

1999-2001 MAX RX Validation Table
State: KY

Measure	Expected Range	1999		2000		2001		% Change 1999-2000	% Change 2000 - 2001	Cross Year Change Within Expected Range (+/-15%)
		Value	Within Range	Value	Within Range	Value	Within Range			
All RX Claims										
Total Number of Claims	N/A	11,789,968	N/A	12,990,641	N/A	13,995,933	N/A	10.18	7.74	Yes
	N/A	13.61	N/A	10.73	N/A	3.88	N/A	-21.16	-63.87	No
% Encounter Claims *	N/A	0.00	N/A	0.00	N/A	0.00	N/A	N/A	N/A	N/A
Total FFS Claims	N/A	10,185,235	N/A	11,596,640	N/A	13,453,353	N/A	13.86	16.01	No
	N/A	1.97	N/A	2.10	N/A	2.18	N/A	6.76	3.74	Yes
% Adjusted Claims	> 1%	.	Yes	99.98	Yes	100.00	Yes	N/A	0.02	Yes
% Standard Adjustments	N/A	\$39	N/A	\$42	N/A	\$44	N/A	5.63	5.19	Yes
Aver. Amt. Pd Adjust. (include \$0)	FFS Claims (Type of Claim=1)									
Total Number of Claims	N/A	10,185,235	N/A	11,596,640	N/A	13,453,353	N/A	13.86	16.01	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	N/A	N/A	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$15-\$60	\$38	Yes	\$43	Yes	\$47	Yes	13.62	9.22	Yes
% Claims with TPL	>0 - 15	0.64	Yes	0.77	Yes	0.88	Yes	20.22	13.72	Yes
Aver. TPL Paid for claims with TPL	N/A	\$37	N/A	\$42	N/A	\$47	N/A	11.28	13.32	Yes
% Family Planning Claims (program type=2)	N/A	0.46	N/A	0.50	N/A	0.53	N/A	6.98	5.68	N/A
% Drug Claims (TOS 16)	95-99	100.00	No	100.00	No	100.00	No	0.00	0.00	Yes
% DME Claims (TOS 51)	>0 - 6	0.00	No	0.00	No	0.00	No	N/A	N/A	N/A
% Drug Claims with Quantity	>98	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	N/A
% Drug Claims with Days Supply	>98	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with HICL	98-100	99.98	Yes	100.00	Yes	100.00	Yes	0.02	0.00	Yes
% Claims with Medispan	98-100	94.38	No	98.29	Yes	99.45	Yes	4.14	1.19	Yes
% Claims with AHFS	98-100	99.98	Yes	100.00	Yes	100.00	Yes	0.02	0.00	Yes
% Claims with Generic (GTC)	98-100	99.98	Yes	100.00	Yes	100.00	Yes	0.02	0.00	Yes
% Claims with GC3	98-100	99.98	Yes	100.00	Yes	100.00	Yes	0.02	0.00	Yes
NDC Configuration Indicator										Yes
	N/A	79.79	N/A	80.08	N/A	79.46	N/A	0.36	-0.78	Yes
% Prescription (codes 0-3)	N/A	20.16	N/A	19.89	N/A	20.52	N/A	-1.36	3.19	Yes
% Products (codes 4-6)	N/A	0.02	N/A	0.02	N/A	0.01	N/A	-23.35	-56.69	No
% Claims with Smart Key	98-100	99.98	Yes	100.00	Yes	100.00	Yes	0.02	0.00	Yes
% OTC-Drug Class	N/A	12.22	N/A	11.04	N/A	10.00	N/A	-9.61	-9.42	Yes
% Prescription-Drug Class	N/A	87.76	N/A	88.95	N/A	90.00	N/A	1.36	1.17	Yes
% Multiple Source (Code Y)	N/A	50.37	N/A	50.05	N/A	48.56	N/A	-0.65	-2.97	Yes
% Single Source (Code N)	N/A	29.69	N/A	35.93	N/A	41.15	N/A	21.02	14.53	Yes

* Cross year change for encounter claims is expected to be +15%, no negative.

** Capitation Claims might be found in either in the All OT Claims or the FFS Non-Crossover section of the table.