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2003-2005 MAX IP VALIDATION TABLE  
STATE: ND

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
<b>All IP Claims</b>										
Total Number of Claims	N/A	9,843	N/A	10,083	N/A	11,222	N/A	2.44	11.30	Yes
% Encounter Claims	N/A	0.68	N/A	0.77	N/A	1.00	N/A	13.65	29.02	No
% 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	9,776	N/A	10,005	N/A	11,110	N/A	2.34	11.04	Yes
% Crossover	5-20	2.77	No	6.54	Yes	13.19	Yes	135.80	101.70	No
% Adjusted Claims	N/A	6.66	N/A	6.40	N/A	5.80	N/A	-3.94	-9.38	Yes
% Standard Adjustments	> 1%	78.19	Yes	73.59	Yes	74.69	Yes	-5.88	1.49	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$3,954	N/A	\$5,486	N/A	\$6,052	N/A	38.75	10.32	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	58	N/A	N/A	N/A	N/A
<b>FFS Non-Crossover Claims (Type of Claim=1, Crossover Claim Indicator=0)</b>										
Total Number of Claims	N/A	9,505	N/A	9,351	N/A	9,645	N/A	-1.62	3.14	Yes
% Claims with> \$0 Paid	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$2000 - \$7000	\$3,652	Yes	\$3,881	Yes	\$4,380	Yes	6.26	12.87	Yes
Aver. Medicaid Amt Paid per Covered Day (>\$0 paid and >0 days claims)	N/A	\$855	N/A	\$902	N/A	\$949	N/A	5.47	5.26	Yes
% Claims with TPL	>0 - 10	12.18	No	8.95	Yes	6.53	Yes	-26.50	-27.00	No
Aver. TPL Paid for claims with TPL	N/A	\$3,614	N/A	\$3,434	N/A	\$2,347	N/A	-4.98	-31.60	No
% Claims with UB-92 Accommodation Codes	95-100	99.95	Yes	99.73	Yes	100.00	Yes	-0.22	0.27	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.08	Yes	1.08	Yes	1.09	Yes	0.10	0.39	Yes
% Claims with UB-92 Ancillary Codes	95-100	96.48	Yes	95.96	Yes	96.28	Yes	-0.54	0.33	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	9.04	Yes	8.72	Yes	8.63	Yes	-3.57	-1.04	Yes
Average LOS	2-<8	4.27	Yes	4.29	Yes	4.60	Yes	0.53	7.24	Yes
Average Covered Days (> 0 day)	2-<8	4.27	Yes	4.29	Yes	4.61	Yes	0.40	7.60	Yes
% Begin Date = Admit Date	95-100	99.62	Yes	99.68	Yes	99.68	Yes	0.06	0.00	Yes
% IP Claims (MAX TOS 01)	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Family Planning Claims (pgm type=2)	>0-5	0.86	Yes	1.28	Yes	1.23	Yes	48.75	-3.86	Yes
% Claims with PDX	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
Average Number of DX Codes (at least 1 DX)	>=2	4.40	Yes	4.35	Yes	4.23	Yes	-1.14	-2.85	Yes
% Claims with PDX, where length=3	5-30	9.52	Yes	8.39	Yes	8.29	Yes	-11.80	-1.20	Yes
% Claims with PDX, where length=4	15-75	24.20	Yes	23.74	Yes	21.93	Yes	-1.89	-7.63	Yes
% Claims with PDX, where length=5	25-70	66.28	Yes	67.86	Yes	69.78	Yes	2.39	2.82	Yes
% Claims with a procedure code	35-70	54.40	Yes	55.40	Yes	54.35	Yes	1.82	-1.89	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	2.08	Yes	1.83	Yes	2.03	Yes	-12.30	10.97	Yes
% Claims with Procedures that have CPT-4 Indicator	N/A	0.08	N/A	0.08	N/A	0.02	N/A	-0.17	-75.30	No
% Claims with Procedures that have ICD-9 Indicator	N/A	99.92	N/A	99.85	N/A	99.98	N/A	-0.08	0.14	Yes
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes

2003-2005 MAX IP VALIDATION TABLE  
STATE: ND

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% Claims with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with DRG	>=90	82.69	No	81.73	No	80.95	No	-1.16	-0.96	Yes
% Claims Maternal Delivery Indicator	N/A	19.57	N/A	21.09	N/A	22.07	N/A	7.77	4.67	Yes
% Claims Newborn Delivery Indicator (only for separate infant delivery claims using mother's ID)	N/A	23.16	N/A	25.79	N/A	27.09	N/A	11.39	5.03	Yes
<b>Patient Status</b>										
% Home	75-90	89.85	Yes	91.44	No	93.85	No	1.78	2.63	Yes
% Transferred	1-10	8.40	Yes	7.39	Yes	4.52	Yes	-12.00	-38.80	No
% Still a Patient	>0 - 2	0.64	Yes	0.50	Yes	0.98	Yes	-21.70	95.97	No
% Died	>0 - 3	1.12	Yes	0.66	Yes	0.64	Yes	-40.50	-3.05	Yes
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	271	N/A	654	N/A	1,465	N/A	141.30	124.00	No
% Claims with > \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with < \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	N/A	\$915	N/A	\$851	N/A	\$1,832	N/A	-6.93	115.30	No
% Claims with TPL	N/A	1.48	N/A	52.14	N/A	83.07	N/A	3,433.00	59.32	No
Aver. TPL Paid -claims with TPL	N/A	\$1,154	N/A	\$4,813	N/A	\$5,857	N/A	316.90	21.69	No
% Claims with UB-92 Accommodation Codes	95-100	0.37	No	60.86	No	93.11	No	16,392.00	52.99	No
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.00	No	1.11	Yes	1.14	Yes	10.80	2.89	Yes
% Claims with UB-92 Ancillary Codes	95-100	0.37	No	60.86	No	92.83	No	16,392.00	52.54	No
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	6.00	Yes	11.78	Yes	12.44	Yes	96.27	5.66	Yes
Average LOS	2-<8	7.11	Yes	6.20	Yes	5.88	Yes	-12.80	-5.15	Yes
% Begin Date = Admit Date	95-100	100.00	Yes	99.69	Yes	99.39	Yes	-0.31	-0.31	Yes
% Claims with IP TOS	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with DX	98-100	0.37	No	60.86	No	93.11	No	16,392.00	52.99	No
Average Number of DX Codes (at least 1 DX)	>=2	8.00	Yes	7.21	Yes	7.34	Yes	-9.86	1.73	Yes
% Claims with PDX, where length=3	5-30	0.00	No	10.80	Yes	10.34	Yes	Div by 0	-4.32	Yes
% Claims with PDX, where length=4	15-75	100.00	No	40.70	Yes	34.97	Yes	-59.30	-14.10	Yes
% Claims with PDX, where length=5	25-70	0.00	No	48.49	Yes	54.69	Yes	Div by 0	12.78	Yes
% Claims with a procedure code	35-70	0.37	No	28.90	No	46.48	Yes	7,732.00	60.85	No
Average Number of Procedures for claims with at least 1 procedure code	>1	1.00	No	2.43	Yes	2.55	Yes	143.40	4.62	Yes
% Claims with Procedures that have CPT-4 Indicator	N/A	0.00	N/A	0.00	N/A	0.15	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have ICD-9 Indicator	N/A	100.00	N/A	100.00	N/A	99.85	N/A	0.00	-0.15	Yes
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	N/A	Div by 0	N/A	Div by 0	N/A	100.00	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with DRG	>=90	0.37	No	57.65	No	83.82	No	15,522.00	45.41	No

2003-2005 MAX LT VALIDATION TABLE  
STATE: ND

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
<b>All LT Claims</b>										
Total Number of Claims	N/A	53,323	N/A	57,972	N/A	56,681	N/A	8.72	-2.23	Yes
% Encounter Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	-100.00	No
% 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	53,323	N/A	57,970	N/A	56,681	N/A	8.72	-2.22	Yes
% Crossover	5-20	0.04	No	1.18	No	2.68	No	2,768.00	126.50	No
% Adjusted Claims	> 1%	17.47	Yes	24.53	Yes	24.16	Yes	40.39	-1.49	Yes
% Standard Adjustments	N/A	98.75	N/A	99.34	N/A	50.26	N/A	0.59	-49.40	No
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$3,561	N/A	\$4,488	N/A	\$4,152	N/A	26.05	-7.50	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	51	N/A	N/A	N/A	N/A
<b>FFS Non-Crossover Claims (Type of Claim=1 Crossover Claim Indicator=0)</b>										
Total Number of Claims	N/A	53,301	N/A	57,284	N/A	55,162	N/A	7.47	-3.70	Yes
% Claims with> \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
<b>Average Medicaid Amount Paid Per Covered Day (claims with &gt;\$0 paid)</b>										
NF (TOS 07)	\$50-\$100	\$113	No	\$119	No	\$124	No	4.88	4.79	Yes
ICF/MR (TOS 05)	N/A	\$252	N/A	\$265	N/A	\$278	N/A	5.07	4.96	Yes
Aged/MH (TOS 02)	N/A	\$262	N/A	\$248	N/A	\$327	N/A	-5.28	31.55	No
IP Psych. < 21 (TOS 04)	N/A	\$420	N/A	\$397	N/A	\$461	N/A	-5.44	16.00	No
% NF (TOS 07)	75-99	85.75	Yes	84.62	Yes	86.11	Yes	-1.33	1.76	Yes
% NF claims with NF Covered Days	N/A	99.65	N/A	99.78	N/A	99.30	N/A	0.13	-0.48	Yes
Avg days for NF claims with Covered Days	N/A	29	N/A	29	N/A	29	N/A	-0.01	-0.50	Yes
% ICF/MR (TOS 05)	>0-20	13.88	Yes	15.07	Yes	13.51	Yes	8.60	-10.40	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	30	N/A	30	N/A	30	N/A	0.80	-0.72	Yes
% Aged/MH (TOS 02)	>0-10	0.14	Yes	0.09	Yes	0.14	Yes	-30.20	48.08	No
% Aged/MH claims with Aged/MH Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for Aged/MH claims with Covered Days	N/A	29	N/A	30	N/A	30	N/A	3.77	-0.99	Yes
% IP Psych. < 21 (TOS 04)	>0-5	0.23	Yes	0.22	Yes	0.25	Yes	-5.45	12.09	Yes
% IP Psych. < 21 claims with IP Psych Covered Days	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
Avg days for IP Psych. < 21 claims with Covered Days	N/A	18	N/A	17	N/A	18	N/A	-7.73	5.33	Yes
% Claims with Leave Days	1-20	5.35	Yes	4.69	Yes	4.84	Yes	-12.30	3.11	Yes
% Claims with DX	95-100	3.11	No	64.95	No	99.92	Yes	1,987.00	53.85	No
% Claims with DX, where length=3	5-30	12.36	Yes	16.06	Yes	15.62	Yes	29.97	-2.77	Yes
% Claims with DX, where length=4	15-75	53.47	Yes	51.81	Yes	50.99	Yes	-3.10	-1.58	Yes
% Claims with DX, where length=5	25-70	34.18	Yes	32.13	Yes	33.39	Yes	-5.99	3.93	Yes
<b>Patient Status</b>										
% Home	1-5	1.00	No	0.85	No	0.85	No	-14.30	-0.61	Yes
% Still a Patient	8-98	96.74	Yes	97.10	Yes	97.06	Yes	0.37	-0.04	Yes
% Died	>0-5	1.62	Yes	1.31	Yes	1.37	Yes	-19.40	5.24	Yes
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	22	N/A	686	N/A	1,519	N/A	3,018.00	121.40	No
% Claims with> \$0 Paid	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A

2003-2005 MAX LT VALIDATION TABLE  
STATE: ND

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
Aver. Medicaid Amount Paid (claims with >\$0 paid)	N/A	\$1,580	N/A	\$1,806	N/A	\$1,229	N/A	14.33	-32.00	No
% NF (TOS 07)	75-99	0.00	No	95.48	Yes	86.90	Yes	Div by 0	-8.99	Yes
% ICF/MR (TOS 05)	>0-20	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Aged/MH (TOS 02)	>0-10	31.82	No	2.62	Yes	13.10	No	-91.80	399.30	No
% IP Psych. < 21 (TOS 04)	>0-5	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Claims with DX	95-100	100.00	Yes	96.65	Yes	99.41	Yes	-3.35	2.86	Yes
% Claims with DX, where length=3	5-30	13.64	Yes	15.69	Yes	10.00	Yes	15.03	-36.30	No
% Claims with DX, where length=4	15-75	40.91	Yes	40.12	Yes	33.84	Yes	-1.93	-15.70	No
% Claims with DX, where length=5	25-70	45.45	Yes	44.19	Yes	56.16	Yes	-2.78	27.08	No
Patient Status										
% Home	1-5	0.00	No	5.39	No	3.75	Yes	Div by 0	-30.40	No
% Still a Patient	8-98	9.09	Yes	72.01	Yes	48.19	Yes	692.10	-33.10	No
% Died	>0-5	0.00	No	3.50	Yes	1.32	Yes	Div by 0	-62.40	No

2003-2005 MAX OT VALIDATION TABLE  
STATE: ND

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
<b>All OT Claims</b>										
Total Number of Claims	N/A	1,796,221	N/A	1,992,418	N/A	2,303,728	N/A	10.92	15.62	No
% Encounter Claims (Claim Type=3)	N/A	0.66	N/A	0.65	N/A	0.68	N/A	-0.96	4.79	Yes
% Supplemental Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Cap Claims (Claim Type=2, and MAX TOS 20,21,22)	N/A	20.18	N/A	16.17	N/A	13.67	N/A	-19.90	-15.50	No
Total FFS Claims Excluding Capitation Payments	N/A	1,421,883	N/A	1,657,343	N/A	1,973,122	N/A	16.56	19.05	No
% Crossover	5-20	16.10	Yes	12.23	Yes	9.52	Yes	-24.00	-22.20	No
% Adjusted Claims	> 1%	4.12	Yes	2.32	Yes	2.49	Yes	-43.80	7.38	Yes
% Standard Adjustments	N/A	76.36	N/A	54.67	N/A	67.89	N/A	-28.40	24.19	No
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$227	N/A	\$250	N/A	\$210	N/A	9.91	-15.70	No
% Claims(TOC 1,2) TOS 20: HMO Cap Payment	N/A	2.01	N/A	0.48	N/A	0.41	N/A	-76.10	-14.10	Yes
% Claims(TOC 1,2) TOS 21: PHP Cap Payments	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims(TOC 1,2) TOS 22: PCCM Cap Pay.	N/A	18.31	N/A	15.79	N/A	13.35	N/A	-13.80	-15.50	No
Average Paid per HMO Cap Clms (TOS 20)	\$75-\$300	\$137	Yes	\$130	Yes	\$136	Yes	-4.72	4.70	Yes
Average Paid per PHP Cap Clms (TOS 21)	\$20-\$250	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
Average Paid per PCCM Cap Clms (TOS 22)	3-5	\$2	No	\$2	No	\$2	No	0.00	0.00	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	14,967	N/A	N/A	N/A	N/A
<b>FFS Non-Crossover Claims (Type of Claim=1, Crossover Claim Indicator=0, excluding capitation claims)</b>										
Total Number of Claims	N/A	1,192,966	N/A	1,454,648	N/A	1,785,354	N/A	21.94	22.73	No
% 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	6.39	N/A	5.34	N/A	4.89	N/A	-16.40	-8.45	Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	8.18	N/A	4.98	N/A	1.32	N/A	-39.00	-73.60	No
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	5.68	N/A	3.17	N/A	2.45	N/A	-44.20	-22.60	No
% Other Claims with Span Bills/All Other Claims	N/A	6.26	N/A	5.39	N/A	5.18	N/A	-13.90	-3.76	Yes
% Claims W/ Service Place 11- Office	50-90	53.72	Yes	49.78	No	43.53	No	-7.33	-12.50	Yes
% Claims W/ Service Place 12 - Home	>0-5	21.89	No	24.57	No	26.90	No	12.21	9.50	Yes
% Claims W/ Service Place 21 - Hospital	>0-5	4.65	Yes	4.18	Yes	3.88	Yes	-10.20	-7.05	Yes
% Claims W/ Service Place 32 - NF	>0-5	0.19	Yes	0.30	Yes	0.30	Yes	54.90	0.11	Yes
% Claims W/ Service Place 23 - ER	1-10	2.60	Yes	2.03	Yes	1.94	Yes	-22.10	-4.19	Yes
% Claims w/ Service Place 22 - OPD	>0-10	13.91	No	16.47	No	20.88	No	18.44	26.77	No
% Claims W/ Service Place 99 - Unknown/Other	<5	0.00	Yes	0.00	Yes	0.00	Yes	638.10	94.64	No
% Claims with TPL	>0 - 15	0.75	Yes	1.30	Yes	1.86	Yes	73.55	42.78	No
Aver. TPL Paid -claims with TPL	N/A	\$57	N/A	\$58	N/A	\$100	N/A	2.07	70.64	No
<b>PERCENT CLAIMS/MAX TOS</b>										
% claims MAX TOS 08: Physicians	10-35	0.33	No	6.97	No	15.57	Yes	2,003.00	123.20	No
% claims MAX TOS 09: Dental	2-20	11.22	Yes	9.02	Yes	7.24	Yes	-19.60	-19.80	No
% claims MAX TOS 10: Other Practioner	0.5-8	3.13	Yes	2.65	Yes	2.88	Yes	-15.40	8.40	Yes
% claims MAX TOS 11: OPD	3-25	7.21	Yes	5.55	Yes	6.89	Yes	-23.00	23.99	No
% claims MAX TOS 12: Clinic	2-25	4.95	Yes	6.08	Yes	5.71	Yes	22.66	-6.02	Yes
% claims MAX TOS 13: HH	>0-25	0.94	Yes	0.96	Yes	0.95	Yes	2.03	-0.40	Yes
% claims MAX TOS 15: Lab/Xray	4-20	16.36	Yes	17.14	Yes	17.22	Yes	4.74	0.47	Yes
% claims MAX TOS 16: Drugs	<3	2.36	Yes	1.44	Yes	0.17	Yes	-38.90	-88.10	No
% claims MAX TOS 19: Other Services	<25	37.29	No	22.35	Yes	8.15	Yes	-40.10	-63.60	No

2003-2005 MAX OT VALIDATION TABLE  
STATE: ND

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% claims MAX TOS 51: DME	>3	2.71	No	5.60	Yes	5.00	Yes	106.70	-10.80	Yes
% claims MAX TOS 26: Transportation	>1	4.06	Yes	2.27	Yes	2.11	Yes	-44.10	-7.01	Yes
% claims MAX TOS 24: Sterilizations	N/A	0.06	N/A	0.07	N/A	0.08	N/A	8.42	16.92	No
% claims MAX TOS 25: Abortions	N/A	0.01	N/A	0.01	N/A	0.00	N/A	-21.10	-28.30	No
% claims MAX TOS 30: PCS	>0	0.00	No	0.16	Yes	4.53	Yes	Div by 0	2,655.00	No
% claims MAX TOS 31: TCM	>0	4.66	Yes	4.32	Yes	4.04	Yes	-7.28	-6.52	Yes
% claims MAX TOS 33: Rehabilitation	>0	0.51	Yes	5.86	Yes	7.82	Yes	1,048.00	33.56	No
% claims MAX TOS 34: PT/OT/hear/speech	>1	0.93	No	0.74	No	0.92	No	-21.10	25.29	No
% claims MAX TOS 35: Hospice	>0	0.02	Yes	0.05	Yes	0.07	Yes	159.80	37.80	No
% claims MAX TOS 36: Nurse Midwife	N/A	0.00	N/A	0.03	N/A	0.08	N/A	Div by 0	190.30	No
% claims MAX TOS 37: Nurse Practitioner	N/A	0.00	N/A	0.32	N/A	0.67	N/A	63,062.00	109.60	No
% claims MAX TOS 38: Private Nursing	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 39: Religious Non-Med.	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 52: Residential Care	N/A	0.21	N/A	0.50	N/A	0.42	N/A	133.70	-15.60	No
% claims MAX TOS 53: Psych. Services	>1	2.97	Yes	6.52	Yes	8.28	Yes	119.10	27.00	No
% claims MAX TOS 54: Adult Day Care	>0	0.05	Yes	1.40	Yes	1.22	Yes	2,913.00	-13.00	Yes
% claims MAX TOS 99: Unknown	<1	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Average Medicaid Amount Paid For Selected MAX TOS (excluding claims with <=\$0 paid)										
Total	N/A	\$118	N/A	\$112	N/A	\$104	N/A	-5.61	-6.81	Yes
08: Physicians	\$20-90	\$38	Yes	\$72	Yes	\$66	Yes	87.75	-7.49	Yes
09: Dental	\$10-60	\$44	Yes	\$45	Yes	\$48	Yes	3.05	6.55	Yes
10: Other Practioner	\$10-100	\$23	Yes	\$29	Yes	\$35	Yes	24.00	21.47	No
11: OPD	\$20-100	\$241	No	\$181	No	\$99	Yes	-24.70	-45.30	No
12: Clinic	\$20-100	\$68	Yes	\$61	Yes	\$53	Yes	-9.88	-12.90	Yes
13: HH	N/A	\$135	N/A	\$135	N/A	\$113	N/A	0.20	-16.10	No
15: Lab/Xray	10-60	\$30	Yes	\$36	Yes	\$35	Yes	21.96	-4.52	Yes
16: Drugs	10-60	\$19	Yes	\$18	Yes	\$23	Yes	-2.53	23.91	No
19: Other Services	N/A	\$172	N/A	\$146	N/A	\$252	N/A	-15.10	72.38	No
51: DME	N/A	\$125	N/A	\$54	N/A	\$44	N/A	-56.30	-19.50	No
26: Transportation	N/A	\$34	N/A	\$49	N/A	\$50	N/A	45.25	2.04	Yes
30: PCS	N/A	Div by 0	N/A	\$690	N/A	\$97	N/A	Div by 0	-86.00	No
31: Targeted Case Management	N/A	\$47	N/A	\$45	N/A	\$47	N/A	-2.44	3.17	Yes
33: Rehabilitation	N/A	\$1,018	N/A	\$130	N/A	\$99	N/A	-87.30	-23.70	No
34: PT/OT/speech/hear	N/A	\$27	N/A	\$35	N/A	\$36	N/A	29.35	1.99	Yes
35: Hospice	N/A	\$2,478	N/A	\$2,553	N/A	\$2,986	N/A	3.04	16.95	No
52: Residential Care	N/A	\$2,477	N/A	\$2,310	N/A	\$1,939	N/A	-6.70	-16.10	No
53: Psych. Services	N/A	\$86	N/A	\$132	N/A	\$171	N/A	52.55	30.01	No
54: Adult Day Care	N/A	\$93	N/A	\$760	N/A	\$758	N/A	719.90	-0.26	Yes
PERCENT OF CLAIMS BY PROGRAM TYPE (claim type 1)										
% Family Planning (code 2)	N/A	0.95	N/A	0.67	N/A	0.53	N/A	-29.70	-20.10	No
% RHC (code 3)	N/A	2.19	N/A	1.72	N/A	1.56	N/A	-21.50	-9.34	Yes
% FQHC (code 4)	N/A	0.43	N/A	0.48	N/A	0.42	N/A	10.32	-12.10	Yes
% IHS (code 5)	N/A	3.50	N/A	2.51	N/A	2.04	N/A	-28.30	-18.90	No
% Waiver (code 6,7)	N/A	15.62	N/A	15.84	N/A	17.22	N/A	1.45	8.70	Yes
AVERAGE EXPENDITURES BY PROGRAM										
Family Planning (code 2)	N/A	\$53	N/A	\$56	N/A	\$59	N/A	6.58	5.24	Yes

2003-2005 MAX OT VALIDATION TABLE  
STATE: ND

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
RHC (code 3)	N/A	\$61	N/A	\$60	N/A	\$59	N/A	-2.02	-1.63	Yes
FQHC (code 4)	N/A	\$103	N/A	\$93	N/A	\$90	N/A	-9.86	-3.76	Yes
IHS (code 5)	N/A	\$209	N/A	\$215	N/A	\$227	N/A	2.75	5.74	Yes
Waiver (code 6, 7)	N/A	\$329	N/A	\$291	N/A	\$240	N/A	-11.70	-17.50	No
% Claims with DX	> 60	87.93	Yes	90.77	Yes	92.41	Yes	3.24	1.80	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	99.99	Yes	99.99	Yes	99.99	Yes	0.01	0.00	Yes
% Claims with 1 DX that have 2 DX	N/A	38.76	N/A	44.72	N/A	45.58	N/A	15.39	1.91	Yes
% Claims with DX, where length=3	5-25	5.70	Yes	6.14	Yes	6.73	Yes	7.88	9.53	Yes
% Claims with DX, where length=4	40-70	56.37	Yes	49.06	Yes	45.07	Yes	-13.00	-8.14	Yes
% Claims with DX, where length=5	20-55	37.94	Yes	44.80	Yes	48.20	Yes	18.07	7.61	Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A	100.00	N/A	99.98	N/A	100.00	N/A	-0.02	0.02	Yes
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Other Claims with Service Codes /All Other Claims (Excluding OPD/HH)	98-100	95.19	No	94.50	No	94.84	No	-0.72	0.36	Yes
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	51.02	N/A	49.50	N/A	51.10	N/A	-2.99	3.23	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	13.71	N/A	28.44	N/A	33.92	N/A	107.50	19.27	No
% Other National Code Indicator (codes 2-5, 7- 9)/ Claims with Service Codes	N/A	0.00	N/A	0.03	N/A	0.06	N/A	Div by 0	71.48	No
% State Specific Serv. Indicator (10-87)/Claims with Service Codes	N/A	33.48	N/A	21.89	N/A	14.93	N/A	-34.60	-31.80	No
% CPT-4 Format Codes- 5n/Claims with CPT-4	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% HCPCS Format Codes Cnnnn or Cnnn /Claims with HCPCS	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with TOS 08 with Physician Specialty	N/A	80.49	N/A	2.07	N/A	0.00	N/A	-97.40	-100.00	No
PERCENT OF CLAIMS BY CLTC CODE										
CLTC 00: not a CLTC claim	N/A	N/A	N/A	N/A	N/A	72.03	N/A	N/A	N/A	N/A
CLTC Non-Waiver Claims (11-20)	N/A	N/A	N/A	N/A	N/A	10.91	N/A	N/A	N/A	N/A
CLTC 11: Non-Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	0.33	N/A	N/A	N/A	N/A
CLTC 12: Non-Waiver PDN	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 13: Non-Waiver Adult Day	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 14: Non-Waiver HH	N/A	N/A	N/A	N/A	N/A	0.95	N/A	N/A	N/A	N/A
CLTC 15: Non-Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 16: Non-Waiver Rehab	N/A	N/A	N/A	N/A	N/A	5.29	N/A	N/A	N/A	N/A
CLTC 17: Non-Waiver TCM	N/A	N/A	N/A	N/A	N/A	0.47	N/A	N/A	N/A	N/A
CLTC 18: Non-Waiver Transportation	N/A	N/A	N/A	N/A	N/A	1.43	N/A	N/A	N/A	N/A
CLTC 19: Non-Waiver Hospice	N/A	N/A	N/A	N/A	N/A	0.07	N/A	N/A	N/A	N/A
CLTC 20: Non-Waiver DME	N/A	N/A	N/A	N/A	N/A	2.36	N/A	N/A	N/A	N/A
CLTC Waiver Claims (30-40)	N/A	N/A	N/A	N/A	N/A	17.06	N/A	N/A	N/A	N/A
CLTC 30: Other Waiver	N/A	N/A	N/A	N/A	N/A	7.79	N/A	N/A	N/A	N/A
CLTC 31: Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	4.20	N/A	N/A	N/A	N/A
CLTC 32: Waiver PDN	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 33: Waiver Adult Day	N/A	N/A	N/A	N/A	N/A	1.22	N/A	N/A	N/A	N/A
CLTC 34: Waiver HH	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A



2003-2005 MAX OT VALIDATION TABLE  
STATE: ND

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
CLTC 35: Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	0.42	N/A	N/A	N/A	N/A
CLTC 36: Waiver Rehab	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 37: Waiver TCM	N/A	N/A	N/A	N/A	N/A	3.42	N/A	N/A	N/A	N/A
CLTC 38: Waiver Transportation	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 39: Waiver Hospice	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 40: Waiver DME	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
<b>FFS Crossover Claims (Type of Claim=1), Crossover Claim Indicator=1, excluding capitation claims)</b>										
Total Number of Claims	N/A	228,917	N/A	202,695	N/A	187,768	N/A	-11.50	-7.36	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	10.34	N/A	10.17	N/A	10.39	N/A	-1.63	2.09	Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	13.00	N/A	11.57	N/A	10.92	N/A	-11.00	-5.64	Yes
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	9.08	N/A	6.52	N/A	Div by 0	N/A	-28.20	Div by 0	N/A
% Other Claims with Span Bills/All Other Claims	N/A	10.00	N/A	9.98	N/A	10.28	N/A	-0.13	2.96	Yes
<b>PERCENT CLAIMS/MAX TOS (excluding 20-22)</b>										
% claims MAX TOS 08: Physicians	N/A	0.10	N/A	18.49	N/A	56.94	N/A	19,315.00	207.90	No
% claims MAX TOS 10: Other Practioner	N/A	4.46	N/A	4.01	N/A	3.68	N/A	-10.10	-8.17	Yes
% claims MAX TOS 11: OPD	N/A	12.60	N/A	15.70	N/A	16.94	N/A	24.64	7.88	Yes
% claims MAX TOS 12: Clinic	N/A	6.13	N/A	7.12	N/A	7.90	N/A	16.11	10.96	Yes
% claims MAX TOS 13: HH	N/A	3.35	N/A	1.67	N/A	0.00	N/A	-50.40	-100.00	No
% claims MAX TOS 15: Lab/Xray	N/A	5.07	N/A	4.55	N/A	3.77	N/A	-10.10	-17.20	No
% claims MAX TOS 19: Other Services	N/A	55.18	N/A	39.13	N/A	9.59	N/A	-29.10	-75.50	No
% claims MAX TOS 51: DME	N/A	1.62	N/A	1.53	N/A	0.00	N/A	-5.92	-100.00	No
% claims MAX TOS 26: Transportation	N/A	5.67	N/A	3.78	N/A	0.98	N/A	-33.20	-74.10	No
% claims MAX TOS 30: PCS	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 31: TCM	N/A	1.82	N/A	2.39	N/A	0.00	N/A	31.33	-100.00	No
% claims MAX TOS 33: Rehabilitation	N/A	0.00	N/A	0.01	N/A	0.02	N/A	991.70	26.56	No
% claims MAX TOS 34: PT/OT/hear/speech	N/A	2.76	N/A	0.65	N/A	0.17	N/A	-76.30	-73.20	No
% claims MAX TOS 35: Hospice	N/A	0.20	N/A	0.20	N/A	0.00	N/A	-0.94	-100.00	No
% claims MAX TOS 52: Residential Care	N/A	0.05	N/A	0.04	N/A	0.00	N/A	-10.90	-100.00	No
% claims MAX TOS 53: Psych. Services	N/A	0.90	N/A	0.70	N/A	0.00	N/A	-22.30	-100.00	No
% claims MAX TOS 54: Adult Day Care	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Average Amount Paid	N/A	\$45	N/A	\$45	N/A	\$39	N/A	0.38	-14.60	Yes
% Claims with DX	N/A	99.27	N/A	99.96	N/A	99.99	N/A	0.69	0.03	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	99.66	Yes	99.97	Yes	100.00	Yes	0.31	0.03	Yes
% Claims with 1 DX that have 2 DX	N/A	52.22	N/A	55.41	N/A	57.71	N/A	6.10	4.14	Yes
% Claims with DX, where length=3	5-25	9.27	Yes	9.86	Yes	8.42	Yes	6.39	-14.60	Yes
% Claims with DX, where length=4	40-70	47.98	Yes	45.41	Yes	43.49	Yes	-5.35	-4.23	Yes
% Claims with DX, where length=5	20-55	42.76	Yes	44.73	Yes	48.10	Yes	4.62	7.52	Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A	3.65	N/A	2.55	N/A	Div by 0	N/A	-30.20	Div by 0	N/A
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	N/A	100.00	N/A	100.00	N/A	Div by 0	N/A	0.00	Div by 0	N/A
% Other Claims with Service Codes/All Other Claims (Excluding OPD/HH)	98-100	22.92	No	12.87	No	Div by 0	No	-43.80	Div by 0	N/A

2003-2005 MAX OT VALIDATION TABLE  
STATE: ND

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	35.01	N/A	29.09	N/A	Div by 0	N/A	-16.90	Div by 0	N/A
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	43.23	N/A	66.19	N/A	Div by 0	N/A	53.14	Div by 0	N/A
% Other Codes Indicator /Claims with Service Codes	N/A	5.66	N/A	2.49	N/A	Div by 0	N/A	-56.00	Div by 0	N/A

2003-2005 MAX RX VALIDATION TABLE  
STATE: ND

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
<b>All RX Claims</b>										
Total Number of Claims	N/A	1,112,653	N/A	1,234,142	N/A	1,162,496	N/A	10.92	-5.81	Yes
% Encounter Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Supplemental Claims	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
Total FFS Claims	N/A	1,112,653	N/A	1,234,142	N/A	1,162,496	N/A	10.92	-5.81	Yes
% Adjusted Claims	N/A	2.35	N/A	1.82	N/A	2.37	N/A	-22.60	29.93	No
% Standard Adjustments	> 1%	90.58	Yes	78.83	Yes	90.46	Yes	-13.00	14.75	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$66	N/A	\$69	N/A	\$70	N/A	3.94	2.33	Yes
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	1,522	N/A	N/A	N/A	N/A
<b>FFS Claims (Type of Claim=1)</b>										
Total Number of Claims	N/A	1,112,653	N/A	1,234,142	N/A	1,162,496	N/A	10.92	-5.81	Yes
% Claims with> \$0 Paid	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$15-\$60	\$52	Yes	\$55	Yes	\$56	Yes	6.24	2.91	Yes
% Claims with TPL	>0 - 15	5.62	Yes	4.66	Yes	5.24	Yes	-17.10	12.54	Yes
Aver. TPL Paid for claims with TPL	N/A	\$53	N/A	\$57	N/A	\$59	N/A	8.54	2.50	Yes
% Family Planning Claims (program type=2)	N/A	1.58	N/A	1.48	N/A	1.32	N/A	-6.64	-10.50	Yes
% Drug Claims (TOS 16)	95-99	99.03	No	99.65	No	98.94	Yes	0.63	-0.72	Yes
% DME Claims (TOS 51)	>0 - 6	0.97	Yes	0.35	Yes	1.06	Yes	-63.90	202.40	No
% Drug Claims with Quantity	>98	99.98	Yes	92.32	No	99.97	Yes	-7.66	8.29	Yes
% Drug Claims with Days Supply	>98	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with HICL	98-100	98.82	Yes	100.00	Yes	100.00	Yes	1.20	0.00	Yes
% Claims with Medispan	98-100	98.51	Yes	99.65	Yes	99.76	Yes	1.15	0.11	Yes
% Claims with AHFS	98-100	98.82	Yes	100.00	Yes	100.00	Yes	1.20	0.00	Yes
% Claims with Generic (GTC)	98-100	98.82	Yes	100.00	Yes	100.00	Yes	1.20	0.00	Yes
% Claims with GC3	98-100	98.82	Yes	100.00	Yes	100.00	Yes	1.20	0.00	Yes
<b>NDC Configuration Indicator</b>										
% Prescription (codes 0-3)	N/A	75.75	N/A	73.91	N/A	72.60	N/A	-2.43	-1.77	Yes
% Products (codes 4-6)	N/A	22.92	N/A	25.94	N/A	27.15	N/A	13.18	4.67	Yes
% HRI (code 7)	N/A	0.07	N/A	0.06	N/A	0.04	N/A	-12.50	-39.70	No
% Claims with Smart Key	98-100	98.82	Yes	100.00	Yes	100.00	Yes	1.20	0.00	Yes
% OTC-Drug Class	N/A	3.38	N/A	5.25	N/A	6.27	N/A	55.38	19.48	No
% Prescription-Drug Class	N/A	95.44	N/A	94.75	N/A	93.73	N/A	-0.72	-1.08	Yes
% Multiple Source (Code Y)	N/A	49.75	N/A	53.21	N/A	57.41	N/A	6.95	7.89	Yes
% Single Source (Code N)	N/A	43.22	N/A	39.31	N/A	37.56	N/A	-9.04	-4.44	Yes

**2003-2005 MAX PSF VALIDATION TABLE**  
**STATE: ND**

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
<b>All Records</b>											
Total Number of Records	N/A	82,203	N/A	81,240	N/A	79,961	N/A	-1.17	-1.57	10% (+/-)	Yes
Total Medicaid Amount Paid	N/A	\$455,080,606	N/A	\$514,424,890	N/A	\$539,432,954	N/A	13.04	4.86	15% (+/-)	Yes
% with no services (Code 0)	N/A	8.73	N/A	12.16	N/A	12.16	N/A	39.29	0.03	N/A	N/A
% with FFS only claims (Code 1)	N/A	36.02	N/A	36.67	N/A	36.89	N/A	1.82	0.59	N/A	N/A
% with only cap claims (Code 2)	N/A	10.61	N/A	7.69	N/A	6.85	N/A	-27.50	-10.90	N/A	N/A
% with only encounter claims (Code 3)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	102.40	-23.80	N/A	N/A
% with FFS and cap claims (Code 4)	N/A	43.32	N/A	42.23	N/A	42.71	N/A	-2.52	1.13	N/A	N/A
% with cap and encounter claims only (Code 5)	N/A	0.15	N/A	0.17	N/A	0.18	N/A	15.87	0.17	N/A	N/A
% with FFS and encounter claims only (Code 6)	N/A	0.01	N/A	0.01	N/A	0.01	N/A	51.78	-32.30	N/A	N/A
% with FFS, cap and encounter records (Code 7)	N/A	1.16	N/A	1.05	N/A	1.20	N/A	-9.71	14.09	N/A	N/A
# with claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	2,614	N/A	2,791	N/A	1,336	N/A	6.77	-52.10	N/A	N/A
% with claims and missing Medicaid eligibility (excludes S-SCHIP only)	<2%	3.18	No	3.44	No	1.67	Yes	8.04	-51.40	N/A	N/A
# with FFS claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	375	N/A	N/A	N/A	N/A	N/A
% with FFS claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	0.47	N/A	N/A	N/A	N/A	N/A
Expenditures for people missing Medicaid eligibility (excludes S-SCHIP only enrollees)	N/A	\$2,081,189	N/A	\$2,748,016	N/A	\$1,479,769	N/A	32.04	-46.20	N/A	N/A
Expenditures for people with FFS claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	\$1,473,057	N/A	N/A	N/A	N/A	N/A
<b>S-SCHIP ENROLLMENT</b>											
# with ONLY S-SCHIP enrollment	N/A	3,135	N/A	3,380	N/A	3,639	N/A	7.82	7.66	N/A	N/A
% with ONLY S-SCHIP enrollment	N/A	3.81	N/A	4.16	N/A	4.55	N/A	9.09	9.39	N/A	N/A
# with ANY S-SCHIP enrollment	N/A	3,158	N/A	3,397	N/A	4,374	N/A	7.57	28.76	N/A	N/A
% with ANY S-SCHIP enrollment	N/A	3.84	N/A	4.18	N/A	5.47	N/A	8.84	30.82	N/A	N/A
Total PYE ANY S-SCHIP enrollment	N/A	2,174	N/A	2,318	N/A	2,609	N/A	6.62	12.57	N/A	N/A
<b>Total Medicaid Enrollees (excludes people with missing Medicaid eligibility information or S-SCHIP only)</b>											
Total Medicaid Enrollees	N/A	76,454	N/A	75,069	N/A	74,986	N/A	-1.81	-0.11	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	55,470	N/A	53,769	N/A	54,090	N/A	-3.07	0.60	10% (+/-)	Yes
# with any M-SCHIP enrollment (Medicaid enrollees)	N/A	1,999	N/A	2,161	N/A	2,254	N/A	8.10	4.30	N/A	N/A
Total PYE any M-SCHIP	N/A	1,167	N/A	1,253	N/A	1,331	N/A	7.34	6.25	N/A	N/A
<b>Eligibility Demographics</b>											
% Records with Valid SSN Format	>=95%	99.52	Yes	99.46	Yes	99.44	Yes	-0.07	-0.02	10% (+/-)	Yes
% Records whose MSIS SSN passed High Group Test (Code 1)	>95%	N/A	No	N/A	No	99.42	No	N/A	N/A	10% (+/-)	No
% Records whose MSIS SSN failed High Group Test due to invalid AAA (Code 2)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to GG = 00 (Code 3)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to SSSS = 0000 (Code 4)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to GG not yet issued (Code 5)	N/A	N/A	N/A	N/A	N/A	0.02	N/A	N/A	N/A	N/A	N/A
% Records whose MSIS SSN failed High Group Test due to RR with invalid DOB (Code 6)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A	N/A
#SSNs with duplicate records	0	308	No	325	No	367	No	5.52	12.92	N/A	N/A
% with External SSN from EDB (Code 1)	N/A	N/A	N/A	N/A	N/A	22.25	N/A	N/A	N/A	10% (+/-)	No
% with External SSN from state-provided cross-reference file Code 2)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	10% (+/-)	No
% with County Code	>=98%	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	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%	2.33	Yes	2.10	Yes	2.20	Yes	-9.84	4.75	10% (+/-)	Yes
% White	N/A	74.05	N/A	69.82	N/A	74.04	N/A	-5.71	6.05	10% (+/-)	Yes
% Black	N/A	1.95	N/A	1.93	N/A	3.00	N/A	-1.16	55.56	10% (+/-)	No
% Native American/Alaskan Native	N/A	21.69	N/A	21.96	N/A	24.72	N/A	1.225	12.60	10% (+/-)	No
% Asian	N/A	0.36	N/A	0.37	N/A	0.48	N/A	1.115	30.11	N/A	N/A
% Native Hawaiian or other Pacific Islander	N/A	0.06	N/A	0.06	N/A	0.13	N/A	-369	124.70	N/A	N/A
% More than one race	N/A	0.41	N/A	2.55	N/A	3.01	N/A	514.6	18.11	N/A	N/A
% Unknown race	<5%	0.26	Yes	0.01	Yes	0.67	Yes	-95.9	6,169.00	N/A	N/A
% Hispanic/Latino (included with race categories prior to 2005)	N/A	1.21	N/A	3.31	N/A	3.34	N/A	172.6	1.08	10% (+/-)	Yes
% of Hispanic/Latino with unknown race	N/A	N/A	N/A	N/A	N/A	0.04	N/A	N/A	N/A	N/A	N/A
% Age 0	2-8%	3.81	Yes	4.19	Yes	4.39	Yes	9.78	4.92	10% (+/-)	Yes
% Age 0-20 Years	49-74%	51.72	Yes	53.56	Yes	53.80	Yes	3.56	0.45	10% (+/-)	Yes
% Age > 64 Years	5-18%	13.22	Yes	13.00	Yes	13.06	Yes	-1.65	0.46	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 Gender Code 'M' or 'F'	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	N/A	N/A
% Enrollees with 12 months enrollment	40-65%	45.75	Yes	45.43	Yes	46.42	Yes	-0.69	2.18	10% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ND

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
<b>EDB Dual Eligibles</b>											
Total EDB Duals (Duals confirmed by EDB)	N/A	15,311	N/A	15,046	N/A	15,534	N/A	-1.73	3.24	10% (+/-)	Yes
Total EDB Dual PYE	N/A	12,401	N/A	12,516	N/A	12,882	N/A	0.93	2.93	15% (+/-)	Yes
% Age > 64 Years who are EDB Duals	>=90%	96.34	Yes	96.24	Yes	98.79	Yes	-0.10	2.66	10% (+/-)	Yes
% MAX Aged Groups (11,21,31,41,51) who are EDB Duals	>=90%	96.40	Yes	96.30	Yes	98.89	Yes	-0.11	2.69	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) who are EDB Duals	30-55%	54.90	Yes	55.11	No	55.89	No	0.39	1.40	10% (+/-)	Yes
% EDB Only (50)	<5%	1.67	Yes	0.97	Yes	0.51	Yes	-41.70	-47.60	N/A	N/A
% EDB QMB Only (51)	N/A	7.69	N/A	8.76	N/A	9.69	N/A	13.95	10.60	N/A	N/A
% EDB QMB Plus (52)	N/A	7.97	N/A	8.02	N/A	8.69	N/A	0.68	8.33	N/A	N/A
% EDB SLMB Only (53)	N/A	5.92	N/A	6.14	N/A	6.28	N/A	3.67	2.31	N/A	N/A
% EDB SLMB Plus (54)	N/A	1.14	N/A	1.22	N/A	1.62	N/A	6.41	33.38	N/A	N/A
% EDB QDWI (55)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB QI-1 (56)	N/A	2.23	N/A	2.11	N/A	2.27	N/A	-5.68	7.55	N/A	N/A
% EDB QI-2 (57)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB Other (58)	N/A	73.38	N/A	72.78	N/A	70.94	N/A	-2.53	N/A	N/A	N/A
% EDB dual type unknown (59)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% EDB dual status unknown (98)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
Total Non-EDB Duals (Duals rptd in MSIS, not found in EDB)	N/A	173	N/A	174	N/A	29	N/A	0.58	-83.30	10% (+/-)	No
% Non-EDB Duals Without Valid SSN	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	10% (+/-)	N/A
% Non-EDB Duals who are Children/Adults	N/A	1.16	N/A	0.57	N/A	10.34	N/A	-50.30	1,700.00	10% (+/-)	No
% EDB Duals with Spanish Language	N/A	0.06	N/A	0.09	N/A	0.11	N/A	58.30	17.61	15% (+/-)	No
% EDB Duals with EDB Date of Death During Year	6-10%	10.98	No	9.72	Yes	9.68	Yes	-11.50	-0.43	15% (+/-)	Yes
% EDB Duals with Medicaid Reported HIC	N/A	98.23	N/A	98.98	N/A	99.41	N/A	0.76	0.44	15% (+/-)	Yes
% EDB Duals with Medicaid reported HIC = Medicare HIC	N/A	94.79	N/A	96.25	N/A	96.78	N/A	1.53	0.56	15% (+/-)	Yes
TOTAL EDB DUAL ENROLLEES IN JUNE	N/A	14,283	N/A	14,184	N/A	14,602	N/A	-0.69	2.95	10% (+/-)	Yes
<b>June Medicare Type</b>											
June % with Part A Medicare	N/A	2.91	N/A	2.55	N/A	2.55	N/A	-12.20	0.09	15% (+/-)	Yes
June % with Part B Medicare	N/A	2.04	N/A	1.97	N/A	2.61	N/A	-3.44	32.18	15% (+/-)	No
June % Part A/B Medicare	N/A	95.05	N/A	95.47	N/A	94.84	N/A	0.45	-0.67	15% (+/-)	Yes
<b>Original Reason for Medicare Entitlement</b>											
% Aged (Code 0)	N/A	52.26	N/A	51.14	N/A	50.90	N/A	-2.14	-0.46	15% (+/-)	Yes
% Disabled (Code 1)	N/A	46.61	N/A	47.86	N/A	48.11	N/A	2.67	0.52	15% (+/-)	Yes
% ESRD (Code 2)	N/A	0.34	N/A	0.37	N/A	0.27	N/A	7.63	-26.00	15% (+/-)	No
% Disabled with ESRD (Code 3)	N/A	0.79	N/A	0.64	N/A	0.72	N/A	-19.30	13.00	15% (+/-)	Yes
<b>Other Eligibility Characteristics (All Enrollees)</b>											
% MAX Aged Groups (11,21,31,41,51) >64 Years	>=99%	99.97	Yes	99.95	Yes	99.91	Yes	-0.02	-0.04	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) >64 Years	N/A	0.92	N/A	0.73	N/A	0.75	N/A	-20.00	2.89	10% (+/-)	Yes
% MAX Child Grps (14,16, 24, 34, 44, 48, 54) <21 Years	>=98%	99.23	Yes	99.30	Yes	99.32	Yes	0.07	0.01	10% (+/-)	Yes
% MAX Adult Groups (15,17,25,35,45,55) >20 Years	>=80%	92.67	Yes	92.32	Yes	91.81	Yes	-0.39	-0.54	10% (+/-)	Yes
% MAX 1115 expansion enrollees (MASBOE=51,52,54,55) with 1115 waiver enrollment (Waiver Type=1,5,6,A,F)	100%	N/A	N/A	N/A	N/A	Div by 0	Yes	N/A	N/A	N/A	N/A
% MAX 1115 waiver enrollees (Waiver Type=1,5,6,A,F) in MAX 1115 expansion group (MASBOE=51,52,54,55)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	N/A	N/A
MAX Aged Total	N/A	10,012	N/A	9,684	N/A	9,718	N/A	-3.28	0.35	10% (+/-)	Yes
11: Aged, Cash	N/A	1,942	N/A	1,885	N/A	1,786	N/A	-2.94	-5.25	10% (+/-)	Yes
21: Aged, MN	N/A	6,372	N/A	6,043	N/A	6,070	N/A	-5.16	0.45	10% (+/-)	Yes
31: Aged, Poverty	N/A	1,698	N/A	1,753	N/A	1,860	N/A	3.24	6.10	10% (+/-)	Yes
41: Other Aged	N/A	0	N/A	3	N/A	2	N/A	Div by 0	-33.30	10% (+/-)	No
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled Total	N/A	10,149	N/A	10,237	N/A	10,480	N/A	0.87	2.37	10% (+/-)	Yes
12: Disabled, Cash	N/A	6,279	N/A	6,360	N/A	6,397	N/A	1.29	0.58	10% (+/-)	Yes
22: Disabled, MN	N/A	3,072	N/A	2,731	N/A	2,750	N/A	-11.10	0.70	10% (+/-)	Yes
32: Disabled, Poverty	N/A	798	N/A	888	N/A	978	N/A	11.28	10.14	10% (+/-)	No
42: Other Disabled	N/A	0	N/A	258	N/A	355	N/A	Div by 0	37.60	10% (+/-)	No
52: 1115 Disabled	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Child Total	N/A	37,294	N/A	38,061	N/A	38,137	N/A	2.06	0.20	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	12,249	N/A	12,564	N/A	12,334	N/A	2.57	-1.83	10% (+/-)	Yes

**2003-2005 MAX PSF VALIDATION TABLE**  
STATE: ND

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
16: AFDC-U Child, Cash	N/A	1,909	N/A	2,071	N/A	1,954	N/A	8.49	-5.65	10% (+/-)	Yes
24: AFDC Child, MN	N/A	2,220	N/A	2,123	N/A	2,372	N/A	-4.37	11.73	10% (+/-)	No
34: Child Poverty	N/A	7,795	N/A	10,728	N/A	11,028	N/A	37.63	2.80	10% (+/-)	Yes
44: Other Child	N/A	11,208	N/A	8,556	N/A	8,395	N/A	-23.70	-1.88	10% (+/-)	Yes
48: Foster Care Child	N/A	1,913	N/A	2,019	N/A	2,054	N/A	5.54	1.73	10% (+/-)	Yes
54: 1115 Child	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Adult Total	N/A	18,999	N/A	17,087	N/A	16,651	N/A	-10.10	-2.55	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	6,418	N/A	6,354	N/A	6,256	N/A	-1.00	-1.54	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	2,102	N/A	2,259	N/A	2,159	N/A	7.47	-4.43	10% (+/-)	Yes
25: AFDC Adult, MN	N/A	1,612	N/A	1,564	N/A	1,571	N/A	-2.98	0.45	10% (+/-)	Yes
35: Adult, Poverty	N/A	838	N/A	1,125	N/A	1,201	N/A	34.25	6.76	10% (+/-)	Yes
45: Other Adult	N/A	8,029	N/A	5,785	N/A	5,464	N/A	-27.90	-5.55	10% (+/-)	Yes
55: 1115 Adult	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
<b>Long-Term Care Enrollees</b>											
<b>INSTITUTIONAL STATUS</b>											
# enrollees with any ILTC claims (includes NF, ICF/MR, Aged Mental Hospital, IP Psych. < 21 years)	N/A	5,961	N/A	5,821	N/A	5,865	N/A	-2.35	0.76	N/A	N/A
% enrollees with any ILTC claims	N/A	7.80	N/A	7.75	N/A	7.82	N/A	-0.55	0.87	N/A	N/A
% AGED enrollees with any ILTC claims	N/A	47.64	N/A	47.49	N/A	47.08	N/A	-0.32	-0.87	N/A	N/A
% DISABLED enrollees with any ILTC claims	N/A	10.91	N/A	11.03	N/A	11.39	N/A	1.11	3.31	N/A	N/A
% CHILD enrollees with any ILTC claims	N/A	0.21	N/A	0.22	N/A	0.22	N/A	1.66	-0.20	N/A	N/A
% ADULT enrollees with any ILTC claims	N/A	0.02	N/A	0.06	N/A	0.08	N/A	178.00	33.40	N/A	N/A
<b>COMMUNITY LONG-TERM CARE STATUS</b>											
# enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	6,509	N/A	N/A	N/A	15% (+/-)	No
% enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	8.68	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	15.60	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	25.44	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	5.23	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	1.99	N/A	N/A	N/A	15% (+/-)	No
# enrollees with ILTC claims and CLTC claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	545	N/A	N/A	N/A	15% (+/-)	No
<b>Section 1915(c) Waiver Enrollment - Most Recent</b>											
# ever enrolled in any Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	3,835	N/A	N/A	N/A	15% (+/-)	No
% enrolled in any Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	5.11	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	3.91	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	18.91	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	3.84	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	0.04	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Aged and Disabled (Code G)	N/A	N/A	N/A	N/A	N/A	487	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Aged (Code H)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Physically Disabled (Code I)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	28	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with HIV/AIDS (Code K)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for MR/DD (Code L)	N/A	N/A	N/A	N/A	N/A	3,320	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for People with MI/SED (Code M)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver for Technologically Dependent/Medically Fragile (Code N)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with Section 1915(c) waiver enrollment for unspecified or unknown populations (Code O)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% of Section 1915(c) waiver enrollees with no waiver claim (Program Type 6 or 7)	<10%	N/A	No	N/A	No	3.42	Yes	N/A	N/A	15% (+/-)	No
% of Section 1915(c) claim (Program Type 6 or 7) recipients with no waiver enrollment	<10%	N/A	No	N/A	No	28.31	Yes	N/A	N/A	15% (+/-)	No
% of Section 1915(c) waiver enrollees with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	0.18	N/A	N/A	N/A	15% (+/-)	No
<b>Other Waiver Enrollment (Enrolled Any Time During the Year)</b>											
# with any 1115 waiver (Codes 1,5,6,A,F)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with any 1915(b) waiver (Code 2)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
% AGED enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with any combined 1915(b)(c) waiver (Code 4)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 HIFA waiver (Code 5)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 Pharmacy waiver coverage (Code 6)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any Pharmacy waiver coverage	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any combined 1915(b)(c) waiver	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
# with other type of waiver (Code 7)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with unknown type of waiver (Code 9)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 disaster-related waiver (Code A)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
# with 1115 Family Planning Only waiver (Code F)	N/A	N/A	N/A	N/A	N/A	0	N/A	N/A	N/A	15% (+/-)	No
<b>Enrollees with Restricted Benefits</b>											
<i>Family Planning enrollees with Restricted Benefits (Code 6)</i>											
# with ONLY Family Planning Only enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# with ANY Family Planning Only enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# PYE ANY FP Only	N/A	Div by 0	N/A	Div by 0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<i>Aliens with Restricted Benefits (Code 2)</i>											
# Aliens with ONLY restricted benefits	N/A	4	N/A	6	N/A	3	N/A	50.00	-50.00	N/A	N/A
# Aliens with ANY restricted benefits	N/A	4	N/A	6	N/A	3	N/A	50.00	-50.00	N/A	N/A
# PYE Aliens with ANY restricted benefits	N/A	0	N/A	1	N/A	0	N/A	20.00	-50.00	N/A	N/A
<i>EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - Code 3)</i>											
# EDB Duals with ONLY restricted benefits enrollment	N/A	1,685	N/A	2,127	N/A	2,304	N/A	26.23	8.32	N/A	N/A
# EDB Duals with ANY restricted benefits enrollment	N/A	2,398	N/A	2,890	N/A	3,147	N/A	20.52	8.89	N/A	N/A
# PYE EDB Duals with ANY restricted benefits	N/A	1,396	N/A	1,972	N/A	2,050	N/A	41.25	3.99	N/A	N/A
% EDB Duals with ONLY restricted benefits enrollment	N/A	N/A	N/A	N/A	N/A	14.83	N/A	N/A	N/A	15% (+/-)	No
<i>Prescription Drug Enrollees (Codes X, Y, or Z)</i>											
# with ONLY Prescription Drug enrollment (may also have a month or more of Code 3)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# with ANY Prescription Drug enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
# PYE ANY Prescription Drug enrollment	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<i>Dual Prescription Drug Enrollees</i>											
# with ONLY prescription drugs who are also EDB duals	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<b>June Eligibility Profile</b>											
<b>TOTAL ENROLLEES IN JUNE</b>											
June % Full Scope Benefits (Code 1)	>80%	97.29	Yes	96.24	Yes	96.14	Yes	-1.08	-0.11	15% (+/-)	Yes
June % Restricted Benefits Alien (Code 2)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	-100.00	15% (+/-)	No
June % Restricted Benefits Dual (Code 3)	<5%	2.71	Yes	3.75	Yes	3.86	Yes	38.66	2.77	15% (+/-)	Yes
June % Restricted Benefits Pregnant (Code 4)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Other (Code 5)	0%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Family Planning (Code 6)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Unknown Benefits (Code 9)	0%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Pharm Plus Non-Dual Enrollee (Code X)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
June % Restricted Benefits Pharm Plus Dual Receiving Medicare Cost Sharing (Code Y)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
June % Restricted Benefits Pharm Plus Dual Not Receiving Medicare Cost Sharing (Code Z)	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	15% (+/-)	No
June % Private Health Insurance (Codes 2-4)	2-12%	19.74	No	18.86	No	19.01	No	-4.43	0.78	15% (+/-)	Yes

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
June Total Enrollees with TANF Flag (Code 2)	N/A	8,661	N/A	7,588	N/A	7,308	N/A	-12.40	-3.69	15% (+/-)	Yes
June # with M-SCHIP (Code 2) - Child (<19 Years)	N/A	1,144	N/A	1,216	N/A	1,293	N/A	6.29	6.33	15% (+/-)	Yes
June # with M-SCHIP (Code 2) - Adult (>18 Years)	N/A	12	N/A	21	N/A	19	N/A	75.00	-9.52	15% (+/-)	Yes
June # with S-SCHIP Flag (Code 3) - Child (<19 Years)	N/A	11	N/A	7	N/A	136	N/A	-36.40	1,843.00	15% (+/-)	No
June # with S-SCHIP Flag (Code 3) - Adult (>18 Years)	N/A	1	N/A	4	N/A	1	N/A	300.00	-75.00	15% (+/-)	No
<b>Medicaid Expenditures</b>											
Total Medicaid Amt Paid	N/A	\$449,386,582	N/A	\$511,676,874	N/A	\$537,953,185	N/A	13.86	5.14	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$5,878	N/A	\$6,816	N/A	\$7,174	N/A	15.96	5.25	15% (+/-)	Yes
25th Percentile	N/A	\$140	N/A	\$146	N/A	\$173	N/A	4.29	18.49	15% (+/-)	No
50th Percentile (Median)	N/A	\$714	N/A	\$785	N/A	\$869	N/A	9.94	10.70	15% (+/-)	Yes
75th Percentile	N/A	\$3,114	N/A	\$3,602	N/A	\$3,948	N/A	15.67	9.61	15% (+/-)	Yes
95th Percentile	N/A	\$38,988	N/A	\$43,217	N/A	\$45,481	N/A	10.85	5.24	15% (+/-)	Yes
99th Percentile	N/A	\$75,682	N/A	\$89,309	N/A	\$91,729	N/A	18.01	2.71	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$17,186	N/A	\$20,147	N/A	\$20,689	N/A	17.23	2.69	15% (+/-)	Yes
MAX Disabled	N/A	\$17,385	N/A	\$20,372	N/A	\$21,012	N/A	17.18	3.14	10% (+/-)	Yes
MAX Child	N/A	\$1,682	N/A	\$1,791	N/A	\$1,982	N/A	6.49	10.69	10% (+/-)	No
MAX Adult	N/A	\$2,008	N/A	\$2,333	N/A	\$2,467	N/A	16.17	5.77	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$17,640	N/A	\$20,606	N/A	\$21,007	N/A	16.82	1.95	15% (+/-)	Yes
MAX Aged	N/A	\$17,342	N/A	\$20,377	N/A	\$20,703	N/A	17.50	1.60	10% (+/-)	Yes
MAX Disabled	N/A	\$18,375	N/A	\$21,185	N/A	\$21,690	N/A	15.30	2.38	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/LONG-TERM CARE ENROLLEE</b>											
Enrollees with ILTC claims	N/A	N/A	N/A	N/A	N/A	\$46,639	N/A	N/A	N/A	15% (+/-)	No
Enrollees with CLTC claims (excluding CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$20,228	N/A	N/A	N/A	15% (+/-)	No
Enrollees with ILTC and CLTC claims (excluding CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$38,397	N/A	N/A	N/A	15% (+/-)	No
<b>AVG MEDICAID AMT PD PER ENROLLEE IN 1915(c) WAIVER - MOST RECENT</b>											
All Section 1915(c) enrollees	N/A	N/A	N/A	N/A	N/A	\$26,071	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Aged and Disabled (Code G)	N/A	N/A	N/A	N/A	N/A	\$25,339	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Aged (Code H)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Physically Disabled (Code I)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	\$33,489	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with HIV/AIDS (Code K)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for MR/DD (Code L)	N/A	N/A	N/A	N/A	N/A	\$26,116	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with MI/SED (Code M)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Technologically Dependent/Medically Fragile (Code N)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for none of the above (Code O)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
<b>AVG 1915(c) WAIVER AMT PD (PROGRAM TYPES 6/7) PER ENROLLEE IN ANY 1915(c) WAIVER - MOST RECENT</b>											
All Section 1915(c) enrollees	N/A	N/A	N/A	N/A	N/A	\$18,778	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Aged and Disabled (Code G)	N/A	N/A	N/A	N/A	N/A	\$12,728	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Aged (Code H)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Physically Disabled (Code I)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with Brain Injuries (Code J)	N/A	N/A	N/A	N/A	N/A	\$26,971	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with HIV/AIDS (Code K)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for MR/DD (Code L)	N/A	N/A	N/A	N/A	N/A	\$19,596	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for People with MI/SED (Code M)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for Technologically Dependent/Medically Fragile (Code N)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
Section 1915(c) waiver for none of the above (Code O)	N/A	N/A	N/A	N/A	N/A	Div by 0	N/A	N/A	N/A	15% (+/-)	No
<b>EXPENDITURES FOR RESTRICTED BENEFIT ENROLLEES</b>											
<i>Expenditures for Family Planning enrollees with Restricted Benefits</i>											
Expenditures for ONLY FP Only enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
Average Medicaid Paid for ONLY FP Only enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
<i>Expenditures for Aliens with Restricted Benefits</i>											
Expend for Aliens with restricted benefits ONLY enrollment	N/A	\$9,046	N/A	\$13,386	N/A	\$10,479	N/A	47.98	-21.70	N/A	N/A
Avg Medicaid Paid for Alien enrollees with restricted benefits ONLY	N/A	\$2,262	N/A	\$2,231	N/A	\$3,493	N/A	-1.35	56.57	N/A	N/A
<i>Expenditures for EDB Duals with Restricted Benefits (Medicare Cost Sharing Only - Code 3)</i>											



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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Expenditures for EDB Duals with only restricted benefits enrollment	N/A	\$260,006	N/A	\$558,719	N/A	\$624,809	N/A	114.90	11.83	N/A	N/A
Avg Medicaid Paid for EDB Duals with only restricted benefit enrollment	N/A	\$154	N/A	\$263	N/A	\$271	N/A	70.23	3.24	N/A	N/A
<b>Prescription Drug Enrollees</b>											
Expenditures for Prescription Drug ONLY enrollees (may also have a month or more of Code 3)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
Avg Medicaid Paid for Prescription Drug ONLY enrollees	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
<b>Dual Prescription Drug Enrollees</b>											
Expenditures for Prescription Drug ONLY enrollees who are also EDB duals	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A	N/A
<b>MEDICAID ENROLLEES - EXCLUDING SELECT RESTRICTED BENEFIT GROUPS (excludes people with missing eligibility information, S-SCHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) ----</b> <b>NOTE: S-SCHIP only, FP Only, duals with restricted benefits, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total Medicaid Enrollees	N/A	74,765	N/A	72,936	N/A	72,679	N/A	-2.45	-0.35	10% (+/-)	Yes
MAX Aged Total	N/A	8,828	N/A	8,251	N/A	8,148	N/A	-6.54	-1.25	10% (+/-)	Yes
MAX Disabled Total	N/A	9,648	N/A	9,543	N/A	9,746	N/A	-1.09	2.13	10% (+/-)	Yes
MAX Child Total	N/A	37,294	N/A	38,061	N/A	38,137	N/A	2.06	0.20	10% (+/-)	Yes
MAX Adult Total	N/A	18,995	N/A	17,081	N/A	16,648	N/A	-10.10	-2.53	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	54,305	N/A	52,155	N/A	52,409	N/A	-3.96	0.49	10% (+/-)	Yes
Total EDB Duals	N/A	13,626	N/A	12,919	N/A	13,230	N/A	-5.19	2.41	10% (+/-)	Yes
MAX Aged	N/A	8,468	N/A	7,893	N/A	8,040	N/A	-6.79	1.86	10% (+/-)	Yes
MAX Disabled	N/A	5,071	N/A	4,948	N/A	5,123	N/A	-2.43	3.54	10% (+/-)	Yes
<b>Total Medicaid Amount Paid</b>											
Total Medicaid Amt Paid	N/A	\$449,117,530	N/A	\$511,104,769	N/A	\$537,317,897	N/A	13.80	5.13	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$6,007	N/A	\$7,008	N/A	\$7,393	N/A	16.66	5.50	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$19,474	N/A	\$23,616	N/A	\$24,626	N/A	21.27	4.28	15% (+/-)	Yes
MAX Disabled	N/A	\$18,277	N/A	\$21,821	N/A	\$22,572	N/A	19.39	3.45	10% (+/-)	Yes
MAX Child	N/A	\$1,682	N/A	\$1,791	N/A	\$1,982	N/A	6.49	10.69	10% (+/-)	No
MAX Adult	N/A	\$2,008	N/A	\$2,333	N/A	\$2,467	N/A	16.18	5.76	10% (+/-)	Yes
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$19,802	N/A	\$23,956	N/A	\$24,618	N/A	20.97	2.77	15% (+/-)	Yes
MAX Aged	N/A	\$19,749	N/A	\$24,045	N/A	\$24,695	N/A	21.75	2.70	10% (+/-)	Yes
MAX Disabled	N/A	\$20,169	N/A	\$24,094	N/A	\$24,756	N/A	19.46	2.75	10% (+/-)	Yes
<b>MANAGED CARE PLAN INFORMATION (Enrollees in Capitated Plans - PCCM, HMO, HIO, &amp; PHPs, excludes people with missing eligibility information, S-SCHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) ----</b> <b>NOTE: FP Only, duals with restricted benefits, and Aliens with restricted benefits were NOT excluded prior to 2003. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
% Total Enrollees in MC Anytime During Year	N/A	68.37	N/A	68.28	N/A	67.52	N/A	-0.13	-1.12	25% (+)	Yes
Total MC Enrollees	N/A	51,116	N/A	49,799	N/A	49,070	N/A	-2.58	-1.46	25% (+)	Yes
Aged	N/A	10	N/A	3	N/A	1	N/A	-70.00	-66.70	25% (+)	No
Disabled	N/A	196	N/A	234	N/A	190	N/A	19.39	-18.80	25% (+)	Yes
Child	N/A	33,455	N/A	33,920	N/A	33,721	N/A	1.39	-0.59	25% (+)	Yes
Adult	N/A	17,455	N/A	15,642	N/A	15,158	N/A	-10.40	-3.09	25% (+)	Yes
% of MC Enrollees in HMO/HIO (Dups)	N/A	2.84	N/A	2.72	N/A	2.94	N/A	-4.29	8.16	25% (+)	Yes
% of MC Enrollees in Dental (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in BHO (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in Prenatal (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in LTC (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in PACE (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% of MC Enrollees in PCCM (Dups)	N/A	97.73	N/A	97.86	N/A	97.74	N/A	0.13	-0.12	25% (+)	Yes
% of MC Enrollees in Other MC (Dups)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
% EDB Duals ever enrolled in HMO/HIOs	<20%	0.01	Yes	0.02	Yes	0.00	Yes	110.90	-100.00	25% (+)	No
% 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	0.60	N/A	0.63	N/A	0.44	N/A	4.19	-30.10	25% (+)	No
% Section 1915(c) waiver enrollees ever enrolled in HMO/HIOs	N/A	N/A	N/A	N/A	N/A	0.18	N/A	N/A	N/A	25% (+)	No
% Section 1915(c) waiver enrollees in PHP only or PHP/PCCM only	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	25% (+)	No
% Section 1915(c) waiver enrollees in PCCM only	N/A	N/A	N/A	N/A	N/A	10.98	N/A	N/A	N/A	25% (+)	No
TOTAL ENROLLEES IN JUNE	N/A	54,282	N/A	52,002	N/A	52,278	N/A	-4.20	0.53	25% (+)	Yes
June % HMO/HIO only (Code 1)	N/A	1.49	N/A	1.52	N/A	1.42	N/A	1.81	-6.45	25% (+)	Yes

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
June % Dental Plan only (Code 2)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % BHO only (Code 3)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % PCCM only (Code 4)	N/A	63.05	N/A	61.60	N/A	61.18	N/A	-2.30	-0.68	25% (+)	Yes
June % Other MC only (Code 5)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & Dental (Code 6)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & BHO (Code 7)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & Other MC (Code 8)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % HMO/HIO & Dental & BHO (Code 9)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Dental & PCCM (Code 10)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % BHO & PCCM (Code 11)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Other MC & PCCM (Code 12)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Dental & BHO & PCCM (Code 13)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Dental & BHO (Code 14)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % Other Combinations (Code 15)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	25% (+)	N/A
June % FFS Only (Code 16)	N/A	35.46	N/A	36.88	N/A	37.40	N/A	4.01	1.41	25% (+)	Yes
June % MC Status Unknown (Code 99)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	25% (+)	N/A
<b>CAPITATION CLAIMS</b>											
Total Cap Payments	N/A	\$1,895,919	N/A	\$1,829,726	N/A	\$1,885,985	N/A	-3.49	3.08	15% (+/-)	Yes
HMO/HIO	N/A	\$1,244,393	N/A	\$1,212,428	N/A	\$1,283,077	N/A	-2.57	5.83	15% (+/-)	Yes
PHP	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
PCCM	N/A	\$651,526	N/A	\$617,298	N/A	\$602,908	N/A	-5.25	-2.33	15% (+/-)	Yes
Ratio of Cap Claims to PME (person mo. enroll.) in MC	-9-2	0.80	No	0.81	No	0.79	No	0.30	-1.95	15% (+/-)	Yes
HMO/HIO	-9-2	1.02	Yes	1.02	Yes	1.01	Yes	-0.22	-0.60	15% (+/-)	Yes
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	0.80	No	0.80	No	0.79	No	0.31	-2.00	15% (+/-)	Yes
Average Cap Payment for PME in MC	N/A	\$5	N/A	\$5	N/A	\$5	N/A	2.17	3.38	15% (+/-)	Yes
HMO/HIO	N/A	\$129	N/A	\$132	N/A	\$138	N/A	2.52	4.46	15% (+/-)	Yes
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	\$2	N/A	\$2	N/A	\$2	N/A	0.31	-2.00	15% (+/-)	Yes
<b>Persons enrolled in PHP only or PHP/PCCM only</b>											
Total Cap Payments	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Total Medicaid Amt Paid	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Count of Enrollees	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>Persons enrolled in PCCM only</b>											
Total Cap Payments	N/A	\$664,704	N/A	\$629,369	N/A	\$607,969	N/A	-5.32	-3.40	15% (+/-)	Yes
Count of Enrollees	N/A	49,665	N/A	48,446	N/A	47,628	N/A	-2.45	-1.69	15% (+/-)	Yes
<b>Persons ever enrolled in HMO/HIOs during year</b>											
Count of Enrollees	N/A	1,451	N/A	1,353	N/A	1,442	N/A	-6.75	6.58	15% (+/-)	Yes
Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	25% (+)	N/A
Disabled	N/A	3	N/A	2	N/A	2	N/A	-33.30	0.00	25% (+)	Yes
Child	N/A	866	N/A	846	N/A	918	N/A	-2.31	8.51	25% (+)	Yes
Adult	N/A	582	N/A	505	N/A	522	N/A	-13.20	3.37	25% (+)	Yes
Total Ever Enrolled in HMO/HIO PYE	N/A	807	N/A	766	N/A	776	N/A	-5.00	1.32	25% (+)	Yes
Total Cap Payments	N/A	\$1,231,215	N/A	\$1,200,357	N/A	\$1,278,016	N/A	-2.51	6.47	15% (+/-)	Yes
Average Cap Payments	N/A	\$849	N/A	\$887	N/A	\$886	N/A	4.56	-0.10	15% (+/-)	Yes
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	\$231	N/A	\$981	N/A	\$1,020	N/A	324.70	3.93	15% (+/-)	Yes
Child	N/A	\$657	N/A	\$667	N/A	\$633	N/A	1.51	-5.04	15% (+/-)	Yes
Adult	N/A	\$1,137	N/A	\$1,256	N/A	\$1,331	N/A	10.48	5.96	15% (+/-)	Yes
Total FFS Payments	N/A	\$918,498	N/A	\$865,284	N/A	\$1,172,193	N/A	-5.79	35.47	15% (+/-)	No
Average FFS Payments per enrollee	N/A	\$633.01	N/A	\$640	N/A	\$813	N/A	1.03	27.11	15% (+/-)	No
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	\$4,697.00	N/A	\$3,617	N/A	\$22,663	N/A	-23.00	526.60	15% (+/-)	No
Child	N/A	\$585.33	N/A	\$468	N/A	\$624	N/A	-20.00	33.37	15% (+/-)	No
Adult	N/A	\$683.01	N/A	\$915	N/A	\$1,061	N/A	33.95	15.94	15% (+/-)	No
Total FFS Payments by Type of Service											
IP	N/A	\$163,587	N/A	\$117,291	N/A	\$220,832	N/A	-28.30	88.28	15% (+/-)	No

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
ILTC	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Drug	N/A	\$315,868	N/A	\$372,758	N/A	\$335,575	N/A	18.01	-9.98	15% (+/-)	Yes
All Other (excluding cap payments)	N/A	\$439,043	N/A	\$375,235	N/A	\$615,786	N/A	-14.50	64.11	15% (+/-)	No
Average FFS Payments by Type of Service											
IP	N/A	\$113	N/A	\$87	N/A	\$153	N/A	-23.10	76.66	15% (+/-)	No
ILTC	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
Drug	N/A	\$218	N/A	\$276	N/A	\$233	N/A	26.56	-15.50	15% (+/-)	No
All Other (excluding cap payments)	N/A	\$303	N/A	\$277	N/A	\$427	N/A	-8.34	53.98	15% (+/-)	No
<b>FFS INFORMATION FOR NON-DUAL MEDICAID ENROLLEES (excludes EDB Duals, people ever enrolled in HMO/HIOS, with missing eligibility information, S-SCHIP only, FP Only, Aliens with restricted benefits only, and prescription drug only enrollees) ---- NOTE: S-SCHIP only, FP Only, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total Non-Dual FFS Enrollees	N/A	59,689	N/A	58,666	N/A	58,007	N/A	-1.71	-1.12	15% (+/-)	Yes
Total Non-Dual FFS Recipients	N/A	50,154	N/A	49,216	N/A	49,534	N/A	-1.87	0.65	15% (+/-)	Yes
Total Non-Dual FFS PYE	N/A	42,032	N/A	40,271	N/A	40,182	N/A	-4.19	-0.22	15% (+/-)	Yes
MAX Aged Total	N/A	360	N/A	358	N/A	108	N/A	-0.56	-69.80	10% (+/-)	No
11: Aged, Cash	N/A	163	N/A	173	N/A	37	N/A	6.14	-78.60	10% (+/-)	No
21: Aged, MN	N/A	113	N/A	93	N/A	68	N/A	-17.70	-26.90	10% (+/-)	No
31: Aged, Poverty	N/A	84	N/A	91	N/A	3	N/A	8.33	-96.70	10% (+/-)	No
41: Other Aged	N/A	0	N/A	1	N/A	0	N/A	Div by 0	-100.00	10% (+/-)	No
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled Total	N/A	4,574	N/A	4,594	N/A	4,621	N/A	0.44	0.59	10% (+/-)	Yes
12: Disabled, Cash	N/A	3,951	N/A	4,033	N/A	4,011	N/A	2.08	-0.55	10% (+/-)	Yes
22: Disabled, MN	N/A	620	N/A	535	N/A	567	N/A	-13.70	5.98	10% (+/-)	Yes
32: Disabled, Poverty	N/A	3	N/A	3	N/A	4	N/A	0.00	33.33	10% (+/-)	No
42: Other Disabled	N/A	0	N/A	23	N/A	39	N/A	Div by 0	69.57	10% (+/-)	No
52: 1115 Disabled	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Child Total	N/A	36,425	N/A	37,212	N/A	37,216	N/A	2.16	0.01	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	11,917	N/A	12,238	N/A	12,008	N/A	2.69	-1.88	10% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	1,821	N/A	2,005	N/A	1,864	N/A	10.10	-7.03	10% (+/-)	Yes
24: AFDC Child, MN	N/A	2,179	N/A	2,095	N/A	2,343	N/A	-3.85	11.84	10% (+/-)	No
34: Child Poverty	N/A	7,649	N/A	10,524	N/A	10,786	N/A	37.59	2.49	10% (+/-)	Yes
44: Other Child	N/A	10,956	N/A	8,338	N/A	8,166	N/A	-23.90	-2.06	10% (+/-)	Yes
48: Foster Care Child	N/A	1,903	N/A	2,012	N/A	2,049	N/A	5.73	1.84	10% (+/-)	Yes
54: 1115 Child	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Adult Total	N/A	18,330	N/A	16,502	N/A	16,062	N/A	-9.97	-2.67	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	6,189	N/A	6,131	N/A	6,033	N/A	-0.94	-1.60	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	1,985	N/A	2,194	N/A	2,080	N/A	10.53	-5.20	10% (+/-)	Yes
25: AFDC Adult, MN	N/A	1,553	N/A	1,521	N/A	1,532	N/A	-2.06	0.72	10% (+/-)	Yes
35: Adult, Poverty	N/A	819	N/A	1,092	N/A	1,156	N/A	33.33	5.86	10% (+/-)	Yes
45: Other Adult	N/A	7,784	N/A	5,564	N/A	5,261	N/A	-28.50	-5.45	10% (+/-)	Yes
55: 1115 Adult	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
# Non-Dual FFS Enrollees w/ MSIS Dual Code/No EDB Confirmation	N/A	173	N/A	174	N/A	29	N/A	0.58	-83.30	10% (+/-)	No
Total FFS Medicaid Amt Paid	N/A	\$176,471,727	N/A	\$198,925,154	N/A	\$208,558,337	N/A	12.72	4.84	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per Non-Dual FFS Enrollee	N/A	\$2,957	N/A	\$3,391	N/A	\$3,595	N/A	14.69	6.03	15% (+/-)	Yes
Avg FFS Medicaid Amt Paid per Non-Dual FFS Recipient (User of any service)	N/A	\$3,519	N/A	\$4,042	N/A	\$4,210	N/A	14.87	4.17	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX ELIG GRP</b>											
All Aged	N/A	\$13,010	N/A	\$14,161	N/A	\$19,514	N/A	8.85	37.80	15% (+/-)	No
11: Aged, Cash	N/A	\$13,343	N/A	\$14,430	N/A	\$8,969	N/A	8.15	-37.80	15% (+/-)	No
21: Aged, MN	N/A	\$22,076	N/A	\$26,664	N/A	\$26,112	N/A	20.78	-2.07	15% (+/-)	Yes
31: Aged, Poverty	N/A	\$167	N/A	\$196	N/A	\$0	N/A	17.03	-100.00	15% (+/-)	No
41: Other Aged	N/A	Div by 0	N/A	\$75,749	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$16,188	N/A	\$19,375	N/A	\$20,151	N/A	19.69	4.01	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$15,712	N/A	\$18,863	N/A	\$19,433	N/A	20.06	3.02	15% (+/-)	Yes
22: Disabled, MN	N/A	\$19,295	N/A	\$23,246	N/A	\$25,861	N/A	20.47	11.25	15% (+/-)	Yes
32: Disabled, Poverty	N/A	\$177	N/A	\$416	N/A	\$2,539	N/A	135.50	510.40	15% (+/-)	No
42: Other Disabled	N/A	Div by 0	N/A	\$21,492	N/A	\$12,820	N/A	Div by 0	-40.40	15% (+/-)	No
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
All Child	N/A	\$1,679	N/A	\$1,794	N/A	\$1,989	N/A	6.83	10.86	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$1,344	N/A	\$1,246	N/A	\$1,460	N/A	-7.35	17.20	15% (+/-)	No
16: AFDC-U Child, Cash	N/A	\$1,311	N/A	\$1,126	N/A	\$1,093	N/A	-14.10	-2.92	15% (+/-)	Yes
24: AFDC Child, MN	N/A	\$3,766	N/A	\$6,294	N/A	\$6,405	N/A	67.13	1.76	15% (+/-)	Yes
34: Child, Poverty	N/A	\$900	N/A	\$849	N/A	\$930	N/A	-5.65	9.49	15% (+/-)	Yes
44: Other Child	N/A	\$1,153	N/A	\$1,298	N/A	\$1,455	N/A	12.53	12.11	15% (+/-)	Yes
48: Foster Care Child	N/A	\$7,897	N/A	\$8,103	N/A	\$8,551	N/A	2.61	5.53	15% (+/-)	Yes
54: 1115 Child	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Adult	N/A	\$1,996	N/A	\$2,309	N/A	\$2,448	N/A	15.68	6.06	15% (+/-)	Yes
15: AFDC Adult, Cash	N/A	\$2,492	N/A	\$2,735	N/A	\$2,850	N/A	9.79	4.20	15% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	\$1,311	N/A	\$1,399	N/A	\$1,430	N/A	6.66	2.22	15% (+/-)	Yes
25: AFDC Adult, MN	N/A	\$2,059	N/A	\$2,789	N/A	\$2,657	N/A	35.43	-4.75	15% (+/-)	Yes
35: Adult, Poverty	N/A	\$2,166	N/A	\$2,410	N/A	\$2,375	N/A	11.29	-1.44	15% (+/-)	Yes
45: Other Adult	N/A	\$1,745	N/A	\$2,046	N/A	\$2,346	N/A	17.21	14.66	15% (+/-)	Yes
55: 1115 Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$32,444,973	N/A	\$34,308,051	N/A	\$40,380,122	N/A	5.74	17.70	15% (+/-)	No
IP: Number of Users	N/A	6,761	N/A	6,941	N/A	7,575	N/A	2.66	9.13	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$4,799	N/A	\$4,943	N/A	\$5,331	N/A	3.00	7.85	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	5	N/A	5	N/A	6	N/A	0.32	7.91	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$102,270	N/A	\$72,070	N/A	\$0	N/A	-29.50	-100.00	15% (+/-)	No
MH Aged: Number of Users	N/A	1	N/A	1	N/A	0	N/A	0.00	-100.00	15% (+/-)	No
MH Aged: Avg Medicaid Pd per User	N/A	\$102,270	N/A	\$72,070	N/A	Div by 0	N/A	-29.50	Div by 0	15% (+/-)	N/A
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$962,747	N/A	\$851,569	N/A	\$1,125,556	N/A	-11.50	32.17	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	57	N/A	55	N/A	52	N/A	-3.51	-5.45	15% (+/-)	Yes
IP Psych<21: Avg Medicaid Pd per User	N/A	\$16,890	N/A	\$15,483	N/A	\$21,645	N/A	-8.33	39.80	15% (+/-)	No
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$21,370,986	N/A	\$27,565,471	N/A	\$23,576,189	N/A	28.99	-14.50	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	245	N/A	244	N/A	231	N/A	-0.41	-5.33	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$87,229	N/A	\$112,973	N/A	\$102,061	N/A	29.51	-9.66	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$7,060,091	N/A	\$7,848,141	N/A	\$7,991,272	N/A	11.16	1.82	15% (+/-)	Yes
NF Number of Users	N/A	253	N/A	278	N/A	257	N/A	9.88	-7.55	15% (+/-)	Yes
NF: Avg Medicaid Pd per User	N/A	\$27,905	N/A	\$28,231	N/A	\$31,094	N/A	1.17	10.14	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$145,003	N/A	\$6,872,405	N/A	\$17,374,609	N/A	4,639.00	152.80	15% (+/-)	No
Physician: Number of Users	N/A	1,191	N/A	22,554	N/A	35,336	N/A	1,794.00	56.67	15% (+/-)	No
Physician: Avg Medicaid Pd per User	N/A	\$122	N/A	\$305	N/A	\$492	N/A	150.30	61.37	15% (+/-)	No
Dental: Total Medicaid Paid (TOS 09)	N/A	\$4,618,124	N/A	\$4,604,873	N/A	\$4,845,512	N/A	-0.29	5.23	15% (+/-)	Yes
Dental: Number of Users	N/A	15,468	N/A	14,718	N/A	14,771	N/A	-4.85	0.36	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$299	N/A	\$313	N/A	\$328	N/A	4.79	4.85	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$809,096	N/A	\$1,021,752	N/A	\$1,591,637	N/A	26.28	55.78	15% (+/-)	No
Other Practitioner: Number of Users	N/A	10,600	N/A	11,844	N/A	14,987	N/A	11.74	26.54	15% (+/-)	No
Other Practitioner: Avg Medicaid Pd per User	N/A	\$76	N/A	\$86	N/A	\$106	N/A	13.02	23.11	15% (+/-)	No
OPD: Total Medicaid Paid (TOS 11)	N/A	\$19,093,020	N/A	\$13,391,020	N/A	\$10,782,169	N/A	-29.90	-19.50	15% (+/-)	No
OPD Number of Users	N/A	21,733	N/A	17,959	N/A	18,513	N/A	-17.40	3.09	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$879	N/A	\$746	N/A	\$582	N/A	-15.10	-21.90	15% (+/-)	No
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$3,860,494	N/A	\$4,369,297	N/A	\$3,975,183	N/A	13.18	-9.02	15% (+/-)	Yes
Clinic: Number of Users	N/A	15,613	N/A	17,751	N/A	18,796	N/A	13.69	5.89	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$247	N/A	\$246	N/A	\$211	N/A	-0.45	-14.10	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$1,266,603	N/A	\$1,455,216	N/A	\$1,254,431	N/A	14.89	-13.80	15% (+/-)	Yes
HH: Number of Users	N/A	1,146	N/A	1,319	N/A	1,188	N/A	15.10	-9.93	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$1,105	N/A	\$1,103	N/A	\$1,056	N/A	-0.18	-4.29	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$5,526,899	N/A	\$8,424,884	N/A	\$9,736,145	N/A	52.43	15.56	15% (+/-)	No
Lab/Xray: Number of Users	N/A	25,709	N/A	26,103	N/A	27,483	N/A	1.53	5.29	15% (+/-)	Yes
Lab/Xray: Avg Medicaid Pd per User	N/A	\$215	N/A	\$323	N/A	\$354	N/A	50.13	9.76	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$22,493,794	N/A	\$26,684,554	N/A	\$24,928,731	N/A	18.63	-6.58	15% (+/-)	Yes
Drugs: Number of Users	N/A	35,872	N/A	33,916	N/A	34,898	N/A	-5.45	2.90	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$627	N/A	\$787	N/A	\$714	N/A	25.47	-9.21	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$34,116,341	N/A	\$23,236,821	N/A	\$13,224,892	N/A	-31.90	-43.10	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ND

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Other Services: Number of Users	N/A	38,932	N/A	28,754	N/A	3,693	N/A	-26.10	-87.20	15% (+/-)	No
Other Services: Avg Medicaid Pd per User	N/A	\$876	N/A	\$808	N/A	\$3,581	N/A	-7.78	343.10	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$1,357,676	N/A	\$1,335,399	N/A	\$1,399,835	N/A	-1.64	4.83	15% (+/-)	Yes
Transportation: Number of Users	N/A	4,997	N/A	3,692	N/A	3,695	N/A	-26.10	0.08	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$272	N/A	\$362	N/A	\$379	N/A	33.13	4.74	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$0	N/A	\$137,582	N/A	\$1,031,398	N/A	Div by 0	649.70	15% (+/-)	No
PCS: Number of Users	N/A	0	N/A	49	N/A	179	N/A	Div by 0	265.30	15% (+/-)	No
PCS: Avg Medicaid Pd per User	N/A	Div by 0	N/A	\$2,808	N/A	\$5,762	N/A	Div by 0	105.20	15% (+/-)	No
Target Case Management: Total Medicaid Paid (TOS 31)	N/A	\$1,602,286	N/A	\$1,811,426	N/A	\$1,712,546	N/A	13.05	-5.46	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	2,078	N/A	2,449	N/A	2,274	N/A	17.85	-7.15	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$771	N/A	\$740	N/A	\$753	N/A	-4.07	1.82	15% (+/-)	Yes
Rehab Services: Total Medicaid Paid (TOS 33)	N/A	\$6,148,752	N/A	\$8,802,612	N/A	\$9,655,204	N/A	43.16	9.69	15% (+/-)	Yes
Rehab Services: Number of Users	N/A	954	N/A	6,423	N/A	7,783	N/A	573.30	21.17	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$6,445	N/A	\$1,370	N/A	\$1,241	N/A	-78.70	-9.48	15% (+/-)	Yes
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$270,635	N/A	\$293,499	N/A	\$474,744	N/A	8.45	61.75	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	389	N/A	810	N/A	1,433	N/A	108.20	76.91	15% (+/-)	No
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$696	N/A	\$362	N/A	\$331	N/A	-47.90	-8.57	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$315,704	N/A	\$389,994	N/A	\$382,778	N/A	23.53	-1.85	15% (+/-)	Yes
Hospice: Number of Users	N/A	31	N/A	38	N/A	30	N/A	22.58	-21.10	15% (+/-)	No
Hospice: Avg Medicaid Pd per User	N/A	\$10,184	N/A	\$10,263	N/A	\$12,759	N/A	0.78	24.32	15% (+/-)	No
DME: Total Medicaid Paid (TOS 51)	N/A	\$3,973,855	N/A	\$3,780,167	N/A	\$3,368,429	N/A	-4.87	-10.90	15% (+/-)	Yes
DME: Number of Users	N/A	14,166	N/A	14,558	N/A	16,643	N/A	2.77	14.32	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$281	N/A	\$260	N/A	\$202	N/A	-7.44	-22.10	15% (+/-)	No
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$5,200,735	N/A	\$5,670,007	N/A	\$2,032,063	N/A	9.02	-64.20	15% (+/-)	No
Residential Care: Number of Users	N/A	202	N/A	262	N/A	110	N/A	29.70	-58.00	15% (+/-)	No
Residential Care: Avg Medicaid Pd per User	N/A	\$25,746	N/A	\$21,641	N/A	\$18,473	N/A	-15.90	-14.60	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$2,983,805	N/A	\$11,107,789	N/A	\$22,739,538	N/A	272.30	104.70	15% (+/-)	No
Psych. Services: Number of Users	N/A	5,210	N/A	8,110	N/A	9,180	N/A	55.66	13.19	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$573	N/A	\$1,370	N/A	\$2,477	N/A	139.20	80.86	15% (+/-)	No
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$6,598	N/A	\$4,127,067	N/A	\$4,190,732	N/A	62,450.00	1.54	15% (+/-)	Yes
Adult Day Care: Number of Users	N/A	2	N/A	264	N/A	263	N/A	13,100.00	-0.38	15% (+/-)	Yes
Adult Day Care: Avg Medicaid Pd per User	N/A	\$3,299	N/A	\$15,633	N/A	\$15,934	N/A	373.90	1.93	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX TOS</b>											
Inpatient Hospital (TOS 01)	N/A	\$544	N/A	\$585	N/A	\$696	N/A	7.59	19.04	15% (+/-)	No
Aged	N/A	\$998	N/A	\$1,478	N/A	\$1,442	N/A	48.18	-2.43	15% (+/-)	Yes
Disabled	N/A	\$2,232	N/A	\$2,864	N/A	\$3,554	N/A	28.34	24.08	15% (+/-)	No
Child	N/A	\$326	N/A	\$298	N/A	\$363	N/A	-8.68	21.79	15% (+/-)	No
Adult	N/A	\$545	N/A	\$577	N/A	\$641	N/A	5.96	10.97	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$494	N/A	\$619	N/A	\$564	N/A	25.34	-9.01	15% (+/-)	Yes
Aged	N/A	\$7,679	N/A	\$7,890	N/A	\$13,672	N/A	2.74	73.28	15% (+/-)	No
Disabled	N/A	\$5,161	N/A	\$6,182	N/A	\$5,564	N/A	19.78	-10.00	15% (+/-)	Yes
Child	N/A	\$85	N/A	\$136	N/A	\$147	N/A	60.79	7.98	15% (+/-)	Yes
Adult	N/A	\$2	N/A	\$3	N/A	\$2	N/A	25.82	-27.20	15% (+/-)	No
Drugs (TOS=16)	N/A	\$377	N/A	\$455	N/A	\$430	N/A	20.70	-5.52	15% (+/-)	Yes
Aged	N/A	\$1,571	N/A	\$1,826	N/A	\$1,579	N/A	16.26	-13.50	15% (+/-)	Yes
Disabled	N/A	\$2,125	N/A	\$2,559	N/A	\$2,498	N/A	20.38	-2.35	15% (+/-)	Yes
Child	N/A	\$174	N/A	\$213	N/A	\$205	N/A	22.51	-3.93	15% (+/-)	Yes
Adult	N/A	\$320	N/A	\$384	N/A	\$348	N/A	20.08	-9.44	15% (+/-)	Yes
All Other Services	N/A	\$1,542	N/A	\$1,732	N/A	\$1,906	N/A	12.31	10.06	15% (+/-)	Yes
Aged	N/A	\$2,762	N/A	\$2,966	N/A	\$2,820	N/A	7.41	-4.93	15% (+/-)	Yes
Disabled	N/A	\$6,669	N/A	\$7,770	N/A	\$8,535	N/A	16.51	9.85	15% (+/-)	Yes
Child	N/A	\$1,094	N/A	\$1,146	N/A	\$1,274	N/A	4.78	11.11	15% (+/-)	Yes
Adult	N/A	\$1,129	N/A	\$1,344	N/A	\$1,458	N/A	19.10	8.44	15% (+/-)	Yes
<b>% OF NON-DUAL FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TOS</b>											
% Non-Dual FFS Enrollees with IP Claims (TOS=01)	N/A	11.33	N/A	11.83	N/A	13.06	N/A	4.45	10.37	15% (+/-)	Yes
Aged	N/A	12.50	N/A	14.25	N/A	13.89	N/A	13.97	-2.51	15% (+/-)	Yes
Disabled	N/A	18.15	N/A	16.87	N/A	18.52	N/A	-7.03	9.81	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ND

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Child	N/A	8.84	N/A	8.98	N/A	10.03	N/A	1.56	11.66	15% (+/-)	Yes
Adult	N/A	14.54	N/A	16.81	N/A	18.51	N/A	15.58	10.11	15% (+/-)	Yes
% Non-Dual FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	0.92	N/A	0.98	N/A	0.92	N/A	5.62	-5.23	15% (+/-)	Yes
Aged	N/A	23.06	N/A	21.51	N/A	36.11	N/A	-6.71	67.89	15% (+/-)	No
Disabled	N/A	8.40	N/A	8.77	N/A	8.68	N/A	4.49	-1.08	15% (+/-)	Yes
Child	N/A	0.22	N/A	0.22	N/A	0.22	N/A	1.56	-0.01	15% (+/-)	Yes
Adult	N/A	0.02	N/A	0.05	N/A	0.08	N/A	149.90	48.40	15% (+/-)	No
% with ratio of ILTC days/enroll days > 1	N/A	0.54	N/A	28.85	N/A	8.40	N/A	5,198.00	-70.90	15% (+/-)	No
% Non-Dual FFS Enrollees with Drug Claims (TOS=16)	N/A	60.10	N/A	57.81	N/A	60.16	N/A	-3.80	4.06	15% (+/-)	Yes
Aged	N/A	63.33	N/A	63.69	N/A	78.70	N/A	0.56	23.58	15% (+/-)	No
Disabled	N/A	78.31	N/A	79.30	N/A	79.10	N/A	1.26	-0.26	15% (+/-)	Yes
Child	N/A	56.56	N/A	53.19	N/A	56.58	N/A	-5.96	6.38	15% (+/-)	Yes
Adult	N/A	62.53	N/A	62.13	N/A	62.89	N/A	-0.63	1.23	15% (+/-)	Yes
% Non-Dual FFS Enrollees with All Other Claims	N/A	81.49	N/A	81.46	N/A	83.39	N/A	-0.03	2.37	15% (+/-)	Yes
Aged	N/A	75.56	N/A	72.07	N/A	85.19	N/A	-4.62	18.20	15% (+/-)	No
Disabled	N/A	90.58	N/A	91.73	N/A	92.64	N/A	1.27	1.00	15% (+/-)	Yes
Child	N/A	82.42	N/A	81.46	N/A	83.22	N/A	-1.17	2.16	15% (+/-)	Yes
Adult	N/A	77.48	N/A	78.81	N/A	81.12	N/A	1.71	2.94	15% (+/-)	Yes
Avg # IP Days per Non-Dual FFS User	N/A	5	N/A	5	N/A	6	N/A	0.32	7.91	15% (+/-)	Yes
Aged	N/A	8	N/A	9	N/A	9	N/A	13.02	4.39	15% (+/-)	Yes
Disabled	N/A	11	N/A	14	N/A	15	N/A	24.58	8.12	15% (+/-)	Yes
Child	N/A	5	N/A	5	N/A	5	N/A	-5.79	10.08	15% (+/-)	Yes
Adult	N/A	3	N/A	3	N/A	3	N/A	-6.42	3.43	15% (+/-)	Yes
Avg # ILTC Days per Non-Dual FFS User	N/A	243	N/A	273	N/A	252	N/A	12.45	-7.69	15% (+/-)	Yes
Aged	N/A	248	N/A	266	N/A	299	N/A	7.22	12.34	15% (+/-)	Yes
Disabled	N/A	267	N/A	294	N/A	265	N/A	10.30	-9.86	15% (+/-)	Yes
Child	N/A	134	N/A	205	N/A	205	N/A	52.84	0.12	15% (+/-)	Yes
Adult	N/A	40	N/A	28	N/A	13	N/A	-29.30	-53.80	15% (+/-)	No
% Non-Dual FFS Enrollees with Delivery	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX PGM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$1,307,281	N/A	\$1,420,248	N/A	\$1,352,881	N/A	8.64	-4.74	15% (+/-)	Yes
FP: Number of Users	N/A	5,909	N/A	5,602	N/A	5,197	N/A	-5.20	-7.23	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$221	N/A	\$254	N/A	\$260	N/A	14.60	2.68	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$1,580,255	N/A	\$1,468,629	N/A	\$1,586,366	N/A	-7.06	8.02	15% (+/-)	Yes
RHC: Number of Users	N/A	7,063	N/A	6,627	N/A	7,148	N/A	-6.17	7.86	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$224	N/A	\$222	N/A	\$222	N/A	-0.95	0.14	15% (+/-)	Yes
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$531,168	N/A	\$626,597	N/A	\$632,244	N/A	17.97	0.90	15% (+/-)	Yes
FQHC: Number of Users	N/A	1,488	N/A	1,855	N/A	1,955	N/A	24.66	5.39	15% (+/-)	Yes
FQHC: Avg Medicaid Pd per User	N/A	\$357	N/A	\$338	N/A	\$323	N/A	-5.37	-4.26	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$7,636,143	N/A	\$7,326,214	N/A	\$8,525,407	N/A	-4.06	16.37	15% (+/-)	No
IHS: Number of Users	N/A	6,674	N/A	6,350	N/A	6,307	N/A	-4.85	-0.68	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$1,144	N/A	\$1,154	N/A	\$1,352	N/A	0.84	17.16	15% (+/-)	No
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$17,663,168	N/A	\$19,751,759	N/A	\$21,358,457	N/A	11.82	8.13	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	1,867	N/A	1,961	N/A	2,239	N/A	5.04	14.18	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$9,461	N/A	\$10,072	N/A	\$9,539	N/A	6.46	-5.29	15% (+/-)	Yes
<b>FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS</b>											
Total FFS CLTC Expenditures (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$28,146,038	N/A	N/A	N/A	15% (+/-)	No
Number of FFS Non-Dual CLTC Users (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	5,855	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per FFS Non-Dual User (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$4,977	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$1,606	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$6,667	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$3,006	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$521	N/A	N/A	N/A	15% (+/-)	No
% Non-Dual FFS Enrollees with CLTC Claims (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	9.75	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	51.85	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	71.13	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	5.34	N/A	N/A	N/A	15% (+/-)	No

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Adult	N/A	N/A	N/A	N/A	N/A	2.02	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$22,881,753	N/A	N/A	N/A	15% (+/-)	No
Number of Non-Dual CLTC Users (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	3,329	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per Non-Dual User (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$6,873	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$2,876	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$16,745	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$3,006	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$521	N/A	N/A	N/A	15% (+/-)	No
% Non-Dual FFS Enrollees with CLTC Claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	5.74	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	19.44	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	21.55	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	5.34	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	2.02	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$21,358,457	N/A	N/A	N/A	15% (+/-)	No
Number of Non-Dual CLTC Users (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	2,239	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per Non-Dual User (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$9,539	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$3,054	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$18,387	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$4,065	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$3,608	N/A	N/A	N/A	15% (+/-)	No
% Non-Dual FFS Enrollees with CLTC Claims (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	3.86	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	10.19	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	18.55	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	3.65	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.07	N/A	N/A	N/A	15% (+/-)	No
<b>FFS INFORMATION FOR DUAL MEDICAID ENROLLEES (excludes non-EDB duals, duals ever enrolled in HMO/HIOS, duals with only restricted benefits, duals with missing eligibility information, and prescription drug only enrollees)—NOTE: non-EDB duals and duals with restricted benefits were not excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total EDB Dual FFS Enrollees	N/A	13,625	N/A	12,917	N/A	13,230	N/A	-5.20	2.42	15% (+/-)	Yes
Number of EDB Dual FFS Recipients	N/A	12,877	N/A	12,487	N/A	12,873	N/A	-3.03	3.09	15% (+/-)	Yes
Total EDB Dual FFS PYE	N/A	11,235	N/A	10,901	N/A	11,202	N/A	-2.98	2.76	15% (+/-)	Yes
% EDB Only Dual (Code 50)	N/A	1.86	N/A	1.11	N/A	0.60	N/A	-40.20	-46.40	15% (+/-)	No
% QMB Only (Code 51)	N/A	3.13	N/A	2.13	N/A	2.65	N/A	-31.90	24.26	15% (+/-)	No
% QMB Plus (Code 52)	N/A	8.95	N/A	9.34	N/A	10.20	N/A	4.36	9.20	15% (+/-)	Yes
% SLMB Only (Code 53)	N/A	2.14	N/A	1.08	N/A	1.22	N/A	-49.80	13.09	15% (+/-)	Yes
% SLMB Plus (Code 54)	N/A	1.28	N/A	1.42	N/A	1.90	N/A	10.30	34.45	15% (+/-)	No
% QDWI (Code 55)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% QI 1 (Code 56)	N/A	0.19	N/A	0.15	N/A	0.14	N/A	-22.90	-7.50	15% (+/-)	Yes
% QI 2 (Code 57)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% Other Type Dual (Code 58)	N/A	82.44	N/A	84.77	N/A	83.30	N/A	2.83	-1.74	15% (+/-)	Yes
% Dual Type Unknown (Code 59)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
MAX Aged EDB Dual FFS Total	N/A	8,468	N/A	7,893	N/A	8,040	N/A	-6.79	1.86	10% (+/-)	Yes
11: Aged, Cash	N/A	1,779	N/A	1,712	N/A	1,749	N/A	-3.77	2.16	10% (+/-)	Yes
21: Aged, MN	N/A	6,259	N/A	5,950	N/A	6,002	N/A	-4.94	0.87	10% (+/-)	Yes
31: Aged, Poverty	N/A	430	N/A	229	N/A	287	N/A	-46.70	25.33	10% (+/-)	No
41: Other Aged	N/A	0	N/A	2	N/A	2	N/A	Div by 0	0.00	10% (+/-)	Yes
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled EDB Dual FFS Total	N/A	5,071	N/A	4,947	N/A	5,123	N/A	-2.45	3.56	10% (+/-)	Yes
12: Disabled, Cash	N/A	2,326	N/A	2,325	N/A	2,385	N/A	-0.04	2.58	10% (+/-)	Yes
22: Disabled, MN	N/A	2,451	N/A	2,196	N/A	2,182	N/A	-10.40	-0.64	10% (+/-)	Yes
32: Disabled, Poverty	N/A	294	N/A	191	N/A	240	N/A	-35.00	25.65	10% (+/-)	No
42: Other Disabled	N/A	0	N/A	235	N/A	316	N/A	Div by 0	34.47	10% (+/-)	No
52: 1115 Disabled	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
Total FFS Medicaid Amt Paid	N/A	\$269,820,306	N/A	\$309,476,729	N/A	\$325,697,573	N/A	14.70	5.24	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Dual	N/A	\$19,803	N/A	\$23,959	N/A	\$24,618	N/A	20.98	2.75	15% (+/-)	Yes



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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Average FFS Medicaid Amt Paid per FFS Dual Recipient (User of any service)	N/A	\$20,954	N/A	\$24,784	N/A	\$25,301	N/A	18.28	2.09	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$19,749	N/A	\$24,045	N/A	\$24,695	N/A	21.75	2.70	15% (+/-)	Yes
11: Aged, Cash	N/A	\$8,730	N/A	\$10,063	N/A	\$11,068	N/A	15.28	9.99	15% (+/-)	Yes
21: Aged, MN	N/A	\$24,194	N/A	\$28,941	N/A	\$29,747	N/A	19.62	2.78	15% (+/-)	Yes
31: Aged, Poverty	N/A	\$642	N/A	\$1,177	N/A	\$1,344	N/A	83.52	14.19	15% (+/-)	Yes
41: Other Aged	N/A	Div by 0	N/A	\$43,083	N/A	\$129,709	N/A	Div by 0	201.10	15% (+/-)	No
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$20,169	N/A	\$24,098	N/A	\$24,756	N/A	19.48	2.73	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$13,757	N/A	\$15,905	N/A	\$16,930	N/A	15.61	6.44	15% (+/-)	Yes
22: Disabled, MN	N/A	\$28,517	N/A	\$35,309	N/A	\$36,317	N/A	23.82	2.86	15% (+/-)	Yes
32: Disabled, Poverty	N/A	\$1,296	N/A	\$1,646	N/A	\$3,700	N/A	26.98	124.80	15% (+/-)	No
42: Other Disabled	N/A	Div by 0	N/A	\$18,643	N/A	\$19,980	N/A	Div by 0	7.17	15% (+/-)	Yes
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$1,986,058	N/A	\$2,079,251	N/A	\$4,102,200	N/A	4.69	97.29	15% (+/-)	No
IP: Number of Users	N/A	997	N/A	1,011	N/A	1,387	N/A	1.40	37.19	15% (+/-)	No
IP: Average Medicaid Pd per User	N/A	\$1,992	N/A	\$2,057	N/A	\$2,958	N/A	3.24	43.81	15% (+/-)	No
IP: Average Medicaid Covered Days Per User	N/A	6	N/A	7	N/A	7	N/A	7.47	7.61	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$458,574	N/A	\$358,771	N/A	\$764,057	N/A	-21.80	113.00	15% (+/-)	No
MH Aged: Number of Users	N/A	12	N/A	8	N/A	11	N/A	-33.30	37.50	15% (+/-)	No
MH Aged: Avg Medicaid Pd per User	N/A	\$38,215	N/A	\$44,846	N/A	\$69,460	N/A	17.35	54.88	15% (+/-)	No
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$0	N/A	\$1,955	N/A	\$0	N/A	Div by 0	-100.00	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	0	N/A	1	N/A	0	N/A	Div by 0	-100.00	15% (+/-)	No
IP Psych<21: Avg Medicaid Pd per User	N/A	Div by 0	N/A	\$1,955	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$34,513,804	N/A	\$41,566,179	N/A	\$38,450,574	N/A	20.43	-7.50	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	400	N/A	404	N/A	415	N/A	1.00	2.72	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$86,285	N/A	\$102,887	N/A	\$92,652	N/A	19.24	-9.95	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$141,095,231	N/A	\$158,105,696	N/A	\$162,004,138	N/A	12.06	2.47	15% (+/-)	Yes
NF Number of Users	N/A	5,014	N/A	4,845	N/A	4,917	N/A	-3.37	1.49	15% (+/-)	Yes
NF: Avg Medicaid Pd per User	N/A	\$28,140	N/A	\$32,633	N/A	\$32,948	N/A	15.96	0.97	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$10,187	N/A	\$894,445	N/A	\$3,115,505	N/A	8,680.00	248.30	15% (+/-)	No
Physician: Number of Users	N/A	151	N/A	6,273	N/A	8,678	N/A	4,054.00	38.34	15% (+/-)	No
Physician: Avg Medicaid Pd per User	N/A	\$67	N/A	\$143	N/A	\$359	N/A	111.40	151.80	15% (+/-)	No
Dental: Total Medicaid Paid (TOS 09)	N/A	\$1,173,994	N/A	\$1,257,704	N/A	\$1,317,059	N/A	7.13	4.72	15% (+/-)	Yes
Dental: Number of Users	N/A	4,375	N/A	4,261	N/A	4,285	N/A	-2.61	0.56	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$268	N/A	\$295	N/A	\$307	N/A	10.00	4.13	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$217,767	N/A	\$189,813	N/A	\$295,823	N/A	-12.80	55.85	15% (+/-)	No
Other Practitioner: Number of Users	N/A	3,405	N/A	3,095	N/A	4,049	N/A	-9.10	30.82	15% (+/-)	No
Other Practitioner: Avg Medicaid Pd per User	N/A	\$64	N/A	\$61	N/A	\$73	N/A	-4.11	19.13	15% (+/-)	No
OPD: Total Medicaid Paid (TOS 11)	N/A	\$3,854,183	N/A	\$3,642,389	N/A	\$4,196,517	N/A	-5.50	15.21	15% (+/-)	No
OPD Number of Users	N/A	5,294	N/A	5,103	N/A	5,943	N/A	-3.61	16.46	15% (+/-)	No
OPD: Avg Medicaid Pd per User	N/A	\$728	N/A	\$714	N/A	\$706	N/A	-1.96	-1.07	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$371,008	N/A	\$1,224,900	N/A	\$1,796,760	N/A	230.20	46.69	15% (+/-)	No
Clinic: Number of Users	N/A	2,096	N/A	3,553	N/A	4,147	N/A	69.51	16.72	15% (+/-)	No
Clinic: Avg Medicaid Pd per User	N/A	\$177	N/A	\$345	N/A	\$433	N/A	94.77	25.68	15% (+/-)	No
HH: Total Medicaid Paid (TOS 13)	N/A	\$1,088,309	N/A	\$769,498	N/A	\$666,554	N/A	-29.30	-13.40	15% (+/-)	Yes
HH: Number of Users	N/A	398	N/A	345	N/A	303	N/A	-13.30	-12.20	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$2,734	N/A	\$2,230	N/A	\$2,200	N/A	-18.40	-1.37	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$300,192	N/A	\$506,850	N/A	\$712,259	N/A	68.84	40.53	15% (+/-)	No
Lab/Xray: Number of Users	N/A	3,625	N/A	3,469	N/A	4,162	N/A	-4.30	19.98	15% (+/-)	No
Lab/Xray: Avg Medicaid Pd per User	N/A	\$83	N/A	\$146	N/A	\$171	N/A	76.43	17.13	15% (+/-)	No
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$34,120,206	N/A	\$40,226,098	N/A	\$39,646,712	N/A	17.90	-1.44	15% (+/-)	Yes
Drugs: Number of Users	N/A	11,491	N/A	11,349	N/A	11,497	N/A	-1.24	1.30	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$2,969	N/A	\$3,544	N/A	\$3,448	N/A	19.37	-2.71	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$45,050,839	N/A	\$25,559,956	N/A	\$23,804,401	N/A	-43.30	-6.87	15% (+/-)	Yes
Other Services: Number of Users	N/A	9,461	N/A	7,737	N/A	4,448	N/A	-18.20	-42.50	15% (+/-)	No



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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Other Services: Avg Medicaid Pd per User	N/A	\$4,762	N/A	\$3,304	N/A	\$5,352	N/A	-30.60	62.00	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$660,832	N/A	\$526,812	N/A	\$624,803	N/A	-20.30	18.60	15% (+/-)	No
Transportation: Number of Users	N/A	2,584	N/A	2,072	N/A	2,194	N/A	-19.80	5.89	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$256	N/A	\$254	N/A	\$285	N/A	-0.58	12.01	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$0	N/A	\$1,510,544	N/A	\$6,770,870	N/A	Div by 0	348.20	15% (+/-)	No
PCS: Number of Users	N/A	0	N/A	516	N/A	1,208	N/A	Div by 0	134.10	15% (+/-)	No
PCS: Avg Medicaid Pd per User	N/A	Div by 0	N/A	\$2,927	N/A	\$5,605	N/A	Div by 0	91.47	15% (+/-)	No
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$1,155,887	N/A	\$1,220,337	N/A	\$1,626,073	N/A	5.58	33.25	15% (+/-)	No
Target Case Management: Number of Users	N/A	1,384	N/A	1,348	N/A	1,441	N/A	-2.60	6.90	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$835	N/A	\$905	N/A	\$1,128	N/A	8.40	24.65	15% (+/-)	No
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$28,404	N/A	\$2,162,494	N/A	\$4,130,525	N/A	7,513.00	91.01	15% (+/-)	No
Rehab Services: Number of Users	N/A	2	N/A	1,187	N/A	1,351	N/A	59,250.00	13.82	15% (+/-)	Yes
Rehab Services: Avg Medicaid Pd per User	N/A	\$14,202	N/A	\$1,822	N/A	\$3,057	N/A	-87.20	67.82	15% (+/-)	No
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$203,793	N/A	\$146,033	N/A	\$114,220	N/A	-28.30	-21.80	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	391	N/A	291	N/A	352	N/A	-25.60	20.96	15% (+/-)	No
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$521	N/A	\$502	N/A	\$324	N/A	-3.72	-35.30	15% (+/-)	No
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$1,368,068	N/A	\$2,547,961	N/A	\$3,241,204	N/A	86.25	27.21	15% (+/-)	No
Hospice: Number of Users	N/A	207	N/A	264	N/A	298	N/A	27.54	12.88	15% (+/-)	Yes
Hospice: Avg Medicaid Pd per User	N/A	\$6,609	N/A	\$9,651	N/A	\$10,877	N/A	46.03	12.69	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$567,699	N/A	\$922,466	N/A	\$1,002,841	N/A	62.49	8.71	15% (+/-)	Yes
DME: Number of Users	N/A	3,066	N/A	3,497	N/A	4,094	N/A	14.06	17.07	15% (+/-)	No
DME: Avg Medicaid Pd per User	N/A	\$185	N/A	\$264	N/A	\$245	N/A	42.47	-7.14	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$1,390,468	N/A	\$11,402,812	N/A	\$12,605,761	N/A	720.10	10.55	15% (+/-)	Yes
Residential Care: Number of Users	N/A	111	N/A	532	N/A	549	N/A	379.30	3.20	15% (+/-)	Yes
Residential Care: Avg Medicaid Pd per User	N/A	\$12,527	N/A	\$21,434	N/A	\$22,961	N/A	71.10	7.13	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$124,746	N/A	\$1,315,307	N/A	\$2,383,384	N/A	954.40	81.20	15% (+/-)	No
Psych. Services: Number of Users	N/A	736	N/A	1,903	N/A	1,623	N/A	158.60	-14.70	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$169	N/A	\$691	N/A	\$1,469	N/A	307.80	112.50	15% (+/-)	No
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$44,866	N/A	\$11,311,298	N/A	\$12,287,000	N/A	25,111.00	8.63	15% (+/-)	Yes
Adult Day Care: Number of Users	N/A	8	N/A	726	N/A	782	N/A	8,975.00	7.71	15% (+/-)	Yes
Adult Day Care: Avg Medicaid Pd per User	N/A	\$5,608	N/A	\$15,580	N/A	\$15,712	N/A	177.80	0.85	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY SELECTED TYPE OF SERVICE</b>											
Inpatient Hospital (TOS=01)	N/A	\$146	N/A	\$161	N/A	\$310	N/A	10.43	92.62	15% (+/-)	No
Aged	N/A	\$81	N/A	\$113	N/A	\$237	N/A	39.64	108.60	15% (+/-)	No
Disabled	N/A	\$248	N/A	\$217	N/A	\$420	N/A	-12.40	93.16	15% (+/-)	No
ILTC (TOS=02,04,05,07)	N/A	\$12,922	N/A	\$15,486	N/A	\$15,209	N/A	19.84	-1.79	15% (+/-)	Yes
Aged	N/A	\$15,791	N/A	\$19,053	N/A	\$19,052	N/A	20.66	-0.01	15% (+/-)	Yes
Disabled	N/A	\$8,352	N/A	\$10,035	N/A	\$9,378	N/A	20.16	-6.55	15% (+/-)	Yes
Drugs (TOS=16)	N/A	\$2,504	N/A	\$3,114	N/A	\$2,997	N/A	24.36	-3.77	15% (+/-)	Yes
Aged	N/A	\$2,303	N/A	\$2,874	N/A	\$2,743	N/A	24.78	-4.57	15% (+/-)	Yes
Disabled	N/A	\$2,860	N/A	\$3,512	N/A	\$3,410	N/A	22.82	-2.92	15% (+/-)	Yes
All Other Services	N/A	\$4,231	N/A	\$5,198	N/A	\$6,102	N/A	22.85	17.40	15% (+/-)	No
Aged	N/A	\$1,574	N/A	\$2,004	N/A	\$2,664	N/A	27.35	32.91	15% (+/-)	No
Disabled	N/A	\$8,709	N/A	\$10,333	N/A	\$11,548	N/A	18.65	11.76	15% (+/-)	Yes
<b>% OF FFS DUALS WITH CLAIMS BY SELECTED TYPE OF SERVICE</b>											
% FFS Duals with IP Claims (TOS=01)	N/A	7.32	N/A	7.83	N/A	10.48	N/A	6.96	33.95	15% (+/-)	No
Aged	N/A	6.44	N/A	7.08	N/A	10.04	N/A	10.44	41.73	15% (+/-)	No
Disabled	N/A	8.76	N/A	8.81	N/A	11.03	N/A	0.66	25.14	15% (+/-)	No
% FFS Duals with ILTC Claims (TOS=02,04,05,07)	N/A	39.71	N/A	40.63	N/A	40.26	N/A	2.32	-0.90	15% (+/-)	Yes
Aged	N/A	55.35	N/A	57.28	N/A	56.39	N/A	3.49	-1.55	15% (+/-)	Yes
Disabled	N/A	14.26	N/A	14.68	N/A	15.48	N/A	2.93	5.48	15% (+/-)	Yes
% FFS Duals with Drug Claims (TOS=16)	N/A	84.34	N/A	87.86	N/A	86.90	N/A	4.18	-1.09	15% (+/-)	Yes
Aged	N/A	87.32	N/A	90.79	N/A	89.04	N/A	3.98	-1.92	15% (+/-)	Yes
Disabled	N/A	79.69	N/A	83.36	N/A	83.64	N/A	4.61	0.33	15% (+/-)	Yes
% FFS Duals with All Other Claims	N/A	81.04	N/A	82.34	N/A	85.71	N/A	1.60	4.09	15% (+/-)	Yes
Aged	N/A	75.52	N/A	75.51	N/A	79.30	N/A	-0.01	5.02	15% (+/-)	Yes
Disabled	N/A	90.40	N/A	93.23	N/A	95.61	N/A	3.13	2.55	15% (+/-)	Yes

**2003-2005 MAX PSF VALIDATION TABLE**  
**STATE: ND**

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Avg # IP Days per FFS Dual User (TOS 01)	N/A	6	N/A	7	N/A	7	N/A	7.47	7.61	15% (+/-)	Yes
Aged	N/A	6	N/A	5	N/A	6	N/A	-1.41	13.06	15% (+/-)	Yes
Disabled	N/A	7	N/A	8	N/A	9	N/A	17.08	5.30	15% (+/-)	Yes
Avg # ILTC Days per FFS Dual User (TOS 02, 04, 05, 07)	N/A	259	N/A	285	N/A	271	N/A	10.30	-5.18	15% (+/-)	Yes
Aged	N/A	253	N/A	278	N/A	268	N/A	10.05	-3.63	15% (+/-)	Yes
Disabled	N/A	295	N/A	328	N/A	283	N/A	11.26	-13.80	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX PROGRAM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$91,770	N/A	\$87,514	N/A	\$88,410	N/A	-4.64	1.02	15% (+/-)	Yes
FP: Number of Users	N/A	380	N/A	356	N/A	360	N/A	-6.32	1.12	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$242	N/A	\$246	N/A	\$246	N/A	1.79	-0.10	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$234,451	N/A	\$231,163	N/A	\$296,790	N/A	-1.40	28.39	15% (+/-)	No
RHC: Number of Users	N/A	1,673	N/A	1,525	N/A	1,921	N/A	-8.85	25.97	15% (+/-)	No
RHC: Avg Medicaid Pd per User	N/A	\$140	N/A	\$152	N/A	\$154	N/A	8.17	1.92	15% (+/-)	Yes
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$9,888	N/A	\$24,343	N/A	\$40,146	N/A	146.20	64.92	15% (+/-)	No
FQHC: Number of Users	N/A	48	N/A	167	N/A	250	N/A	247.90	49.70	15% (+/-)	No
FQHC: Avg Medicaid Pd per User	N/A	\$206	N/A	\$146	N/A	\$161	N/A	-29.20	10.17	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$1,128,359	N/A	\$1,092,340	N/A	\$1,061,869	N/A	-3.19	-2.79	15% (+/-)	Yes
IHS: Number of Users	N/A	376	N/A	366	N/A	396	N/A	-2.66	8.20	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$3,001	N/A	\$2,985	N/A	\$2,681	N/A	-0.55	-10.20	15% (+/-)	Yes
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$43,654,844	N/A	\$46,991,317	N/A	\$52,035,201	N/A	7.64	10.73	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	2,632	N/A	2,215	N/A	2,921	N/A	-15.80	31.87	15% (+/-)	No
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$16,586	N/A	\$21,215	N/A	\$17,814	N/A	27.91	-16.00	15% (+/-)	No
<b>FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS</b>											
Total FFS CLTC Expenditures (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$65,819,080	N/A	N/A	N/A	15% (+/-)	No
Number of Dual CLTC Users (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	6,953	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per FFS Dual User (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$9,466	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$4,595	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$14,596	N/A	N/A	N/A	15% (+/-)	No
% FFS Dual Enrollees with CLTC Claims (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	52.55	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	44.27	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	66.15	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$56,561,028	N/A	N/A	N/A	15% (+/-)	No
Number of Dual CLTC Users (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	3,168	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per Dual User (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$17,854	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$7,945	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$26,766	N/A	N/A	N/A	15% (+/-)	No
% FFS Dual Enrollees with CLTC Claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	23.95	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	18.57	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	32.60	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$52,035,201	N/A	N/A	N/A	15% (+/-)	No
Number of Dual CLTC Users (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	2,921	N/A	N/A	N/A	15% (+/-)	No
Average CLTC Expenditures per Dual User (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$17,814	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$6,133	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$28,116	N/A	N/A	N/A	15% (+/-)	No
% FFS Dual Enrollees with CLTC Claims (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	22.08	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	16.98	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	30.31	N/A	N/A	N/A	15% (+/-)	No
<b>FFS INFORMATION FOR TOTAL MEDICAID ENROLLEES (excludes people ever enrolled in HMO/HIOs, with missing eligibility information, S-SCHIP only, FP Only, Aliens with only restricted benefits, duals with restricted benefits only, and prescription drug only enrollees) --- NOTE: S-SCHIP only, FP Only, duals with restricted benefits, and Aliens with restricted benefits were NOT excluded prior to 2001. Prescription drug only enrollees were NOT excluded prior to 2003.</b>											
Total FFS Enrollees	N/A	73,314	N/A	71,583	N/A	71,237	N/A	-2.36	-0.48	15% (+/-)	Yes
# FFS Recipients	N/A	63,031	N/A	61,703	N/A	62,407	N/A	-2.11	1.14	15% (+/-)	Yes
% FFS Enrollees who are Recipients	65-90%	85.97	Yes	86.20	Yes	87.60	Yes	0.26	1.63	15% (+/-)	Yes
% Aged who are Recipients	90-100%	94.59	Yes	96.23	Yes	97.28	Yes	1.74	1.09	15% (+/-)	Yes
% Disabled who are Recipients	85-100%	92.96	Yes	94.79	Yes	95.49	Yes	1.97	0.74	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ND

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
% Child who are Recipients	80-100%	84.67	Yes	83.65	Yes	85.21	Yes	-1.21	1.87	15% (+/-)	Yes
% Adults who are Recipients	80-100%	80.76	Yes	81.98	Yes	83.48	Yes	1.51	1.83	15% (+/-)	Yes
Total FFS PYE	N/A	53,268	N/A	51,172	N/A	51,384	N/A	-3.93	0.42	15% (+/-)	Yes
MAX Aged Total	N/A	8,828	N/A	8,251	N/A	8,148	N/A	-6.54	-1.25	10% (+/-)	Yes
11: Aged, Cash	N/A	1,942	N/A	1,885	N/A	1,786	N/A	-2.94	-5.25	10% (+/-)	Yes
21: Aged, MN	N/A	6,372	N/A	6,043	N/A	6,070	N/A	-5.16	0.45	10% (+/-)	Yes
31: Aged, Poverty	N/A	514	N/A	320	N/A	290	N/A	-37.70	-9.38	10% (+/-)	Yes
41: Other Aged	N/A	0	N/A	3	N/A	2	N/A	Div by 0	-33.30	10% (+/-)	No
51: 1115 Aged	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled Total	N/A	9,645	N/A	9,541	N/A	9,744	N/A	-1.08	2.13	10% (+/-)	Yes
12: Disabled, Cash	N/A	6,277	N/A	6,358	N/A	6,396	N/A	1.29	0.60	10% (+/-)	Yes
22: Disabled, MN	N/A	3,071	N/A	2,731	N/A	2,749	N/A	-11.10	0.66	10% (+/-)	Yes
32: Disabled, Poverty	N/A	297	N/A	194	N/A	244	N/A	-34.70	25.77	10% (+/-)	No
42: Other Disabled	N/A	0	N/A	258	N/A	355	N/A	Div by 0	37.60	10% (+/-)	No
52: 1115 Disabled	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Child Total	N/A	36,428	N/A	37,215	N/A	37,219	N/A	2.16	0.01	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	11,917	N/A	12,238	N/A	12,008	N/A	2.69	-1.88	10% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	1,821	N/A	2,005	N/A	1,864	N/A	10.10	-7.03	10% (+/-)	Yes
24: AFDC Child, MN	N/A	2,180	N/A	2,097	N/A	2,343	N/A	-3.81	11.73	10% (+/-)	No
34: Child Poverty	N/A	7,650	N/A	10,525	N/A	10,787	N/A	37.58	2.49	10% (+/-)	Yes
44: Other Child	N/A	10,956	N/A	8,338	N/A	8,167	N/A	-23.90	-2.05	10% (+/-)	Yes
48: Foster Care Child	N/A	1,904	N/A	2,012	N/A	2,050	N/A	5.67	1.89	10% (+/-)	Yes
54: 1115 Child	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Adult Total	N/A	18,413	N/A	16,576	N/A	16,126	N/A	-9.98	-2.71	10% (+/-)	Yes
15: AFDC Adult, Cash	N/A	6,211	N/A	6,163	N/A	6,057	N/A	-0.77	-1.72	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	1,989	N/A	2,198	N/A	2,082	N/A	10.51	-5.28	10% (+/-)	Yes
25: AFDC Adult, MN	N/A	1,588	N/A	1,545	N/A	1,552	N/A	-2.71	0.45	10% (+/-)	Yes
35: Adult, Poverty	N/A	824	N/A	1,095	N/A	1,167	N/A	32.89	6.58	10% (+/-)	Yes
45: Other Adult	N/A	7,801	N/A	5,575	N/A	5,268	N/A	-28.50	-5.51	10% (+/-)	Yes
55: 1115 Adult	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
Total FFS Medicaid Amt Paid	N/A	\$446,292,033	N/A	\$508,401,883	N/A	\$534,255,910	N/A	13.92	5.09	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Enrollee	N/A	\$6,087	N/A	\$7,102	N/A	\$7,500	N/A	16.67	5.60	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Recipient (User of any svc)	N/A	\$7,081	N/A	\$8,240	N/A	\$8,561	N/A	16.37	3.90	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$19,474	N/A	\$23,616	N/A	\$24,626	N/A	21.27	4.28	15% (+/-)	Yes
11: Aged, Cash	N/A	\$9,117	N/A	\$10,464	N/A	\$11,025	N/A	14.78	5.36	15% (+/-)	Yes
21: Aged, MN	N/A	\$24,156	N/A	\$28,906	N/A	\$29,706	N/A	19.66	2.77	15% (+/-)	Yes
31: Aged, Poverty	N/A	\$564	N/A	\$898	N/A	\$1,330	N/A	59.25	48.13	15% (+/-)	No
41: Other Aged	N/A	Div by 0	N/A	\$53,971	N/A	\$129,709	N/A	Div by 0	140.30	15% (+/-)	No
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$18,281	N/A	\$21,824	N/A	\$22,572	N/A	19.38	3.43	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$14,988	N/A	\$17,782	N/A	\$18,499	N/A	18.64	4.04	15% (+/-)	Yes
22: Disabled, MN	N/A	\$26,655	N/A	\$32,946	N/A	\$34,160	N/A	23.60	3.69	15% (+/-)	Yes
32: Disabled, Poverty	N/A	\$1,285	N/A	\$1,627	N/A	\$3,681	N/A	26.61	126.20	15% (+/-)	No
42: Other Disabled	N/A	Div by 0	N/A	\$18,897	N/A	\$19,194	N/A	Div by 0	1.57	15% (+/-)	Yes
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Child	N/A	\$1,680	N/A	\$1,794	N/A	\$1,989	N/A	6.80	10.85	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$1,344	N/A	\$1,246	N/A	\$1,460	N/A	-7.35	17.20	15% (+/-)	No
16: AFDC-U Child, Cash	N/A	\$1,311	N/A	\$1,126	N/A	\$1,093	N/A	-14.10	-2.92	15% (+/-)	Yes
24: AFDC Child, MN	N/A	\$3,766	N/A	\$6,289	N/A	\$6,405	N/A	66.99	1.84	15% (+/-)	Yes
34: Child, Poverty	N/A	\$901	N/A	\$850	N/A	\$930	N/A	-5.65	9.48	15% (+/-)	Yes
44: Other Child	N/A	\$1,153	N/A	\$1,298	N/A	\$1,455	N/A	12.53	12.10	15% (+/-)	Yes
48: Foster Care Child	N/A	\$7,900	N/A	\$8,103	N/A	\$8,547	N/A	2.57	5.48	15% (+/-)	Yes
54: 1115 Child	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Adult	N/A	\$2,002	N/A	\$2,327	N/A	\$2,459	N/A	16.19	5.68	15% (+/-)	Yes
15: AFDC Adult, Cash	N/A	\$2,502	N/A	\$2,770	N/A	\$2,863	N/A	10.69	3.37	15% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	\$1,325	N/A	\$1,404	N/A	\$1,432	N/A	5.96	2.00	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ND

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
25: AFDC Adult, MN	N/A	\$2,064	N/A	\$2,802	N/A	\$2,671	N/A	35.77	-4.65	15% (+/-)	Yes
35: Adult, Poverty	N/A	\$2,157	N/A	\$2,409	N/A	\$2,400	N/A	11.72	-0.41	15% (+/-)	Yes
45: Other Adult	N/A	\$1,749	N/A	\$2,053	N/A	\$2,350	N/A	17.41	14.49	15% (+/-)	Yes
55: 1115 Adult	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$34,431,031	N/A	\$36,387,302	N/A	\$44,482,322	N/A	5.68	22.25	15% (+/-)	No
IP: Number of Users	N/A	7,758	N/A	7,952	N/A	8,962	N/A	2.50	12.70	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$4,438	N/A	\$4,576	N/A	\$4,963	N/A	3.10	8.47	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	5	N/A	5	N/A	6	N/A	1.35	8.63	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$560,844	N/A	\$430,841	N/A	\$764,057	N/A	-23.20	77.34	15% (+/-)	No
MH Aged: Number of Users	N/A	13	N/A	9	N/A	11	N/A	-30.80	22.22	15% (+/-)	No
MH Aged: Avg Medicaid Pd per User	N/A	\$43,142	N/A	\$47,871	N/A	\$69,460	N/A	10.96	45.10	15% (+/-)	No
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$962,747	N/A	\$853,524	N/A	\$1,125,556	N/A	-11.30	31.87	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	57	N/A	56	N/A	52	N/A	-1.75	-7.14	15% (+/-)	Yes
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$16,890	N/A	\$15,242	N/A	\$21,645	N/A	-9.76	42.02	15% (+/-)	No
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$55,884,790	N/A	\$69,131,650	N/A	\$62,026,763	N/A	23.70	-10.30	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	645	N/A	648	N/A	646	N/A	0.47	-0.31	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$86,643	N/A	\$106,685	N/A	\$96,017	N/A	23.13	-10.00	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$148,155,322	N/A	\$165,953,837	N/A	\$169,995,410	N/A	12.01	2.44	15% (+/-)	Yes
NF Number of Users	N/A	5,267	N/A	5,123	N/A	5,174	N/A	-2.73	1.00	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$28,129	N/A	\$32,394	N/A	\$32,856	N/A	15.16	1.43	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$155,190	N/A	\$7,766,850	N/A	\$20,490,114	N/A	4,905.00	163.80	15% (+/-)	No
Physician: Number of Users	N/A	1,342	N/A	28,827	N/A	44,014	N/A	2,048.00	52.68	15% (+/-)	No
Physician: Avg Medicaid Pd per User	N/A	\$116	N/A	\$269	N/A	\$466	N/A	133.00	72.79	15% (+/-)	No
Dental: Total Medicaid Paid (TOS 09)	N/A	\$5,792,118	N/A	\$5,862,577	N/A	\$6,162,571	N/A	1.22	5.12	15% (+/-)	Yes
Dental: Number of Users	N/A	19,843	N/A	18,979	N/A	19,056	N/A	-4.35	0.41	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$292	N/A	\$309	N/A	\$323	N/A	5.82	4.69	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$1,026,863	N/A	\$1,211,565	N/A	\$1,887,460	N/A	17.99	55.79	15% (+/-)	No
Other Practitioner: Number of Users	N/A	14,005	N/A	14,939	N/A	19,036	N/A	6.67	27.42	15% (+/-)	No
Other Practitioner: Avg Medicaid Pd per User	N/A	\$73	N/A	\$81	N/A	\$99	N/A	10.61	22.26	15% (+/-)	No
OPD: Total Medicaid Paid (TOS 11)	N/A	\$22,947,203	N/A	\$17,033,409	N/A	\$14,978,686	N/A	-25.80	-12.10	15% (+/-)	Yes
OPD Number of Users	N/A	27,027	N/A	23,062	N/A	24,456	N/A	-14.70	6.05	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$849	N/A	\$739	N/A	\$612	N/A	-13.00	-17.10	15% (+/-)	No
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$4,231,502	N/A	\$5,594,197	N/A	\$5,771,943	N/A	32.20	3.18	15% (+/-)	Yes
Clinic: Number of Users	N/A	17,709	N/A	21,304	N/A	22,943	N/A	20.30	7.69	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$239	N/A	\$263	N/A	\$252	N/A	9.90	-4.19	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$2,354,912	N/A	\$2,224,714	N/A	\$1,920,985	N/A	-5.53	-13.70	15% (+/-)	Yes
HH: Number of Users	N/A	1,544	N/A	1,664	N/A	1,491	N/A	7.77	-10.40	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$1,525	N/A	\$1,337	N/A	\$1,288	N/A	-12.30	-3.63	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$5,827,091	N/A	\$8,931,734	N/A	\$10,448,404	N/A	53.28	16.98	15% (+/-)	No
Lab/Xray: Number of Users	N/A	29,334	N/A	29,572	N/A	31,645	N/A	0.81	7.01	15% (+/-)	Yes
Lab/Xray:Avg Medicaid Pd per User	N/A	\$199	N/A	\$302	N/A	\$330	N/A	52.05	9.32	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$56,614,000	N/A	\$66,910,652	N/A	\$64,575,443	N/A	18.19	-3.49	15% (+/-)	Yes
Drugs: Number of Users	N/A	47,363	N/A	45,265	N/A	46,395	N/A	-4.43	2.50	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$1,195	N/A	\$1,478	N/A	\$1,392	N/A	23.67	-5.84	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$79,167,180	N/A	\$48,796,777	N/A	\$37,029,293	N/A	-38.40	-24.10	15% (+/-)	No
Other Services: Number of Users	N/A	48,393	N/A	36,491	N/A	8,141	N/A	-24.60	-77.70	15% (+/-)	No
Other Services: Avg Medicaid Pd per User	N/A	\$1,636	N/A	\$1,337	N/A	\$4,548	N/A	-18.30	240.10	15% (+/-)	No
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$2,018,508	N/A	\$1,862,211	N/A	\$2,024,638	N/A	-7.74	8.72	15% (+/-)	Yes
Transportation: Number of Users	N/A	7,581	N/A	5,764	N/A	5,889	N/A	-24.00	2.17	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$266	N/A	\$323	N/A	\$344	N/A	21.34	6.42	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$0	N/A	\$1,648,126	N/A	\$7,802,268	N/A	Div by 0	373.40	15% (+/-)	No
PCS: Number of Users	N/A	0	N/A	565	N/A	1,387	N/A	Div by 0	145.50	15% (+/-)	No
PCS: Avg Medicaid Pd per User	N/A	Div by 0	N/A	\$2,917	N/A	\$5,625	N/A	Div by 0	92.84	15% (+/-)	No
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$2,758,173	N/A	\$3,031,763	N/A	\$3,338,619	N/A	9.92	10.12	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	3,462	N/A	3,797	N/A	3,715	N/A	9.68	-2.16	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$797	N/A	\$798	N/A	\$899	N/A	0.22	12.55	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ND

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$6,177,156	N/A	\$10,965,106	N/A	\$13,785,729	N/A	77.51	25.72	15% (+/-)	No
Rehab Services: Number of Users	N/A	956	N/A	7,610	N/A	9,134	N/A	696.00	20.03	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$6,461	N/A	\$1,441	N/A	\$1,509	N/A	-77.70	4.75	15% (+/-)	Yes
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$474,428	N/A	\$439,532	N/A	\$588,964	N/A	-7.36	34.00	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	780	N/A	1,101	N/A	1,785	N/A	41.15	62.13	15% (+/-)	No
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$608	N/A	\$399	N/A	\$330	N/A	-34.40	-17.30	15% (+/-)	No
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$1,683,772	N/A	\$2,937,955	N/A	\$3,623,982	N/A	74.49	23.35	15% (+/-)	No
Hospice: Number of Users	N/A	238	N/A	302	N/A	328	N/A	26.89	8.61	15% (+/-)	Yes
Hospice: Avg Medicaid Pd per User	N/A	\$7,075	N/A	\$9,728	N/A	\$11,049	N/A	37.51	13.57	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$4,541,554	N/A	\$4,702,633	N/A	\$4,371,270	N/A	3.55	-7.05	15% (+/-)	Yes
DME: Number of Users	N/A	17,232	N/A	18,055	N/A	20,737	N/A	4.78	14.85	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$264	N/A	\$260	N/A	\$211	N/A	-1.17	-19.10	15% (+/-)	No
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$6,591,203	N/A	\$17,072,819	N/A	\$14,637,824	N/A	159.00	-14.30	15% (+/-)	Yes
Residential Care: Number of Users	N/A	313	N/A	794	N/A	659	N/A	153.70	-17.00	15% (+/-)	No
Residential Care: Avg Medicaid Pd per User	N/A	\$21,058	N/A	\$21,502	N/A	\$22,212	N/A	2.11	3.30	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$3,108,551	N/A	\$12,423,096	N/A	\$25,122,922	N/A	299.60	102.20	15% (+/-)	No
Psych. Services: Number of Users	N/A	5,946	N/A	10,013	N/A	10,803	N/A	68.40	7.89	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$523	N/A	\$1,241	N/A	\$2,326	N/A	137.30	87.44	15% (+/-)	No
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$51,464	N/A	\$15,438,365	N/A	\$16,477,732	N/A	29,898.00	6.73	15% (+/-)	Yes
Adult Day Care: Number of Users	N/A	10	N/A	990	N/A	1,045	N/A	9,800.00	5.56	15% (+/-)	Yes
Adult Day Care: Avg Medicaid Pd per User	N/A	\$5,146	N/A	\$15,594	N/A	\$15,768	N/A	203.00	1.12	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY SELECTED MAX TOS</b>											
Inpatient Hospital (TOS=01)	N/A	\$470	N/A	\$508	N/A	\$624	N/A	8.24	22.84	15% (+/-)	No
Aged	N/A	\$119	N/A	\$173	N/A	\$253	N/A	45.57	46.33	15% (+/-)	No
Disabled	N/A	\$1,189	N/A	\$1,492	N/A	\$1,906	N/A	25.48	27.77	15% (+/-)	No
Child	N/A	\$326	N/A	\$298	N/A	\$363	N/A	-8.68	21.79	15% (+/-)	No
Adult	N/A	\$545	N/A	\$582	N/A	\$641	N/A	6.76	10.30	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$2,804	N/A	\$3,302	N/A	\$3,284	N/A	17.77	-0.56	15% (+/-)	Yes
Aged	N/A	\$15,460	N/A	\$18,569	N/A	\$18,980	N/A	20.11	2.22	15% (+/-)	Yes
Disabled	N/A	\$6,839	N/A	\$8,180	N/A	\$7,569	N/A	19.61	-7.47	15% (+/-)	Yes
Child	N/A	\$85	N/A	\$136	N/A	\$147	N/A	60.80	7.98	15% (+/-)	Yes
Adult	N/A	\$2	N/A	\$3	N/A	\$2	N/A	26.16	-27.30	15% (+/-)	No
Drugs (TOS=16)	N/A	\$772	N/A	\$935	N/A	\$906	N/A	21.05	-3.02	15% (+/-)	Yes
Aged	N/A	\$2,273	N/A	\$2,829	N/A	\$2,727	N/A	24.42	-3.58	15% (+/-)	Yes
Disabled	N/A	\$2,511	N/A	\$3,053	N/A	\$2,977	N/A	21.56	-2.48	15% (+/-)	Yes
Child	N/A	\$174	N/A	\$213	N/A	\$205	N/A	22.54	-3.94	15% (+/-)	Yes
Adult	N/A	\$325	N/A	\$392	N/A	\$354	N/A	20.82	-9.71	15% (+/-)	Yes
All Other Services	N/A	\$2,042	N/A	\$2,357	N/A	\$2,685	N/A	15.45	13.92	15% (+/-)	Yes
Aged	N/A	\$1,622	N/A	\$2,046	N/A	\$2,666	N/A	26.12	30.30	15% (+/-)	No
Disabled	N/A	\$7,742	N/A	\$9,099	N/A	\$10,119	N/A	17.53	11.21	15% (+/-)	Yes
Child	N/A	\$1,095	N/A	\$1,146	N/A	\$1,274	N/A	4.73	11.10	15% (+/-)	Yes
Adult	N/A	\$1,131	N/A	\$1,350	N/A	\$1,461	N/A	19.39	8.22	15% (+/-)	Yes
<b>% OF FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE</b>											
% FFS Enrollees with IP Claims (TOS=01)	N/A	10.58	N/A	11.11	N/A	12.58	N/A	4.98	13.25	15% (+/-)	Yes
Aged	N/A	6.68	N/A	7.39	N/A	10.09	N/A	10.62	36.46	15% (+/-)	No
Disabled	N/A	13.21	N/A	12.69	N/A	14.58	N/A	-3.91	14.90	15% (+/-)	Yes
Child	N/A	8.84	N/A	8.98	N/A	10.02	N/A	1.56	11.66	15% (+/-)	Yes
Adult	N/A	14.52	N/A	16.83	N/A	18.53	N/A	15.90	10.09	15% (+/-)	Yes
% FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	8.13	N/A	8.13	N/A	8.23	N/A	0.00	1.23	15% (+/-)	Yes
Aged	N/A	54.03	N/A	55.73	N/A	56.12	N/A	3.14	0.71	15% (+/-)	Yes
Disabled	N/A	11.48	N/A	11.83	N/A	12.25	N/A	3.10	3.55	15% (+/-)	Yes
Child	N/A	0.22	N/A	0.22	N/A	0.22	N/A	1.56	-0.01	15% (+/-)	Yes
Adult	N/A	0.02	N/A	0.06	N/A	0.08	N/A	177.70	33.63	15% (+/-)	No
% FFS Enrollees with Drug Claims (TOS=16)	N/A	64.60	N/A	63.23	N/A	65.13	N/A	-2.12	2.99	15% (+/-)	Yes
Aged	N/A	86.34	N/A	89.61	N/A	88.91	N/A	3.79	-0.79	15% (+/-)	Yes
Disabled	N/A	79.04	N/A	81.41	N/A	81.49	N/A	3.00	0.10	15% (+/-)	Yes
Child	N/A	56.56	N/A	53.19	N/A	56.58	N/A	-5.96	6.37	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Adult	N/A	62.53	N/A	62.19	N/A	62.95	N/A	-0.54	1.23	15% (+/-)	Yes
% FFS Enrollees with All Other Claims	N/A	81.41	N/A	81.62	N/A	83.82	N/A	0.26	2.70	15% (+/-)	Yes
Aged	N/A	75.52	N/A	75.36	N/A	79.38	N/A	-0.21	5.34	15% (+/-)	Yes
Disabled	N/A	90.48	N/A	92.51	N/A	94.20	N/A	2.24	1.83	15% (+/-)	Yes
Child	N/A	82.43	N/A	81.46	N/A	83.22	N/A	-1.17	2.16	15% (+/-)	Yes
Adult	N/A	77.46	N/A	78.83	N/A	81.19	N/A	1.77	2.99	15% (+/-)	Yes
Avg # IP Days per FFS User	N/A	5	N/A	5	N/A	6	N/A	1.35	8.63	15% (+/-)	Yes
Aged	N/A	6	N/A	6	N/A	6	N/A	0.56	8.34	15% (+/-)	Yes
Disabled	N/A	10	N/A	12	N/A	13	N/A	22.03	5.30	15% (+/-)	Yes
Child	N/A	5	N/A	5	N/A	5	N/A	-5.79	10.08	15% (+/-)	Yes
Adult	N/A	3	N/A	3	N/A	3	N/A	-6.08	3.05	15% (+/-)	Yes
Avg # ILTC Days per FFS User	N/A	257	N/A	284	N/A	269	N/A	10.46	-5.38	15% (+/-)	Yes
Aged	N/A	253	N/A	278	N/A	269	N/A	10.00	-3.46	15% (+/-)	Yes
Disabled	N/A	285	N/A	316	N/A	277	N/A	10.83	-12.40	15% (+/-)	Yes
Child	N/A	134	N/A	205	N/A	205	N/A	52.84	0.12	15% (+/-)	Yes
Adult	N/A	40	N/A	27	N/A	13	N/A	-31.10	-52.60	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX PGM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$1,399,051	N/A	\$1,507,762	N/A	\$1,441,291	N/A	7.77	-4.41	15% (+/-)	Yes
FP: Number of Users	N/A	6,289	N/A	5,958	N/A	5,557	N/A	-5.26	-6.73	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$222	N/A	\$253	N/A	\$259	N/A	13.76	2.49	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$1,814,706	N/A	\$1,699,792	N/A	\$1,883,156	N/A	-6.33	10.79	15% (+/-)	Yes
RHC: Number of Users	N/A	8,736	N/A	8,152	N/A	9,069	N/A	-6.68	11.25	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$208	N/A	\$209	N/A	\$208	N/A	0.38	-0.42	15% (+/-)	Yes
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$541,056	N/A	\$650,940	N/A	\$672,390	N/A	20.31	3.30	15% (+/-)	Yes
FQHC: Number of Users	N/A	1,536	N/A	2,022	N/A	2,205	N/A	31.64	9.05	15% (+/-)	Yes
FQHC: Avg Medicaid Pd per User	N/A	\$352	N/A	\$322	N/A	\$305	N/A	-8.61	-5.28	15% (+/-)	Yes
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$8,764,502	N/A	\$8,418,554	N/A	\$9,587,276	N/A	-3.95	13.88	15% (+/-)	Yes
IHS: Number of Users	N/A	7,050	N/A	6,716	N/A	6,703	N/A	-4.74	-0.19	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$1,243	N/A	\$1,254	N/A	\$1,430	N/A	0.83	14.10	15% (+/-)	Yes
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$61,318,012	N/A	\$66,743,076	N/A	\$73,393,658	N/A	8.85	9.96	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	4,499	N/A	4,176	N/A	5,160	N/A	-7.18	23.56	15% (+/-)	No
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$13,629	N/A	\$15,983	N/A	\$14,224	N/A	17.27	-11.00	15% (+/-)	Yes
<b>FFS COMMUNITY-BASED LONG-TERM CARE EXPENDITURES AND USERS</b>											
Total FFS CLTC Expenditures (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$93,965,118	N/A	N/A	N/A	15% (+/-)	No
Number of CLTC Users (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	12,608	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per User (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	\$7,453	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$4,548	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$10,692	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$3,006	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$516	N/A	N/A	N/A	15% (+/-)	No
% FFS Enrollees with CLTC Claims (all codes - overestimate)	N/A	N/A	N/A	N/A	N/A	17.70	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	44.37	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	68.51	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	5.34	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	2.05	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$79,442,781	N/A	N/A	N/A	15% (+/-)	No
Number of CLTC Users (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	6,497	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per User (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$12,228	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$7,874	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$23,022	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$3,006	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$516	N/A	N/A	N/A	15% (+/-)	No
% FFS Enrollees with CLTC Claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	9.12	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	18.58	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	27.36	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	5.34	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	2.05	N/A	N/A	N/A	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: ND

Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
Total FFS CLTC Expenditures (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$73,393,658	N/A	N/A	N/A	15% (+/-)	No
Number of CLTC Users (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	5,160	N/A	N/A	N/A	15% (+/-)	No
Average FFS CLTC Expenditures per User (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	\$14,224	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$6,108	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$24,656	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$4,065	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$2,918	N/A	N/A	N/A	15% (+/-)	No
% FFS Enrollees with CLTC Claims (Section 1915(c) claims only - excludes CLTC Codes 11-20)	N/A	N/A	N/A	N/A	N/A	7.24	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	16.89	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	24.73	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	3.65	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.09	N/A	N/A	N/A	15% (+/-)	No