

1999-2001 MAX LT Validation Table

State: NM

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 LT Claims										
Total Number of Claims	N/A	90,725	N/A	98,585	N/A	115,010	N/A	8.66	16.66	No
'	N/A	0.00	N/A	0.00	N/A	0.00	N/A	N/A	N/A	N/A
% Encounter Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	N/A	N/A	N/A
Total Supplemental Claim	N/A	90,725	N/A	98,585	N/A	115,010	N/A	8.66	16.66	No
% Crossover	5-20	8.12	Yes	7.88	Yes	6.24	Yes	-2.97	-20.90	No
% Standard Adjustment	> 1%	9.37	Yes	6.82	Yes	14.34	Yes	-27.24	110.36	No
Aver. Amt. Pd Adjust. (including S)	N/A	.	N/A	94.33	N/A	26.74	N/A	N/A	-71.65	No
Non-Crossover Claims (Type of Claim=1 Crossover Claim Indicator=0)										
Total Number of Claims	N/A	\$1,060	N/A	\$2,386	N/A	\$2,259	N/A	125.05	-5.33	Yes
% Claims with> \$0 Paic	N/A	83,355	N/A	90,814	N/A	107,839	N/A	8.95	18.75	No
% Claims with< \$0 Paic	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Average Medicaid Amount Paid Per Covered Day (claims with >\$0 paid)	0	0.00	Yes	0.00	Yes	0.00	Yes	N/A	N/A	N/A
NF (TOS 07)										
ICF/MR (TOS 05)	\$50-\$100	\$92	Yes	\$95	Yes	\$101	No	3.22	5.97	Yes
Aged/MH (TOS 02)	N/A	\$162	N/A	\$185	N/A	\$198	N/A	14.17	7.03	Yes
IP Psych. < 21 (TOS 04)	N/A	.	N/A	.	N/A	.	N/A	N/A	N/A	N/A
% NF (TOS 07)	N/A	\$198	N/A	\$196	N/A	\$199	N/A	-0.71	1.23	Yes
% NF claims with NF Covered Day:	75-99	86.22	Yes	87.59	Yes	88.13	Yes	1.59	0.62	Yes
Avg days for NF claims with Covered Days	N/A	99.10	N/A	98.22	N/A	99.04	N/A	-0.89	0.83	Yes
% ICF/MR (TOS 05)	N/A	23	N/A	21	N/A	20	N/A	-8.39	-7.98	Yes
% ICF/MR claims with ICF/MR Covered Days	>0-20	5.69	Yes	5.64	Yes	6.30	Yes	-1.00	11.75	Yes
Avg days for ICF/MR claims with Coverec Days	N/A	93.11	N/A	92.42	N/A	92.79	N/A	-0.74	0.40	Yes
% Aged/MH (TOS 02)	N/A	22	N/A	20	N/A	16	N/A	-6.82	-23.53	No
% Aged/MH claims with Aged/MH Coverec Days	>0-10	0.00	No	0.00	No	0.00	No	N/A	N/A	N/A
Avg days for Aged/MH claims with Coverec Days	N/A	.	N/A	.	N/A	.	N/A	N/A	N/A	N/A
% IP Psych. < 21 (TOS 04)	N/A	.	N/A	.	N/A	.	N/A	N/A	N/A	N/A
% IP Psych. < 21 claims with IP Psych Covered Days	>0-5	8.09	No	6.78	No	5.57	No	-16.20	-17.78	No
Avg days for IP Psych. < 21 claims with Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with Leave Day:	N/A	18	N/A	15	N/A	15	N/A	-14.82	-3.96	Yes
% Claims with DX	1-20	2.78	Yes	2.83	Yes	2.19	Yes	1.64	-22.57	N/A
	95-100	0.32	No	0.42	No	0.54	No	32.97	29.08	No

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

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		Value	Within Range	Value	Within Range	Value	Within Range			
% Claims with DX, where length=3	5-30	0.76	No	0.00	No	4.11	No	-100.00	N/A	N/A
% Claims with DX, where length=4	15-75	7.22	No	4.46	No	7.53	No	-38.24	68.86	No
% Claims with DX, where length=5	25-70	92.02	No	95.54	No	88.36	No	3.83	-7.52	Yes
Patient Status										
% Home	1-5	0.80	No	0.87	No	0.69	No	9.48	-20.57	No
% Still a Patient	8-98	96.95	Yes	97.03	Yes	97.60	Yes	0.08	0.59	Yes
% Died	>0-5	1.13	Yes	1.02	Yes	0.90	Yes	-9.49	-11.69	Yes
FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)										
Total Number of Claims	N/A	7,370	N/A	7,771	N/A	7,171	N/A	5.44	-7.72	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	N/A	N/A	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	N/A	\$292	N/A	\$302	N/A	\$388	N/A	3.54	28.44	No
% NF (TOS 07)	75-99	99.80	No	99.85	No	99.83	No	0.05	-0.01	N/A
% ICF/MR (TOS 05)	>0-20	0.03	Yes	0.00	No	0.00	No	-100.00	N/A	N/A
% Aged/MH (TOS 02)	>0-10	0.14	Yes	0.14	Yes	0.15	Yes	4.32	8.37	Yes
% IP Psych. < 21 (TOS 04)	>0-5	0.04	Yes	0.01	Yes	0.01	Yes	-68.39	8.37	N/A
% Claims with DX	95-100	0.00	No	0.00	No	3.15	No	N/A	N/A	N/A
% Claims with DX, where length=3	5-30	.	No	.	No	12.39	Yes	N/A	N/A	N/A
% Claims with DX, where length=4	15-75	.	No	.	No	46.02	Yes	N/A	N/A	N/A
% Claims with DX, where length=5	25-70	.	No	.	No	41.15	Yes	N/A	N/A	N/A
Patient Status										
% Home	1-5	0.00	No	0.00	No	0.21	No	N/A	N/A	N/A
% Still a Patient	8-98	0.00	No	0.00	No	1.85	No	N/A	N/A	N/A
% Died	>0-5	0.00	No	0.00	No	0.06	Yes	N/A	N/A	N/A

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