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**MEDICAID ANALYTIC EXTRACT
STATE-SPECIFIC VALIDATION
TABLES (2006)**

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ABBREVIATIONS AND ACRONYMS IN THE VALIDATION TABLES

Abbreviations

| | |
|-------|------------------|
| Avg | average |
| Dups | duplicate counts |
| Pharm | pharmacy |
| Psych | psychiatric |

Acronyms

| | |
|--------------|--|
| AAA | Social Security area number (first 3 digits of a Social Security number) |
| AFDC | Aid to Families with Dependent Children |
| AFDC-U | AFDC for Unemployed Parents |
| BHO | behavioral health organization |
| CLTC | community long-term care |
| CLTC FLAG | CLTC flag |
| CPT-4 | Current Procedural Terminology, 4th Edition |
| DIV | division |
| DOB | date of birth |
| EDB | Medicare Enrollment Database |
| EDB DUAL | EDB dual status (annual) |
| EXT SSN SRCE | external source of the Social Security number |
| FFS | fee-for-service |
| FP | family planning |
| FQHC | Federally Qualified Health Center |
| GG | Social Security group number (middle 2 digits of a Social Security number) |
| HCPCS | Health Care Common Procedure Coding System |
| HGT FLAG | high group test flag |
| HIC | Health Insurance Claim number |
| HIFA | Health Insurance Flexibility and Accountability |
| HIO | health insuring organization |
| HIV/AIDS | human immunodeficiency virus/acquired immunodeficiency syndrome |
| HMO | health maintenance organization |
| ICF/MR | intermediate care facility for the mentally retarded |
| ICD-9-CM | International Classification of Diseases, 9th Edition |
| IHS | Indian Health Service |
| ILTC | institutional long-term care |
| IP | inpatient hospital claims file; inpatient |
| LT | institutionalized long-term care claims file |
| LTC | long-term care |
| MAX | Medicaid Analytic Extract |
| MAX ELIG CD | MAX eligibility code |
| MAX TOS | MAX type of service |

ABBREVIATIONS AND ACRONYMS IN THE VALIDATION TABLES

Acronyms (continued)

| | |
|-------------------|---|
| MC | managed care |
| MC COMBO | MC combination code |
| MC TYPE | MC type |
| MDCR ORIG REAS CD | Medicare original reason code |
| MH | mental hospital |
| MI/SED | mental illness/serious emotional disturbance |
| MR/DD | mentally retardation/development disability |
| MSIS | Medicaid Statistical Information System |
| M-CHIP | Medicaid State Children's Health Insurance Program |
| N/A | not applicable or not available |
| NF | nursing facility |
| OT | other, non-institutional claims file; occupational therapy |
| PACE | Program of All-Inclusive Care for the Elderly |
| PCCM | primary care case management |
| PGM TYPE | program type |
| PHP | prepaid health plan |
| PT | physical therapy |
| PVT INS CD | private insurance code |
| RBF | restricted benefits flag |
| QDWI | Qualified Disabled and Working Individuals |
| QI-1 | Qualified Individuals 1 |
| QI-2 | Qualified Individuals 2 |
| QMB | Qualified Medicare Beneficiary |
| RCPNT IND | recipient indicator |
| RHC | Rural Health Clinic |
| RX | prescription drug claims file |
| SLMB | Specified Low-Income Medicare Beneficiary |
| S-CHIP | state-financed State Children's Health Insurance Program |
| SCHIP | SCHIP code |
| SSSS | Social Security serial number (last 4 digits of a Social Security number) |
| TANF | Temporary Assistance for Needy Families |
| TANF FLAG | TANF flag |
| TOS | type of service |
| TPL | Third-Party Liability |
| WVR TYPE | waiver type |

2004-2006 MAX IP Validation Table
State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Change Within Expected Range |
|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| All IP Claims | | | | | | | | | | |
| Total Number of Claims | N/A | 14,011 | N/A | 14,218 | N/A | 14,598 | N/A | 1.48 | 2.67 | 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 | 14,011 | N/A | 14,218 | N/A | 14,598 | N/A | 1.48 | 2.67 | Yes |
| % Crossover | 5-20 | 25.02 | No | 24.71 | No | 26.30 | No | -1.26 | 6.46 | Yes |
| % Adjusted Claims | N/A | 8.80 | N/A | 6.43 | N/A | 2.50 | N/A | -27.00 | -61.10 | No |
| % Standard Adjustments | >1% | 99.68 | Yes | 99.45 | Yes | 98.90 | Yes | -0.22 | -0.55 | Yes |
| Avg Medicaid Paid, Adjusted Claims (Include \$0) | N/A | \$5,109 | N/A | \$5,703 | N/A | \$6,766 | N/A | 11.64 | 18.63 | No |
| # of Claims with Missing Medicaid Eligibility and > \$0 Paid (Excludes S-CHIP Only) | N/A | N/A | N/A | 63 | N/A | 78 | N/A | N/A | 23.81 | No |
| Avg Medicaid Paid for Claims with Missing Medicaid Eligibility and > \$0 Paid (Excludes S-CHIP Only) | N/A | N/A | N/A | N/A | N/A | \$2,810 | N/A | N/A | N/A | N/A |
| # Claims with > \$1 Million Paid | 0 | N/A | N/A | N/A | N/A | 0 | Yes | N/A | N/A | N/A |
| FFS Non-Crossover Claims (Type of Claim = 1, Crossover Claim Indicator = 0) | | | | | | | | | | |
| Total Number of Claims | N/A | 10,505 | N/A | 10,705 | N/A | 10,758 | N/A | 1.90 | 0.50 | 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 |
| Avg Medicaid Paid (Claims with > \$0 Paid) | \$2000-\$7000 | \$5,003 | Yes | \$5,325 | Yes | \$4,730 | Yes | 6.43 | -11.20 | Yes |
| Avg Medicaid Paid per Covered Day (> \$0 Paid and > 0 Days) | N/A | \$1,027 | N/A | \$1,116 | N/A | \$979 | N/A | 8.66 | -12.20 | Yes |
| % Claims with TPL | >0 - 10 | 1.09 | Yes | 1.13 | Yes | 0.70 | Yes | 3.25 | -38.30 | No |
| Avg TPL Paid for Claims with TPL | N/A | \$1,548 | N/A | \$2,074 | N/A | \$2,024 | N/A | 33.97 | -2.41 | Yes |
| % Claims with UB-92 Accommodation Codes | 95-100 | 99.94 | Yes | 100.00 | Yes | 100.00 | Yes | 0.06 | 0.00 | Yes |
| Avg # of UB-92 Accommodation Codes (> 0 Codes) | >1 | 1.23 | Yes | 1.24 | Yes | 1.23 | Yes | 0.60 | -1.08 | Yes |
| % Claims with UB-92 Ancillary Codes | 95-100 | 99.68 | Yes | 99.71 | Yes | 99.59 | Yes | 0.03 | -0.12 | Yes |
| Avg # of UB-92 Ancillary Codes (> 0 Codes) | >3 | 7.13 | Yes | 7.21 | Yes | 7.14 | Yes | 1.03 | -0.86 | Yes |
| Avg Length of Stay | 2-<8 | 4.31 | Yes | 4.65 | Yes | 4.62 | Yes | 7.75 | -0.57 | Yes |
| Avg Covered Days (> 0 Days) | 2-<8 | 4.87 | Yes | 4.77 | Yes | 4.83 | Yes | -2.05 | 1.19 | Yes |
| % Begin Date = Admission Date | 95-100 | 98.37 | Yes | 98.17 | Yes | 97.97 | Yes | -0.21 | -0.20 | Yes |
| % IP Claims (MAX TOS = 01) | 95-100 | 99.26 | Yes | 99.38 | Yes | 99.17 | Yes | 0.13 | -0.21 | Yes |
| % Family Planning Claims (PGM TYPE = 2) | >0-5 | 0.83 | Yes | 0.71 | Yes | 0.96 | Yes | -14.30 | 34.86 | No |
| % Claims with Primary Diagnosis Code | 98-100 | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| Avg # of Diagnosis Codes (> 0 Codes) | >=2 | 4.72 | Yes | 4.90 | Yes | 4.98 | Yes | 3.81 | 1.68 | Yes |
| % Primary Diagnosis Code Claims with Length = 3 | 5-30 | 5.06 | Yes | 5.15 | Yes | 4.80 | No | 1.64 | -6.81 | Yes |
| % Primary Diagnosis Code Claims with Length = 4 | 15-75 | 24.04 | Yes | 24.04 | Yes | 21.58 | Yes | 0.04 | -10.20 | Yes |
| % Primary Diagnosis Code Claims with Length = 5 | 25-70 | 70.90 | No | 70.81 | No | 73.62 | No | -0.13 | 3.97 | Yes |
| % Claims with a Procedure Code | 35-70 | 60.82 | Yes | 61.75 | Yes | 64.04 | Yes | 1.53 | 3.71 | Yes |
| Avg # of Procedure Codes (> 0 Codes) | >1 | 2.17 | Yes | 2.22 | Yes | 2.19 | Yes | 2.15 | -1.09 | Yes |
| % Claims with Procedure Code with 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 Procedure Code with ICD-9 Indicator | N/A | 100.00 | N/A | 100.00 | N/A | 100.00 | N/A | 0.00 | 0.00 | Yes |

2004-2006 MAX IP Validation Table
State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Change Within Expected Range |
|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| % CPT-4 Indicator Claims with CPT-4 Format = 5 Digits | 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 |
| % ICD-9-CM Indicator Claims with ICD-9-CM Format = 3 or 4 Digits | N/A | 99.37 | N/A | 99.92 | N/A | 99.96 | N/A | 0.55 | 0.03 | Yes |
| % Claims with Diagnosis Related Group | >=90 | 0.00 | No | 0.00 | No | 0.00 | No | Div by 0 | Div by 0 | N/A |
| % Claims Maternal Delivery Indicator | N/A | 23.77 | N/A | 23.33 | N/A | 24.42 | N/A | -1.87 | 4.69 | Yes |
| % Claims Newborn Delivery Indicator (Only for Separate Infant Delivery Claims Using Mother's ID) | N/A | 10.15 | N/A | 9.94 | N/A | 12.30 | N/A | -2.05 | 23.73 | No |
| PATIENT STATUS | | | | | | | | | | |
| % Home | 75-90 | 74.55 | No | 72.99 | No | 72.67 | No | -2.09 | -0.44 | Yes |
| % Transferred | 1-10 | 24.24 | No | 25.39 | No | 26.00 | No | 4.76 | 2.40 | Yes |
| % Still a Patient | >0-2 | 0.55 | Yes | 0.74 | Yes | 0.47 | Yes | 33.66 | -35.80 | No |
| % Died | >0-3 | 0.66 | Yes | 0.88 | Yes | 0.86 | Yes | 33.69 | -2.61 | Yes |
| FFS Crossover Claims (Type of Claim = 1, Crossover Claim Indicator = 1) | | | | | | | | | | |
| Total Number of Claims | N/A | 3,506 | N/A | 3,513 | N/A | 3,840 | N/A | 0.20 | 9.31 | 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 |
| Avg Medicaid Paid (Claims with > \$0 Paid) | N/A | \$893 | N/A | \$1,018 | N/A | \$994 | N/A | 14.04 | -2.36 | Yes |
| % Claims with TPL | N/A | 0.29 | N/A | 1.62 | N/A | 1.25 | N/A | 468.90 | -23.00 | No |
| Avg TPL Paid for Claims with TPL | N/A | \$522 | N/A | \$516 | N/A | \$454 | N/A | -1.12 | -12.10 | Yes |
| % Claims with UB-92 Accommodation Codes | 95-100 | 0.00 | No | 0.09 | No | 0.13 | No | Div by 0 | 52.47 | No |
| Avg # of UB-92 Accommodation Codes (> 0 Codes) | >1 | Div by 0 | Yes | 2.00 | Yes | 1.20 | Yes | Div by 0 | -40.00 | No |
| % Claims with UB-92 Ancillary Codes | 95-100 | 0.00 | No | 0.09 | No | 0.10 | No | Div by 0 | 21.98 | No |
| Avg # of UB-92 Ancillary Codes (> 0 Codes) | >3 | Div by 0 | Yes | 15.00 | Yes | 8.50 | Yes | Div by 0 | -43.30 | No |
| Avg Length of Stay | 2-<8 | 5.66 | Yes | 5.90 | Yes | 5.61 | Yes | 4.13 | -4.89 | Yes |
| % Begin Date = Admission Date | 95-100 | 99.80 | Yes | 99.57 | Yes | 99.69 | Yes | -0.23 | 0.12 | Yes |
| % IP Claims (MAX TOS = 01) | 95-100 | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| % Claims with Primary Diagnosis Code | 98-100 | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| Avg # of Diagnosis Codes (> 0 Codes) | >=2 | 1.00 | No | 1.01 | No | 1.01 | No | 0.48 | 0.07 | Yes |
| % Primary Diagnosis Code Claims with Length = 3 | 5-30 | 9.67 | Yes | 9.37 | Yes | 8.28 | Yes | -3.14 | -11.60 | Yes |
| % Primary Diagnosis Code Claims with Length = 4 | 15-75 | 37.34 | Yes | 37.66 | Yes | 35.57 | Yes | 0.87 | -5.54 | Yes |
| % Primary Diagnosis Code Claims with Length = 5 | 25-70 | 52.99 | Yes | 52.97 | Yes | 56.15 | Yes | -0.04 | 5.99 | Yes |
| % Claims with a Procedure Code | 35-70 | 0.00 | No | 0.03 | No | 0.03 | No | Div by 0 | -8.52 | Yes |
| Avg # of Procedure Codes (> 0 Codes) | >1 | Div by 0 | Yes | 5.00 | Yes | 1.00 | No | Div by 0 | -80.00 | No |
| % Claims with Procedure Code with CPT-4 Indicator | N/A | Div by 0 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| % Claims with Procedure Code with ICD-9 Indicator | N/A | Div by 0 | N/A | 100.00 | N/A | 100.00 | N/A | Div by 0 | 0.00 | Yes |
| % CPT-4 Indicator Claims with CPT-4 Format = 5 Digits | 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 |
| % ICD-9-CM Indicator Claims with ICD-9-CM Format = 3 or 4 Digits | N/A | Div by 0 | N/A | 100.00 | N/A | 100.00 | N/A | Div by 0 | 0.00 | Yes |
| % Claims with Diagnosis Related Group | >=90 | 0.00 | No | 0.00 | No | 0.00 | No | Div by 0 | Div by 0 | N/A |

2004-2006 MAX LT Validation Table
State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Change Within Expected Range |
|---|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| All LT Claims | | | | | | | | | | |
| Total Number of Claims | N/A | 34,423 | N/A | 37,889 | N/A | 41,122 | N/A | 10.07 | 8.53 | 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 | 34,423 | N/A | 37,889 | N/A | 41,122 | N/A | 10.07 | 8.53 | Yes |
| % Crossover | 5-20 | 9.77 | Yes | 10.65 | Yes | 11.16 | Yes | 9.09 | 4.78 | Yes |
| % Adjusted Claims | > 1% | 4.22 | Yes | 71.90 | Yes | 9.91 | Yes | 1,606.00 | -86.20 | No |
| % Standard Adjustments | N/A | 99.66 | N/A | 99.69 | N/A | 99.07 | N/A | 0.04 | -0.63 | Yes |
| Avg Medicaid Paid, Adjusted Claims (Include \$0) | N/A | \$3,055 | N/A | \$3,045 | N/A | \$2,940 | N/A | -0.32 | -3.44 | Yes |
| # of Claims with Missing Medicaid Eligibility and > \$0 Paid (Excludes S-CHIP Only) | N/A | N/A | N/A | 110 | N/A | 81 | N/A | N/A | -26.40 | No |
| Avg Medicaid Paid for Claims with Missing Medicaid Eligibility and > \$0 Paid (Excludes S-CHIP Only) | N/A | N/A | N/A | N/A | N/A | \$1,720 | N/A | N/A | N/A | N/A |
| # Claims with > \$200,000 Paid | 0 | N/A | N/A | N/A | N/A | 0 | Yes | N/A | N/A | N/A |
| FFS Non-Crossover Claims (Type of Claim = 1, Crossover Claim Indicator = 0) | | | | | | | | | | |
| Total Number of Claims | N/A | 31,061 | N/A | 33,852 | N/A | 36,531 | N/A | 8.99 | 7.91 | 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 |
| AVERAGE MEDICAID AMOUNT PAID PER COVERED DAY BY MAX TYPE OF SERVICE (CLAIMS WITH >\$0 PAID) | | | | | | | | | | |
| NF (MAX TOS = 07) | \$50-\$100 | \$112 | No | \$130 | No | \$136 | No | 15.17 | 4.86 | Yes |
| ICF/MR (MAX TOS = 05) | N/A | \$455 | N/A | \$474 | N/A | \$502 | N/A | 3.98 | 5.94 | Yes |
| MH Aged (MAX TOS = 02) | N/A | Div by 0 | N/A | \$803 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | N/A |
| IP Psych, Age < 21 (MAX 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 |
| TYPE OF SERVICE | | | | | | | | | | |
| % NF (MAX TOS = 07) | 75-99 | 98.91 | Yes | 99.14 | No | 99.05 | No | 0.24 | -0.10 | Yes |
| % NF claims with NF Covered Days | N/A | 99.97 | N/A | 99.95 | N/A | 100.00 | N/A | -0.03 | 0.05 | Yes |
| Avg days for NF claims with Covered Days | N/A | 26 | N/A | 23 | N/A | 21 | N/A | -11.00 | -8.41 | Yes |
| % ICF/MR (MAX TOS = 05) | >0-20 | 1.09 | Yes | 0.85 | Yes | 0.95 | Yes | -22.00 | 11.97 | Yes |
| % ICF/MR claims with ICF/MR Covered Days | N/A | 100.00 | N/A | 100.00 | N/A | 100.00 | N/A | 0.00 | 0.00 | Yes |
| Avg days for ICF/MR claims with Covered Days | N/A | 6 | N/A | 7 | N/A | 6 | N/A | 10.88 | -10.10 | Yes |
| % MH Aged (MAX TOS = 02) | >0-10 | 0.00 | No | 0.01 | Yes | 0.00 | No | Div by 0 | -100.00 | No |
| % MH Aged claims with MH Aged Covered Days | N/A | Div by 0 | N/A | 100.00 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | N/A |
| Avg days for MH Aged claims with Covered Days | N/A | Div by 0 | N/A | 30 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | N/A |
| % IP Psych, Age < 21 (MAX TOS = 04) | >0-5 | 0.00 | No | 0.00 | No | 0.00 | No | Div by 0 | Div by 0 | N/A |
| % IP Psych, Age < 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, Age < 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 |
| LEAVE DAYS | | | | | | | | | | |
| % Claims with Leave Days | 1-20 | 0.00 | No | 0.17 | No | 0.00 | No | Div by 0 | -100.00 | No |
| DIAGNOSIS CODES | | | | | | | | | | |
| % Claims with Primary Diagnosis Code | 95-100 | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |

2004-2006 MAX LT Validation Table
State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Change Within Expected Range |
|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| % Primary Diagnosis Code Claims with Length = 3 | 5-30 | 16.28 | Yes | 15.97 | Yes | 15.27 | Yes | -1.87 | -4.42 | Yes |
| % Primary Diagnosis Code Claims with Length = 4 | 15-75 | 59.74 | Yes | 57.70 | Yes | 55.74 | Yes | -3.42 | -3.38 | Yes |
| % Primary Diagnosis Code Claims with Length = 5 | 25-70 | 23.99 | No | 26.33 | Yes | 28.99 | Yes | 9.79 | 10.09 | Yes |
| PATIENT STATUS | | | | | | | | | | |
| % Home | 1-5 | 0.73 | No | 0.68 | No | 0.58 | No | -7.44 | -13.80 | Yes |
| % Still a Patient | 8-98 | 95.22 | Yes | 95.63 | Yes | 96.27 | Yes | 0.43 | 0.68 | Yes |
| % Died | >0-5 | 1.86 | Yes | 1.63 | Yes | 1.31 | Yes | -12.20 | -19.90 | No |
| FFS Crossover Claims (Type of Claim = 1, Crossover Claim Indicator = 1) | | | | | | | | | | |
| Total Number of Claims | N/A | 3,362 | N/A | 4,037 | N/A | 4,591 | N/A | 20.08 | 13.72 | 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 |
| Avg Medicaid Paid (Claims with > \$0 Paid) | N/A | \$767 | N/A | \$713 | N/A | \$648 | N/A | -6.98 | -9.14 | Yes |
| TYPE OF SERVICE | | | | | | | | | | |
| % NF (MAX TOS = 07) | 75-99 | 95.48 | Yes | 88.21 | Yes | 79.76 | Yes | -7.61 | -9.57 | Yes |
| % ICF/MR (MAX TOS = 05) | >0-20 | 0.00 | No | 0.00 | No | 0.00 | No | Div by 0 | Div by 0 | N/A |
| % MH Aged (MAX TOS = 02) | >0-10 | 4.52 | Yes | 11.79 | No | 20.24 | No | 160.80 | 71.62 | No |
| % IP Psych, Age < 21 (MAX TOS = 04) | >0-5 | 0.00 | No | 0.00 | No | 0.00 | No | Div by 0 | Div by 0 | N/A |
| DIAGNOSIS CODES | | | | | | | | | | |
| % Claims with Primary Diagnosis Code | 95-100 | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| % Primary Diagnosis Code Claims with Length = 3 | 5-30 | 13.38 | Yes | 13.43 | Yes | 9.17 | Yes | 0.31 | -31.70 | No |
| % Primary Diagnosis Code Claims with Length = 4 | 15-75 | 46.34 | Yes | 42.61 | Yes | 41.45 | Yes | -8.06 | -2.71 | Yes |
| % Primary Diagnosis Code Claims with Length = 5 | 25-70 | 40.18 | Yes | 43.94 | Yes | 49.38 | Yes | 9.36 | 12.37 | Yes |
| PATIENT STATUS | | | | | | | | | | |
| % Home | 1-5 | 9.25 | No | 5.87 | No | 7.78 | No | -36.50 | 32.46 | No |
| % Still a Patient | 8-98 | 50.18 | Yes | 54.15 | Yes | 68.35 | Yes | 7.91 | 26.23 | No |
| % Died | >0-5 | 1.43 | Yes | 1.81 | Yes | 1.24 | Yes | 26.65 | -31.30 | No |

2004-2006 MAX OT Validation Table
State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Change Within Expected Range |
|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| All OT Claims | | | | | | | | | | |
| Total Number of Claims | N/A | 4,049,042 | N/A | 4,240,536 | N/A | 4,520,187 | N/A | 4.73 | 6.60 | 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 |
| % Capitation 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 Excluding Capitation Payments | N/A | 4,049,042 | N/A | 4,240,536 | N/A | 4,520,187 | N/A | 4.73 | 6.60 | Yes |
| % Crossover | 5-20 | 8.17 | Yes | 7.84 | Yes | 8.22 | Yes | -4.04 | 4.75 | Yes |
| % Adjusted Claims | >1% | 1.87 | Yes | 2.91 | Yes | 9.78 | Yes | 55.81 | 236.00 | No |
| % Standard Adjustments | N/A | 79.04 | N/A | 70.49 | N/A | 68.61 | N/A | -10.80 | -2.66 | Yes |
| Avg Medicaid Paid, Adjusted Claims (Include \$0) | N/A | \$327 | N/A | \$254 | N/A | \$143 | N/A | -22.40 | -43.60 | No |
| % Claims with HMO Capitation Payment | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| % Claims with PHP Capitation Payment | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| % Claims with PCCM Capitation Payment | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Avg Medicaid Paid per HMO Capitation Claim | \$75-\$300 | Div by 0 | No | Div by 0 | No | Div by 0 | No | Div by 0 | Div by 0 | N/A |
| Avg Medicaid Paid per PHP Capitation Claim | \$20-\$250 | Div by 0 | No | Div by 0 | No | Div by 0 | No | Div by 0 | Div by 0 | N/A |
| Avg Medicaid Paid per PCCM Capitation Claim | 3-5 | Div by 0 | No | Div by 0 | No | Div by 0 | No | Div by 0 | Div by 0 | N/A |
| # of Claims with Missing Medicaid Eligibility and > \$0 Paid (Excludes S-CHIP Only) | N/A | N/A | N/A | 4,279 | N/A | 7,930 | N/A | N/A | 85.32 | No |
| Avg Medicaid Paid for Claims with Missing Medicaid Eligibility and > \$0 Paid (Excludes S-CHIP Only) | N/A | N/A | N/A | N/A | N/A | \$63 | N/A | N/A | N/A | N/A |
| # Claims with > \$200,000 Paid | 0 | N/A | N/A | N/A | N/A | 0 | Yes | N/A | N/A | N/A |
| FFS Non-Crossover Claims (Type of Claim = 1, Crossover Claim Indicator = 0) | | | | | | | | | | |
| Total Number of Claims | N/A | 3,718,125 | N/A | 3,907,966 | N/A | 4,148,844 | N/A | 5.11 | 6.16 | 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 | 6.61 | N/A | 6.84 | N/A | 7.35 | N/A | 3.44 | 7.51 | Yes |
| % Outpatient Claims with Span Bill | N/A | 5.07 | N/A | 4.84 | N/A | 5.22 | N/A | -4.55 | 7.71 | Yes |
| % Home Health Claims with Span Bill | N/A | 30.50 | N/A | 20.16 | N/A | 21.60 | N/A | -33.90 | 7.13 | Yes |
| % Other Claims with Span Bill | N/A | 6.37 | N/A | 6.75 | N/A | 7.31 | N/A | 5.93 | 8.24 | Yes |
| PLACE OF SERVICE | | | | | | | | | | |
| % Claims with Place of Service = Office (PLC OF SVC CD = 11) | 50-90 | 36.22 | No | 34.81 | No | 33.32 | No | -3.89 | -4.27 | Yes |
| % Claims with Place of Service = Home (PLC OF SVC CD = 12) | >0-5 | 9.58 | No | 11.05 | No | 11.64 | No | 15.32 | 5.32 | Yes |
| % Claims with Place of Service = Hospital (PLC OF SVC CD = 21) | >0-5 | 1.93 | Yes | 2.04 | Yes | 1.99 | Yes | 5.54 | -2.28 | Yes |
| % Claims with Place of Service = Nursing Facility (PLC OF SVC CD = 32) | >0-5 | 0.17 | Yes | 0.16 | Yes | 0.13 | Yes | -3.90 | -22.10 | No |
| % Claims with Place of Service = Emergency Room (PLC OF SVC CD = 23) | 1-10 | 2.13 | Yes | 2.23 | Yes | 2.24 | Yes | 4.76 | 0.49 | Yes |
| % Claims with Place of Service = Outpatient (PLC OF SVC CD = 22) | >0-10 | 22.62 | No | 22.40 | No | 22.67 | No | -0.95 | 1.20 | Yes |
| % Claims with Place of Service = Unknown/Other (PLC OF SVC CD = 99) | <5 | 13.87 | No | 14.37 | No | 15.15 | No | 3.57 | 5.50 | Yes |
| THIRD-PARTY LIABILITY | | | | | | | | | | |
| % Claims with TPL | >0 - 15 | 0.53 | Yes | 0.45 | Yes | 0.39 | Yes | -15.30 | -12.90 | Yes |
| Avg TPL Paid for Claims with TPL | N/A | \$82 | N/A | \$92 | N/A | \$96 | N/A | 11.83 | 4.13 | Yes |

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State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Change Within Expected Range |
|---|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| PERCENT OF CLAIMS BY MAX TYPE OF SERVICE | | | | | | | | | | |
| Physician Services (MAX TOS = 08) | 10-35 | 16.88 | Yes | 16.92 | Yes | 16.35 | Yes | 0.22 | -3.36 | Yes |
| Dental Services (MAX TOS = 09) | 2-20 | 7.77 | Yes | 7.32 | Yes | 7.02 | Yes | -5.80 | -4.18 | Yes |
| Other Practitioner Services (MAX TOS = 10) | 0.5-8 | 0.95 | Yes | 0.86 | Yes | 0.75 | Yes | -8.76 | -12.60 | Yes |
| Outpatient Services (MAX TOS = 11) | 3-25 | 7.32 | Yes | 7.29 | Yes | 7.68 | Yes | -0.46 | 5.39 | Yes |
| Clinic Services (MAX TOS = 12) | 2-25 | 2.84 | Yes | 2.58 | Yes | 3.06 | Yes | -9.11 | 18.61 | No |
| Home Health Services (MAX TOS = 13) | >0-25 | 1.37 | Yes | 1.67 | Yes | 1.42 | Yes | 21.92 | -15.00 | Yes |
| Lab/Xray Services (MAX TOS = 15) | 4-20 | 20.66 | No | 19.53 | Yes | 19.18 | Yes | -5.48 | -1.81 | Yes |
| Drugs (MAX TOS = 16) | <3 | 0.33 | Yes | 0.25 | Yes | 0.24 | Yes | -24.20 | -3.90 | Yes |
| Other Services (MAX TOS = 19) | <25 | 7.56 | Yes | 8.85 | Yes | 8.05 | Yes | 17.08 | -9.12 | Yes |
| Durable Medical Equipment (MAX TOS = 51) | >3 | 1.60 | No | 1.60 | No | 2.26 | No | -0.37 | 41.30 | No |
| Transportation Services (MAX TOS = 26) | >1 | 4.09 | Yes | 5.69 | Yes | 6.35 | Yes | 39.09 | 11.58 | Yes |
| Sterilizations (MAX TOS = 24) | N/A | 0.07 | N/A | 0.07 | N/A | 0.07 | N/A | 1.86 | 4.12 | Yes |
| Abortions (MAX TOS = 25) | N/A | 0.01 | N/A | 0.01 | N/A | 0.00 | N/A | -40.40 | -59.00 | No |
| Personal Care Services (MAX TOS = 30) | >0 | 1.20 | Yes | 1.38 | Yes | 1.47 | Yes | 14.83 | 6.50 | Yes |
| Targeted Case Management (MAX TOS = 31) | >0 | 2.82 | Yes | 3.09 | Yes | 2.90 | Yes | 9.69 | -6.02 | Yes |
| Rehabilitation Services (MAX TOS = 33) | >0 | 0.00 | Yes | 0.00 | No | 0.00 | No | -100.00 | Div by 0 | N/A |
| PT/OT/Hearing/Speech Services (MAX TOS = 34) | >1 | 1.39 | Yes | 1.45 | Yes | 1.60 | Yes | 4.98 | 10.01 | Yes |
| Hospice Services (MAX TOS = 35) | >0 | 0.01 | Yes | 0.01 | Yes | 0.01 | Yes | -17.00 | 26.36 | No |
| Nurse Midwife Services (MAX TOS = 36) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Nurse Practitioner Services (MAX TOS = 37) | N/A | 0.10 | N/A | 0.10 | N/A | 0.13 | N/A | 8.21 | 24.74 | No |
| Private Nursing Services (MAX TOS = 38) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Religious Non-Medical Services (MAX TOS = 39) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Residential Care Services (MAX TOS = 52) | N/A | 0.06 | N/A | 0.06 | N/A | 0.07 | N/A | -4.24 | 20.14 | No |
| Psychiatric Services (MAX TOS = 53) | >1 | 20.87 | Yes | 21.07 | Yes | 21.39 | Yes | 0.96 | 1.53 | Yes |
| Adult Day Care (MAX TOS = 54) | >0 | 0.00 | No | 0.00 | No | 0.00 | No | Div by 0 | Div by 0 | N/A |
| Unknown Services (MAX TOS = 99) | <1 | 1.54 | No | 0.20 | Yes | 0.00 | Yes | -87.30 | -99.00 | No |
| AVERAGE MEDICAID AMOUNT PAID BY MAX TYPE OF SERVICE (CLAIMS WITH >\$0 PAID) | | | | | | | | | | |
| Total | N/A | \$118 | N/A | \$122 | N/A | \$123 | N/A | 3.59 | 1.24 | Yes |
| Physician Services (MAX TOS = 08) | \$20-90 | \$61 | Yes | \$61 | Yes | \$59 | Yes | -0.43 | -3.75 | Yes |
| Dental Services (MAX TOS = 09) | \$10-60 | \$45 | Yes | \$47 | Yes | \$45 | Yes | 3.16 | -3.74 | Yes |
| Other Practitioner Services (MAX TOS = 10) | \$10-100 | \$154 | No | \$153 | No | \$166 | No | -0.79 | 8.97 | Yes |
| Outpatient Services (MAX TOS = 11) | \$20-100 | \$146 | No | \$155 | No | \$154 | No | 5.85 | -0.72 | Yes |
| Clinic Services (MAX TOS = 12) | \$20-100 | \$93 | Yes | \$98 | Yes | \$90 | Yes | 4.87 | -8.31 | Yes |
| Home Health Services (MAX TOS = 13) | N/A | \$155 | N/A | \$119 | N/A | \$120 | N/A | -23.00 | 0.82 | Yes |
| Lab/Xray Services (MAX TOS = 15) | 10-60 | \$29 | Yes | \$31 | Yes | \$37 | Yes | 7.63 | 20.03 | No |
| Drugs (MAX TOS = 16) | 10-60 | \$22 | Yes | \$24 | Yes | \$31 | Yes | 11.30 | 28.78 | No |
| Other Services (MAX TOS = 19) | N/A | \$336 | N/A | \$303 | N/A | \$324 | N/A | -9.78 | 6.76 | Yes |
| Durable Medical Equipment (MAX TOS = 51) | N/A | \$119 | N/A | \$121 | N/A | \$100 | N/A | 1.86 | -18.00 | No |
| Transportation Services (MAX TOS = 26) | N/A | \$34 | N/A | \$36 | N/A | \$35 | N/A | 7.25 | -3.74 | Yes |
| Personal Care Services (MAX TOS = 30) | N/A | \$271 | N/A | \$278 | N/A | \$273 | N/A | 2.43 | -1.67 | Yes |
| Targeted Case Management (MAX TOS = 31) | N/A | \$66 | N/A | \$60 | N/A | \$63 | N/A | -9.74 | 6.13 | Yes |
| Rehabilitation Services (MAX TOS = 33) | N/A | \$26,843 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | N/A |

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State: VT

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|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| PT/OT/Hearing/Speech Services (MAX TOS = 34) | N/A | \$20 | N/A | \$20 | N/A | \$19 | N/A | -2.57 | -4.48 | Yes |
| Hospice Services (MAX TOS = 35) | N/A | \$2,204 | N/A | \$2,638 | N/A | \$2,725 | N/A | 19.68 | 3.31 | Yes |
| Residential Care Services (MAX TOS = 52) | N/A | \$975 | N/A | \$765 | N/A | \$725 | N/A | -21.60 | -5.18 | Yes |
| Psychiatric Services (MAX TOS = 53) | N/A | \$214 | N/A | \$223 | N/A | \$225 | N/A | 4.09 | 0.86 | Yes |
| Adult Day Care (MAX TOS = 54) | 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 |
| PERCENT OF CLAIMS BY PROGRAM TYPE | | | | | | | | | | |
| Family Planning (PGM TYPE = 2) | N/A | 0.75 | N/A | 0.71 | N/A | 0.71 | N/A | -6.53 | 0.18 | Yes |
| Rural Health Clinic (PGM TYPE = 3) | N/A | 1.48 | N/A | 1.42 | N/A | 1.31 | N/A | -4.54 | -7.58 | Yes |
| Federally Qualified Health Center (PGM TYPE = 4) | N/A | 0.99 | N/A | 0.96 | N/A | 1.16 | N/A | -3.46 | 21.07 | No |
| Indian Health Services (PGM TYPE = 5) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Home and Community Based Care (PGM TYPE = 6,7) | N/A | 7.48 | N/A | 7.45 | N/A | 7.68 | N/A | -0.49 | 3.09 | Yes |
| AVERAGE EXPENDITURES BY PROGRAM TYPE | | | | | | | | | | |
| Family Planning (PGM TYPE = 2) | N/A | \$57 | N/A | \$60 | N/A | \$59 | N/A | 5.06 | -1.81 | Yes |
| Rural Health Clinic (PGM TYPE = 3) | N/A | \$78 | N/A | \$80 | N/A | \$83 | N/A | 2.84 | 3.01 | Yes |
| Federally Qualified Health Center (PGM TYPE = 4) | N/A | \$121 | N/A | \$122 | N/A | \$117 | N/A | 0.68 | -4.18 | Yes |
| Indian Health Services (PGM TYPE = 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 |
| Home and Community Based Care (PGM TYPE = 6,7) | N/A | \$422 | N/A | \$432 | N/A | \$427 | N/A | 2.54 | -1.24 | Yes |
| DIAGNOSIS AND PROCEDURE CODES | | | | | | | | | | |
| % Claims with Primary Diagnosis Code | > 60 | 99.37 | Yes | 99.35 | Yes | 99.37 | Yes | -0.03 | 0.02 | Yes |
| % Physician, Outpatient, or Clinic Claims with Primary Diagnosis Code | 85-100 | 99.99 | Yes | 99.99 | Yes | 99.98 | Yes | 0.00 | -0.01 | Yes |
| % Primary Diagnosis Claims with Secondary Diagnosis Code | N/A | 13.25 | N/A | 14.23 | N/A | 14.79 | N/A | 7.39 | 3.91 | Yes |
| % Primary Diagnosis Code Claims with Length = 3 | 5-25 | 9.53 | Yes | 9.68 | Yes | 9.45 | Yes | 1.65 | -2.36 | Yes |
| % Primary Diagnosis Code Claims with Length = 4 | 40-70 | 54.36 | Yes | 52.23 | Yes | 51.54 | Yes | -3.92 | -1.32 | Yes |
| % Primary Diagnosis Code Claims with Length = 5 | 20-55 | 36.11 | Yes | 38.09 | Yes | 39.00 | Yes | 5.47 | 2.41 | Yes |
| % Outpatient Claims with Procedure Code or UB-92 Revenue Code | N/A | 100.00 | N/A | 100.00 | N/A | 100.00 | N/A | 0.00 | 0.00 | Yes |
| % Home Health Claims with Procedure Code or UB-92 Revenue Code | N/A | 99.95 | N/A | 99.97 | N/A | 99.98 | N/A | 0.02 | 0.01 | Yes |
| % Other Claims with Procedure Code | 98-100 | 96.36 | No | 95.16 | No | 94.16 | No | -1.25 | -1.05 | Yes |
| % Claims with Procedure Code with CPT-4 Indicator | N/A | 50.90 | N/A | 52.23 | N/A | 52.27 | N/A | 2.61 | 0.07 | Yes |
| % Claims with Procedure Code with HCPCS (II & III) Indicator | N/A | 46.49 | N/A | 47.10 | N/A | 47.73 | N/A | 1.31 | 1.35 | Yes |
| % with Procedure Code with Other National Indicator | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| % with Procedure Code with State-Specific Indicator | N/A | 1.96 | N/A | 0.00 | N/A | 0.00 | N/A | -99.90 | -5.47 | Yes |
| % CPT-4 Indicator Claims with CPT-4 Format = 5 Digits | 98-100 | 99.99 | Yes | 99.99 | Yes | 99.99 | Yes | -0.01 | 0.00 | Yes |
| % HCPCS (II & III) Indicator Claims with HCPCS Format = Either 1 Character and 4 Digits or 2 Characters and 3 Digits | 98-100 | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| PHYSICIAN SPECIALTY | | | | | | | | | | |
| % Physician Claims 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 | | | | | | | | | | |
| Not a CLTC Claim (CLTC FLAG = 00) | N/A | N/A | N/A | 83.55 | N/A | 82.51 | N/A | N/A | -1.25 | Yes |
| CLTC Non-Waiver Claims (CLTC FLAG = 11-20) | N/A | N/A | N/A | 9.00 | N/A | 9.82 | N/A | N/A | 9.08 | Yes |
| CLTC Non-Waiver Personal Care (CLTC FLAG = 11) | N/A | N/A | N/A | 1.38 | N/A | 1.46 | N/A | N/A | 6.46 | Yes |
| CLTC Non-Waiver Private Duty Nurse (CLTC FLAG = 12) | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | N/A |
| CLTC Non-Waiver Adult Day Care (CLTC FLAG = 13) | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | N/A |
| CLTC Non-Waiver Home Health (CLTC FLAG = 14) | N/A | N/A | N/A | 1.67 | N/A | 1.42 | N/A | N/A | -15.00 | Yes |

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|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| CLTC Non-Waiver Residential Care (CLTC FLAG = 15) | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | N/A |
| CLTC Non-Waiver Rehabilitation (CLTC FLAG = 16) | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | N/A |
| CLTC Non-Waiver Targeted Case Management (CLTC FLAG = 17) | N/A | N/A | N/A | 0.87 | N/A | 0.90 | N/A | N/A | 3.73 | Yes |
| CLTC Non-Waiver Transportation (CLTC FLAG = 18) | N/A | N/A | N/A | 4.39 | N/A | 4.77 | N/A | N/A | 8.60 | Yes |
| CLTC Non-Waiver Hospice (CLTC FLAG = 19) | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | 14.62 | Yes |
| CLTC Non-Waiver Durable Medical Equipment (CLTC FLAG = 20) | N/A | N/A | N/A | 0.69 | N/A | 1.26 | N/A | N/A | 82.00 | No |
| CLTC Waiver Claims (CLTC FLAG = 30-40) | N/A | N/A | N/A | 7.44 | N/A | 7.67 | N/A | N/A | 3.02 | Yes |
| CLTC Other Waiver (CLTC FLAG = 30) | N/A | N/A | N/A | 7.28 | N/A | 7.47 | N/A | N/A | 2.65 | Yes |
| CLTC Waiver Personal Care (CLTC FLAG = 31) | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | N/A |
| CLTC Waiver Private Duty Nurse (CLTC FLAG = 32) | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | N/A |
| CLTC Waiver Adult Day Care (CLTC FLAG = 33) | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | N/A |
| CLTC Waiver Home Health (CLTC FLAG = 34) | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | N/A |
| CLTC Waiver Residential Care (CLTC FLAG = 35) | N/A | N/A | N/A | 0.06 | N/A | 0.07 | N/A | N/A | 20.14 | No |
| CLTC Waiver Rehabilitation (CLTC FLAG = 36) | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | N/A |
| CLTC Waiver Targeted Case Management (CLTC FLAG = 37) | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | N/A |
| CLTC Waiver Transportation (CLTC FLAG = 38) | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | N/A |
| CLTC Waiver Hospice (CLTC FLAG = 39) | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | N/A |
| CLTC Waiver Durable Medical Equipment (CLTC FLAG = 40) | N/A | N/A | N/A | 0.11 | N/A | 0.13 | N/A | N/A | 19.11 | No |
| FFS Crossover Claims (Type of Claim = 1, Crossover Claim Indicator = 1) | | | | | | | | | | |
| Total Number of Claims | N/A | 330,917 | N/A | 332,570 | N/A | 371,343 | N/A | 0.50 | 11.66 | 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 |
| Avg Medicaid Paid (Claims with > \$0 Paid) | N/A | \$41 | N/A | \$46 | N/A | \$46 | N/A | 11.25 | 1.75 | Yes |
| % Claims with Span Bill | N/A | 7.17 | N/A | 7.22 | N/A | 6.37 | N/A | 0.74 | -11.80 | Yes |
| % Outpatient Claims with Span Bill | N/A | 16.09 | N/A | 14.48 | N/A | 10.78 | N/A | -9.97 | -25.60 | No |
| % Home Health Claims with Span Bill | 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 Bill | N/A | 6.34 | N/A | 6.42 | N/A | 5.76 | N/A | 1.32 | -10.30 | Yes |
| PERCENT OF CLAIMS BY MAX TYPE OF SERVICE (EXCLUDING 20-22) | | | | | | | | | | |
| Physician Services (MAX TOS = 08) | N/A | 49.93 | N/A | 47.50 | N/A | 44.09 | N/A | -4.87 | -7.17 | Yes |
| Other Practitioner Services (MAX TOS = 10) | N/A | 2.76 | N/A | 2.61 | N/A | 2.51 | N/A | -5.39 | -3.84 | Yes |
| Outpatient Services (MAX TOS = 11) | N/A | 8.50 | N/A | 9.90 | N/A | 12.05 | N/A | 16.54 | 21.71 | No |
| Clinic Services (MAX TOS = 12) | N/A | 4.64 | N/A | 5.39 | N/A | 6.32 | N/A | 16.11 | 17.24 | No |
| Home Health Services (MAX TOS = 13) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Lab/Xray Services (MAX TOS = 15) | N/A | 17.58 | N/A | 16.65 | N/A | 16.75 | N/A | -5.27 | 0.64 | Yes |
| Other Services (MAX TOS = 19) | N/A | 0.23 | N/A | 0.49 | N/A | 0.42 | N/A | 110.10 | -14.00 | Yes |
| Durable Medical Equipment (MAX TOS = 51) | N/A | 6.37 | N/A | 6.14 | N/A | 6.12 | N/A | -3.56 | -0.41 | Yes |
| Transportation Services (MAX TOS = 26) | N/A | 3.13 | N/A | 3.36 | N/A | 2.88 | N/A | 7.45 | -14.40 | Yes |
| Personal Care Services (MAX TOS = 30) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Targeted Case Management (MAX TOS = 31) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Rehabilitation Services (MAX TOS = 33) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| PT/OT/Hearing/Speech Services (MAX TOS = 34) | N/A | 1.19 | N/A | 1.73 | N/A | 1.59 | N/A | 44.74 | -7.65 | Yes |
| Hospice Services (MAX TOS = 35) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| Residential Care Services (MAX TOS = 52) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |

2004-2006 MAX OT Validation Table
State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Change Within Expected Range |
|---|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| Psychiatric Services (MAX TOS = 53) | N/A | 5.16 | N/A | 5.81 | N/A | 6.95 | N/A | 12.67 | 19.60 | No |
| Adult Day Care (MAX TOS = 54) | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| DIAGNOSIS AND PROCEDURE CODES | | | | | | | | | | |
| % Claims with Primary Diagnosis Code | N/A | 100.00 | N/A | 100.00 | N/A | 100.00 | N/A | 0.00 | 0.00 | Yes |
| % Physician, Outpatient, or Clinic Claims with Primary Diagnosis Code | 85-100 | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| % Primary Diagnosis Claims with Secondary Diagnosis Code | N/A | 0.00 | N/A | 0.00 | N/A | 0.00 | N/A | Div by 0 | Div by 0 | N/A |
| % Primary Diagnosis Code Claims with Length = 3 | 5-25 | 1.51 | No | 1.41 | No | 1.22 | No | -6.47 | -13.90 | Yes |
| % Primary Diagnosis Code Claims with Length = 4 | 40-70 | 8.62 | No | 9.19 | No | 11.16 | No | 6.62 | 21.35 | No |
| % Primary Diagnosis Code Claims with Length = 5 | 20-55 | 89.87 | No | 89.39 | No | 87.63 | No | -0.53 | -1.98 | Yes |
| % Outpatient Claims with Procedure Code or UB-92 Revenue Code | N/A | 49.13 | N/A | 53.86 | N/A | 67.97 | N/A | 9.63 | 26.20 | No |
| % Home Health Claims with Procedure Code or UB-92 Revenue Code | 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 Procedure Code | 98-100 | 99.28 | Yes | 99.13 | Yes | 99.27 | Yes | -0.15 | 0.14 | Yes |
| % Claims with Procedure Code with CPT-4 Indicator | N/A | 85.60 | N/A | 85.64 | N/A | 86.85 | N/A | 0.05 | 1.42 | Yes |
| % Claims with Procedure Code with HCPCS (II & III) Indicator | N/A | 14.33 | N/A | 14.36 | N/A | 13.15 | N/A | 0.22 | -8.43 | Yes |
| % with Procedure Code with Other Code Indicator | N/A | 0.07 | N/A | 0.00 | N/A | 0.00 | N/A | -98.70 | -100.00 | No |

2004-2006 MAX RX Validation Table
State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Change Within Expected Range |
|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---|
| All RX Claims | | | | | | | | | | |
| Total Number of Claims | N/A | 2,829,442 | N/A | 3,054,459 | N/A | 2,193,240 | N/A | 7.95 | -28.20 | No |
| % 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 | 2,829,442 | N/A | 3,054,459 | N/A | 2,193,240 | N/A | 7.95 | -28.20 | No |
| % Adjusted Claims | N/A | 0.42 | N/A | 0.56 | N/A | 0.68 | N/A | 32.65 | 21.14 | No |
| % Standard Adjustments | >1% | 99.71 | Yes | 99.73 | Yes | 94.83 | Yes | 0.02 | -4.92 | Yes |
| Avg Medicaid Paid, Adjusted Claims (Include \$0) | N/A | \$102 | N/A | \$101 | N/A | \$142 | N/A | -0.88 | 40.57 | No |
| # of Claims with Missing Medicaid Eligibility and > \$0 Paid (Excludes S-CHIP Only) | N/A | N/A | N/A | 119,597 | N/A | 106,027 | N/A | N/A | -11.30 | Yes |
| Avg Medicaid Paid for Claims with Missing Medicaid Eligibility and > \$0 Paid (Excludes S-CHIP Only) | N/A | N/A | N/A | N/A | N/A | \$45 | N/A | N/A | N/A | N/A |
| # Claims with > \$200,000 Paid | 0 | N/A | N/A | N/A | N/A | 0 | Yes | N/A | N/A | N/A |
| FFS Claims (Type of Claim = 1) | | | | | | | | | | |
| Total Number of Claims | N/A | 2,829,442 | N/A | 3,054,459 | N/A | 2,193,240 | N/A | 7.95 | -28.20 | No |
| % Claims with > \$0 Paid | 95-100 | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| % Claims with < \$0 Paid | 0 | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | Div by 0 | Div by 0 | N/A |
| Avg Medicaid Paid (Claims with > \$0 Paid) | \$15-\$60 | \$63 | No | \$65 | No | \$54 | Yes | 3.40 | -16.10 | No |
| % Claims with TPL | >0-15 | 2.33 | Yes | 1.97 | Yes | 9.11 | Yes | -15.70 | 363.50 | No |
| Avg TPL Paid for Claims with TPL | N/A | \$63 | N/A | \$68 | N/A | \$60 | N/A | 9.15 | -12.80 | Yes |
| % Family Planning Claims (PGM TYPE = 2) | N/A | 0.62 | N/A | 0.46 | N/A | 0.55 | N/A | -24.80 | 19.42 | No |
| % Drug Claims (MAX TOS = 16) | 95-99 | 100.00 | No | 100.00 | No | 100.00 | No | 0.00 | 0.00 | Yes |
| % Durable Medical Equipment Claims (MAX TOS = 51) | >0 - 6 | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | 177.90 | -53.60 | No |
| % Drug Claims with Quantity | >98 | 99.96 | Yes | 100.00 | Yes | 100.00 | Yes | 0.04 | 0.00 | Yes |
| % Drug Claims with Days Supply | >98 | 100.00 | Yes | 100.00 | Yes | 100.00 | Yes | 0.00 | 0.00 | Yes |
| DRUG CLASSIFICATION | | | | | | | | | | |
| % Claims with Hierarchical Ingredient Code List | 98-100 | 99.83 | Yes | 99.84 | Yes | 99.81 | Yes | 0.01 | -0.03 | Yes |
| % Claims with Medispan | 98-100 | 99.57 | Yes | 99.69 | Yes | 99.68 | Yes | 0.12 | -0.01 | Yes |
| % Claims with American Hospital Formulary System | 98-100 | 99.83 | Yes | 99.84 | Yes | 99.81 | Yes | 0.01 | -0.03 | Yes |
| % Claims with Generic Therapeutic Class | 98-100 | 99.83 | Yes | 99.84 | Yes | 99.81 | Yes | 0.01 | -0.03 | Yes |
| % Claims with Specific Therapeutic Class | 98-100 | 99.83 | Yes | 99.84 | Yes | 99.81 | Yes | 0.01 | -0.03 | Yes |
| NDC CONFIGURATION INDICATOR | | | | | | | | | | |
| % Prescription (NDC FMT IND = 0-3) | N/A | 76.90 | N/A | 77.39 | N/A | 76.91 | N/A | 0.64 | -0.62 | Yes |
| % Products (NDC FMT IND = 4-6) | N/A | 22.72 | N/A | 22.25 | N/A | 22.56 | N/A | -2.11 | 1.43 | Yes |
| % Health Related Item (NDC FMT IND = 7) | N/A | 0.03 | N/A | 0.03 | N/A | 0.12 | N/A | 4.64 | 280.90 | No |
| % Claims with Smart Key | 98-100 | 99.83 | Yes | 99.84 | Yes | 99.81 | Yes | 0.01 | -0.03 | Yes |
| % Claims with Over-the-Counter Drug Class | N/A | 4.15 | N/A | 5.23 | N/A | 8.11 | N/A | 26.16 | 55.08 | No |
| % Claims with Prescription Drug Class | N/A | 95.68 | N/A | 94.61 | N/A | 91.70 | N/A | -1.12 | -3.08 | Yes |
| % Claims with Multiple Sources | N/A | 53.29 | N/A | 57.84 | N/A | 61.43 | N/A | 8.53 | 6.21 | Yes |
| % Claims with Single Source (No Generic) | N/A | 39.84 | N/A | 37.71 | N/A | 33.57 | N/A | -5.35 | -11.00 | Yes |

2004-2006 MAX PSF Validation Table
State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|--|----------------|---------------|-------------------------|---------------|-------------------------|---------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| All Records | | | | | | | | | | | |
| Total Number of Records | N/A | 168,697 | N/A | 165,860 | N/A | 164,682 | N/A | -1.68 | -0.71 | 10% (+/-) | Yes |
| Total Medicaid Paid | N/A | \$777,505,668 | N/A | \$854,512,495 | N/A | \$811,342,706 | N/A | 9.90 | -5.05 | 15% (+/-) | Yes |
| % with No Services (RCPNT IND = 0) | N/A | 13.66 | N/A | 12.29 | N/A | 11.80 | N/A | -9.97 | -4.02 | N/A | N/A |
| % with FFS Only Claims (RCPNT IND = 1) | N/A | 86.34 | N/A | 87.71 | N/A | 88.20 | N/A | 1.58 | 0.56 | N/A | N/A |
| % with Only Capitation Claims (RCPNT IND = 2) | 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 Only Encounter Claims (RCPNT IND = 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 Capitation Claims (RCPNT IND = 4) | 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 Capitation and Encounter Claims Only (RCPNT IND = 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 (RCPNT IND = 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, Capitation, and Encounter Claims (RCPNT IND = 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-CHIP Only) | N/A | 3,503 | N/A | 3,098 | N/A | 3,146 | N/A | -11.60 | 1.55 | N/A | N/A |
| % with Claims and Missing Medicaid Eligibility (Excludes S-CHIP Only) | <2% | 2.08 | No | 1.87 | Yes | 1.91 | Yes | -10.00 | 2.28 | N/A | N/A |
| Total Medicaid Paid for People Missing Medicaid Eligibility (Excludes S-CHIP Only Enrollees) | N/A | \$6,622,749 | N/A | \$8,561,065 | N/A | \$5,580,485 | N/A | 29.27 | -34.80 | N/A | N/A |
| Avg Medicaid Paid for People Missing Medicaid Eligibility (Excludes S-CHIP Only Enrollees) | N/A | N/A | N/A | N/A | N/A | \$1,774 | N/A | N/A | N/A | N/A | N/A |
| # with FFS Claims and Missing Medicaid Eligibility (Excludes S-CHIP Only) | N/A | N/A | N/A | 3,098 | N/A | 3,146 | N/A | N/A | 1.55 | N/A | N/A |
| % with FFS Claims and Missing Medicaid Eligibility (Excludes S-CHIP Only) | N/A | N/A | N/A | 1.87 | N/A | 1.91 | N/A | N/A | 2.28 | N/A | N/A |
| Total Medicaid Paid for People with FFS Claims and Missing Medicaid Eligibility (Excludes S-CHIP Only) | N/A | N/A | N/A | \$8,561,065 | N/A | \$5,580,485 | N/A | N/A | -34.80 | N/A | N/A |
| Avg Medicaid Paid for People with FFS Claims and Missing Medicaid Eligibility (Excludes S-CHIP Only) | N/A | N/A | N/A | N/A | N/A | \$1,774 | N/A | N/A | N/A | N/A | N/A |
| S-CHIP ENROLLMENT | | | | | | | | | | | |
| # with ONLY S-CHIP Enrollment | N/A | 2,045 | N/A | 2,111 | N/A | 2,066 | N/A | 3.23 | -2.13 | N/A | N/A |
| % with ONLY S-CHIP Enrollment | N/A | 1.21 | N/A | 1.27 | N/A | 1.25 | N/A | 4.99 | -1.43 | N/A | N/A |
| # with ANY S-CHIP Enrollment | N/A | 6,532 | N/A | 6,704 | N/A | 6,524 | N/A | 2.63 | -2.68 | N/A | N/A |
| % with ANY S-CHIP Enrollment | N/A | 3.87 | N/A | 4.04 | N/A | 3.96 | N/A | 4.39 | -1.99 | N/A | N/A |
| Total Person-Years of Enrollment with ANY S-CHIP Enrollment | N/A | 2,992 | N/A | 3,169 | N/A | 3,144 | N/A | 5.92 | -0.78 | N/A | N/A |
| Total Medicaid Enrollees (excludes people with missing Medicaid eligibility information or S-CHIP only) | | | | | | | | | | | |
| Total Medicaid Enrollees | N/A | 163,149 | N/A | 160,651 | N/A | 159,470 | N/A | -1.53 | -0.74 | 10% (+/-) | Yes |
| Total Medicaid Person-Years of Enrollment | N/A | 127,886 | N/A | 126,944 | N/A | 126,424 | N/A | -0.74 | -0.41 | 10% (+/-) | Yes |
| # with Any M-CHIP Enrollment | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| Total Person-Years of Enrollment Any M-CHIP | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| Demographic Characteristics | | | | | | | | | | | |
| % Records with Valid SSN Format | >=95% | 99.72 | Yes | 99.72 | Yes | 99.71 | Yes | 0.00 | -0.01 | 10% (+/-) | Yes |
| % Records Whose MSIS SSN Passed High Group Test (HGT FLAG = 1) | >95% | N/A | No | 99.67 | No | 99.60 | No | N/A | -0.06 | 10% (+/-) | Yes |
| % Records Whose MSIS SSN Failed High Group Test Due to Invalid AAA (HGT FLAG = 2) | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | 0.74 | N/A | N/A |
| % Records Whose MSIS SSN Failed High Group Test Due to GG = 00 (HGT FLAG = 3) | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | N/A | N/A |

2004-2006 MAX PSF Validation Table
State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| % Records Whose MSIS SSN Failed High Group Test Due to SSSS = 0000 (HGT FLAG = 4) | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | N/A | N/A |
| % Records Whose MSIS SSN Failed High Group Test Due to GG Not Yet Issued (HGT FLAG = 5) | N/A | N/A | N/A | 0.05 | N/A | 0.10 | N/A | N/A | 110.30 | N/A | N/A |
| % Records Whose MSIS SSN Failed High Group Test Due to Railroad Retirement Number with Invalid DOB (HGT FLAG = 6) | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | N/A | N/A |
| # SSNs with More Than One MSIS ID | 0 | 0 | Yes | 0 | Yes | 0 | Yes | Div by 0 | Div by 0 | N/A | N/A |
| % with External SSN from EDB (EXT SSN SRCE = 1) | N/A | N/A | N/A | 22.18 | N/A | 22.41 | N/A | N/A | 1.05 | 10% (+/-) | Yes |
| % with External SSN from State-Provided Cross-Reference File (EXT SSN SRCE = 2) | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | 10% (+/-) | N/A |
| % with County Code | >=98% | 98.80 | Yes | 96.54 | No | 95.73 | No | -2.29 | -0.84 | 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% | 1.09 | Yes | 1.18 | Yes | 1.20 | Yes | 8.00 | 2.07 | 10% (+/-) | Yes |
| % White | N/A | 57.63 | N/A | 0.00 | N/A | 60.67 | N/A | -100 | Div by 0 | 10% (+/-) | N/A |
| % Black | N/A | 0.83 | N/A | 0.00 | N/A | 1.10 | N/A | -100 | Div by 0 | 10% (+/-) | N/A |
| % Native American/Alaskan Native | N/A | 0.14 | N/A | 0.00 | N/A | 0.17 | N/A | -100 | Div by 0 | 10% (+/-) | N/A |
| % Asian | N/A | 0.25 | N/A | 0.00 | N/A | 0.30 | N/A | -100 | Div by 0 | 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% | 40.96 | No | 100.00 | No | 37.76 | No | 144.1 | -62.20 | 10% (+/-) | No |
| % Hispanic/Latino (Included with Race Categories Prior to 2005) | N/A | 0.18 | N/A | 0.00 | N/A | 0.36 | N/A | -100 | Div by 0 | 10% (+/-) | N/A |
| % of Hispanic/Latino with Unknown Race | N/A | N/A | N/A | Div by 0 | N/A | 100.00 | N/A | N/A | Div by 0 | 10% (+/-) | N/A |
| % Age 0 | 2-8% | 2.36 | Yes | 2.28 | Yes | 2.35 | Yes | -3.61 | 3.17 | 10% (+/-) | Yes |
| % Age 0-20 Years | 49-74% | 45.00 | No | 44.99 | No | 44.85 | No | -0.03 | -0.31 | 10% (+/-) | Yes |
| % Age > 64 Years | 5-18% | 12.91 | Yes | 12.81 | Yes | 12.73 | Yes | -0.80 | -0.63 | 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 | 40-70% | 52.50 | Yes | 53.97 | Yes | 54.00 | Yes | 2.80 | 0.05 | 10% (+/-) | Yes |
| EDB Dual Eligibles | | | | | | | | | | | |
| Total EDB Duals (Duals Confirmed by EDB) | N/A | 31,478 | N/A | 31,489 | N/A | 31,698 | N/A | 0.03 | 0.66 | 10% (+/-) | Yes |
| Total EDB Dual Person-Years of Enrollment | N/A | 27,130 | N/A | 27,526 | N/A | 27,714 | N/A | 1.46 | 0.68 | 15% (+/-) | Yes |
| % Age > 64 Years Who Are EDB Duals | >=90% | 97.53 | Yes | 97.80 | Yes | 97.99 | Yes | 0.28 | 0.19 | 10% (+/-) | Yes |
| % Aged Groups (MAX ELIG CD = 11,21,31,41,51) Who Are EDB Duals | >=90% | 98.08 | Yes | 98.51 | Yes | 98.62 | Yes | 0.44 | 0.11 | 10% (+/-) | Yes |
| % Disabled Groups (MAX ELIG CD = 12,22,32,3A,42,52) Who Are EDB Duals | 30-55% | 56.83 | No | 56.98 | No | 57.14 | No | 0.27 | 0.27 | 10% (+/-) | Yes |
| % EDB Only (EDB DUAL = 50) | <5% | 2.66 | Yes | 1.50 | Yes | 1.43 | Yes | -43.60 | -5.07 | N/A | N/A |
| % EDB QMB Only (EDB DUAL = 51) | N/A | 0.71 | N/A | 0.56 | N/A | 6.17 | N/A | -21.60 | 1,011.00 | N/A | N/A |
| % EDB QMB Plus (EDB DUAL = 52) | N/A | 33.61 | N/A | 35.55 | N/A | 36.21 | N/A | 5.78 | 1.84 | N/A | N/A |
| % EDB SLMB Only (EDB DUAL = 53) | N/A | 1.63 | N/A | 1.76 | N/A | 7.93 | N/A | 7.94 | 349.80 | N/A | N/A |
| % EDB SLMB Plus (EDB DUAL = 54) | N/A | 2.87 | N/A | 2.86 | N/A | 3.37 | N/A | -0.15 | 17.86 | N/A | N/A |
| % EDB QDWI (EDB DUAL = 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 (EDB DUAL = 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 (EDB DUAL = 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 (EDB DUAL = 58) | N/A | 20.46 | N/A | 21.18 | N/A | 21.52 | N/A | 3.50 | 1.62 | N/A | N/A |
| % EDB Dual Type Unknown (EDB DUAL = 59) | N/A | 38.06 | N/A | 36.59 | N/A | 23.37 | N/A | -3.86 | -36.10 | N/A | N/A |
| % EDB Dual Status Unknown (EDB DUAL = 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 |

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State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Total Non-EDB Duals (Duals Reported in MSIS, Not Found in EDB) | N/A | 706 | N/A | 270 | N/A | 186 | N/A | -61.80 | -31.10 | 10% (+/-) | No |
| % Non-EDB Duals Without Valid SSN | N/A | 0.14 | N/A | 0.00 | N/A | 0.00 | N/A | -100.00 | Div by 0 | 10% (+/-) | N/A |
| % Non-EDB Duals Who Are Children/Adults | N/A | 30.59 | N/A | 17.04 | N/A | 3.76 | N/A | -44.30 | -77.90 | 10% (+/-) | No |
| % EDB Duals with Spanish Language | N/A | 0.07 | N/A | 0.06 | N/A | 0.05 | N/A | -9.56 | -11.10 | 15% (+/-) | Yes |
| % EDB Duals with EDB Date of Death During Year | 6-10% | 5.79 | No | 6.10 | Yes | 5.83 | No | 5.23 | -4.38 | 15% (+/-) | Yes |
| % EDB Duals with Medicaid Reported HIC | N/A | 97.19 | N/A | 98.30 | N/A | 98.62 | N/A | 1.14 | 0.32 | 15% (+/-) | Yes |
| % EDB Duals with Medicaid Reported HIC = Medicare HIC | N/A | 96.21 | N/A | 97.93 | N/A | 97.99 | N/A | 1.79 | 0.06 | 15% (+/-) | Yes |
| Total EDB Dual Enrollees in June | N/A | 29,979 | N/A | 29,991 | N/A | 30,259 | N/A | 0.04 | 0.89 | 10% (+/-) | Yes |
| JUNE MEDICARE ELIGIBILITY GROUP | | | | | | | | | | | |
| June % with Part A Medicare | N/A | 2.16 | N/A | 2.31 | N/A | 1.89 | N/A | 7.22 | -18.50 | 15% (+/-) | No |
| June % with Part B Medicare | N/A | 1.18 | N/A | 1.19 | N/A | 1.32 | N/A | 0.81 | 11.05 | 15% (+/-) | Yes |
| June % Part A/B Medicare | N/A | 96.66 | N/A | 96.50 | N/A | 96.79 | N/A | -0.17 | 0.31 | 15% (+/-) | Yes |
| ORIGINAL REASON FOR MEDICARE ENTITLEMENT | | | | | | | | | | | |
| % Aged (MDCR ORIG REAS CD = 0) | N/A | 54.56 | N/A | 53.02 | N/A | 51.56 | N/A | -2.81 | -2.75 | 15% (+/-) | Yes |
| % Disabled (MDCR ORIG REAS CD = 1) | N/A | 44.93 | N/A | 46.46 | N/A | 47.88 | N/A | 3.42 | 3.06 | 15% (+/-) | Yes |
| % End Stage Renal Disease (MDCR ORIG REAS CD = 2) | N/A | 0.16 | N/A | 0.16 | N/A | 0.17 | N/A | -3.96 | 7.45 | 15% (+/-) | Yes |
| % Disabled with End Stage Renal Disease (MDCR ORIG REAS CD = 3) | N/A | 0.36 | N/A | 0.36 | N/A | 0.38 | N/A | 1.75 | 6.31 | 15% (+/-) | Yes |
| Other Eligibility Characteristics (All Enrollees) | | | | | | | | | | | |
| % Aged Groups (MAX ELIG CD = 11,21,31,41,51) Who Are > 64 Years | >=99% | 99.92 | Yes | 99.96 | Yes | 99.98 | Yes | 0.05 | 0.02 | 10% (+/-) | Yes |
| % Disabled Groups (MAX ELIG CD = 12,22,32,3A,42,52) Who Are > 64 Years | N/A | 7.02 | N/A | 6.83 | N/A | 6.49 | N/A | -2.70 | -5.02 | 10% (+/-) | Yes |
| % Child Groups (MAX ELIG CD = 14,16, 24, 34, 44, 48, 54) Who Are < 21 Years | >=98% | 99.46 | Yes | 99.40 | Yes | 99.43 | Yes | -0.06 | 0.04 | 10% (+/-) | Yes |
| % Adult Groups (MAX ELIG CD = 15,17,25,35,45,55) Who Are > 20 Years | >=80% | 95.67 | Yes | 95.81 | Yes | 95.84 | Yes | 0.15 | 0.03 | 10% (+/-) | Yes |
| % MAX 1115 Expansion Enrollees (MAX ELIG CD = 51,52,54,55) with 1115 Waiver Enrollment (WVR TYPE = 1,5,6,A,F) | 100% | N/A | N/A | 90.82 | N/A | 100.00 | No | N/A | 10.11 | 25% (+/-) | Yes |
| % MAX 1115 Waiver Enrollees (WVR TYPE = 1,5,6,A,F) in MAX 1115 Expansion Group (MAX ELIG CD = 51,52,54,55) | N/A | N/A | N/A | 35.65 | N/A | 36.26 | N/A | N/A | 1.69 | 25% (+/-) | Yes |
| Aged Total | N/A | 19,467 | N/A | 18,918 | N/A | 18,661 | N/A | -2.82 | -1.36 | 10% (+/-) | Yes |
| Aged, Cash (MAX ELIG CD = 11) | N/A | 1,544 | N/A | 1,433 | N/A | 1,370 | N/A | -7.19 | -4.40 | 10% (+/-) | Yes |
| Aged, Medically Needy (MAX ELIG CD = 21) | N/A | 3,410 | N/A | 3,482 | N/A | 3,490 | N/A | 2.11 | 0.23 | 10% (+/-) | Yes |
| Aged, Poverty (MAX ELIG CD = 31) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 10% (+/-) | N/A |
| Other Aged (MAX ELIG CD = 41) | N/A | 3,705 | N/A | 3,739 | N/A | 3,824 | N/A | 0.92 | 2.27 | 10% (+/-) | Yes |
| 1115 Aged (MAX ELIG CD = 51) | N/A | 10,808 | N/A | 10,264 | N/A | 9,977 | N/A | -5.03 | -2.80 | 10% (+/-) | Yes |
| Disabled Total | N/A | 20,671 | N/A | 21,434 | N/A | 22,044 | N/A | 3.69 | 2.85 | 10% (+/-) | Yes |
| Disabled, Cash (MAX ELIG CD = 12) | N/A | 13,031 | N/A | 13,325 | N/A | 13,655 | N/A | 2.26 | 2.48 | 10% (+/-) | Yes |
| Disabled, Medically Needy (MAX ELIG CD = 22) | N/A | 3,395 | N/A | 3,688 | N/A | 3,886 | N/A | 8.63 | 5.37 | 10% (+/-) | Yes |
| Disabled, Poverty (MAX ELIG CD = 32, 3A) | N/A | 77 | N/A | 101 | N/A | 129 | N/A | 31.17 | 27.72 | 10% (+/-) | No |
| Other Disabled (MAX ELIG CD = 42) | N/A | 1,914 | N/A | 2,052 | N/A | 2,180 | N/A | 7.21 | 6.24 | 10% (+/-) | Yes |
| 1115 Disabled (MAX ELIG CD = 52) | N/A | 2,254 | N/A | 2,268 | N/A | 2,194 | N/A | 0.62 | -3.26 | 10% (+/-) | Yes |
| Child Total | N/A | 68,669 | N/A | 67,524 | N/A | 66,651 | N/A | -1.67 | -1.29 | 10% (+/-) | Yes |
| AFDC Child, Cash (MAX ELIG CD = 14) | N/A | 8,819 | N/A | 8,453 | N/A | 8,382 | N/A | -4.15 | -0.84 | 10% (+/-) | Yes |
| AFDC-U Child, Cash (MAX ELIG CD = 16) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 10% (+/-) | N/A |
| AFDC Child, Medically Needy (MAX ELIG CD = 24) | N/A | 2,263 | N/A | 2,340 | N/A | 2,474 | N/A | 3.40 | 5.73 | 10% (+/-) | Yes |
| Child Poverty (MAX ELIG CD = 34) | N/A | 47,313 | N/A | 46,773 | N/A | 46,462 | N/A | -1.14 | -0.67 | 10% (+/-) | Yes |

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| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Other Child (MAX ELIG CD = 44) | N/A | 4,797 | N/A | 4,836 | N/A | 4,802 | N/A | 0.81 | -0.70 | 10% (+/-) | Yes |
| Foster Care Child (MAX ELIG CD = 48) | N/A | 2,767 | N/A | 2,848 | N/A | 2,680 | N/A | 2.93 | -5.90 | 10% (+/-) | Yes |
| 1115 Child (MAX ELIG CD = 54) | N/A | 2,710 | N/A | 2,274 | N/A | 1,851 | N/A | -16.10 | -18.60 | 10% (+/-) | No |
| Adult Total | N/A | 54,342 | N/A | 52,775 | N/A | 52,114 | N/A | -2.88 | -1.25 | 10% (+/-) | Yes |
| AFDC Adult, Cash (MAX ELIG CD = 15) | N/A | 4,255 | N/A | 4,044 | N/A | 3,922 | N/A | -4.96 | -3.02 | 10% (+/-) | Yes |
| AFDC-U Adult, Cash (MAX ELIG CD = 17) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 10% (+/-) | N/A |
| AFDC Adult, Medically Needy (MAX ELIG CD = 25) | N/A | 5,346 | N/A | 5,649 | N/A | 6,003 | N/A | 5.67 | 6.27 | 10% (+/-) | Yes |
| Adult, Poverty (MAX ELIG CD = 35) | N/A | 2,524 | N/A | 2,545 | N/A | 2,681 | N/A | 0.83 | 5.34 | 10% (+/-) | Yes |
| Other Adult (MAX ELIG CD = 45) | N/A | 3,574 | N/A | 3,795 | N/A | 3,749 | N/A | 6.18 | -1.21 | 10% (+/-) | Yes |
| 1115 Adult (MAX ELIG CD = 55) | N/A | 38,643 | N/A | 36,742 | N/A | 35,759 | N/A | -4.92 | -2.68 | 10% (+/-) | Yes |
| Long-Term Care Enrollees | | | | | | | | | | | |
| INSTITUTIONAL STATUS | | | | | | | | | | | |
| # Enrollees with Any ILTC Claims (Includes NF, ICF/MR, Aged Mental Hospital, IP Psych Age < 21 years, MAX TOS = 02, 04, 05, 07) | N/A | 3,688 | N/A | 3,628 | N/A | 3,664 | N/A | -1.63 | 0.99 | 15% (+/-) | Yes |
| % Enrollees with Any ILTC Claims | N/A | 2.26 | N/A | 2.26 | N/A | 2.30 | N/A | -0.10 | 1.74 | 15% (+/-) | Yes |
| % Aged Enrollees with Any ILTC Claims | N/A | 16.27 | N/A | 16.34 | N/A | 16.40 | N/A | 0.43 | 0.36 | 15% (+/-) | Yes |
| % Disabled Enrollees with Any ILTC Claims | N/A | 2.42 | N/A | 2.38 | N/A | 2.67 | N/A | -1.63 | 11.88 | 15% (+/-) | Yes |
| % 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 | 15% (+/-) | N/A |
| % Adult Enrollees with Any ILTC Claims | N/A | 0.04 | N/A | 0.05 | N/A | 0.03 | N/A | 33.86 | -37.70 | 15% (+/-) | No |
| COMMUNITY LONG-TERM CARE STATUS | | | | | | | | | | | |
| # Enrollees with Any CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | 8,518 | N/A | 8,845 | N/A | N/A | 3.84 | 15% (+/-) | Yes |
| % Enrollees with Any CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | 5.30 | N/A | 5.55 | N/A | N/A | 4.61 | 15% (+/-) | Yes |
| % Aged Enrollees with Any CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | 9.62 | N/A | 11.45 | N/A | N/A | 18.98 | 15% (+/-) | No |
| % Disabled Enrollees with Any CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | 19.54 | N/A | 20.29 | N/A | N/A | 3.83 | 15% (+/-) | Yes |
| % Child Enrollees with Any CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | 2.61 | N/A | 2.32 | N/A | N/A | -11.10 | 15% (+/-) | Yes |
| % Adult Enrollees with Any CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | 1.41 | N/A | 1.32 | N/A | N/A | -6.35 | 15% (+/-) | Yes |
| # Enrollees with ILTC Claims and CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | 557 | N/A | 615 | N/A | N/A | 10.41 | 15% (+/-) | Yes |
| # Ever Enrolled in Section 1915(c) Waiver or with Any CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | N/A | N/A | 8,863 | N/A | N/A | N/A | 15% (+/-) | No |
| SECTION 1915(c) WAIVER ENROLLMENT - MOST RECENT | | | | | | | | | | | |
| # Ever Enrolled in Any Section 1915(c) Waiver (WVR TYPE = G-P) | N/A | N/A | N/A | 4,344 | N/A | 4,559 | N/A | N/A | 4.95 | 15% (+/-) | Yes |
| % Enrolled in Any Section 1915(c) Waiver | N/A | N/A | N/A | 2.70 | N/A | 2.86 | N/A | N/A | 5.73 | 15% (+/-) | Yes |
| % Aged Enrollees in Section 1915(c) Waiver | N/A | N/A | N/A | 7.66 | N/A | 8.75 | N/A | N/A | 14.18 | 15% (+/-) | Yes |
| % Disabled Enrollees in Section 1915(c) Waiver | N/A | N/A | N/A | 12.16 | N/A | 12.28 | N/A | N/A | 0.96 | 15% (+/-) | Yes |
| % Child Enrollees in Section 1915(c) Waiver | N/A | N/A | N/A | 0.35 | N/A | 0.24 | N/A | N/A | -30.90 | 15% (+/-) | No |
| % Adult Enrollees in Section 1915(c) Waiver | N/A | N/A | N/A | 0.10 | N/A | 0.12 | N/A | N/A | 12.32 | 15% (+/-) | Yes |
| # with Section 1915(c) Waiver for Aged and Disabled (WVR TYPE = G) | N/A | N/A | N/A | 1,938 | N/A | 2,175 | N/A | N/A | 12.23 | 15% (+/-) | Yes |
| # Aged, EDB Dual | N/A | N/A | N/A | N/A | N/A | 1,553 | N/A | N/A | N/A | 15% (+/-) | No |
| # Aged, Non-Dual | N/A | N/A | N/A | N/A | N/A | 18 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, EDB Dual | N/A | N/A | N/A | N/A | N/A | 437 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, Non-Dual | N/A | N/A | N/A | N/A | N/A | 157 | N/A | N/A | N/A | 15% (+/-) | No |
| # Other (Child or Adult) | N/A | N/A | N/A | N/A | N/A | 10 | N/A | N/A | N/A | 15% (+/-) | No |
| # with Section 1915(c) Waiver for Aged (WVR TYPE = H) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |

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State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| # Aged, EDB Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Aged, Non-Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, EDB Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, Non-Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Other (Child or Adult) | 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 (WVR TYPE = I) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Aged, EDB Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Aged, Non-Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, EDB Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, Non-Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Other (Child or Adult) | 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 (WVR TYPE = J) | N/A | N/A | N/A | 62 | N/A | 67 | N/A | N/A | 8.07 | 15% (+/-) | Yes |
| # Aged, EDB Dual | N/A | N/A | N/A | N/A | N/A | 1 | N/A | N/A | N/A | 15% (+/-) | No |
| # Aged, Non-Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, EDB Dual | N/A | N/A | N/A | N/A | N/A | 40 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, Non-Dual | N/A | N/A | N/A | N/A | N/A | 25 | N/A | N/A | N/A | 15% (+/-) | No |
| # Other (Child or Adult) | N/A | N/A | N/A | N/A | N/A | 1 | N/A | N/A | N/A | 15% (+/-) | No |
| # with Section 1915(c) Waiver for People with HIV/AIDS (WVR TYPE = K) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Aged, EDB Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Aged, Non-Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, EDB Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, Non-Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Other (Child or Adult) | 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 MR/DD (WVR TYPE = L) | N/A | N/A | N/A | 2,247 | N/A | 2,238 | N/A | N/A | -0.40 | 15% (+/-) | Yes |
| # Aged, EDB Dual | N/A | N/A | N/A | N/A | N/A | 59 | N/A | N/A | N/A | 15% (+/-) | No |
| # Aged, Non-Dual | N/A | N/A | N/A | N/A | N/A | 1 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, EDB Dual | N/A | N/A | N/A | N/A | N/A | 1,248 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, Non-Dual | N/A | N/A | N/A | N/A | N/A | 768 | N/A | N/A | N/A | 15% (+/-) | No |
| # Other (Child or Adult) | N/A | N/A | N/A | N/A | N/A | 162 | N/A | N/A | N/A | 15% (+/-) | No |
| # with Section 1915(c) Waiver for People with MI/SED (WVR TYPE = M) | N/A | N/A | N/A | 97 | N/A | 79 | N/A | N/A | -18.60 | 15% (+/-) | No |
| # Aged, EDB Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Aged, Non-Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, EDB Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, Non-Dual | N/A | N/A | N/A | N/A | N/A | 32 | N/A | N/A | N/A | 15% (+/-) | No |
| # Other (Child or Adult) | N/A | N/A | N/A | N/A | N/A | 47 | N/A | N/A | N/A | 15% (+/-) | No |
| # with Section 1915(c) Waiver for Technologically Dependent/Medically Fragile (WVR TYPE = N) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Aged, EDB Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Aged, Non-Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, EDB Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, Non-Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Other (Child or Adult) | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |

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State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| # with Section 1915(c) Waiver for People with Autism/Autism Spectrum Disorder (WVR TYPE = P) | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Aged, EDB Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Aged, Non-Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, EDB Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, Non-Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Other (Child or Adult) | 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 (WVR TYPE = O) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # Aged, EDB Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Aged, Non-Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, EDB Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Disabled, Non-Dual | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | 15% (+/-) | No |
| # Other (Child or Adult) | 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 (PGM TYPE = 6 or 7) | <15% | N/A | No | 0.64 | Yes | 0.44 | Yes | N/A | -31.90 | 15% (+/-) | No |
| % of Section 1915(c) Claim (PGM TYPE = 6 or 7) Recipients with No Waiver Enrollment | <10% | N/A | No | 6.70 | Yes | 10.56 | Yes | N/A | 57.61 | 15% (+/-) | No |
| % of Section 1915(c) Waiver Enrollees with Any HMO/HIO Enrollment | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| Other Waiver Enrollment (Enrolled Any Time During the Year) | | | | | | | | | | | |
| # with Any 1115 Waiver (WVR TYPE = 1,5,6,A,F) | N/A | N/A | N/A | 131,305 | N/A | 137,303 | N/A | N/A | 4.57 | 25% (+/-) | Yes |
| % Aged Enrollees with Any 1115 Waiver | N/A | N/A | N/A | 75.21 | N/A | 79.88 | N/A | N/A | 6.21 | 15% (+/-) | Yes |
| % Disabled Enrollees with Any 1115 Waiver | N/A | N/A | N/A | 63.90 | N/A | 69.83 | N/A | N/A | 9.28 | 15% (+/-) | Yes |
| % Child Enrollees with Any 1115 Waiver | N/A | N/A | N/A | 82.47 | N/A | 86.04 | N/A | N/A | 4.34 | 15% (+/-) | Yes |
| % Adult Enrollees with Any 1115 Waiver | N/A | N/A | N/A | 90.37 | N/A | 95.28 | N/A | N/A | 5.43 | 15% (+/-) | Yes |
| % with Any HMO/HIO Enrollment | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # with Any 1915(b) Waiver (WVR TYPE = 2) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 25% (+/-) | N/A |
| % Aged Enrollees with Any 1915(b) Waiver | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| % Disabled Enrollees with Any 1915(b) Waiver | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| % Child Enrollees with Any 1915(b) Waiver | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| % Adult Enrollees with Any 1915(b) Waiver | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| % with Any HMO/HIO Enrollment | N/A | N/A | N/A | Div by 0 | N/A | Div by 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # with Any Combined 1915(b)(c) Waiver (WVR TYPE = 4) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 25% (+/-) | N/A |
| % Aged Enrollees with Any Combined 1915(b)(c) Waiver | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| % Disabled Enrollees with Any Combined 1915(b)(c) Waiver | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| % Child Enrollees with Any Combined 1915(b)(c) Waiver | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| % Adult Enrollees with Any Combined 1915(b)(c) Waiver | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| % with Any HMO/HIO Enrollment | N/A | N/A | N/A | Div by 0 | N/A | Div by 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| # with 1115 HIFA Waiver (WVR TYPE = 5) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 25% (+/-) | N/A |
| # with 1115 Pharmacy Waiver Coverage (WVR TYPE = 6) | N/A | N/A | N/A | 13,397 | N/A | 12,907 | N/A | N/A | -3.66 | 25% (+/-) | Yes |
| % Aged Enrollees with Pharmacy Waiver Coverage | N/A | N/A | N/A | 57.11 | N/A | 55.78 | N/A | N/A | -2.33 | 15% (+/-) | Yes |
| % Disabled Enrollees with Any Pharmacy Waiver Coverage | N/A | N/A | N/A | 11.99 | N/A | 11.20 | N/A | N/A | -6.59 | 15% (+/-) | Yes |
| % Child Enrollees with Any Pharmacy Waiver Coverage | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| % Adult Enrollees with Any Combined 1915(b)(c) Waiver | N/A | N/A | N/A | 0.05 | N/A | 0.06 | N/A | N/A | 26.59 | 15% (+/-) | No |
| % with Any HMO/HIO Enrollment | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |

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|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| # with Other Type of Waiver (WVR TYPE = 7) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 25% (+/-) | N/A |
| # with Unknown Type of Waiver (WVR TYPE = 9) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 25% (+/-) | N/A |
| # with 1115 Disaster-Related Waiver (WVR TYPE = A) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 25% (+/-) | N/A |
| # with 1115 Family Planning Only Waiver (WVR TYPE = F) | N/A | N/A | N/A | 0 | N/A | 0 | N/A | N/A | Div by 0 | 25% (+/-) | N/A |
| Enrollees with Restricted Benefits | | | | | | | | | | | |
| <i>Family Planning enrollees with Restricted Benefits (RBF = 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 |
| # Person-Years of Enrollment 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 |
| <i>Aliens with Restricted Benefits (RBF = 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 |
| # Person-Years of Enrollment 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 |
| <i>EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - RBF = 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 |
| # Person-Years of Enrollment EDB Duals 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 |
| % EDB Duals with ONLY Restricted Benefits Enrollment | <=40% | N/A | No | 0.00 | Yes | 0.00 | Yes | N/A | Div by 0 | 15% (+/-) | N/A |
| <i>Prescription Drug Enrollees (RBF = X, Y, or Z)</i> | | | | | | | | | | | |
| # with ONLY Prescription Drug Enrollment (May Have a Month or More of RBF = 3) | N/A | 12,200 | N/A | 11,632 | N/A | 11,202 | N/A | -4.66 | -3.70 | N/A | N/A |
| # with ANY Prescription Drug Enrollment | N/A | 14,019 | N/A | 13,406 | N/A | 12,901 | N/A | -4.37 | -3.77 | N/A | N/A |
| # Person-Years of ANY Prescription Drug Enrollment | N/A | 10,727 | N/A | 10,675 | N/A | 10,238 | N/A | -0.48 | -4.10 | N/A | N/A |
| <i>Dual Prescription Drug Enrollees</i> | | | | | | | | | | | |
| # with ONLY Prescription Drugs Who Are EDB Duals | N/A | 11,997 | N/A | 11,508 | N/A | 11,104 | N/A | -4.08 | -3.51 | N/A | N/A |
| June Eligibility Profile | | | | | | | | | | | |
| Total Enrollees in June | N/A | 127,739 | N/A | 126,603 | N/A | 127,215 | N/A | -0.89 | 0.48 | 15% (+/-) | Yes |
| June % Full Scope Benefits (RBF = 1) | >80% | 89.39 | Yes | 90.11 | Yes | 89.65 | Yes | 0.80 | -0.51 | 15% (+/-) | Yes |
| June % Restricted Benefits Alien (RBF = 2) | <5% | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| June % Restricted Benefits Dual (RBF = 3) | <5% | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| June % Restricted Benefits Pregnant (RBF = 4) | <5% | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| June % Restricted Benefits Other (RBF = 5) | 0% | 2.56 | No | 1.66 | No | 2.17 | No | -35.20 | 31.11 | 15% (+/-) | No |
| June % Restricted Benefits Family Planning (RBF = 6) | <5% | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| June % Unknown Benefits (RBF = 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 (RBF = X) | N/A | N/A | N/A | 0.10 | N/A | 0.08 | N/A | N/A | -13.50 | 15% (+/-) | Yes |
| June % Restricted Benefits Pharm Plus Dual Receiving Medicare Cost Sharing (RBF = Y) | N/A | N/A | N/A | 0.43 | N/A | 3.06 | N/A | N/A | 605.50 | 15% (+/-) | No |
| June % Restricted Benefits Pharm Plus Dual Not Receiving Medicare Cost Sharing (RBF = Z) | N/A | N/A | N/A | 7.71 | N/A | 5.03 | N/A | N/A | -34.70 | 15% (+/-) | No |
| June % Private Health Insurance (PVT INS CD = 2-4) | 2-15% | 14.15 | Yes | 13.77 | Yes | 29.25 | No | -2.70 | 112.40 | 15% (+/-) | No |
| June Total Enrollees with TANF Flag (TANF FLAG = 2) | N/A | 12,123 | N/A | 11,285 | N/A | 10,749 | N/A | -6.91 | -4.75 | 15% (+/-) | Yes |
| June # with M-CHIP (SCHIP = 2) - Child (Age < 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-CHIP (SCHIP = 2) - Adult (Age > 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-CHIP (SCHIP = 3) - Child (Age < 19 Years) | N/A | 1,422 | N/A | 1,557 | N/A | 1,550 | N/A | 9.49 | -0.45 | 15% (+/-) | Yes |
| June # with S-CHIP (SCHIP = 3) - Adult (Age > 18 Years) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |

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|---|----------------|---------------|-------------------------|---------------|-------------------------|---------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Medicaid Expenditures | | | | | | | | | | | |
| Total Medicaid Paid | N/A | \$770,882,919 | N/A | \$845,951,430 | N/A | \$805,762,221 | N/A | 9.74 | -4.75 | 15% (+/-) | Yes |
| Avg Medicaid Paid per Enrollee | N/A | \$4,725 | N/A | \$5,266 | N/A | \$5,053 | N/A | 11.44 | -4.05 | 15% (+/-) | Yes |
| 25th Percentile | N/A | \$181 | N/A | \$211 | N/A | \$215 | N/A | 16.57 | 1.90 | 15% (+/-) | Yes |
| 50th Percentile (Median) | N/A | \$845 | N/A | \$964 | N/A | \$866 | N/A | 14.08 | -10.20 | 15% (+/-) | Yes |
| 75th Percentile | N/A | \$3,570 | N/A | \$4,001 | N/A | \$3,472 | N/A | 12.07 | -13.20 | 15% (+/-) | Yes |
| 95th Percentile | N/A | \$23,081 | N/A | \$26,080 | N/A | \$25,800 | N/A | 12.99 | -1.07 | 15% (+/-) | Yes |
| 99th Percentile | N/A | \$61,147 | N/A | \$66,691 | N/A | \$66,000 | N/A | 9.07 | -1.04 | 15% (+/-) | Yes |
| Maximum Medicaid Paid | N/A | N/A | N/A | N/A | N/A | \$452,935 | N/A | N/A | N/A | 25% (+/-) | No |
| NUMBER OF HIGH-COST ENROLLEES | | | | | | | | | | | |
| # of Enrollees with Total Medicaid Paid > \$1,000,000 | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | N/A | N/A |
| # of Enrollees with Total Medicaid Paid > \$500,000 | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | N/A | N/A |
| AVERAGE MEDICAID AMOUNT PAID PER ENROLLEE BY MAX ELIGIBILITY GROUP | | | | | | | | | | | |
| Avg Medicaid Paid per Enrollee | N/A | \$4,725 | N/A | \$5,266 | N/A | \$5,053 | N/A | 11.44 | -4.05 | 15% (+/-) | Yes |
| Aged | N/A | \$9,086 | N/A | \$10,347 | N/A | \$8,735 | N/A | 13.88 | -15.60 | 15% (+/-) | No |
| Disabled | N/A | \$14,495 | N/A | \$15,573 | N/A | \$14,273 | N/A | 7.44 | -8.35 | 10% (+/-) | Yes |
| Child | N/A | \$2,407 | N/A | \$2,533 | N/A | \$2,650 | N/A | 5.25 | 4.61 | 10% (+/-) | Yes |
| Adult | N/A | \$2,376 | N/A | \$2,755 | N/A | \$2,908 | N/A | 15.93 | 5.57 | 10% (+/-) | Yes |
| AVERAGE MEDICAID AMOUNT PAID PER EDB DUAL ENROLLEE | | | | | | | | | | | |
| Avg Medicaid Paid per EDB Dual Enrollee | N/A | \$10,243 | N/A | \$11,407 | N/A | \$9,366 | N/A | 11.36 | -17.90 | 15% (+/-) | No |
| Aged | N/A | \$9,104 | N/A | \$10,349 | N/A | \$8,707 | N/A | 13.68 | -15.90 | 10% (+/-) | No |
| Disabled | N/A | \$12,387 | N/A | \$13,221 | N/A | \$10,477 | N/A | 6.73 | -20.80 | 10% (+/-) | No |
| AVERAGE MEDICAID AMOUNT PAID PER LONG-TERM CARE ENROLLEE | | | | | | | | | | | |
| Avg Medicaid Paid per Enrollee with ILTC Claims (MAX TOS = 02, 04, 05, 07) | N/A | N/A | N/A | \$38,296 | N/A | \$35,612 | N/A | N/A | -7.01 | 15% (+/-) | Yes |
| Avg Medicaid Paid per Enrollee with CLTC Claims (Excluding CLTC FLAG = 16-20) | N/A | N/A | N/A | \$34,732 | N/A | \$34,224 | N/A | N/A | -1.46 | 15% (+/-) | Yes |
| Avg Medicaid Paid per Enrollee with ILTC (MAX TOS = 02, 04, 05, 07) and CLTC Claims (Excluding CLTC FLAG = 16-20) | N/A | N/A | N/A | \$41,361 | N/A | \$36,388 | N/A | N/A | -12.00 | 15% (+/-) | Yes |
| AVERAGE MEDICAID AMOUNT PAID PER ENROLLEE IN 1915(c) WAIVER - MOST RECENT | | | | | | | | | | | |
| Avg Medicaid Paid per Section 1915(c) Enrollee | N/A | N/A | N/A | \$47,092 | N/A | \$45,403 | N/A | N/A | -3.59 | 15% (+/-) | Yes |
| Section 1915(c) Waiver for Aged and Disabled (WVR TYPE = G) | N/A | N/A | N/A | \$32,974 | N/A | \$28,809 | N/A | N/A | -12.60 | 15% (+/-) | Yes |
| Section 1915(c) Waiver for Aged (WVR TYPE = H) | N/A | N/A | N/A | Div by 0 | N/A | Div by 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for Physically Disabled (WVR TYPE = I) | N/A | N/A | N/A | Div by 0 | N/A | Div by 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for People with Brain Injuries (WVR TYPE = J) | N/A | N/A | N/A | \$73,038 | N/A | \$71,967 | N/A | N/A | -1.47 | 15% (+/-) | Yes |
| Section 1915(c) Waiver for People with HIV/AIDS (WVR TYPE = K) | N/A | N/A | N/A | Div by 0 | N/A | Div by 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for People with MR/DD (WVR TYPE = L) | N/A | N/A | N/A | \$57,153 | N/A | \$59,327 | N/A | N/A | 3.80 | 15% (+/-) | Yes |
| Section 1915(c) Waiver for People with MI/SED (WVR TYPE = M) | N/A | N/A | N/A | \$79,548 | N/A | \$85,257 | N/A | N/A | 7.18 | 15% (+/-) | Yes |
| Section 1915(c) Waiver for Technologically Dependent/Medically Fragile (WVR TYPE = N) | N/A | N/A | N/A | Div by 0 | N/A | Div by 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for People with Autism/Autism Spectrum Disorder (WVR TYPE = P) | 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 (WVR TYPE = O) | N/A | N/A | N/A | Div by 0 | N/A | Div by 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| AVERAGE 1915(c) WAIVER AMOUNT PAID (PROGRAM TYPES 6 OR 7) PER ENROLLEE IN ANY 1915(c) WAIVER - MOST RECENT | | | | | | | | | | | |
| Avg 1915(c) Waiver Amount Paid per Section 1915(c) Enrollee | N/A | N/A | N/A | \$28,650 | N/A | \$29,345 | N/A | N/A | 2.43 | 15% (+/-) | Yes |

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|--|----------------|---------------|-------------------------|---------------|-------------------------|---------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Section 1915(c) Waiver for Aged and Disabled (WVR TYPE = G) | N/A | N/A | N/A | \$11,076 | N/A | \$9,646 | N/A | N/A | -12.90 | 15% (+/-) | Yes |
| Section 1915(c) Waiver for Aged (WVR TYPE = H) | N/A | N/A | N/A | Div by 0 | N/A | Div by 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for Physically Disabled (WVR TYPE = I) | N/A | N/A | N/A | Div by 0 | N/A | Div by 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for People with Brain Injuries (WVR TYPE = J) | N/A | N/A | N/A | \$48,740 | N/A | \$55,602 | N/A | N/A | 14.08 | 15% (+/-) | Yes |
| Section 1915(c) Waiver for People with HIV/AIDS (WVR TYPE = K) | N/A | N/A | N/A | Div by 0 | N/A | Div by 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for People with MR/DD (WVR TYPE = L) | N/A | N/A | N/A | \$42,935 | N/A | \$47,237 | N/A | N/A | 10.02 | 15% (+/-) | Yes |
| Section 1915(c) Waiver for People with MI/SED (WVR TYPE = M) | N/A | N/A | N/A | \$35,998 | N/A | \$42,582 | N/A | N/A | 18.29 | 15% (+/-) | No |
| Section 1915(c) Waiver for Technologically Dependent/Medically Fragile (WVR TYPE = N) | N/A | N/A | N/A | Div by 0 | N/A | Div by 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| Section 1915(c) Waiver for People with Autism/Autism Spectrum Disorder (WVR TYPE = P) | 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 (WVR TYPE = O) | N/A | N/A | N/A | Div by 0 | N/A | Div by 0 | N/A | N/A | Div by 0 | 15% (+/-) | N/A |
| EXPENDITURES FOR RESTRICTED BENEFIT ENROLLEES | | | | | | | | | | | |
| <i>Expenditures for Family Planning Enrollees with Restricted Benefits (RBF = 6)</i> | | | | | | | | | | | |
| Total Medicaid Paid for ONLY Family Planning Only Enrollees | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| Avg Medicaid Paid per ONLY Family Planning Only Enrollee | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| <i>Expenditures for Aliens with Restricted Benefits (RBF = 2)</i> | | | | | | | | | | | |
| Total Medicaid Paid for Aliens with Restricted Benefits ONLY Enrollment | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| Avg Medicaid Paid per Alien Enrollee with Restricted Benefits ONLY | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | N/A | N/A |
| <i>Expenditures for EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - RBF = 3)</i> | | | | | | | | | | | |
| Total Medicaid Paid for 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 |
| Avg Medicaid Paid per EDB Dual with Only Restricted Benefits 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 |
| <i>Expenditures for Prescription Drug Enrollees (RBF = X, Y, or Z)</i> | | | | | | | | | | | |
| Total Medicaid Paid for Prescription Drug ONLY Enrollees (May Have a Month or More of RBF = 3) | N/A | \$30,101,364 | N/A | \$33,103,178 | N/A | \$12,884,303 | N/A | 9.97 | -61.10 | N/A | N/A |
| Avg Medicaid Paid per Prescription Drug ONLY Enrollee | N/A | \$2,467 | N/A | \$2,846 | N/A | \$1,150 | N/A | 15.34 | -59.60 | N/A | N/A |
| <i>Expenditures for Dual Prescription Drug Enrollees</i> | | | | | | | | | | | |
| Total Medicaid Paid for Prescription Drug ONLY Enrollees Who Are EDB Duals | N/A | \$29,871,801 | N/A | \$32,874,030 | N/A | \$12,769,927 | N/A | 10.05 | -61.20 | N/A | N/A |
| MEDICAID ENROLLEES - EXCLUDING SELECT RESTRICTED BENEFIT GROUPS (excludes people with missing eligibility information, S-CHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) ---- NOTE: S-CHIP 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. | | | | | | | | | | | |
| Total Medicaid Enrollees | N/A | 150,949 | N/A | 149,019 | N/A | 148,268 | N/A | -1.28 | -0.50 | 10% (+/-) | Yes |
| Aged Total | N/A | 9,065 | N/A | 9,087 | N/A | 9,205 | N/A | 0.24 | 1.30 | 10% (+/-) | Yes |
| Disabled Total | N/A | 18,873 | N/A | 19,633 | N/A | 20,298 | N/A | 4.03 | 3.39 | 10% (+/-) | Yes |
| Child Total | N/A | 68,669 | N/A | 67,524 | N/A | 66,651 | N/A | -1.67 | -1.29 | 10% (+/-) | Yes |
| Adult Total | N/A | 54,342 | N/A | 52,775 | N/A | 52,114 | N/A | -2.88 | -1.25 | 10% (+/-) | Yes |
| Total Medicaid Person-Years of Enrollment | N/A | 117,887 | N/A | 117,008 | N/A | 116,871 | N/A | -0.75 | -0.12 | 10% (+/-) | Yes |
| Total EDB Duals | N/A | 19,481 | N/A | 19,981 | N/A | 20,594 | N/A | 2.57 | 3.07 | 10% (+/-) | Yes |
| Aged | N/A | 8,846 | N/A | 8,875 | N/A | 9,007 | N/A | 0.33 | 1.49 | 10% (+/-) | Yes |
| Disabled | N/A | 9,998 | N/A | 10,467 | N/A | 10,888 | N/A | 4.69 | 4.02 | 10% (+/-) | Yes |
| TOTAL MEDICAID AMOUNT PAID | | | | | | | | | | | |
| Total Medicaid Paid | N/A | \$740,781,555 | N/A | \$812,848,252 | N/A | \$792,877,918 | N/A | 9.73 | -2.46 | 15% (+/-) | Yes |
| AVERAGE MEDICAID AMOUNT PAID PER ENROLLEE BY MAX ELIGIBILITY GROUP | | | | | | | | | | | |
| Avg Medicaid Paid per Enrollee | N/A | \$4,907 | N/A | \$5,455 | N/A | \$5,348 | N/A | 11.15 | -1.96 | 15% (+/-) | Yes |

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State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Aged | N/A | \$16,921 | N/A | \$18,715 | N/A | \$16,590 | N/A | 10.60 | -11.40 | 15% (+/-) | Yes |
| Disabled | N/A | \$15,526 | N/A | \$16,624 | N/A | \$15,373 | N/A | 7.08 | -7.53 | 10% (+/-) | Yes |
| Child | N/A | \$2,407 | N/A | \$2,533 | N/A | \$2,650 | N/A | 5.25 | 4.61 | 10% (+/-) | Yes |
| Adult | N/A | \$2,376 | N/A | \$2,755 | N/A | \$2,908 | N/A | 15.93 | 5.57 | 10% (+/-) | Yes |
| AVERAGE MEDICAID AMOUNT PAID PER EDB DUAL ENROLLEE | | | | | | | | | | | |
| Avg Medicaid Paid per EDB Dual Enrollee | N/A | \$15,018 | N/A | \$16,332 | N/A | \$13,796 | N/A | 8.75 | -15.50 | 15% (+/-) | No |
| Aged | N/A | \$17,012 | N/A | \$18,851 | N/A | \$16,653 | N/A | 10.81 | -11.70 | 10% (+/-) | No |
| Disabled | N/A | \$13,901 | N/A | \$14,729 | N/A | \$11,888 | N/A | 5.95 | -19.30 | 10% (+/-) | No |
| Managed CARE PLAN INFORMATION (Enrollees in Capitated Plans - PCCM, HMO, HIO, & PHPs, excludes people with missing eligibility information, S-CHIP 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. | | | | | | | | | | | |
| % Total Enrollees in MC Anytime During Year | N/A | 75.14 | N/A | 75.98 | N/A | 75.74 | N/A | 1.12 | -0.31 | 25% (+) | Yes |
| Total MC Enrollees | N/A | 113,418 | N/A | 113,218 | N/A | 112,296 | N/A | -0.18 | -0.81 | 25% (+) | Yes |
| Aged | N/A | 389 | N/A | 390 | N/A | 415 | N/A | 0.26 | 6.41 | 25% (+) | Yes |
| Disabled | N/A | 9,172 | N/A | 9,580 | N/A | 9,570 | N/A | 4.45 | -0.10 | 25% (+) | Yes |
| Child | N/A | 55,376 | N/A | 55,612 | N/A | 55,272 | N/A | 0.43 | -0.61 | 25% (+) | Yes |
| Adult | N/A | 48,481 | N/A | 47,636 | N/A | 47,039 | N/A | -1.74 | -1.25 | 25% (+) | Yes |
| % of MC Enrollees in HMO/HIO (MC TYPE = 1) | 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 (MC TYPE = 2) | 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 (MC TYPE = 3) | 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 (MC TYPE = 4) | 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 (MC TYPE = 5) | 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 (MC TYPE = 6) | 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 (MC TYPE = 7) | 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 (MC TYPE = 8) | 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 | 13.83 | N/A | 14.22 | N/A | 13.46 | N/A | 2.82 | -5.37 | 25% (+) | Yes |
| % Section 1915(c) Waiver Enrollees Ever Enrolled in HMO/HIOs | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | 25% (+) | N/A |
| % Section 1915(c) Waiver Enrollees in PHP Only or PHP and PCCM Only | N/A | N/A | N/A | 0.00 | N/A | 0.00 | N/A | N/A | Div by 0 | 25% (+) | N/A |
| % Section 1915(c) Waiver Enrollees in PCCM Only | N/A | N/A | N/A | 18.30 | N/A | 15.53 | N/A | N/A | -15.10 | 25% (+) | Yes |
| Total Enrollees in June | N/A | 118,119 | N/A | 116,875 | N/A | 117,489 | N/A | -1.05 | 0.53 | 25% (+) | Yes |
| June % HMO/HIO Only (MC COMBO = 01) | 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 Plan Only (MC COMBO = 02) | 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 (MC COMBO = 03) | 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 (MC COMBO = 04) | N/A | 70.27 | N/A | 71.51 | N/A | 70.42 | N/A | 1.76 | -1.52 | 25% (+) | Yes |
| June % Other MC Only (MC COMBO = 05) | 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 (MC COMBO = 06) | 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 (MC COMBO = 07) | 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 (MC COMBO = 08) | 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 (MC COMBO = 09) | 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 (MC COMBO = 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 (MC COMBO = 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 (MC COMBO = 12) | 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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State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| June % Dental & BHO & PCCM (MC COMBO = 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 (MC COMBO = 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 (MC COMBO = 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 (MC COMBO = 16) | N/A | 29.73 | N/A | 28.49 | N/A | 29.58 | N/A | -4.15 | 3.81 | 25% (+) | Yes |
| June % MC Status Unknown (MC COMBO = 99) | <5% | 0.00 | Yes | 0.00 | Yes | 0.00 | Yes | Div by 0 | Div by 0 | 25% (+) | N/A |
| CAPITATION CLAIMS | | | | | | | | | | | |
| Total Capitation Payments | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | 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 | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Ratio of Capitation Claims to Person-Month Enrollment in MC | .9-2 | 0.00 | No | 0.00 | No | 0.00 | No | Div by 0 | 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 | 0.00 | No | 0.00 | No | 0.00 | No | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Avg Capitation Payment per Person-Month Enrollment in MC | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | 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 | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| PERSONS ENROLLED IN PHP ONLY OR PHP AND PCCM ONLY | | | | | | | | | | | |
| Total Capitation Payments | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Total Medicaid Paid | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Count of Enrollees | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| PERSONS ENROLLED IN PCCM ONLY | | | | | | | | | | | |
| Total Capitation Payments | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Count of Enrollees | N/A | 113,418 | N/A | 113,218 | N/A | 112,296 | N/A | -0.18 | -0.81 | 15% (+/-) | Yes |
| PERSONS EVER ENROLLED IN HMO OR HIO DURING YEAR | | | | | | | | | | | |
| Count of Enrollees | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Aged | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| Disabled | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| Child | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| Adult | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| Total Ever Enrolled in HMO/HIO Person-Years of Enrollment | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 25% (+) | N/A |
| Total Capitation Payments | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Avg Capitation 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 |
| Avg 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 |

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State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Adult | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Total FFS Payments by Type of Service | | | | | | | | | | | |
| IP (MAX TOS = 01) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| ILTC (MAX TOS = 02, 04, 05, 07) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Drug (MAX TOS = 16) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| All Other (Excluding Capitation 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 (MAX TOS = 01) | 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 (MAX TOS = 02, 04, 05, 07) | 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 (MAX TOS = 16) | 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 Capitation 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 |
| FFS INFORMATION FOR NON-DUAL MEDICAID ENROLLEES (excludes EDB Duals, people ever enrolled in HMO/HIOs, with missing eligibility information, S-CHIP only, FP Only, Aliens with restricted benefits only, and prescription drug only enrollees) ---- NOTE: S-CHIP only, FP Only, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003. | | | | | | | | | | | |
| Total Non-Dual FFS Enrollees | N/A | 131,468 | N/A | 129,038 | N/A | 127,674 | N/A | -1.85 | -1.06 | 15% (+/-) | Yes |
| Total Non-Dual FFS Recipients | N/A | 113,045 | N/A | 112,252 | N/A | 111,959 | N/A | -0.70 | -0.26 | 15% (+/-) | Yes |
| Total Non-Dual FFS Person-Years of Enrollment | N/A | 100,661 | N/A | 99,331 | N/A | 98,636 | N/A | -1.32 | -0.70 | 15% (+/-) | Yes |
| Aged Total | N/A | 219 | N/A | 212 | N/A | 198 | N/A | -3.20 | -6.60 | 10% (+/-) | Yes |
| Aged, Cash (MAX ELIG CD = 11) | N/A | 35 | N/A | 31 | N/A | 31 | N/A | -11.40 | 0.00 | 10% (+/-) | Yes |
| Aged, Medically Needy (MAX ELIG CD = 21) | N/A | 117 | N/A | 116 | N/A | 106 | N/A | -0.86 | -8.62 | 10% (+/-) | Yes |
| Aged, Poverty (MAX ELIG CD = 31) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 10% (+/-) | N/A |
| Other Aged (MAX ELIG CD = 41) | N/A | 64 | N/A | 59 | N/A | 55 | N/A | -7.81 | -6.78 | 10% (+/-) | Yes |
| 1115 Aged (MAX ELIG CD = 51) | N/A | 3 | N/A | 6 | N/A | 6 | N/A | 100.00 | 0.00 | 10% (+/-) | Yes |
| Disabled Total | N/A | 8,875 | N/A | 9,166 | N/A | 9,410 | N/A | 3.28 | 2.66 | 10% (+/-) | Yes |
| Disabled, Cash (MAX ELIG CD = 12) | N/A | 7,530 | N/A | 7,719 | N/A | 7,909 | N/A | 2.51 | 2.46 | 10% (+/-) | Yes |
| Disabled, Medically Needy (MAX ELIG CD = 22) | N/A | 551 | N/A | 578 | N/A | 551 | N/A | 4.90 | -4.67 | 10% (+/-) | Yes |
| Disabled, Poverty (MAX ELIG CD = 32, 3A) | N/A | 75 | N/A | 100 | N/A | 126 | N/A | 33.33 | 26.00 | 10% (+/-) | No |
| Other Disabled (MAX ELIG CD = 42) | N/A | 689 | N/A | 739 | N/A | 786 | N/A | 7.26 | 6.36 | 10% (+/-) | Yes |
| 1115 Disabled (MAX ELIG CD = 52) | N/A | 30 | N/A | 30 | N/A | 38 | N/A | 0.00 | 26.67 | 10% (+/-) | No |
| Child Total | N/A | 68,664 | N/A | 67,516 | N/A | 66,644 | N/A | -1.67 | -1.29 | 10% (+/-) | Yes |
| AFDC Child, Cash (MAX ELIG CD = 14) | N/A | 8,819 | N/A | 8,452 | N/A | 8,382 | N/A | -4.16 | -0.83 | 10% (+/-) | Yes |
| AFDC-U Child, Cash (MAX ELIG CD = 16) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 10% (+/-) | N/A |
| AFDC Child, Medically Needy (MAX ELIG CD = 24) | N/A | 2,261 | N/A | 2,337 | N/A | 2,473 | N/A | 3.36 | 5.82 | 10% (+/-) | Yes |
| Child Poverty (MAX ELIG CD = 34) | N/A | 47,312 | N/A | 46,773 | N/A | 46,459 | N/A | -1.14 | -0.67 | 10% (+/-) | Yes |
| Other Child (MAX ELIG CD = 44) | N/A | 4,796 | N/A | 4,834 | N/A | 4,801 | N/A | 0.79 | -0.68 | 10% (+/-) | Yes |
| Foster Care Child (MAX ELIG CD = 48) | N/A | 2,767 | N/A | 2,848 | N/A | 2,679 | N/A | 2.93 | -5.93 | 10% (+/-) | Yes |
| 1115 Child (MAX ELIG CD = 54) | N/A | 2,709 | N/A | 2,272 | N/A | 1,850 | N/A | -16.10 | -18.60 | 10% (+/-) | No |
| Adult Total | N/A | 53,710 | N/A | 52,144 | N/A | 51,422 | N/A | -2.92 | -1.38 | 10% (+/-) | Yes |
| AFDC Adult, Cash (MAX ELIG CD = 15) | N/A | 4,202 | N/A | 3,990 | N/A | 3,870 | N/A | -5.05 | -3.01 | 10% (+/-) | Yes |
| AFDC-U Adult, Cash (MAX ELIG CD = 17) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 10% (+/-) | N/A |
| AFDC Adult, Medically Needy (MAX ELIG CD = 25) | N/A | 5,257 | N/A | 5,557 | N/A | 5,889 | N/A | 5.71 | 5.97 | 10% (+/-) | Yes |
| Adult, Poverty (MAX ELIG CD = 35) | N/A | 2,509 | N/A | 2,532 | N/A | 2,665 | N/A | 0.92 | 5.25 | 10% (+/-) | Yes |
| Other Adult (MAX ELIG CD = 45) | N/A | 3,524 | N/A | 3,747 | N/A | 3,691 | N/A | 6.33 | -1.49 | 10% (+/-) | Yes |

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State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|---------------|-------------------------|---------------|-------------------------|---------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| 1115 Adult (MAX ELIG CD = 55) | N/A | 38,218 | N/A | 36,318 | N/A | 35,307 | N/A | -4.97 | -2.78 | 10% (+/-) | Yes |
| # Non-Dual FFS Enrollees with MSIS Dual Code but No EDB Confirmation | N/A | 547 | N/A | 201 | N/A | 131 | N/A | -63.30 | -34.80 | 10% (+/-) | No |
| Total FFS Medicaid Paid | N/A | \$448,219,948 | N/A | \$486,526,297 | N/A | \$508,753,551 | N/A | 8.55 | 4.57 | 15% (+/-) | Yes |
| Avg FFS Medicaid Paid per Non-Dual FFS Enrollee | N/A | \$3,409 | N/A | \$3,770 | N/A | \$3,985 | N/A | 10.59 | 5.69 | 15% (+/-) | Yes |
| Avg FFS Medicaid Paid per Non-Dual FFS Recipient (User of Any service) | N/A | \$3,965 | N/A | \$4,334 | N/A | \$4,544 | N/A | 9.31 | 4.84 | 15% (+/-) | Yes |
| AVERAGE FFS MEDICAID AMOUNT PAID PER NON-DUAL FFS ENROLLEE BY MAX ELIGIBILITY GROUP | | | | | | | | | | | |
| Aged | N/A | \$13,231 | N/A | \$13,011 | N/A | \$13,705 | N/A | -1.66 | 5.33 | 15% (+/-) | Yes |
| Aged, Cash (MAX ELIG CD = 11) | N/A | \$11,709 | N/A | \$16,216 | N/A | \$14,675 | N/A | 38.49 | -9.50 | 15% (+/-) | Yes |
| Aged, Medically Needy (MAX ELIG CD = 21) | N/A | \$5,244 | N/A | \$4,135 | N/A | \$3,721 | N/A | -21.10 | -10.00 | 15% (+/-) | Yes |
| Aged, Poverty (MAX ELIG CD = 31) | 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 |
| Other Aged (MAX ELIG CD = 41) | N/A | \$29,207 | N/A | \$30,032 | N/A | \$33,708 | N/A | 2.82 | 12.24 | 15% (+/-) | Yes |
| 1115 Aged (MAX ELIG CD = 51) | N/A | \$1,653 | N/A | \$687 | N/A | \$1,722 | N/A | -58.40 | 150.60 | 15% (+/-) | No |
| Disabled | N/A | \$17,356 | N/A | \$18,789 | N/A | \$19,405 | N/A | 8.26 | 3.28 | 15% (+/-) | Yes |
| Disabled, Cash (MAX ELIG CD = 12) | N/A | \$16,453 | N/A | \$17,751 | N/A | \$18,382 | N/A | 7.89 | 3.56 | 15% (+/-) | Yes |
| Disabled, Medically Needy (MAX ELIG CD = 22) | N/A | \$10,070 | N/A | \$14,004 | N/A | \$13,308 | N/A | 39.07 | -4.97 | 15% (+/-) | Yes |
| Disabled, Poverty (MAX ELIG CD = 32, 3A) | N/A | \$10,220 | N/A | \$7,378 | N/A | \$6,941 | N/A | -27.80 | -5.92 | 15% (+/-) | Yes |
| Other Disabled (MAX ELIG CD = 42) | N/A | \$34,201 | N/A | \$35,422 | N/A | \$36,370 | N/A | 3.57 | 2.68 | 15% (+/-) | Yes |
| 1115 Disabled (MAX ELIG CD = 52) | N/A | \$8,618 | N/A | \$6,407 | N/A | \$11,174 | N/A | -25.70 | 74.41 | 15% (+/-) | No |
| Child | N/A | \$2,406 | N/A | \$2,532 | N/A | \$2,648 | N/A | 5.21 | 4.59 | 15% (+/-) | Yes |
| AFDC Child, Cash (MAX ELIG CD = 14) | N/A | \$3,034 | N/A | \$3,105 | N/A | \$3,357 | N/A | 2.33 | 8.11 | 15% (+/-) | Yes |
| AFDC-U Child, Cash (MAX ELIG CD = 16) | 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 |
| AFDC Child, Medically Needy (MAX ELIG CD = 24) | N/A | \$3,307 | N/A | \$3,240 | N/A | \$4,020 | N/A | -2.04 | 24.09 | 15% (+/-) | No |
| Child Poverty (MAX ELIG CD = 34) | N/A | \$1,550 | N/A | \$1,639 | N/A | \$1,718 | N/A | 5.76 | 4.79 | 15% (+/-) | Yes |
| Other Child (MAX ELIG CD = 44) | N/A | \$2,499 | N/A | \$2,381 | N/A | \$2,268 | N/A | -4.74 | -4.73 | 15% (+/-) | Yes |
| Foster Care Child (MAX ELIG CD = 48) | N/A | \$15,444 | N/A | \$16,199 | N/A | \$16,814 | N/A | 4.89 | 3.79 | 15% (+/-) | Yes |
| 1115 Child (MAX ELIG CD = 54) | N/A | \$1,080 | N/A | \$1,228 | N/A | \$1,424 | N/A | 13.64 | 15.96 | 15% (+/-) | No |
| Adult | N/A | \$2,347 | N/A | \$2,697 | N/A | \$2,858 | N/A | 14.89 | 5.99 | 15% (+/-) | Yes |
| AFDC Adult, Cash (MAX ELIG CD = 15) | N/A | \$4,314 | N/A | \$4,732 | N/A | \$4,823 | N/A | 9.69 | 1.94 | 15% (+/-) | Yes |
| AFDC-U Adult, Cash (MAX ELIG CD = 17) | 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 |
| AFDC Adult, Medically Needy (MAX ELIG CD = 25) | N/A | \$2,476 | N/A | \$2,602 | N/A | \$2,788 | N/A | 5.08 | 7.17 | 15% (+/-) | Yes |
| Adult, Poverty (MAX ELIG CD = 35) | N/A | \$3,012 | N/A | \$2,964 | N/A | \$3,206 | N/A | -1.60 | 8.17 | 15% (+/-) | Yes |
| Other Adult (MAX ELIG CD = 45) | N/A | \$2,714 | N/A | \$2,842 | N/A | \$2,908 | N/A | 4.72 | 2.31 | 15% (+/-) | Yes |
| 1115 Adult (MAX ELIG CD = 55) | N/A | \$2,036 | N/A | \$2,454 | N/A | \$2,623 | N/A | 20.55 | 6.88 | 15% (+/-) | Yes |
| FFS EXPENDITURES AND USERS BY MAX TYPE OF SERVICE | | | | | | | | | | | |
| IP: Total Medicaid Paid (MAX TOS = 01) | N/A | \$50,294,310 | N/A | \$53,622,773 | N/A | \$48,303,929 | N/A | 6.62 | -9.92 | 15% (+/-) | Yes |
| IP: Number of Users | N/A | 7,433 | N/A | 7,461 | N/A | 7,462 | N/A | 0.38 | 0.01 | 15% (+/-) | Yes |
| IP: Avg Medicaid Paid per User | N/A | \$6,766 | N/A | \$7,187 | N/A | \$6,473 | N/A | 6.22 | -9.93 | 15% (+/-) | Yes |
| IP: Avg Medicaid Covered Days Per User | N/A | 7 | N/A | 7 | N/A | 7 | N/A | -1.13 | 0.97 | 15% (+/-) | Yes |
| MH Aged: Total Medicaid Paid (MAX TOS = 02) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| MH Aged: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| MH Aged: Avg Medicaid Paid 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 |
| IP Psych, Age < 21: Total Medicaid Paid (MAX TOS = 04) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| IP Psych, Age < 21: Number of Users | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |

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State: VT

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|--|----------------|--------------|-------------------------|--------------|-------------------------|--------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| IP Psych, Age < 21: Avg Medicaid Paid 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 (MAX TOS = 05) | N/A | \$341,238 | N/A | \$179,196 | N/A | \$189,275 | N/A | -47.50 | 5.63 | 15% (+/-) | Yes |
| ICF/MR: Number of Users | N/A | 2 | N/A | 1 | N/A | 1 | N/A | -50.00 | 0.00 | 15% (+/-) | Yes |
| ICF/MR: Avg Medicaid Paid per User | N/A | \$170,619 | N/A | \$179,196 | N/A | \$189,275 | N/A | 5.03 | 5.63 | 15% (+/-) | Yes |
| NF: Total Medicaid Paid (MAX TOS = 07) | N/A | \$4,418,232 | N/A | \$5,209,617 | N/A | \$5,450,100 | N/A | 17.91 | 4.62 | 15% (+/-) | Yes |
| NF: Number of Users | N/A | 211 | N/A | 219 | N/A | 196 | N/A | 3.79 | -10.50 | 15% (+/-) | Yes |
| NF:Avg Medicaid Paid per User | N/A | \$20,939 | N/A | \$23,788 | N/A | \$27,807 | N/A | 13.60 | 16.89 | 15% (+/-) | No |
| Physician: Total Medicaid Paid (MAX TOS = 08) | N/A | \$37,092,353 | N/A | \$38,840,997 | N/A | \$38,293,791 | N/A | 4.71 | -1.41 | 15% (+/-) | Yes |
| Physician: Number of Users | N/A | 92,286 | N/A | 91,588 | N/A | 91,197 | N/A | -0.76 | -0.43 | 15% (+/-) | Yes |
| Physician: Avg Medicaid Paid per User | N/A | \$402 | N/A | \$424 | N/A | \$420 | N/A | 5.51 | -0.99 | 15% (+/-) | Yes |
| Dental: Total Medicaid Paid (MAX TOS = 09) | N/A | \$12,039,803 | N/A | \$12,277,992 | N/A | \$11,945,219 | N/A | 1.98 | -2.71 | 15% (+/-) | Yes |
| Dental: Number of Users | N/A | 41,683 | N/A | 41,578 | N/A | 41,852 | N/A | -0.25 | 0.66 | 15% (+/-) | Yes |
| Dental: Avg Medicaid Paid per User | N/A | \$289 | N/A | \$295 | N/A | \$285 | N/A | 2.24 | -3.35 | 15% (+/-) | Yes |
| Other Practitioner: Total Medicaid Paid (MAX TOS = 10) | N/A | \$4,961,790 | N/A | \$4,583,538 | N/A | \$4,731,490 | N/A | -7.62 | 3.23 | 15% (+/-) | Yes |
| Other Practitioner: Number of Users | N/A | 10,160 | N/A | 10,593 | N/A | 10,687 | N/A | 4.26 | 0.89 | 15% (+/-) | Yes |
| Other Practitioner: Avg Medicaid Paid per User | N/A | \$488 | N/A | \$433 | N/A | \$443 | N/A | -11.40 | 2.32 | 15% (+/-) | Yes |
| Outpatient: Total Medicaid Paid (MAX TOS = 11) | N/A | \$37,811,278 | N/A | \$41,948,609 | N/A | \$46,923,685 | N/A | 10.94 | 11.86 | 15% (+/-) | Yes |
| Outpatient: Number of Users | N/A | 45,973 | N/A | 45,980 | N/A | 43,331 | N/A | 0.02 | -5.76 | 15% (+/-) | Yes |
| Outpatient: Avg Medicaid Paid per User | N/A | \$822 | N/A | \$912 | N/A | \$1,083 | N/A | 10.93 | 18.70 | 15% (+/-) | No |
| Clinic: Total Medicaid Paid (MAX TOS = 12) | N/A | \$9,200,821 | N/A | \$9,322,575 | N/A | \$10,788,081 | N/A | 1.32 | 15.72 | 15% (+/-) | No |
| Clinic: Number of Users | N/A | 22,369 | N/A | 22,669 | N/A | 26,351 | N/A | 1.34 | 16.24 | 15% (+/-) | No |
| Clinic: Avg Medicaid Paid per User | N/A | \$411 | N/A | \$411 | N/A | \$409 | N/A | -0.02 | -0.45 | 15% (+/-) | Yes |
| Home Health: Total Medicaid Paid (MAX TOS = 13) | N/A | \$4,829,016 | N/A | \$4,885,174 | N/A | \$4,234,584 | N/A | 1.16 | -13.30 | 15% (+/-) | Yes |
| Home Health: Number of Users | N/A | 2,199 | N/A | 2,372 | N/A | 2,170 | N/A | 7.87 | -8.52 | 15% (+/-) | Yes |
| Home Health: Avg Medicaid Paid per User | N/A | \$2,196 | N/A | \$2,060 | N/A | \$1,951 | N/A | -6.22 | -5.25 | 15% (+/-) | Yes |
| Lab/Xray: Total Medicaid Paid (MAX TOS = 15) | N/A | \$21,180,308 | N/A | \$22,563,368 | N/A | \$28,266,165 | N/A | 6.53 | 25.27 | 15% (+/-) | No |
| Lab/Xray: Number of Users | N/A | 68,407 | N/A | 67,699 | N/A | 69,770 | N/A | -1.03 | 3.06 | 15% (+/-) | Yes |
| Lab/Xray:Avg Medicaid Paid per User | N/A | \$310 | N/A | \$333 | N/A | \$405 | N/A | 7.64 | 21.56 | 15% (+/-) | No |
| Drugs: Total Medicaid Paid (MAX TOS = 16) | N/A | \$73,703,760 | N/A | \$81,507,386 | N/A | \$86,954,411 | N/A | 10.59 | 6.68 | 15% (+/-) | Yes |
| Drugs: Number of Users | N/A | 87,185 | N/A | 87,213 | N/A | 87,595 | N/A | 0.03 | 0.44 | 15% (+/-) | Yes |
| Drugs: Avg Medicaid Paid per User | N/A | \$845 | N/A | \$935 | N/A | \$993 | N/A | 10.55 | 6.22 | 15% (+/-) | Yes |
| Other Services: Total Medicaid Paid (MAX TOS = 19) | N/A | \$54,614,364 | N/A | \$59,486,230 | N/A | \$58,717,981 | N/A | 8.92 | -1.29 | 15% (+/-) | Yes |
| Other Services: Number of Users | N/A | 17,971 | N/A | 18,281 | N/A | 17,315 | N/A | 1.73 | -5.28 | 15% (+/-) | Yes |
| Other Services: Avg Medicaid Paid per User | N/A | \$3,039 | N/A | \$3,254 | N/A | \$3,391 | N/A | 7.07 | 4.22 | 15% (+/-) | Yes |
| Transportation: Total Medicaid Paid (MAX TOS = 26) | N/A | \$2,569,483 | N/A | \$4,061,782 | N/A | \$4,466,480 | N/A | 58.08 | 9.96 | 15% (+/-) | Yes |
| Transportation: Number of Users | N/A | 8,055 | N/A | 8,995 | N/A | 9,080 | N/A | 11.67 | 0.95 | 15% (+/-) | Yes |
| Transportation: Avg Medicaid Paid per User | N/A | \$319 | N/A | \$452 | N/A | \$492 | N/A | 41.56 | 8.93 | 15% (+/-) | Yes |
| Personal Care Services: Total Medicaid Paid (MAX TOS = 30) | N/A | \$11,852,565 | N/A | \$14,570,167 | N/A | \$16,195,020 | N/A | 22.93 | 11.15 | 15% (+/-) | Yes |
| Personal Care Services: Number of Users | N/A | 1,536 | N/A | 1,827 | N/A | 1,907 | N/A | 18.95 | 4.38 | 15% (+/-) | Yes |
| Personal Care Services: Avg Medicaid Paid per User | N/A | \$7,717 | N/A | \$7,975 | N/A | \$8,492 | N/A | 3.35 | 6.49 | 15% (+/-) | Yes |
| Targeted Case Management: Total Medicaid Paid (MAX TOS = 31) | N/A | \$5,919,328 | N/A | \$6,348,505 | N/A | \$6,495,000 | N/A | 7.25 | 2.31 | 15% (+/-) | Yes |
| Targeted Case Management: Number of Users | N/A | 5,640 | N/A | 5,841 | N/A | 5,764 | N/A | 3.56 | -1.32 | 15% (+/-) | Yes |
| Targeted Case Management: Avg Medicaid Paid per User | N/A | \$1,050 | N/A | \$1,087 | N/A | \$1,127 | N/A | 3.56 | 3.67 | 15% (+/-) | Yes |

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State: VT

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|---|----------------|---------------|-------------------------|---------------|-------------------------|---------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Rehabilitation Services: Total Medicaid Paid (MAX TOS = 33) | N/A | \$107,372 | N/A | \$0 | N/A | \$0 | N/A | -100.00 | Div by 0 | 15% (+/-) | N/A |
| Rehabilitation Services: Number of Users | N/A | 2 | N/A | 0 | N/A | 0 | N/A | -100.00 | Div by 0 | 15% (+/-) | N/A |
| Rehabilitation Services: Avg Medicaid Paid per User | N/A | \$53,686 | N/A | Div by 0 | N/A | Div by 0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| PT/OT/Speech/Hearing: Total Medicaid Paid (MAX TOS = 34) | N/A | \$998,421 | N/A | \$1,064,359 | N/A | \$1,202,600 | N/A | 6.60 | 12.99 | 15% (+/-) | Yes |
| PT/OT/Speech/Hearing: Number of Users | N/A | 2,804 | N/A | 2,970 | N/A | 3,340 | N/A | 5.92 | 12.46 | 15% (+/-) | Yes |
| PT/OT/Speech/Hearing: Avg Medicaid Paid per User | N/A | \$356 | N/A | \$358 | N/A | \$360 | N/A | 0.65 | 0.47 | 15% (+/-) | Yes |
| Hospice: Total Medicaid Paid (MAX TOS = 35) | N/A | \$239,510 | N/A | \$242,761 | N/A | \$314,437 | N/A | 1.36 | 29.53 | 15% (+/-) | No |
| Hospice: Number of Users | N/A | 56 | N/A | 39 | N/A | 47 | N/A | -30.40 | 20.51 | 15% (+/-) | No |
| Hospice: Avg Medicaid Paid per User | N/A | \$4,277 | N/A | \$6,225 | N/A | \$6,690 | N/A | 45.54 | 7.48 | 15% (+/-) | Yes |
| Durable Medical Equipment: Total Medicaid Paid (MAX TOS = 51) | N/A | \$5,250,504 | N/A | \$5,466,797 | N/A | \$6,397,681 | N/A | 4.12 | 17.03 | 15% (+/-) | No |
| Durable Medical Equipment: Number of Users | N/A | 14,351 | N/A | 14,534 | N/A | 15,512 | N/A | 1.28 | 6.73 | 15% (+/-) | Yes |
| Durable Medical Equipment: Avg Medicaid Paid per User | N/A | \$366 | N/A | \$376 | N/A | \$412 | N/A | 2.81 | 9.65 | 15% (+/-) | Yes |
| Residential Care: Total Medicaid Paid (MAX TOS = 52) | N/A | \$1,162,452 | N/A | \$457,378 | N/A | \$666,368 | N/A | -60.70 | 45.69 | 15% (+/-) | No |
| Residential Care: Number of Users | N/A | 223 | N/A | 22 | N/A | 26 | N/A | -90.10 | 18.18 | 15% (+/-) | No |
| Residential Care: Avg Medicaid Paid per User | N/A | \$5,213 | N/A | \$20,790 | N/A | \$25,630 | N/A | 298.80 | 23.28 | 15% (+/-) | No |
| Psych Services: Total Medicaid Paid (MAX TOS = 53) | N/A | \$106,495,923 | N/A | \$117,992,320 | N/A | \$126,604,075 | N/A | 10.80 | 7.30 | 15% (+/-) | Yes |
| Psych Services: Number of Users | N/A | 26,658 | N/A | 28,327 | N/A | 29,499 | N/A | 6.26 | 4.14 | 15% (+/-) | Yes |
| Psych Services: Avg Medicaid Paid per User | N/A | \$3,995 | N/A | \$4,165 | N/A | \$4,292 | N/A | 4.27 | 3.04 | 15% (+/-) | Yes |
| Adult Day Care: Total Medicaid Paid (MAX 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 Paid 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 |
| AVERAGE FFS MEDICAID AMOUNT PAID PER NON-DUAL FFS ENROLLEE BY MAX TYPE OF SERVICE | | | | | | | | | | | |
| Inpatient Hospital (MAX TOS = 01) | N/A | \$383 | N/A | \$416 | N/A | \$378 | N/A | 8.63 | -8.96 | 15% (+/-) | Yes |
| Aged | N/A | \$1,558 | N/A | \$751 | N/A | \$1,216 | N/A | -51.80 | 61.81 | 15% (+/-) | No |
| Disabled | N/A | \$1,658 | N/A | \$1,834 | N/A | \$1,606 | N/A | 10.64 | -12.40 | 15% (+/-) | Yes |
| Child | N/A | \$194 | N/A | \$205 | N/A | \$216 | N/A | 5.55 | 5.45 | 15% (+/-) | Yes |
| Adult | N/A | \$408 | N/A | \$438 | N/A | \$361 | N/A | 7.27 | -17.60 | 15% (+/-) | No |
| ILTC (MAX TOS = 02,04,05,07) | N/A | \$36 | N/A | \$42 | N/A | \$44 | N/A | 15.36 | 5.77 | 15% (+/-) | Yes |
| Aged | N/A | \$5,823 | N/A | \$6,702 | N/A | \$6,594 | N/A | 15.09 | -1.60 | 15% (+/-) | Yes |
| Disabled | N/A | \$387 | N/A | \$429 | N/A | \$457 | N/A | 10.82 | 6.43 | 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 | -24.50 | 4.95 | 15% (+/-) | Yes |
| Drugs (MAX TOS = 16) | N/A | \$561 | N/A | \$632 | N/A | \$681 | N/A | 12.67 | 7.82 | 15% (+/-) | Yes |
| Aged | N/A | \$2,098 | N/A | \$1,907 | N/A | \$1,416 | N/A | -9.12 | -25.70 | 15% (+/-) | No |
| Disabled | N/A | \$2,957 | N/A | \$3,089 | N/A | \$3,200 | N/A | 4.48 | 3.59 | 15% (+/-) | Yes |
| Child | N/A | \$231 | N/A | \$252 | N/A | \$273 | N/A | 9.00 | 8.22 | 15% (+/-) | Yes |
| Adult | N/A | \$579 | N/A | \$686 | N/A | \$746 | N/A | 18.38 | 8.81 | 15% (+/-) | Yes |
| All Other Services | N/A | \$2,430 | N/A | \$2,681 | N/A | \$2,881 | N/A | 10.35 | 7.45 | 15% (+/-) | Yes |
| Aged | N/A | \$3,752 | N/A | \$3,652 | N/A | \$4,479 | N/A | -2.67 | 22.65 | 15% (+/-) | No |
| Disabled | N/A | \$12,354 | N/A | \$13,436 | N/A | \$14,142 | N/A | 8.76 | 5.25 | 15% (+/-) | Yes |
| Child | N/A | \$1,981 | N/A | \$2,074 | N/A | \$2,159 | N/A | 4.74 | 4.06 | 15% (+/-) | Yes |
| Adult | N/A | \$1,359 | N/A | \$1,573 | N/A | \$1,751 | N/A | 15.73 | 11.30 | 15% (+/-) | Yes |
| PERCENT OF NON-DUAL FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE | | | | | | | | | | | |

2004-2006 MAX PSF Validation Table
State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| % Non-Dual FFS Enrollees with IP Claims (MAX TOS = 01) | N/A | 5.65 | N/A | 5.78 | N/A | 5.84 | N/A | 2.27 | 1.08 | 15% (+/-) | Yes |
| Aged | N/A | 12.79 | N/A | 12.74 | N/A | 10.10 | N/A | -0.39 | -20.70 | 15% (+/-) | No |
| Disabled | N/A | 12.91 | N/A | 12.91 | N/A | 12.93 | N/A | -0.05 | 0.21 | 15% (+/-) | Yes |
| Child | N/A | 2.91 | N/A | 3.00 | N/A | 3.07 | N/A | 3.28 | 2.41 | 15% (+/-) | Yes |
| Adult | N/A | 7.94 | N/A | 8.10 | N/A | 8.12 | N/A | 2.06 | 0.25 | 15% (+/-) | Yes |
| % Non-Dual FFS Enrollees with ILTC Claims (MAX TOS = 02,04,05,07) | N/A | 0.16 | N/A | 0.17 | N/A | 0.15 | N/A | 5.23 | -9.50 | 15% (+/-) | Yes |
| Aged | N/A | 21.92 | N/A | 21.23 | N/A | 20.20 | N/A | -3.15 | -4.83 | 15% (+/-) | Yes |
| Disabled | N/A | 1.65 | N/A | 1.70 | N/A | 1.53 | N/A | 3.46 | -10.10 | 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 | 0.04 | N/A | 0.04 | N/A | 0.03 | N/A | 3.00 | -30.60 | 15% (+/-) | No |
| % with Ratio of ILTC Days/Enrollment Days > 1 | N/A | 6.57 | N/A | 5.91 | N/A | 8.63 | N/A | -10.10 | 46.04 | 15% (+/-) | No |
| % Non-Dual FFS Enrollees with Drug Claims (MAX TOS = 16) | N/A | 66.32 | N/A | 67.59 | N/A | 68.61 | N/A | 1.92 | 1.51 | 15% (+/-) | Yes |
| Aged | N/A | 70.78 | N/A | 64.15 | N/A | 65.15 | N/A | -9.36 | 1.56 | 15% (+/-) | Yes |
| Disabled | N/A | 86.84 | N/A | 86.45 | N/A | 86.24 | N/A | -0.45 | -0.25 | 15% (+/-) | Yes |
| Child | N/A | 63.65 | N/A | 64.12 | N/A | 64.52 | N/A | 0.74 | 0.62 | 15% (+/-) | Yes |
| Adult | N/A | 66.32 | N/A | 68.77 | N/A | 70.69 | N/A | 3.70 | 2.79 | 15% (+/-) | Yes |
| % Non-Dual FFS Enrollees with All Other Claims | N/A | 83.54 | N/A | 84.52 | N/A | 85.26 | N/A | 1.17 | 0.87 | 15% (+/-) | Yes |
| Aged | N/A | 68.49 | N/A | 64.15 | N/A | 70.71 | N/A | -6.34 | 10.22 | 15% (+/-) | Yes |
| Disabled | N/A | 93.18 | N/A | 92.66 | N/A | 93.11 | N/A | -0.56 | 0.49 | 15% (+/-) | Yes |
| Child | N/A | 88.52 | N/A | 88.50 | N/A | 88.79 | N/A | -0.02 | 0.32 | 15% (+/-) | Yes |
| Adult | N/A | 75.64 | N/A | 78.01 | N/A | 79.30 | N/A | 3.14 | 1.65 | 15% (+/-) | Yes |
| Avg # IP Days per Non-Dual FFS User | N/A | 7 | N/A | 7 | N/A | 7 | N/A | -1.13 | 0.97 | 15% (+/-) | Yes |
| Aged | N/A | 12 | N/A | 8 | N/A | 13 | N/A | -28.80 | 60.69 | 15% (+/-) | No |
| Disabled | N/A | 12 | N/A | 13 | N/A | 13 | N/A | 8.91 | 1.90 | 15% (+/-) | Yes |
| Child | N/A | 6 | N/A | 6 | N/A | 6 | N/A | -6.05 | 6.02 | 15% (+/-) | Yes |
| Adult | N/A | 5 | N/A | 5 | N/A | 5 | N/A | -5.18 | -4.16 | 15% (+/-) | Yes |
| Avg # ILTC Days per Non-Dual FFS User | N/A | 155 | N/A | 157 | N/A | 167 | N/A | 0.74 | 6.79 | 15% (+/-) | Yes |
| Aged | N/A | 240 | N/A | 240 | N/A | 246 | N/A | -0.15 | 2.82 | 15% (+/-) | Yes |
| Disabled | N/A | 145 | N/A | 150 | N/A | 159 | N/A | 3.30 | 5.59 | 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 | 19 | N/A | 12 | N/A | 19 | N/A | -35.30 | 55.56 | 15% (+/-) | No |
| % Non-Dual FFS Enrollees with Maternal Delivery | N/A | N/A | N/A | N/A | N/A | 2.04 | N/A | N/A | N/A | 15% (+/-) | No |
| HIGH-COST FFS NON-DUALS AND EXPENDITURES BY SELECTED MAX TYPE OF SERVICE | | | | | | | | | | | |
| Number of FFS Non-Duals with FFS Medicaid Paid > \$1,000,000 | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | N/A | N/A |
| Number of FFS Non-Duals with FFS Medicaid Paid > \$500,000 | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | N/A | N/A |
| Inpatient Hospital (MAX TOS = 01) > \$500,000 | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | N/A | N/A |
| ILTC (MAX TOS = 02,04,05,07) > \$200,000 | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | N/A | N/A |
| Drugs (MAX TOS = 16) > \$200,000 | N/A | N/A | N/A | N/A | N/A | 2 | N/A | N/A | N/A | N/A | N/A |
| All Other Services > \$200,000 | N/A | N/A | N/A | N/A | N/A | 24 | N/A | N/A | N/A | N/A | N/A |
| Maximum FFS Medicaid Paid | N/A | N/A | N/A | N/A | N/A | \$452,935 | N/A | N/A | N/A | N/A | N/A |
| Inpatient Hospital (MAX TOS = 01) | N/A | N/A | N/A | N/A | N/A | \$356,049 | N/A | N/A | N/A | N/A | N/A |
| ILTC (MAX TOS = 02,04,05,07) | N/A | N/A | N/A | N/A | N/A | \$189,275 | N/A | N/A | N/A | N/A | N/A |
| Drugs (MAX TOS = 16) | N/A | N/A | N/A | N/A | N/A | \$342,560 | N/A | N/A | N/A | N/A | N/A |

2004-2006 MAX PSF Validation Table
State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|--------------|-------------------------|--------------|-------------------------|--------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| All Other Services | N/A | N/A | N/A | N/A | N/A | \$317,414 | N/A | N/A | N/A | N/A | N/A |
| FFS EXPENDITURES AND USERS BY MAX PROGRAM TYPE | | | | | | | | | | | |
| FP: Total Medicaid Paid (PGM TYPE = 2) | N/A | \$2,475,187 | N/A | \$2,310,286 | N/A | \$2,422,823 | N/A | -6.66 | 4.87 | 15% (+/-) | Yes |
| FP: Number of Users | N/A | 11,934 | N/A | 11,435 | N/A | 11,448 | N/A | -4.18 | 0.11 | 15% (+/-) | Yes |
| FP: Avg Medicaid Paid per User | N/A | \$207 | N/A | \$202 | N/A | \$212 | N/A | -2.59 | 4.75 | 15% (+/-) | Yes |
| RHC: Total Medicaid Paid (PGM TYPE = 3) | N/A | \$4,169,374 | N/A | \$4,276,635 | N/A | \$4,307,999 | N/A | 2.57 | 0.73 | 15% (+/-) | Yes |
| RHC: Number of Users | N/A | 13,917 | N/A | 14,102 | N/A | 13,913 | N/A | 1.33 | -1.34 | 15% (+/-) | Yes |
| RHC: Avg Medicaid Paid per User | N/A | \$300 | N/A | \$303 | N/A | \$310 | N/A | 1.23 | 2.10 | 15% (+/-) | Yes |
| FQHC: Total Medicaid Paid (PGM TYPE = 4) | N/A | \$4,241,713 | N/A | \$4,316,034 | N/A | \$5,320,418 | N/A | 1.75 | 23.27 | 15% (+/-) | No |
| FQHC: Number of Users | N/A | 8,562 | N/A | 8,218 | N/A | 12,116 | N/A | -4.02 | 47.43 | 15% (+/-) | No |
| FQHC: Avg Medicaid Paid per User | N/A | \$495 | N/A | \$525 | N/A | \$439 | N/A | 6.01 | -16.40 | 15% (+/-) | No |
| IHS: Total Medicaid Paid (PGM 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 Paid 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 (PGM TYPE = 6 and 7) | N/A | \$39,163,551 | N/A | \$40,913,833 | N/A | \$44,050,660 | N/A | 4.47 | 7.67 | 15% (+/-) | Yes |
| Section 1915(c) Waiver: Number of Users | N/A | 1,436 | N/A | 1,359 | N/A | 1,326 | N/A | -5.36 | -2.43 | 15% (+/-) | Yes |
| Section 1915(c) Waiver: Avg Medicaid Paid per User | N/A | \$27,273 | N/A | \$30,106 | N/A | \$33,221 | N/A | 10.39 | 10.35 | 15% (+/-) | Yes |
| FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS | | | | | | | | | | | |
| Total FFS CLTC Medicaid Paid (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | \$60,369,174 | N/A | \$64,480,264 | N/A | N/A | 6.81 | 15% (+/-) | Yes |
| Number of Non-Dual CLTC Users (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | 4,720 | N/A | 4,612 | N/A | N/A | -2.29 | 15% (+/-) | Yes |
| Avg FFS CLTC Medicaid Paid per Non-Dual User (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | \$12,790 | N/A | \$13,981 | N/A | N/A | 9.31 | 15% (+/-) | Yes |
| Aged | N/A | N/A | N/A | \$11,074 | N/A | \$10,540 | N/A | N/A | -4.82 | 15% (+/-) | Yes |
| Disabled | N/A | N/A | N/A | \$22,250 | N/A | \$22,538 | N/A | N/A | 1.29 | 15% (+/-) | Yes |
| Child | N/A | N/A | N/A | \$5,589 | N/A | \$6,270 | N/A | N/A | 12.17 | 15% (+/-) | Yes |
| Adult | N/A | N/A | N/A | \$1,385 | N/A | \$1,442 | N/A | N/A | 4.11 | 15% (+/-) | Yes |
| % Non-Dual FFS Enrollees with CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | 3.66 | N/A | 3.61 | N/A | N/A | -1.24 | 15% (+/-) | Yes |
| Aged | N/A | N/A | N/A | 12.74 | N/A | 16.67 | N/A | N/A | 30.86 | 15% (+/-) | No |
| Disabled | N/A | N/A | N/A | 24.13 | N/A | 25.22 | N/A | N/A | 4.50 | 15% (+/-) | Yes |
| Child | N/A | N/A | N/A | 2.61 | N/A | 2.32 | N/A | N/A | -11.20 | 15% (+/-) | Yes |
| Adult | N/A | N/A | N/A | 1.38 | N/A | 1.28 | N/A | N/A | -6.80 | 15% (+/-) | Yes |
| Total FFS CLTC Medicaid Paid (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | N/A | N/A | \$40,913,833 | N/A | \$44,050,660 | N/A | N/A | 7.67 | 15% (+/-) | Yes |
| Number of Non-Dual CLTC Users (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | N/A | N/A | 1,359 | N/A | 1,326 | N/A | N/A | -2.43 | 15% (+/-) | Yes |
| Avg FFS CLTC Medicaid Paid per Non-Dual User (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | N/A | N/A | \$30,106 | N/A | \$33,221 | N/A | N/A | 10.35 | 15% (+/-) | Yes |
| Aged | N/A | N/A | N/A | \$16,454 | N/A | \$11,915 | N/A | N/A | -27.60 | 15% (+/-) | No |
| Disabled | N/A | N/A | N/A | \$35,681 | N/A | \$37,319 | N/A | N/A | 4.59 | 15% (+/-) | Yes |
| Child | N/A | N/A | N/A | \$17,638 | N/A | \$23,896 | N/A | N/A | 35.48 | 15% (+/-) | No |
| Adult | N/A | N/A | N/A | \$2,304 | N/A | \$3,843 | N/A | N/A | 66.77 | 15% (+/-) | No |
| % Non-Dual FFS Enrollees with CLTC Claims (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | N/A | N/A | 1.05 | N/A | 1.04 | N/A | N/A | -1.39 | 15% (+/-) | Yes |
| Aged | N/A | N/A | N/A | 7.08 | N/A | 12.63 | N/A | N/A | 78.45 | 15% (+/-) | No |
| Disabled | N/A | N/A | N/A | 10.88 | N/A | 11.14 | N/A | N/A | 2.39 | 15% (+/-) | Yes |

2004-2006 MAX PSF Validation Table
State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|---------------|-------------------------|---------------|-------------------------|---------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Child | N/A | N/A | N/A | 0.41 | N/A | 0.27 | N/A | N/A | -33.80 | 15% (+/-) | No |
| Adult | N/A | N/A | N/A | 0.13 | N/A | 0.14 | N/A | N/A | 5.95 | 15% (+/-) | Yes |
| 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. | | | | | | | | | | | |
| Total EDB Dual FFS Enrollees | N/A | 19,481 | N/A | 19,981 | N/A | 20,594 | N/A | 2.57 | 3.07 | 15% (+/-) | Yes |
| Number of EDB Dual FFS Recipients | N/A | 18,699 | N/A | 19,186 | N/A | 19,757 | N/A | 2.60 | 2.98 | 15% (+/-) | Yes |
| Total EDB Dual FFS Person-Years of Enrollment | N/A | 17,226 | N/A | 17,677 | N/A | 18,235 | N/A | 2.62 | 3.16 | 15% (+/-) | Yes |
| % EDB Only Dual (EDB DUAL = 50) | N/A | 4.07 | N/A | 2.21 | N/A | 2.02 | N/A | -45.80 | -8.48 | 15% (+/-) | Yes |
| % QMB Only (EDB DUAL = 51) | N/A | 0.24 | N/A | 0.14 | N/A | 0.76 | N/A | -40.70 | 440.60 | 15% (+/-) | No |
| % QMB Plus (EDB DUAL = 52) | N/A | 54.29 | N/A | 56.03 | N/A | 55.73 | N/A | 3.19 | -0.53 | 15% (+/-) | Yes |
| % SLMB Only (EDB DUAL = 53) | N/A | 0.44 | N/A | 0.64 | N/A | 1.29 | N/A | 45.67 | 102.50 | 15% (+/-) | No |
| % SLMB Plus (EDB DUAL = 54) | N/A | 4.63 | N/A | 4.51 | N/A | 5.19 | N/A | -2.50 | 15.11 | 15% (+/-) | No |
| % QDWI (EDB DUAL = 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 (EDB DUAL = 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 (EDB DUAL = 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 (EDB DUAL = 58) | N/A | 32.97 | N/A | 33.36 | N/A | 33.12 | N/A | 1.19 | -0.71 | 15% (+/-) | Yes |
| % Dual Type Unknown (EDB DUAL = 59) | N/A | 3.37 | N/A | 3.12 | N/A | 1.89 | N/A | -7.40 | -39.40 | 15% (+/-) | No |
| Aged EDB Dual FFS Total | N/A | 8,846 | N/A | 8,875 | N/A | 9,007 | N/A | 0.33 | 1.49 | 10% (+/-) | Yes |
| Aged, Cash (MAX ELIG CD = 11) | N/A | 1,509 | N/A | 1,402 | N/A | 1,339 | N/A | -7.09 | -4.49 | 10% (+/-) | Yes |
| Aged, Medically Needy (MAX ELIG CD = 21) | N/A | 3,293 | N/A | 3,366 | N/A | 3,384 | N/A | 2.22 | 0.53 | 10% (+/-) | Yes |
| Aged, Poverty (MAX ELIG CD = 31) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 10% (+/-) | N/A |
| Other Aged (MAX ELIG CD = 41) | N/A | 3,641 | N/A | 3,680 | N/A | 3,769 | N/A | 1.07 | 2.42 | 10% (+/-) | Yes |
| 1115 Aged (MAX ELIG CD = 51) | N/A | 403 | N/A | 427 | N/A | 515 | N/A | 5.96 | 20.61 | 10% (+/-) | No |
| Disabled EDB Dual FFS Total | N/A | 9,998 | N/A | 10,467 | N/A | 10,888 | N/A | 4.69 | 4.02 | 10% (+/-) | Yes |
| Disabled, Cash (MAX ELIG CD = 12) | N/A | 5,501 | N/A | 5,606 | N/A | 5,746 | N/A | 1.91 | 2.50 | 10% (+/-) | Yes |
| Disabled, Medically Needy (MAX ELIG CD = 22) | N/A | 2,844 | N/A | 3,110 | N/A | 3,335 | N/A | 9.35 | 7.24 | 10% (+/-) | Yes |
| Disabled, Poverty (MAX ELIG CD = 32, 3A) | N/A | 2 | N/A | 1 | N/A | 3 | N/A | -50.00 | 200.00 | 10% (+/-) | No |
| Other Disabled (MAX ELIG CD = 42) | N/A | 1,225 | N/A | 1,313 | N/A | 1,394 | N/A | 7.18 | 6.17 | 10% (+/-) | Yes |
| 1115 Disabled (MAX ELIG CD = 52) | N/A | 426 | N/A | 437 | N/A | 410 | N/A | 2.58 | -6.18 | 10% (+/-) | Yes |
| Total FFS Medicaid Paid | N/A | \$292,561,607 | N/A | \$326,321,955 | N/A | \$284,124,367 | N/A | 11.54 | -12.90 | 15% (+/-) | Yes |
| Avg FFS Medicaid Paid per FFS Dual | N/A | \$15,018 | N/A | \$16,332 | N/A | \$13,796 | N/A | 8.75 | -15.50 | 15% (+/-) | No |
| Avg FFS Medicaid Paid per FFS Dual Recipient (User of Any Service) | N/A | \$15,646 | N/A | \$17,008 | N/A | \$14,381 | N/A | 8.71 | -15.40 | 15% (+/-) | No |
| AVERAGE FFS MEDICAID AMOUNT PAID PER FFS DUAL BY MAX ELIGIBILITY GROUP | | | | | | | | | | | |
| Aged | N/A | \$17,012 | N/A | \$18,851 | N/A | \$16,653 | N/A | 10.81 | -11.70 | 15% (+/-) | Yes |
| Aged, Cash (MAX ELIG CD = 11) | N/A | \$9,243 | N/A | \$9,720 | N/A | \$7,553 | N/A | 5.15 | -22.30 | 15% (+/-) | No |
| Aged, Medically Needy (MAX ELIG CD = 21) | N/A | \$5,123 | N/A | \$5,540 | N/A | \$3,344 | N/A | 8.14 | -39.60 | 15% (+/-) | No |
| Aged, Poverty (MAX ELIG CD = 31) | 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 |
| Other Aged (MAX ELIG CD = 41) | N/A | \$32,422 | N/A | \$36,204 | N/A | \$33,717 | N/A | 11.66 | -6.87 | 15% (+/-) | Yes |
| 1115 Aged (MAX ELIG CD = 51) | N/A | \$4,023 | N/A | \$4,216 | N/A | \$2,883 | N/A | 4.80 | -31.60 | 15% (+/-) | No |
| Disabled | N/A | \$13,901 | N/A | \$14,729 | N/A | \$11,888 | N/A | 5.95 | -19.30 | 15% (+/-) | No |
| Disabled, Cash (MAX ELIG CD = 12) | N/A | \$13,979 | N/A | \$14,896 | N/A | \$12,498 | N/A | 6.56 | -16.10 | 15% (+/-) | No |
| Disabled, Medically Needy (MAX ELIG CD = 22) | N/A | \$7,939 | N/A | \$8,498 | N/A | \$4,625 | N/A | 7.03 | -45.60 | 15% (+/-) | No |
| Disabled, Poverty (MAX ELIG CD = 32, 3A) | N/A | \$11,846 | N/A | \$792 | N/A | \$6,698 | N/A | -93.30 | 745.70 | 15% (+/-) | No |

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State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|--|----------------|--------------|-------------------------|--------------|-------------------------|---------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Other Disabled (MAX ELIG CD = 42) | N/A | \$30,161 | N/A | \$31,350 | N/A | \$29,275 | N/A | 3.94 | -6.62 | 15% (+/-) | Yes |
| 1115 Disabled (MAX ELIG CD = 52) | N/A | \$5,959 | N/A | \$7,020 | N/A | \$3,337 | N/A | 17.80 | -52.50 | 15% (+/-) | No |
| FFS EXPENDITURES AND USERS BY MAX TYPE OF SERVICE | | | | | | | | | | | |
| IP: Total Medicaid Paid (MAX TOS = 01) | N/A | \$5,003,029 | N/A | \$6,499,882 | N/A | \$5,836,333 | N/A | 29.92 | -10.20 | 15% (+/-) | Yes |
| IP: Number of Users | N/A | 3,079 | N/A | 3,201 | N/A | 3,319 | N/A | 3.96 | 3.69 | 15% (+/-) | Yes |
| IP: Avg Medicaid Paid per User | N/A | \$1,625 | N/A | \$2,031 | N/A | \$1,758 | N/A | 24.97 | -13.40 | 15% (+/-) | Yes |
| IP: Avg Medicaid Covered Days Per User | N/A | 7 | N/A | 7 | N/A | 1 | N/A | 1.45 | -88.70 | 15% (+/-) | No |
| MH Aged: Total Medicaid Paid (MAX TOS = 02) | N/A | \$40,010 | N/A | \$89,791 | N/A | \$138,533 | N/A | 124.40 | 54.28 | 15% (+/-) | No |
| MH Aged: Number of Users | N/A | 71 | N/A | 86 | N/A | 161 | N/A | 21.13 | 87.21 | 15% (+/-) | No |
| MH Aged: Avg Medicaid Paid per User | N/A | \$564 | N/A | \$1,044 | N/A | \$860 | N/A | 85.28 | -17.60 | 15% (+/-) | No |
| IP Psych, Age < 21: Total Medicaid Paid (MAX TOS = 04) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| IP Psych, Age < 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, Age < 21: Avg Medicaid Paid 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 (MAX TOS = 05) | N/A | \$624,240 | N/A | \$766,447 | N/A | \$898,769 | N/A | 22.78 | 17.26 | 15% (+/-) | No |
| ICF/MR: Number of Users | N/A | 4 | N/A | 6 | N/A | 5 | N/A | 50.00 | -16.70 | 15% (+/-) | No |
| ICF/MR: Avg Medicaid Paid per User | N/A | \$156,060 | N/A | \$127,741 | N/A | \$179,754 | N/A | -18.10 | 40.72 | 15% (+/-) | No |
| NF: Total Medicaid Paid (MAX TOS = 07) | N/A | \$88,355,168 | N/A | \$98,649,327 | N/A | \$102,030,140 | N/A | 11.65 | 3.43 | 15% (+/-) | Yes |
| NF: Number of Users | N/A | 3,394 | N/A | 3,313 | N/A | 3,276 | N/A | -2.39 | -1.12 | 15% (+/-) | Yes |
| NF: Avg Medicaid Paid per User | N/A | \$26,033 | N/A | \$29,776 | N/A | \$31,145 | N/A | 14.38 | 4.60 | 15% (+/-) | Yes |
| Physician: Total Medicaid Paid (MAX TOS = 08) | N/A | \$5,281,048 | N/A | \$5,539,531 | N/A | \$5,576,628 | N/A | 4.90 | 0.67 | 15% (+/-) | Yes |
| Physician: Number of Users | N/A | 15,605 | N/A | 15,595 | N/A | 16,236 | N/A | -0.06 | 4.11 | 15% (+/-) | Yes |
| Physician: Avg Medicaid Paid per User | N/A | \$338 | N/A | \$355 | N/A | \$343 | N/A | 4.96 | -3.30 | 15% (+/-) | Yes |
| Dental: Total Medicaid Paid (MAX TOS = 09) | N/A | \$1,053,391 | N/A | \$1,098,266 | N/A | \$1,151,199 | N/A | 4.26 | 4.82 | 15% (+/-) | Yes |
| Dental: Number of Users | N/A | 4,636 | N/A | 4,791 | N/A | 5,119 | N/A | 3.34 | 6.85 | 15% (+/-) | Yes |
| Dental: Avg Medicaid Paid per User | N/A | \$227 | N/A | \$229 | N/A | \$225 | N/A | 0.89 | -1.90 | 15% (+/-) | Yes |
| Other Practitioner: Total Medicaid Paid (MAX TOS = 10) | N/A | \$576,109 | N/A | \$697,772 | N/A | \$615,517 | N/A | 21.12 | -11.80 | 15% (+/-) | Yes |
| Other Practitioner: Number of Users | N/A | 3,751 | N/A | 3,759 | N/A | 3,895 | N/A | 0.21 | 3.62 | 15% (+/-) | Yes |
| Other Practitioner: Avg Medicaid Paid per User | N/A | \$154 | N/A | \$186 | N/A | \$158 | N/A | 20.86 | -14.90 | 15% (+/-) | Yes |
| Outpatient: Total Medicaid Paid (MAX TOS = 11) | N/A | \$5,388,606 | N/A | \$6,642,802 | N/A | \$7,461,119 | N/A | 23.27 | 12.32 | 15% (+/-) | Yes |
| Outpatient: Number of Users | N/A | 9,113 | N/A | 9,981 | N/A | 11,181 | N/A | 9.53 | 12.02 | 15% (+/-) | Yes |
| Outpatient: Avg Medicaid Paid per User | N/A | \$591 | N/A | \$666 | N/A | \$667 | N/A | 12.55 | 0.26 | 15% (+/-) | Yes |
| Clinic: Total Medicaid Paid (MAX TOS = 12) | N/A | \$982,242 | N/A | \$964,094 | N/A | \$1,185,723 | N/A | -1.85 | 22.99 | 15% (+/-) | No |
| Clinic: Number of Users | N/A | 3,309 | N/A | 3,901 | N/A | 4,675 | N/A | 17.89 | 19.84 | 15% (+/-) | No |
| Clinic: Avg Medicaid Paid per User | N/A | \$297 | N/A | \$247 | N/A | \$254 | N/A | -16.70 | 2.63 | 15% (+/-) | Yes |
| Home Health: Total Medicaid Paid (MAX TOS = 13) | N/A | \$3,066,615 | N/A | \$2,905,814 | N/A | \$2,846,510 | N/A | -5.24 | -2.04 | 15% (+/-) | Yes |
| Home Health: Number of Users | N/A | 1,352 | N/A | 1,382 | N/A | 1,368 | N/A | 2.22 | -1.01 | 15% (+/-) | Yes |
| Home Health: Avg Medicaid Paid per User | N/A | \$2,268 | N/A | \$2,103 | N/A | \$2,081 | N/A | -7.30 | -1.04 | 15% (+/-) | Yes |
| Lab/Xray: Total Medicaid Paid (MAX TOS = 15) | N/A | \$3,420,976 | N/A | \$3,618,015 | N/A | \$4,117,476 | N/A | 5.76 | 13.80 | 15% (+/-) | Yes |
| Lab/Xray: Number of Users | N/A | 11,713 | N/A | 11,796 | N/A | 12,601 | N/A | 0.71 | 6.82 | 15% (+/-) | Yes |
| Lab/Xray: Avg Medicaid Paid per User | N/A | \$292 | N/A | \$307 | N/A | \$327 | N/A | 5.02 | 6.54 | 15% (+/-) | Yes |
| Drugs: Total Medicaid Paid (MAX TOS = 16) | N/A | \$67,943,057 | N/A | \$75,788,026 | N/A | \$15,947,159 | N/A | 11.55 | -79.00 | 15% (+/-) | No |
| Drugs: Number of Users | N/A | 17,853 | N/A | 18,278 | N/A | 16,008 | N/A | 2.38 | -12.40 | 15% (+/-) | Yes |
| Drugs: Avg Medicaid Paid per User | N/A | \$3,806 | N/A | \$4,146 | N/A | \$996 | N/A | 8.95 | -76.00 | 15% (+/-) | No |

2004-2006 MAX PSF Validation Table
State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|--------------|-------------------------|--------------|-------------------------|--------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Other Services: Total Medicaid Paid (MAX TOS = 19) | N/A | \$39,882,867 | N/A | \$45,303,646 | N/A | \$49,013,557 | N/A | 13.59 | 8.19 | 15% (+/-) | Yes |
| Other Services: Number of Users | N/A | 3,432 | N/A | 5,102 | N/A | 3,964 | N/A | 48.66 | -22.30 | 15% (+/-) | No |
| Other Services: Avg Medicaid Paid per User | N/A | \$11,621 | N/A | \$8,880 | N/A | \$12,365 | N/A | -23.60 | 39.25 | 15% (+/-) | No |
| Transportation: Total Medicaid Paid (MAX TOS = 26) | N/A | \$3,286,445 | N/A | \$4,881,567 | N/A | \$5,572,940 | N/A | 48.54 | 14.16 | 15% (+/-) | Yes |
| Transportation: Number of Users | N/A | 5,854 | N/A | 6,405 | N/A | 6,518 | N/A | 9.41 | 1.76 | 15% (+/-) | Yes |
| Transportation: Avg Medicaid Paid per User | N/A | \$561 | N/A | \$762 | N/A | \$855 | N/A | 35.76 | 12.18 | 15% (+/-) | Yes |
| Personal Care Services: Total Medicaid Paid (MAX TOS = 30) | N/A | \$224,967 | N/A | \$362,110 | N/A | \$390,256 | N/A | 60.96 | 7.77 | 15% (+/-) | Yes |
| Personal Care Services: Number of Users | N/A | 103 | N/A | 111 | N/A | 100 | N/A | 7.77 | -9.91 | 15% (+/-) | Yes |
| Personal Care Services: Avg Medicaid Paid per User | N/A | \$2,184 | N/A | \$3,262 | N/A | \$3,903 | N/A | 49.36 | 19.63 | 15% (+/-) | No |
| Targeted Case Management: Total Medicaid Paid (MAX TOS = 31) | N/A | \$993,386 | N/A | \$838,890 | N/A | \$1,114,897 | N/A | -15.60 | 32.90 | 15% (+/-) | No |
| Targeted Case Management: Number of Users | N/A | 465 | N/A | 544 | N/A | 590 | N/A | 16.99 | 8.46 | 15% (+/-) | Yes |
| Targeted Case Management: Avg Medicaid Paid per User | N/A | \$2,136 | N/A | \$1,542 | N/A | \$1,890 | N/A | -27.80 | 22.54 | 15% (+/-) | No |
| Rehabilitation Services: Total Medicaid Paid (MAX TOS = 33) | N/A | \$0 | N/A | \$0 | N/A | \$14,663 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Rehabilitation Services: Number of Users | N/A | 0 | N/A | 0 | N/A | 6 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| Rehabilitation Services: Avg Medicaid Paid per User | N/A | Div by 0 | N/A | Div by 0 | N/A | \$2,444 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| PT/OT/Speech/Hearing: Total Medicaid Paid (MAX TOS = 34) | N/A | \$133,571 | N/A | \$185,368 | N/A | \$176,698 | N/A | 38.78 | -4.68 | 15% (+/-) | Yes |
| PT/OT/Speech/Hearing: Number of Users | N/A | 603 | N/A | 738 | N/A | 828 | N/A | 22.39 | 12.20 | 15% (+/-) | Yes |
| PT/OT/Speech/Hearing: Avg Medicaid Paid per User | N/A | \$222 | N/A | \$251 | N/A | \$213 | N/A | 13.39 | -15.00 | 15% (+/-) | Yes |
| Hospice: Total Medicaid Paid (MAX TOS = 35) | N/A | \$262,359 | N/A | \$291,824 | N/A | \$429,896 | N/A | 11.23 | 47.31 | 15% (+/-) | No |
| Hospice: Number of Users | N/A | 42 | N/A | 38 | N/A | 54 | N/A | -9.52 | 42.11 | 15% (+/-) | No |
| Hospice: Avg Medicaid Paid per User | N/A | \$6,247 | N/A | \$7,680 | N/A | \$7,961 | N/A | 22.94 | 3.67 | 15% (+/-) | Yes |
| Durable Medical Equipment: Total Medicaid Paid (MAX TOS = 51) | N/A | \$2,718,448 | N/A | \$3,097,766 | N/A | \$3,932,787 | N/A | 13.95 | 26.96 | 15% (+/-) | No |
| Durable Medical Equipment: Number of Users | N/A | 4,571 | N/A | 4,625 | N/A | 6,255 | N/A | 1.18 | 35.24 | 15% (+/-) | No |
| Durable Medical Equipment: Avg Medicaid Paid per User | N/A | \$595 | N/A | \$670 | N/A | \$629 | N/A | 12.62 | -6.13 | 15% (+/-) | Yes |
| Residential Care: Total Medicaid Paid (MAX TOS = 52) | N/A | \$1,073,519 | N/A | \$1,308,130 | N/A | \$1,468,720 | N/A | 21.85 | 12.28 | 15% (+/-) | Yes |
| Residential Care: Number of Users | N/A | 31 | N/A | 40 | N/A | 41 | N/A | 29.03 | 2.50 | 15% (+/-) | Yes |
| Residential Care: Avg Medicaid Paid per User | N/A | \$34,630 | N/A | \$32,703 | N/A | \$35,822 | N/A | -5.56 | 9.54 | 15% (+/-) | Yes |
| Psych Services: Total Medicaid Paid (MAX TOS = 53) | N/A | \$60,613,715 | N/A | \$66,587,201 | N/A | \$74,149,457 | N/A | 9.86 | 11.36 | 15% (+/-) | Yes |
| Psych Services: Number of Users | N/A | 5,880 | N/A | 6,208 | N/A | 6,870 | N/A | 5.58 | 10.66 | 15% (+/-) | Yes |
| Psych Services: Avg Medicaid Paid per User | N/A | \$10,308 | N/A | \$10,726 | N/A | \$10,793 | N/A | 4.05 | 0.63 | 15% (+/-) | Yes |
| Adult Day Care: Total Medicaid Paid (MAX 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 Paid 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 |
| AVERAGE FFS MEDICAID AMOUNT PAID PER FFS DUAL BY SELECTED MAX TYPE OF SERVICE | | | | | | | | | | | |
| Inpatient Hospital (MAX TOS = 01) | N/A | \$257 | N/A | \$325 | N/A | \$283 | N/A | 26.67 | -12.90 | 15% (+/-) | Yes |
| Aged | N/A | \$205 | N/A | \$227 | N/A | \$232 | N/A | 10.66 | 2.50 | 15% (+/-) | Yes |
| Disabled | N/A | \$285 | N/A | \$355 | N/A | \$302 | N/A | 24.80 | -14.90 | 15% (+/-) | Yes |
| ILTC (MAX TOS = 02,04,05,07) | N/A | \$4,570 | N/A | \$4,980 | N/A | \$5,005 | N/A | 8.98 | 0.50 | 15% (+/-) | Yes |
| Aged | N/A | \$9,428 | N/A | \$10,458 | N/A | \$10,557 | N/A | 10.92 | 0.95 | 15% (+/-) | Yes |
| Disabled | N/A | \$562 | N/A | \$637 | N/A | \$732 | N/A | 13.42 | 14.90 | 15% (+/-) | Yes |
| Drugs (MAX TOS = 16) | N/A | \$3,488 | N/A | \$3,793 | N/A | \$774 | N/A | 8.76 | -79.60 | 15% (+/-) | No |
| Aged | N/A | \$2,971 | N/A | \$3,128 | N/A | \$420 | N/A | 5.26 | -86.60 | 15% (+/-) | No |
| Disabled | N/A | \$4,026 | N/A | \$4,396 | N/A | \$953 | N/A | 9.21 | -78.30 | 15% (+/-) | No |

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|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| All Other Services | N/A | \$6,704 | N/A | \$7,233 | N/A | \$7,734 | N/A | 7.90 | 6.92 | 15% (+/-) | Yes |
| Aged | N/A | \$4,408 | N/A | \$5,039 | N/A | \$5,444 | N/A | 14.32 | 8.03 | 15% (+/-) | Yes |
| Disabled | N/A | \$9,029 | N/A | \$9,340 | N/A | \$9,901 | N/A | 3.44 | 6.01 | 15% (+/-) | Yes |
| PERCENT OF FFS DUALS WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE | | | | | | | | | | | |
| % FFS Duals with IP Claims (MAX TOS = 01) | N/A | 15.81 | N/A | 16.02 | N/A | 16.12 | N/A | 1.36 | 0.60 | 15% (+/-) | Yes |
| Aged | N/A | 17.12 | N/A | 17.39 | N/A | 17.60 | N/A | 1.58 | 1.22 | 15% (+/-) | Yes |
| Disabled | N/A | 14.95 | N/A | 14.88 | N/A | 15.14 | N/A | -0.46 | 1.69 | 15% (+/-) | Yes |
| % FFS Duals with ILTC Claims (MAX TOS = 02,04,05,07) | N/A | 17.79 | N/A | 17.02 | N/A | 16.70 | N/A | -4.33 | -1.89 | 15% (+/-) | Yes |
| Aged | N/A | 35.16 | N/A | 34.25 | N/A | 33.23 | N/A | -2.57 | -2.99 | 15% (+/-) | Yes |
| Disabled | N/A | 3.55 | N/A | 3.38 | N/A | 4.07 | N/A | -4.75 | 20.30 | 15% (+/-) | No |
| % FFS Duals with Drug Claims (MAX TOS = 16) | N/A | 91.64 | N/A | 91.48 | N/A | 77.73 | N/A | -0.18 | -15.00 | 15% (+/-) | Yes |
| Aged | N/A | 92.66 | N/A | 91.74 | N/A | 75.52 | N/A | -1.00 | -17.70 | 15% (+/-) | No |
| Disabled | N/A | 91.35 | N/A | 91.57 | N/A | 79.04 | N/A | 0.25 | -13.70 | 15% (+/-) | Yes |
| % FFS Duals with All Other Claims | N/A | 90.70 | N/A | 90.85 | N/A | 92.32 | N/A | 0.16 | 1.62 | 15% (+/-) | Yes |
| Aged | N/A | 87.97 | N/A | 87.75 | N/A | 90.01 | N/A | -0.25 | 2.57 | 15% (+/-) | Yes |
| Disabled | N/A | 93.62 | N/A | 93.70 | N/A | 94.44 | N/A | 0.09 | 0.79 | 15% (+/-) | Yes |
| Avg # IP Days per FFS Dual User (MAX TOS = 01) | N/A | 7 | N/A | 7 | N/A | 1 | N/A | 1.45 | -88.70 | 15% (+/-) | No |
| Aged | N/A | 7 | N/A | 7 | N/A | 0 | N/A | 0.59 | -96.20 | 15% (+/-) | No |
| Disabled | N/A | 7 | N/A | 8 | N/A | 1 | N/A | 5.73 | -85.60 | 15% (+/-) | No |
| Avg # ILTC Days per FFS Dual User (MAX TOS = 02, 04, 05, 07) | N/A | 223 | N/A | 220 | N/A | 215 | N/A | -1.24 | -2.07 | 15% (+/-) | Yes |
| Aged | N/A | 235 | N/A | 231 | N/A | 231 | N/A | -1.30 | -0.02 | 15% (+/-) | Yes |
| Disabled | N/A | 118 | N/A | 123 | N/A | 107 | N/A | 4.32 | -13.10 | 15% (+/-) | Yes |
| HIGH-COST FFS DUALS AND EXPENDITURES BY SELECTED MAX TYPE OF SERVICE | | | | | | | | | | | |
| Number of FFS Duals with FFS Medicaid Paid > \$1,000,000 | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | N/A | N/A |
| Number of FFS Duals with FFS Medicaid Paid > \$500,000 | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | N/A | N/A |
| Inpatient Hospital (MAX TOS = 01) > \$500,000 | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | N/A | N/A |
| ILTC (MAX TOS = 02,04,05,07) > \$200,000 | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | N/A | N/A |
| Drugs (MAX TOS = 16) > \$200,000 | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | N/A | N/A |
| All Other Services > \$200,000 | N/A | N/A | N/A | N/A | N/A | 4 | N/A | N/A | N/A | N/A | N/A |
| Maximum FFS Medicaid Paid | N/A | N/A | N/A | N/A | N/A | \$239,732 | N/A | N/A | N/A | N/A | N/A |
| Inpatient Hospital (MAX TOS = 01) | N/A | N/A | N/A | N/A | N/A | \$133,729 | N/A | N/A | N/A | N/A | N/A |
| ILTC (MAX TOS = 02,04,05,07) | N/A | N/A | N/A | N/A | N/A | \$182,073 | N/A | N/A | N/A | N/A | N/A |
| Drugs (MAX TOS = 16) | N/A | N/A | N/A | N/A | N/A | \$140,729 | N/A | N/A | N/A | N/A | N/A |
| All Other Services | N/A | N/A | N/A | N/A | N/A | \$234,219 | N/A | N/A | N/A | N/A | N/A |
| FFS EXPENDITURES AND USERS BY MAX PROGRAM TYPE | | | | | | | | | | | |
| FP: Total Medicaid Paid (PGM TYPE = 2) | N/A | \$83,334 | N/A | \$91,864 | N/A | \$64,666 | N/A | 10.24 | -29.60 | 15% (+/-) | No |
| FP: Number of Users | N/A | 425 | N/A | 426 | N/A | 397 | N/A | 0.24 | -6.81 | 15% (+/-) | Yes |
| FP: Avg Medicaid Paid per User | N/A | \$196 | N/A | \$216 | N/A | \$163 | N/A | 9.98 | -24.50 | 15% (+/-) | No |
| RHC: Total Medicaid Paid (PGM TYPE = 3) | N/A | \$382,004 | N/A | \$466,308 | N/A | \$545,459 | N/A | 22.07 | 16.97 | 15% (+/-) | No |
| RHC: Number of Users | N/A | 2,095 | N/A | 2,311 | N/A | 2,436 | N/A | 10.31 | 5.41 | 15% (+/-) | Yes |
| RHC: Avg Medicaid Paid per User | N/A | \$182 | N/A | \$202 | N/A | \$224 | N/A | 10.66 | 10.97 | 15% (+/-) | Yes |
| FQHC: Total Medicaid Paid (PGM TYPE = 4) | N/A | \$330,769 | N/A | \$395,002 | N/A | \$554,261 | N/A | 19.42 | 40.32 | 15% (+/-) | No |
| FQHC: Number of Users | N/A | 1,222 | N/A | 1,635 | N/A | 2,524 | N/A | 33.80 | 54.37 | 15% (+/-) | No |

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State: VT

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|--|----------------|--------------|-------------------------|--------------|-------------------------|--------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| FQHC: Avg Medicaid Paid per User | N/A | \$271 | N/A | \$242 | N/A | \$220 | N/A | -10.70 | -9.10 | 15% (+/-) | Yes |
| IHS: Total Medicaid Paid (PGM 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 Paid 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 (PGM TYPE = 6 and 7) | N/A | \$78,072,493 | N/A | \$84,781,921 | N/A | \$91,674,773 | N/A | 8.59 | 8.13 | 15% (+/-) | Yes |
| Section 1915(c) Waiver: Number of Users | N/A | 2,794 | N/A | 3,187 | N/A | 3,623 | N/A | 14.07 | 13.68 | 15% (+/-) | Yes |
| Section 1915(c) Waiver: Avg Medicaid Paid per User | N/A | \$27,943 | N/A | \$26,602 | N/A | \$25,304 | N/A | -4.80 | -4.88 | 15% (+/-) | Yes |
| FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS | | | | | | | | | | | |
| Total FFS CLTC Medicaid Paid (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | \$88,049,845 | N/A | \$94,911,539 | N/A | N/A | 7.79 | 15% (+/-) | Yes |
| Number of Dual CLTC Users (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | 3,717 | N/A | 4,106 | N/A | N/A | 10.47 | 15% (+/-) | Yes |
| Avg FFS CLTC Medicaid Paid per Dual User (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | \$23,688 | N/A | \$23,115 | N/A | N/A | -2.42 | 15% (+/-) | Yes |
| Aged | N/A | N/A | N/A | \$10,955 | N/A | \$9,700 | N/A | N/A | -11.50 | 15% (+/-) | Yes |
| Disabled | N/A | N/A | N/A | \$35,074 | N/A | \$36,161 | N/A | N/A | 3.10 | 15% (+/-) | Yes |
| % FFS Dual Enrollees with CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | 18.60 | N/A | 19.94 | N/A | N/A | 7.18 | 15% (+/-) | Yes |
| Aged | N/A | N/A | N/A | 19.36 | N/A | 22.06 | N/A | N/A | 13.96 | 15% (+/-) | Yes |
| Disabled | N/A | N/A | N/A | 18.83 | N/A | 19.19 | N/A | N/A | 1.89 | 15% (+/-) | Yes |
| Total FFS CLTC Medicaid Paid (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | N/A | N/A | \$84,781,921 | N/A | \$91,674,773 | N/A | N/A | 8.13 | 15% (+/-) | Yes |
| Number of Dual CLTC Users (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | N/A | N/A | 3,187 | N/A | 3,623 | N/A | N/A | 13.68 | 15% (+/-) | Yes |
| Avg CLTC Medicaid Paid per Dual User (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | N/A | N/A | \$26,602 | N/A | \$25,304 | N/A | N/A | -4.88 | 15% (+/-) | Yes |
| Aged | N/A | N/A | N/A | \$11,736 | N/A | \$10,162 | N/A | N/A | -13.40 | 15% (+/-) | Yes |
| Disabled | N/A | N/A | N/A | \$40,331 | N/A | \$40,613 | N/A | N/A | 0.70 | 15% (+/-) | Yes |
| % FFS Dual Enrollees with CLTC Claims (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | N/A | N/A | 15.95 | N/A | 17.59 | N/A | N/A | 10.30 | 15% (+/-) | Yes |
| Aged | N/A | N/A | N/A | 17.19 | N/A | 20.11 | N/A | N/A | 16.94 | 15% (+/-) | No |
| Disabled | N/A | N/A | N/A | 15.83 | N/A | 16.56 | N/A | N/A | 4.60 | 15% (+/-) | Yes |
| FFS INFORMATION FOR TOTAL MEDICAID ENROLLEES (excludes people ever enrolled in HMO/HIOs, with missing eligibility information, S-CHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) ---- NOTE: S-CHIP 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. | | | | | | | | | | | |
| Total FFS Enrollees | N/A | 150,949 | N/A | 149,019 | N/A | 148,268 | N/A | -1.28 | -0.50 | 15% (+/-) | Yes |
| # FFS Recipients | N/A | 131,744 | N/A | 131,438 | N/A | 131,716 | N/A | -0.23 | 0.21 | 15% (+/-) | Yes |
| % FFS Enrollees Who Are Recipients | 65-90% | 87.28 | Yes | 88.20 | Yes | 88.84 | Yes | 1.06 | 0.72 | 15% (+/-) | Yes |
| % Aged Who Are Recipients | 90-100% | 96.07 | Yes | 95.98 | Yes | 95.86 | Yes | -0.09 | -0.13 | 15% (+/-) | Yes |
| % Disabled Who Are Recipients | 85-100% | 95.25 | Yes | 95.04 | Yes | 95.16 | Yes | -0.22 | 0.13 | 15% (+/-) | Yes |
| % Child Who Are Recipients | 80-100% | 90.15 | Yes | 90.25 | Yes | 90.58 | Yes | 0.12 | 0.37 | 15% (+/-) | Yes |
| % Adults Who Are Recipients | 80-100% | 79.41 | No | 81.69 | Yes | 82.90 | Yes | 2.87 | 1.47 | 15% (+/-) | Yes |
| Total FFS Person-Years of Enrollment | N/A | 117,887 | N/A | 117,008 | N/A | 116,871 | N/A | -0.75 | -0.12 | 15% (+/-) | Yes |
| Aged Total | N/A | 9,065 | N/A | 9,087 | N/A | 9,205 | N/A | 0.24 | 1.30 | 10% (+/-) | Yes |
| Aged, Cash (MAX ELIG CD = 11) | N/A | 1,544 | N/A | 1,433 | N/A | 1,370 | N/A | -7.19 | -4.40 | 10% (+/-) | Yes |
| Aged, Medically Needy (MAX ELIG CD = 21) | N/A | 3,410 | N/A | 3,482 | N/A | 3,490 | N/A | 2.11 | 0.23 | 10% (+/-) | Yes |
| Aged, Poverty (MAX ELIG CD = 31) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 10% (+/-) | N/A |
| Other Aged (MAX ELIG CD = 41) | N/A | 3,705 | N/A | 3,739 | N/A | 3,824 | N/A | 0.92 | 2.27 | 10% (+/-) | Yes |
| 1115 Aged (MAX ELIG CD = 51) | N/A | 406 | N/A | 433 | N/A | 521 | N/A | 6.65 | 20.32 | 10% (+/-) | No |

2004-2006 MAX PSF Validation Table
State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|--|----------------|---------------|-------------------------|---------------|-------------------------|---------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Disabled Total | N/A | 18,873 | N/A | 19,633 | N/A | 20,298 | N/A | 4.03 | 3.39 | 10% (+/-) | Yes |
| Disabled, Cash (MAX ELIG CD = 12) | N/A | 13,031 | N/A | 13,325 | N/A | 13,655 | N/A | 2.26 | 2.48 | 10% (+/-) | Yes |
| Disabled, Medically Needy (MAX ELIG CD = 22) | N/A | 3,395 | N/A | 3,688 | N/A | 3,886 | N/A | 8.63 | 5.37 | 10% (+/-) | Yes |
| Disabled, Poverty (MAX ELIG CD = 32, 3A) | N/A | 77 | N/A | 101 | N/A | 129 | N/A | 31.17 | 27.72 | 10% (+/-) | No |
| Other Disabled (MAX ELIG CD = 42) | N/A | 1,914 | N/A | 2,052 | N/A | 2,180 | N/A | 7.21 | 6.24 | 10% (+/-) | Yes |
| 1115 Disabled (MAX ELIG CD = 52) | N/A | 456 | N/A | 467 | N/A | 448 | N/A | 2.41 | -4.07 | 10% (+/-) | Yes |
| Child Total | N/A | 68,669 | N/A | 67,524 | N/A | 66,651 | N/A | -1.67 | -1.29 | 10% (+/-) | Yes |
| AFDC Child, Cash (MAX ELIG CD = 14) | N/A | 8,819 | N/A | 8,453 | N/A | 8,382 | N/A | -4.15 | -0.84 | 10% (+/-) | Yes |
| AFDC-U Child, Cash (MAX ELIG CD = 16) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 10% (+/-) | N/A |
| AFDC Child, Medically Needy (MAX ELIG CD = 24) | N/A | 2,263 | N/A | 2,340 | N/A | 2,474 | N/A | 3.40 | 5.73 | 10% (+/-) | Yes |
| Child Poverty (MAX ELIG CD = 34) | N/A | 47,313 | N/A | 46,773 | N/A | 46,462 | N/A | -1.14 | -0.67 | 10% (+/-) | Yes |
| Other Child (MAX ELIG CD = 44) | N/A | 4,797 | N/A | 4,836 | N/A | 4,802 | N/A | 0.81 | -0.70 | 10% (+/-) | Yes |
| Foster Care Child (MAX ELIG CD = 48) | N/A | 2,767 | N/A | 2,848 | N/A | 2,680 | N/A | 2.93 | -5.90 | 10% (+/-) | Yes |
| 1115 Child (MAX ELIG CD = 54) | N/A | 2,710 | N/A | 2,274 | N/A | 1,851 | N/A | -16.10 | -18.60 | 10% (+/-) | No |
| Adult Total | N/A | 54,342 | N/A | 52,775 | N/A | 52,114 | N/A | -2.88 | -1.25 | 10% (+/-) | Yes |
| AFDC Adult, Cash (MAX ELIG CD = 15) | N/A | 4,255 | N/A | 4,044 | N/A | 3,922 | N/A | -4.96 | -3.02 | 10% (+/-) | Yes |
| AFDC-U Adult, Cash (MAX ELIG CD = 17) | N/A | 0 | N/A | 0 | N/A | 0 | N/A | Div by 0 | Div by 0 | 10% (+/-) | N/A |
| AFDC Adult, Medically Needy (MAX ELIG CD = 25) | N/A | 5,346 | N/A | 5,649 | N/A | 6,003 | N/A | 5.67 | 6.27 | 10% (+/-) | Yes |
| Adult, Poverty (MAX ELIG CD = 35) | N/A | 2,524 | N/A | 2,545 | N/A | 2,681 | N/A | 0.83 | 5.34 | 10% (+/-) | Yes |
| Other Adult (MAX ELIG CD = 45) | N/A | 3,574 | N/A | 3,795 | N/A | 3,749 | N/A | 6.18 | -1.21 | 10% (+/-) | Yes |
| 1115 Adult (MAX ELIG CD = 55) | N/A | 38,643 | N/A | 36,742 | N/A | 35,759 | N/A | -4.92 | -2.68 | 10% (+/-) | Yes |
| Total FFS Medicaid Paid | N/A | \$740,781,555 | N/A | \$812,848,252 | N/A | \$792,877,918 | N/A | 9.73 | -2.46 | 15% (+/-) | Yes |
| Avg FFS Medicaid Paid per FFS Enrollee | N/A | \$4,907 | N/A | \$5,455 | N/A | \$5,348 | N/A | 11.15 | -1.96 | 15% (+/-) | Yes |
| Avg FFS Medicaid Paid per FFS Recipient (User of Any Service) | N/A | \$5,623 | N/A | \$6,184 | N/A | \$6,020 | N/A | 9.98 | -2.66 | 15% (+/-) | Yes |
| AVERAGE FFS MEDICAID AMOUNT PAID PER FFS ENROLLEE BY MAX ELIGIBILITY GROUP | | | | | | | | | | | |
| Aged | N/A | \$16,921 | N/A | \$18,715 | N/A | \$16,590 | N/A | 10.60 | -11.40 | 15% (+/-) | Yes |
| Aged, Cash (MAX ELIG CD = 11) | N/A | \$9,299 | N/A | \$9,860 | N/A | \$7,714 | N/A | 6.03 | -21.80 | 15% (+/-) | No |
| Aged, Medically Needy (MAX ELIG CD = 21) | N/A | \$5,127 | N/A | \$5,493 | N/A | \$3,355 | N/A | 7.14 | -38.90 | 15% (+/-) | No |
| Aged, Poverty (MAX ELIG CD = 31) | 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 |
| Other Aged (MAX ELIG CD = 41) | N/A | \$32,367 | N/A | \$36,106 | N/A | \$33,717 | N/A | 11.55 | -6.62 | 15% (+/-) | Yes |
| 1115 Aged (MAX ELIG CD = 51) | N/A | \$4,005 | N/A | \$4,167 | N/A | \$2,870 | N/A | 4.04 | -31.10 | 15% (+/-) | No |
| Disabled | N/A | \$15,526 | N/A | \$16,624 | N/A | \$15,373 | N/A | 7.08 | -7.53 | 15% (+/-) | Yes |
| Disabled, Cash (MAX ELIG CD = 12) | N/A | \$15,409 | N/A | \$16,550 | N/A | \$15,906 | N/A | 7.41 | -3.89 | 15% (+/-) | Yes |
| Disabled, Medically Needy (MAX ELIG CD = 22) | N/A | \$8,285 | N/A | \$9,361 | N/A | \$5,856 | N/A | 12.98 | -37.40 | 15% (+/-) | No |
| Disabled, Poverty (MAX ELIG CD = 32, 3A) | N/A | \$10,262 | N/A | \$7,313 | N/A | \$6,935 | N/A | -28.70 | -5.16 | 15% (+/-) | Yes |
| Other Disabled (MAX ELIG CD = 42) | N/A | \$31,616 | N/A | \$32,817 | N/A | \$31,833 | N/A | 3.80 | -3.00 | 15% (+/-) | Yes |
| 1115 Disabled (MAX ELIG CD = 52) | N/A | \$6,134 | N/A | \$6,980 | N/A | \$4,002 | N/A | 13.80 | -42.70 | 15% (+/-) | No |
| Child | N/A | \$2,407 | N/A | \$2,533 | N/A | \$2,650 | N/A | 5.25 | 4.61 | 15% (+/-) | Yes |
| AFDC Child, Cash (MAX ELIG CD = 14) | N/A | \$3,034 | N/A | \$3,109 | N/A | \$3,357 | N/A | 2.46 | 7.98 | 15% (+/-) | Yes |
| AFDC-U Child, Cash (MAX ELIG CD = 16) | 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 |
| AFDC Child, Medically Needy (MAX ELIG CD = 24) | N/A | \$3,307 | N/A | \$3,255 | N/A | \$4,018 | N/A | -1.55 | 23.44 | 15% (+/-) | No |
| Child Poverty (MAX ELIG CD = 34) | N/A | \$1,550 | N/A | \$1,639 | N/A | \$1,720 | N/A | 5.75 | 4.90 | 15% (+/-) | Yes |
| Other Child (MAX ELIG CD = 44) | N/A | \$2,501 | N/A | \$2,382 | N/A | \$2,268 | N/A | -4.76 | -4.79 | 15% (+/-) | Yes |

2004-2006 MAX PSF Validation Table
State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|--|----------------|--------------|-------------------------|---------------|-------------------------|---------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Foster Care Child (MAX ELIG CD = 48) | N/A | \$15,444 | N/A | \$16,199 | N/A | \$16,821 | N/A | 4.89 | 3.84 | 15% (+/-) | Yes |
| 1115 Child (MAX ELIG CD = 54) | N/A | \$1,082 | N/A | \$1,232 | N/A | \$1,426 | N/A | 13.82 | 15.80 | 15% (+/-) | No |
| Adult | N/A | \$2,376 | N/A | \$2,755 | N/A | \$2,908 | N/A | 15.93 | 5.57 | 15% (+/-) | Yes |
| AFDC Adult, Cash (MAX ELIG CD = 15) | N/A | \$4,333 | N/A | \$4,811 | N/A | \$4,902 | N/A | 11.02 | 1.91 | 15% (+/-) | Yes |
| AFDC-U Adult, Cash (MAX ELIG CD = 17) | 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 |
| AFDC Adult, Medically Needy (MAX ELIG CD = 25) | N/A | \$2,518 | N/A | \$2,690 | N/A | \$2,820 | N/A | 6.82 | 4.82 | 15% (+/-) | Yes |
| Adult, Poverty (MAX ELIG CD = 35) | N/A | \$3,010 | N/A | \$2,974 | N/A | \$3,212 | N/A | -1.21 | 8.00 | 15% (+/-) | Yes |
| Other Adult (MAX ELIG CD = 45) | N/A | \$2,729 | N/A | \$2,901 | N/A | \$2,940 | N/A | 6.32 | 1.31 | 15% (+/-) | Yes |
| 1115 Adult (MAX ELIG CD = 55) | N/A | \$2,067 | N/A | \$2,508 | N/A | \$2,678 | N/A | 21.33 | 6.78 | 15% (+/-) | Yes |
| FFS EXPENDITURES AND USERS BY MAX TYPE OF SERVICE | | | | | | | | | | | |
| IP: Total Medicaid Paid (MAX TOS = 01) | N/A | \$55,297,339 | N/A | \$60,122,655 | N/A | \$54,140,262 | N/A | 8.73 | -9.95 | 15% (+/-) | Yes |
| IP: Number of Users | N/A | 10,512 | N/A | 10,662 | N/A | 10,781 | N/A | 1.43 | 1.12 | 15% (+/-) | Yes |
| IP: Avg Medicaid Paid per User | N/A | \$5,260 | N/A | \$5,639 | N/A | \$5,022 | N/A | 7.20 | -10.90 | 15% (+/-) | Yes |
| IP: Avg Medicaid Covered Days Per User | N/A | 7 | N/A | 7 | N/A | 5 | N/A | -0.27 | -28.30 | 15% (+/-) | No |
| MH Aged: Total Medicaid Paid (MAX TOS = 02) | N/A | \$40,010 | N/A | \$89,791 | N/A | \$138,533 | N/A | 124.40 | 54.28 | 15% (+/-) | No |
| MH Aged: Number of Users | N/A | 71 | N/A | 86 | N/A | 161 | N/A | 21.13 | 87.21 | 15% (+/-) | No |
| MH Aged: Avg Medicaid Paid per User | N/A | \$564 | N/A | \$1,044 | N/A | \$860 | N/A | 85.28 | -17.60 | 15% (+/-) | No |
| IP Psych, Age < 21: Total Medicaid Paid (MAX TOS = 04) | N/A | \$0 | N/A | \$0 | N/A | \$0 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| IP Psych, Age < 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, Age < 21: Avg Medicaid Paid 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 (MAX TOS = 05) | N/A | \$965,478 | N/A | \$945,643 | N/A | \$1,088,044 | N/A | -2.05 | 15.06 | 15% (+/-) | No |
| ICF/MR: Number of Users | N/A | 6 | N/A | 7 | N/A | 6 | N/A | 16.67 | -14.30 | 15% (+/-) | Yes |
| ICF/MR: Avg Medicaid Paid per User | N/A | \$160,913 | N/A | \$135,092 | N/A | \$181,341 | N/A | -16.00 | 34.24 | 15% (+/-) | No |
| NF: Total Medicaid Paid (MAX TOS = 07) | N/A | \$92,773,400 | N/A | \$103,858,944 | N/A | \$107,480,240 | N/A | 11.95 | 3.49 | 15% (+/-) | Yes |
| NF: Number of Users | N/A | 3,605 | N/A | 3,532 | N/A | 3,472 | N/A | -2.02 | -1.70 | 15% (+/-) | Yes |
| NF: Avg Medicaid Paid per User | N/A | \$25,735 | N/A | \$29,405 | N/A | \$30,956 | N/A | 14.26 | 5.28 | 15% (+/-) | Yes |
| Physician: Total Medicaid Paid (MAX TOS = 08) | N/A | \$42,373,401 | N/A | \$44,380,528 | N/A | \$43,870,419 | N/A | 4.74 | -1.15 | 15% (+/-) | Yes |
| Physician: Number of Users | N/A | 107,891 | N/A | 107,183 | N/A | 107,433 | N/A | -0.66 | 0.23 | 15% (+/-) | Yes |
| Physician: Avg Medicaid Paid per User | N/A | \$393 | N/A | \$414 | N/A | \$408 | N/A | 5.43 | -1.38 | 15% (+/-) | Yes |
| Dental: Total Medicaid Paid (MAX TOS = 09) | N/A | \$13,093,194 | N/A | \$13,376,258 | N/A | \$13,096,418 | N/A | 2.16 | -2.09 | 15% (+/-) | Yes |
| Dental: Number of Users | N/A | 46,319 | N/A | 46,369 | N/A | 46,971 | N/A | 0.11 | 1.30 | 15% (+/-) | Yes |
| Dental: Avg Medicaid Paid per User | N/A | \$283 | N/A | \$288 | N/A | \$279 | N/A | 2.05 | -3.35 | 15% (+/-) | Yes |
| Other Practitioner: Total Medicaid Paid (MAX TOS = 10) | N/A | \$5,537,899 | N/A | \$5,281,310 | N/A | \$5,347,007 | N/A | -4.63 | 1.24 | 15% (+/-) | Yes |
| Other Practitioner: Number of Users | N/A | 13,911 | N/A | 14,352 | N/A | 14,582 | N/A | 3.17 | 1.60 | 15% (+/-) | Yes |
| Other Practitioner: Avg Medicaid Paid per User | N/A | \$398 | N/A | \$368 | N/A | \$367 | N/A | -7.56 | -0.35 | 15% (+/-) | Yes |
| Outpatient: Total Medicaid Paid (MAX TOS = 11) | N/A | \$43,199,884 | N/A | \$48,591,411 | N/A | \$54,384,804 | N/A | 12.48 | 11.92 | 15% (+/-) | Yes |
| Outpatient: Number of Users | N/A | 55,086 | N/A | 55,961 | N/A | 54,512 | N/A | 1.59 | -2.59 | 15% (+/-) | Yes |
| Outpatient: Avg Medicaid Paid per User | N/A | \$784 | N/A | \$868 | N/A | \$998 | N/A | 10.72 | 14.90 | 15% (+/-) | Yes |
| Clinic: Total Medicaid Paid (MAX TOS = 12) | N/A | \$10,183,063 | N/A | \$10,286,669 | N/A | \$11,973,804 | N/A | 1.02 | 16.40 | 15% (+/-) | No |
| Clinic: Number of Users | N/A | 25,678 | N/A | 26,570 | N/A | 31,026 | N/A | 3.47 | 16.77 | 15% (+/-) | No |
| Clinic: Avg Medicaid Paid per User | N/A | \$397 | N/A | \$387 | N/A | \$386 | N/A | -2.37 | -0.32 | 15% (+/-) | Yes |
| Home Health: Total Medicaid Paid (MAX TOS = 13) | N/A | \$7,895,631 | N/A | \$7,790,988 | N/A | \$7,081,094 | N/A | -1.33 | -9.11 | 15% (+/-) | Yes |
| Home Health: Number of Users | N/A | 3,551 | N/A | 3,754 | N/A | 3,538 | N/A | 5.72 | -5.75 | 15% (+/-) | Yes |

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State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|---|----------------|---------------|-------------------------|---------------|-------------------------|---------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Home Health: Avg Medicaid Paid per User | N/A | \$2,223 | N/A | \$2,075 | N/A | \$2,001 | N/A | -6.66 | -3.56 | 15% (+/-) | Yes |
| Lab/Xray: Total Medicaid Paid (MAX TOS = 15) | N/A | \$24,601,284 | N/A | \$26,181,383 | N/A | \$32,383,641 | N/A | 6.42 | 23.69 | 15% (+/-) | No |
| Lab/Xray: Number of Users | N/A | 80,120 | N/A | 79,495 | N/A | 82,371 | N/A | -0.78 | 3.62 | 15% (+/-) | Yes |
| Lab/Xray: Avg Medicaid Paid per User | N/A | \$307 | N/A | \$329 | N/A | \$393 | N/A | 7.26 | 19.37 | 15% (+/-) | No |
| Drugs: Total Medicaid Paid (MAX TOS = 16) | N/A | \$141,646,817 | N/A | \$157,295,412 | N/A | \$102,901,570 | N/A | 11.05 | -34.60 | 15% (+/-) | No |
| Drugs: Number of Users | N/A | 105,038 | N/A | 105,491 | N/A | 103,603 | N/A | 0.43 | -1.79 | 15% (+/-) | Yes |
| Drugs: Avg Medicaid Paid per User | N/A | \$1,349 | N/A | \$1,491 | N/A | \$993 | N/A | 10.57 | -33.40 | 15% (+/-) | No |
| Other Services: Total Medicaid Paid (MAX TOS = 19) | N/A | \$94,497,231 | N/A | \$104,789,876 | N/A | \$107,731,538 | N/A | 10.89 | 2.81 | 15% (+/-) | Yes |
| Other Services: Number of Users | N/A | 21,403 | N/A | 23,383 | N/A | 21,279 | N/A | 9.25 | -9.00 | 15% (+/-) | Yes |
| Other Services: Avg Medicaid Paid per User | N/A | \$4,415 | N/A | \$4,481 | N/A | \$5,063 | N/A | 1.50 | 12.97 | 15% (+/-) | Yes |
| Transportation: Total Medicaid Paid (MAX TOS = 26) | N/A | \$5,855,928 | N/A | \$8,943,349 | N/A | \$10,039,420 | N/A | 52.72 | 12.26 | 15% (+/-) | Yes |
| Transportation: Number of Users | N/A | 13,909 | N/A | 15,400 | N/A | 15,598 | N/A | 10.72 | 1.29 | 15% (+/-) | Yes |
| Transportation: Avg Medicaid Paid per User | N/A | \$421 | N/A | \$581 | N/A | \$644 | N/A | 37.94 | 10.83 | 15% (+/-) | Yes |
| Personal Care Services: Total Medicaid Paid (MAX TOS = 30) | N/A | \$12,077,532 | N/A | \$14,932,277 | N/A | \$16,585,276 | N/A | 23.64 | 11.07 | 15% (+/-) | Yes |
| Personal Care Services: Number of Users | N/A | 1,639 | N/A | 1,938 | N/A | 2,007 | N/A | 18.24 | 3.56 | 15% (+/-) | Yes |
| Personal Care Services: Avg Medicaid Paid per User | N/A | \$7,369 | N/A | \$7,705 | N/A | \$8,264 | N/A | 4.56 | 7.25 | 15% (+/-) | Yes |
| Targeted Case Management: Total Medicaid Paid (MAX TOS = 31) | N/A | \$6,912,714 | N/A | \$7,187,395 | N/A | \$7,609,897 | N/A | 3.97 | 5.88 | 15% (+/-) | Yes |
| Targeted Case Management: Number of Users | N/A | 6,105 | N/A | 6,385 | N/A | 6,354 | N/A | 4.59 | -0.49 | 15% (+/-) | Yes |
| Targeted Case Management: Avg Medicaid Paid per User | N/A | \$1,132 | N/A | \$1,126 | N/A | \$1,198 | N/A | -0.59 | 6.40 | 15% (+/-) | Yes |
| Rehabilitation Services: Total Medicaid Paid (MAX TOS = 33) | N/A | \$107,372 | N/A | \$0 | N/A | \$14,663 | N/A | -100.00 | Div by 0 | 15% (+/-) | N/A |
| Rehabilitation Services: Number of Users | N/A | 2 | N/A | 0 | N/A | 6 | N/A | -100.00 | Div by 0 | 15% (+/-) | N/A |
| Rehabilitation Services: Avg Medicaid Paid per User | N/A | \$53,686 | N/A | Div by 0 | N/A | \$2,444 | N/A | Div by 0 | Div by 0 | 15% (+/-) | N/A |
| PT/OT/Speech/Hearing: Total Medicaid Paid (MAX TOS = 34) | N/A | \$1,131,992 | N/A | \$1,249,727 | N/A | \$1,379,298 | N/A | 10.40 | 10.37 | 15% (+/-) | Yes |
| PT/OT/Speech/Hearing: Number of Users | N/A | 3,407 | N/A | 3,708 | N/A | 4,168 | N/A | 8.84 | 12.41 | 15% (+/-) | Yes |
| PT/OT/Speech/Hearing: Avg Medicaid Paid per User | N/A | \$332 | N/A | \$337 | N/A | \$331 | N/A | 1.44 | -1.81 | 15% (+/-) | Yes |
| Hospice: Total Medicaid Paid (MAX TOS = 35) | N/A | \$501,869 | N/A | \$534,585 | N/A | \$744,333 | N/A | 6.52 | 39.24 | 15% (+/-) | No |
| Hospice: Number of Users | N/A | 98 | N/A | 77 | N/A | 101 | N/A | -21.40 | 31.17 | 15% (+/-) | No |
| Hospice: Avg Medicaid Paid per User | N/A | \$5,121 | N/A | \$6,943 | N/A | \$7,370 | N/A | 35.57 | 6.15 | 15% (+/-) | Yes |
| Durable Medical Equipment: Total Medicaid Paid (MAX TOS = 51) | N/A | \$7,968,952 | N/A | \$8,564,563 | N/A | \$10,330,468 | N/A | 7.47 | 20.62 | 15% (+/-) | No |
| Durable Medical Equipment: Number of Users | N/A | 18,922 | N/A | 19,159 | N/A | 21,767 | N/A | 1.25 | 13.61 | 15% (+/-) | Yes |
| Durable Medical Equipment: Avg Medicaid Paid per User | N/A | \$421 | N/A | \$447 | N/A | \$475 | N/A | 6.15 | 6.17 | 15% (+/-) | Yes |
| Residential Care: Total Medicaid Paid (MAX TOS = 52) | N/A | \$2,235,971 | N/A | \$1,765,508 | N/A | \$2,135,088 | N/A | -21.00 | 20.93 | 15% (+/-) | No |
| Residential Care: Number of Users | N/A | 254 | N/A | 62 | N/A | 67 | N/A | -75.60 | 8.07 | 15% (+/-) | Yes |
| Residential Care: Avg Medicaid Paid per User | N/A | \$8,803 | N/A | \$28,476 | N/A | \$31,867 | N/A | 223.50 | 11.91 | 15% (+/-) | Yes |
| Psych Services: Total Medicaid Paid (MAX TOS = 53) | N/A | \$167,109,638 | N/A | \$184,579,521 | N/A | \$200,753,532 | N/A | 10.45 | 8.76 | 15% (+/-) | Yes |
| Psych Services: Number of Users | N/A | 32,538 | N/A | 34,535 | N/A | 36,369 | N/A | 6.14 | 5.31 | 15% (+/-) | Yes |
| Psych Services: Avg Medicaid Paid per User | N/A | \$5,136 | N/A | \$5,345 | N/A | \$5,520 | N/A | 4.07 | 3.28 | 15% (+/-) | Yes |
| Adult Day Care: Total Medicaid Paid (MAX 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 Paid 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 |
| AVERAGE FFS MEDICAID AMOUNT PAID PER FFS ENROLLEE BY SELECTED MAX TYPE OF SERVICE | | | | | | | | | | | |
| Inpatient Hospital (MAX TOS = 01) | N/A | \$366 | N/A | \$403 | N/A | \$365 | N/A | 10.13 | -9.49 | 15% (+/-) | Yes |
| Aged | N/A | \$238 | N/A | \$239 | N/A | \$254 | N/A | 0.59 | 6.10 | 15% (+/-) | Yes |

2004-2006 MAX PSF Validation Table
State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|--|----------------|------------|-------------------------|------------|-------------------------|------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Disabled | N/A | \$930 | N/A | \$1,046 | N/A | \$907 | N/A | 12.39 | -13.30 | 15% (+/-) | Yes |
| Child | N/A | \$194 | N/A | \$205 | N/A | \$216 | N/A | 5.81 | 5.21 | 15% (+/-) | Yes |
| Adult | N/A | \$410 | N/A | \$446 | N/A | \$365 | N/A | 8.97 | -18.30 | 15% (+/-) | No |
| ILTC (MAX TOS = 02,04,05,07) | N/A | \$621 | N/A | \$704 | N/A | \$733 | N/A | 13.30 | 4.16 | 15% (+/-) | Yes |
| Aged | N/A | \$9,341 | N/A | \$10,370 | N/A | \$10,472 | N/A | 11.02 | 0.98 | 15% (+/-) | Yes |
| Disabled | N/A | \$480 | N/A | \$540 | N/A | \$605 | N/A | 12.58 | 11.93 | 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 | 22.45 | -23.10 | 15% (+/-) | No |
| Drugs (MAX TOS = 16) | N/A | \$938 | N/A | \$1,056 | N/A | \$694 | N/A | 12.49 | -34.20 | 15% (+/-) | No |
| Aged | N/A | \$2,950 | N/A | \$3,099 | N/A | \$441 | N/A | 5.05 | -85.80 | 15% (+/-) | No |
| Disabled | N/A | \$3,523 | N/A | \$3,786 | N/A | \$1,994 | N/A | 7.47 | -47.30 | 15% (+/-) | No |
| Child | N/A | \$232 | N/A | \$253 | N/A | \$274 | N/A | 9.03 | 8.44 | 15% (+/-) | Yes |
| Adult | N/A | \$598 | N/A | \$715 | N/A | \$769 | N/A | 19.57 | 7.58 | 15% (+/-) | Yes |
| All Other Services | N/A | \$2,982 | N/A | \$3,292 | N/A | \$3,555 | N/A | 10.41 | 8.00 | 15% (+/-) | Yes |
| Aged | N/A | \$4,392 | N/A | \$5,007 | N/A | \$5,423 | N/A | 14.00 | 8.32 | 15% (+/-) | Yes |
| Disabled | N/A | \$10,593 | N/A | \$11,252 | N/A | \$11,867 | N/A | 6.23 | 5.46 | 15% (+/-) | Yes |
| Child | N/A | \$1,981 | N/A | \$2,075 | N/A | \$2,159 | N/A | 4.75 | 4.08 | 15% (+/-) | Yes |
| Adult | N/A | \$1,368 | N/A | \$1,592 | N/A | \$1,773 | N/A | 16.41 | 11.37 | 15% (+/-) | Yes |
| PERCENT OF FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE | | | | | | | | | | | |
| % FFS Enrollees with IP Claims (MAX TOS = 01) | N/A | 6.96 | N/A | 7.15 | N/A | 7.27 | N/A | 2.74 | 1.63 | 15% (+/-) | Yes |
| Aged | N/A | 17.01 | N/A | 17.28 | N/A | 17.44 | N/A | 1.57 | 0.92 | 15% (+/-) | Yes |
| Disabled | N/A | 13.99 | N/A | 13.96 | N/A | 14.11 | N/A | -0.23 | 1.10 | 15% (+/-) | Yes |
| Child | N/A | 2.91 | N/A | 3.00 | N/A | 3.08 | N/A | 3.38 | 2.36 | 15% (+/-) | Yes |
| Adult | N/A | 7.97 | N/A | 8.19 | N/A | 8.18 | N/A | 2.71 | -0.16 | 15% (+/-) | Yes |
| % FFS Enrollees with ILTC Claims (MAX TOS = 02,04,05,07) | N/A | 2.44 | N/A | 2.43 | N/A | 2.45 | N/A | -0.30 | 0.92 | 15% (+/-) | Yes |
| Aged | N/A | 34.84 | N/A | 33.95 | N/A | 32.95 | N/A | -2.55 | -2.95 | 15% (+/-) | Yes |
| Disabled | N/A | 2.65 | N/A | 2.60 | N/A | 2.89 | N/A | -2.14 | 11.33 | 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 | 0.04 | N/A | 0.05 | N/A | 0.03 | N/A | 33.86 | -37.70 | 15% (+/-) | No |
| % FFS Enrollees with Drug Claims (MAX TOS = 16) | N/A | 69.59 | N/A | 70.79 | N/A | 69.88 | N/A | 1.73 | -1.29 | 15% (+/-) | Yes |
| Aged | N/A | 92.13 | N/A | 91.10 | N/A | 75.30 | N/A | -1.13 | -17.30 | 15% (+/-) | No |
| Disabled | N/A | 89.23 | N/A | 89.18 | N/A | 82.38 | N/A | -0.05 | -7.63 | 15% (+/-) | Yes |
| Child | N/A | 63.65 | N/A | 64.13 | N/A | 64.52 | N/A | 0.75 | 0.62 | 15% (+/-) | Yes |
| Adult | N/A | 66.50 | N/A | 68.98 | N/A | 70.89 | N/A | 3.72 | 2.78 | 15% (+/-) | Yes |
| % FFS Enrollees with All Other Claims | N/A | 84.47 | N/A | 85.37 | N/A | 86.24 | N/A | 1.07 | 1.02 | 15% (+/-) | Yes |
| Aged | N/A | 87.50 | N/A | 87.20 | N/A | 89.59 | N/A | -0.34 | 2.74 | 15% (+/-) | Yes |
| Disabled | N/A | 93.41 | N/A | 93.22 | N/A | 93.83 | N/A | -0.21 | 0.66 | 15% (+/-) | Yes |
| Child | N/A | 88.52 | N/A | 88.50 | N/A | 88.78 | N/A | -0.02 | 0.32 | 15% (+/-) | Yes |
| Adult | N/A | 75.73 | N/A | 78.12 | N/A | 79.43 | N/A | 3.16 | 1.68 | 15% (+/-) | Yes |
| Avg # IP Days per FFS User | N/A | 7 | N/A | 7 | N/A | 5 | N/A | -0.27 | -28.30 | 15% (+/-) | No |
| Aged | N/A | 7 | N/A | 7 | N/A | 0 | N/A | -0.36 | -93.80 | 15% (+/-) | No |
| Disabled | N/A | 9 | N/A | 10 | N/A | 6 | N/A | 7.37 | -37.30 | 15% (+/-) | No |
| Child | N/A | 6 | N/A | 6 | N/A | 6 | N/A | -5.90 | 5.80 | 15% (+/-) | Yes |

2004-2006 MAX PSF Validation Table
State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|--|----------------|---------------|-------------------------|---------------|-------------------------|---------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Adult | N/A | 5 | N/A | 5 | N/A | 5 | N/A | -6.43 | -4.34 | 15% (+/-) | Yes |
| Avg # ILTC Days per FFS User | N/A | 219 | N/A | 216 | N/A | 213 | N/A | -1.24 | -1.54 | 15% (+/-) | Yes |
| Aged | N/A | 235 | N/A | 232 | N/A | 232 | N/A | -1.29 | 0.01 | 15% (+/-) | Yes |
| Disabled | N/A | 126 | N/A | 131 | N/A | 120 | N/A | 4.29 | -8.94 | 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 | 18 | N/A | 15 | N/A | 19 | N/A | -19.40 | 29.74 | 15% (+/-) | No |
| HIGH-COST FFS ENROLLEES AND EXPENDITURES BY SELECTED MAX TYPE OF SERVICE | | | | | | | | | | | |
| Number of FFS Enrollees with FFS Medicaid Paid > \$1,000,000 | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | N/A | N/A |
| Number of FFS Enrollees with FFS Medicaid Paid > \$500,000 | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | N/A | N/A |
| Inpatient Hospital (MAX TOS = 01) > \$500,000 | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | N/A | N/A |
| ILTC (MAX TOS = 02,04,05,07) > \$200,000 | N/A | N/A | N/A | N/A | N/A | 0 | N/A | N/A | N/A | N/A | N/A |
| Drugs (MAX TOS = 16) > \$200,000 | N/A | N/A | N/A | N/A | N/A | 2 | N/A | N/A | N/A | N/A | N/A |
| All Other Services > \$200,000 | N/A | N/A | N/A | N/A | N/A | 28 | N/A | N/A | N/A | N/A | N/A |
| Maximum FFS Medicaid Paid | N/A | N/A | N/A | N/A | N/A | \$452,935 | N/A | N/A | N/A | N/A | N/A |
| Inpatient Hospital (MAX TOS = 01) | N/A | N/A | N/A | N/A | N/A | \$356,049 | N/A | N/A | N/A | N/A | N/A |
| ILTC (MAX TOS = 02,04,05,07) | N/A | N/A | N/A | N/A | N/A | \$189,275 | N/A | N/A | N/A | N/A | N/A |
| Drugs (MAX TOS = 16) | N/A | N/A | N/A | N/A | N/A | \$342,560 | N/A | N/A | N/A | N/A | N/A |
| All Other Services | N/A | N/A | N/A | N/A | N/A | \$317,414 | N/A | N/A | N/A | N/A | N/A |
| FFS EXPENDITURES AND USERS BY MAX PROGRAM TYPE | | | | | | | | | | | |
| FP: Total Medicaid Paid (PGM TYPE = 2) | N/A | \$2,558,521 | N/A | \$2,402,150 | N/A | \$2,487,489 | N/A | -6.11 | 3.55 | 15% (+/-) | Yes |
| FP: Number of Users | N/A | 12,359 | N/A | 11,861 | N/A | 11,845 | N/A | -4.03 | -0.14 | 15% (+/-) | Yes |
| FP: Avg Medicaid Paid per User | N/A | \$207 | N/A | \$203 | N/A | \$210 | N/A | -2.17 | 3.69 | 15% (+/-) | Yes |
| RHC: Total Medicaid Paid (PGM TYPE = 3) | N/A | \$4,551,378 | N/A | \$4,742,943 | N/A | \$4,853,458 | N/A | 4.21 | 2.33 | 15% (+/-) | Yes |
| RHC: Number of Users | N/A | 16,012 | N/A | 16,413 | N/A | 16,349 | N/A | 2.50 | -0.39 | 15% (+/-) | Yes |
| RHC: Avg Medicaid Paid per User | N/A | \$284 | N/A | \$289 | N/A | \$297 | N/A | 1.66 | 2.73 | 15% (+/-) | Yes |
| FQHC: Total Medicaid Paid (PGM TYPE = 4) | N/A | \$4,572,482 | N/A | \$4,711,036 | N/A | \$5,874,679 | N/A | 3.03 | 24.70 | 15% (+/-) | No |
| FQHC: Number of Users | N/A | 9,784 | N/A | 9,853 | N/A | 14,640 | N/A | 0.71 | 48.58 | 15% (+/-) | No |
| FQHC: Avg Medicaid Paid per User | N/A | \$467 | N/A | \$478 | N/A | \$401 | N/A | 2.31 | -16.10 | 15% (+/-) | No |
| IHS: Total Medicaid Paid (PGM 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 Paid 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 (PGM TYPE = 6 and 7) | N/A | \$117,236,044 | N/A | \$125,695,754 | N/A | \$135,725,433 | N/A | 7.22 | 7.98 | 15% (+/-) | Yes |
| Section 1915(c) Waiver: Number of Users | N/A | 4,230 | N/A | 4,546 | N/A | 4,949 | N/A | 7.47 | 8.87 | 15% (+/-) | Yes |
| Section 1915(c) Waiver: Avg Medicaid Paid per User | N/A | \$27,715 | N/A | \$27,650 | N/A | \$27,425 | N/A | -0.24 | -0.81 | 15% (+/-) | Yes |
| FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS | | | | | | | | | | | |
| Total FFS CLTC Medicaid Paid (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | \$148,419,019 | N/A | \$159,391,803 | N/A | N/A | 7.39 | 15% (+/-) | Yes |
| Number of CLTC Users (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | 8,437 | N/A | 8,718 | N/A | N/A | 3.33 | 15% (+/-) | Yes |
| Avg FFS CLTC Medicaid Paid per User (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | \$17,591 | N/A | \$18,283 | N/A | N/A | 3.93 | 15% (+/-) | Yes |
| Aged | N/A | N/A | N/A | \$10,956 | N/A | \$9,714 | N/A | N/A | -11.30 | 15% (+/-) | Yes |
| Disabled | N/A | N/A | N/A | \$28,293 | N/A | \$28,916 | N/A | N/A | 2.20 | 15% (+/-) | Yes |
| Child | N/A | N/A | N/A | \$5,589 | N/A | \$6,279 | N/A | N/A | 12.35 | 15% (+/-) | Yes |
| Adult | N/A | N/A | N/A | \$1,462 | N/A | \$1,493 | N/A | N/A | 2.08 | 15% (+/-) | Yes |
| % FFS Enrollees with CLTC Claims (Excludes CLTC FLAG = 16-20) | N/A | N/A | N/A | 5.66 | N/A | 5.88 | N/A | N/A | 3.85 | 15% (+/-) | Yes |

2004-2006 MAX PSF Validation Table
State: VT

| Measure | Expected Range | 2004 Value | 2004 Value Within Range | 2005 Value | 2005 Value Within Range | 2006 Value | 2006 Value Within Range | % Change 2004 - 2005 | % Change 2005 - 2006 | Cross Year Expected Range | Cross Year Within Range |
|--|----------------|------------|-------------------------|---------------|-------------------------|---------------|-------------------------|----------------------|----------------------|---------------------------|-------------------------|
| Aged | N/A | N/A | N/A | 19.20 | N/A | 21.94 | N/A | N/A | 14.28 | 15% (+/-) | Yes |
| Disabled | N/A | N/A | N/A | 21.31 | N/A | 21.98 | N/A | N/A | 3.18 | 15% (+/-) | Yes |
| Child | N/A | N/A | N/A | 2.61 | N/A | 2.32 | N/A | N/A | -11.10 | 15% (+/-) | Yes |
| Adult | N/A | N/A | N/A | 1.41 | N/A | 1.32 | N/A | N/A | -6.35 | 15% (+/-) | Yes |
| Total FFS CLTC Medicaid Paid (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | N/A | N/A | \$125,695,754 | N/A | \$135,725,433 | N/A | N/A | 7.98 | 15% (+/-) | Yes |
| Number of CLTC Users (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | N/A | N/A | 4,546 | N/A | 4,949 | N/A | N/A | 8.87 | 15% (+/-) | Yes |
| Avg FFS CLTC Medicaid Paid per User (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | N/A | N/A | \$27,650 | N/A | \$27,425 | N/A | N/A | -0.81 | 15% (+/-) | Yes |
| Aged | N/A | N/A | N/A | \$11,782 | N/A | \$10,186 | N/A | N/A | -13.50 | 15% (+/-) | Yes |
| Disabled | N/A | N/A | N/A | \$38,584 | N/A | \$39,403 | N/A | N/A | 2.12 | 15% (+/-) | Yes |
| Child | N/A | N/A | N/A | \$17,592 | N/A | \$23,896 | N/A | N/A | 35.84 | 15% (+/-) | No |
| Adult | N/A | N/A | N/A | \$2,784 | N/A | \$3,975 | N/A | N/A | 42.79 | 15% (+/-) | No |
| % FFS Enrollees with CLTC Claims (Section 1915(c) Claims Only - Excludes CLTC FLAG = 11-20) | N/A | N/A | N/A | 3.05 | N/A | 3.34 | N/A | N/A | 9.42 | 15% (+/-) | Yes |
| Aged | N/A | N/A | N/A | 16.96 | N/A | 19.95 | N/A | N/A | 17.62 | 15% (+/-) | No |
| Disabled | N/A | N/A | N/A | 13.52 | N/A | 14.05 | N/A | N/A | 3.90 | 15% (+/-) | Yes |
| Child | N/A | N/A | N/A | 0.42 | N/A | 0.27 | N/A | N/A | -34.00 | 15% (+/-) | No |
| Adult | N/A | N/A | N/A | 0.13 | N/A | 0.15 | N/A | N/A | 14.29 | 15% (+/-) | Yes |