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2003-2005 MAX IP VALIDATION TABLE  
STATE: OR

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	72,732	N/A	68,837	N/A	71,051	N/A	-5.36	3.22	Yes
% Encounter Claims	N/A	48.24	N/A	58.84	N/A	63.29	N/A	21.97	7.57	Yes
% 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	37,646	N/A	28,336	N/A	26,083	N/A	-24.70	-7.95	Yes
% Crossover	5-20	16.41	Yes	3.32	No	2.27	No	-79.80	-31.70	No
% Adjusted Claims	N/A	4.39	N/A	39.50	N/A	7.22	N/A	800.20	-81.70	No
% Standard Adjustments	> 1%	92.43	Yes	93.76	Yes	96.97	Yes	1.44	3.42	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$4,227	N/A	\$4,837	N/A	\$8,192	N/A	14.45	69.36	No
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	32	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	31,468	N/A	27,396	N/A	25,492	N/A	-12.90	-6.95	Yes
% Claims with> \$0 Paid	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$2000 - \$7000	\$3,018	Yes	\$4,526	Yes	\$4,840	Yes	50.00	6.94	Yes
Aver. Medicaid Amt Paid per Covered Day (>\$0 paid and >0 days claims)	N/A	\$810	N/A	\$1,200	N/A	\$1,240	N/A	48.18	3.30	Yes
% Claims with TPL	>0 - 10	1.87	Yes	2.43	Yes	3.39	Yes	30.32	39.42	No
Aver. TPL Paid for claims with TPL	N/A	\$2,448	N/A	\$2,589	N/A	\$2,836	N/A	5.74	9.54	Yes
% Claims with UB-92 Accommodation Codes	95-100	99.85	Yes	99.51	Yes	99.42	Yes	-0.34	-0.09	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.11	Yes	1.12	Yes	1.12	Yes	0.15	0.09	Yes
% Claims with UB-92 Ancillary Codes	95-100	99.81	Yes	99.41	Yes	99.02	Yes	-0.40	-0.40	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	8.37	Yes	8.16	Yes	7.95	Yes	-2.54	-2.53	Yes
Average LOS	2-<8	3.72	Yes	3.76	Yes	3.89	Yes	0.88	3.65	Yes
Average Covered Days (> 0 day)	2-<8	3.56	Yes	3.55	Yes	3.66	Yes	-0.36	3.06	Yes
% Begin Date = Admit Date	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% IP Claims (MAX TOS 01)	95-100	99.85	Yes	99.86	Yes	99.76	Yes	0.01	-0.10	Yes
% Family Planning Claims (pgm type=2)	>0-5	0.88	Yes	0.86	Yes	1.20	Yes	-2.49	39.80	No
% 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	3.25	Yes	3.29	Yes	3.27	Yes	1.24	-0.51	Yes
% Claims with PDX, where length=3	5-30	4.90	No	4.68	No	4.35	No	-4.43	-7.19	Yes
% Claims with PDX, where length=4	15-75	20.10	Yes	18.43	Yes	14.71	No	-8.33	-20.10	No
% Claims with PDX, where length=5	25-70	75.00	No	76.89	No	80.94	No	2.52	5.27	Yes
% Claims with a procedure code	35-70	58.31	Yes	52.10	Yes	44.62	Yes	-10.60	-14.40	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	1.84	Yes	1.84	Yes	1.24	Yes	-0.07	-32.60	No
% Claims with Procedures that have CPT-4 Indicator	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have ICD-9 Indicator	N/A	99.93	N/A	99.85	N/A	99.89	N/A	-0.09	0.04	Yes
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A

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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% Claims with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	N/A	99.99	N/A	100.00	N/A	100.00	N/A	0.01	0.00	Yes
% Claims with DRG	>=90	77.54	No	75.01	No	74.73	No	-3.26	-0.39	Yes
% Claims Maternal Delivery Indicator	N/A	25.20	N/A	27.16	N/A	31.06	N/A	7.81	14.33	Yes
% Claims Newborn Delivery Indicator (only for separate infant delivery claims using mother's ID)	N/A	28.29	N/A	29.84	N/A	33.69	N/A	5.48	12.93	Yes
<b>Patient Status</b>										
% Home	75-90	91.45	No	91.28	No	91.05	No	-0.18	-0.25	Yes
% Transferred	1-10	7.72	Yes	7.91	Yes	7.85	Yes	2.56	-0.81	Yes
% Still a Patient	>0 - 2	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Died	>0 - 3	0.83	Yes	0.80	Yes	0.49	Yes	-3.99	-38.70	No
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	6,178	N/A	940	N/A	591	N/A	-84.80	-37.10	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	\$848	N/A	\$811	N/A	\$829	N/A	-4.32	2.14	Yes
% Claims with TPL	N/A	1.15	N/A	3.51	N/A	2.88	N/A	205.50	-18.10	No
Aver. TPL Paid -claims with TPL	N/A	\$1,504	N/A	\$669	N/A	\$500	N/A	-55.50	-25.20	No
% Claims with UB-92 Accommodation Codes	95-100	99.95	Yes	100.00	Yes	100.00	Yes	0.05	0.00	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.18	Yes	1.15	Yes	1.16	Yes	-2.45	0.68	Yes
% Claims with UB-92 Ancillary Codes	95-100	99.34	Yes	99.47	Yes	98.98	Yes	0.13	-0.49	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	12.92	Yes	11.16	Yes	10.95	Yes	-13.60	-1.90	Yes
Average LOS	2-<8	4.37	Yes	3.36	Yes	4.08	Yes	-23.10	21.53	No
% Begin Date = Admit Date	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with IP TOS	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with DX	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
Average Number of DX Codes (at least 1 DX)	>=2	4.70	Yes	4.63	Yes	4.71	Yes	-1.60	1.73	Yes
% Claims with PDX, where length=3	5-30	9.18	Yes	10.85	Yes	13.71	Yes	18.23	26.31	No
% Claims with PDX, where length=4	15-75	40.09	Yes	39.68	Yes	35.19	Yes	-1.03	-11.30	Yes
% Claims with PDX, where length=5	25-70	50.73	Yes	49.47	Yes	51.10	Yes	-2.48	3.30	Yes
% Claims with a procedure code	35-70	50.45	Yes	33.40	No	36.04	Yes	-33.80	7.89	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	1.91	Yes	1.78	Yes	1.74	Yes	-6.41	-2.60	Yes
% Claims with Procedures that have CPT-4 Indicator	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% Claims with Procedures that have ICD-9 Indicator	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% 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	83.13	No	40.11	No	38.41	No	-51.80	-4.23	Yes

2003-2005 MAX LT VALIDATION TABLE  
STATE: OR

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	84,286	N/A	82,738	N/A	80,171	N/A	-1.84	-3.10	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	84,286	N/A	82,738	N/A	80,171	N/A	-1.84	-3.10	Yes
% Crossover	5-20	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Adjusted Claims	> 1%	46.55	Yes	33.30	Yes	11.91	Yes	-28.50	-64.20	No
% Standard Adjustments	N/A	96.75	N/A	96.21	N/A	87.86	N/A	-0.56	-8.68	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$3,101	N/A	\$3,189	N/A	\$3,886	N/A	2.86	21.86	No
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	10	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	84,286	N/A	82,738	N/A	80,171	N/A	-1.84	-3.10	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	\$105	No	\$119	No	\$134	No	13.12	12.33	Yes
ICF/MR (TOS 05)	N/A	\$673	N/A	\$693	N/A	\$688	N/A	2.91	-0.65	Yes
Aged/MH (TOS 02)	N/A	\$390	N/A	\$383	N/A	\$378	N/A	-1.87	-1.37	Yes
IP Psych. < 21 (TOS 04)	N/A	\$287	N/A	\$288	N/A	\$283	N/A	0.42	-1.93	Yes
% NF (TOS 07)	75-99	92.84	Yes	92.68	Yes	93.26	Yes	-0.17	0.63	Yes
% NF claims with NF Covered Days	N/A	97.72	N/A	97.66	N/A	97.48	N/A	-0.06	-0.19	Yes
Avg days for NF claims with Covered Days	N/A	26	N/A	26	N/A	26	N/A	-1.27	-0.73	Yes
% ICF/MR (TOS 05)	>0-20	0.72	Yes	0.72	Yes	0.65	Yes	0.19	-9.63	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	0.74	0.04	Yes
% Aged/MH (TOS 02)	>0-10	0.60	Yes	0.58	Yes	0.65	Yes	-3.20	12.72	Yes
% 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	26	N/A	27	N/A	27	N/A	3.61	0.35	Yes
% IP Psych. < 21 (TOS 04)	>0-5	5.84	No	6.02	No	5.33	No	3.05	-11.50	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	26	N/A	26	N/A	25	N/A	-0.91	-2.50	Yes
% Claims with Leave Days	1-20	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Claims with DX	95-100	99.99	Yes	100.00	Yes	99.98	Yes	0.01	-0.02	Yes
% Claims with DX, where length=3	5-30	17.94	Yes	16.98	Yes	15.76	Yes	-5.32	-7.20	Yes
% Claims with DX, where length=4	15-75	54.32	Yes	52.90	Yes	52.03	Yes	-2.62	-1.64	Yes
% Claims with DX, where length=5	25-70	27.74	Yes	30.12	Yes	32.21	Yes	8.57	6.94	Yes
<b>Patient Status</b>										
% Home	1-5	2.37	Yes	2.62	Yes	2.50	Yes	10.59	-4.56	Yes
% Still a Patient	8-98	93.46	Yes	93.22	Yes	93.30	Yes	-0.26	0.08	Yes
% Died	>0-5	2.30	Yes	2.14	Yes	2.24	Yes	-7.26	4.95	Yes
<b>FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)</b>										
Total Number of Claims	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A
% Claims with> \$0 Paid	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Claims with< \$0 Paid	0	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A

2003-2005 MAX LT VALIDATION TABLE  
STATE: OR

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	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% NF (TOS 07)	75-99	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% ICF/MR (TOS 05)	>0-20	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% Aged/MH (TOS 02)	>0-10	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% IP Psych. < 21 (TOS 04)	>0-5	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% Claims with DX	95-100	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% Claims with DX, where length=3	5-30	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% Claims with DX, where length=4	15-75	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% Claims with DX, where length=5	25-70	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
Patient Status										
% Home	1-5	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% Still a Patient	8-98	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A
% Died	>0-5	Div by 0	No	Div by 0	No	Div by 0	No	Div by 0	Div by 0	N/A

2003-2005 MAX OT VALIDATION TABLE  
STATE: OR

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	20,992,193	N/A	21,579,696	N/A	23,034,684	N/A	2.80	6.74	Yes
% Encounter Claims (Claim Type=3)	N/A	25.33	N/A	28.56	N/A	31.80	N/A	12.75	11.36	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	46.57	N/A	46.25	N/A	46.72	N/A	-0.69	1.02	Yes
Total FFS Claims Excluding Capitation Payments	N/A	5,898,866	N/A	5,435,933	N/A	4,946,522	N/A	-7.85	-9.00	Yes
% Crossover	5-20	10.07	Yes	6.46	Yes	7.43	Yes	-35.90	15.05	No
% Adjusted Claims	> 1%	3.69	Yes	8.25	Yes	3.17	Yes	123.30	-61.60	No
% Standard Adjustments	N/A	77.50	N/A	76.62	N/A	89.06	N/A	-1.14	16.24	No
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$147	N/A	\$87	N/A	\$210	N/A	-40.90	141.80	No
% Claims(TOC 1,2) TOS 20: HMO Cap Payment	N/A	18.93	N/A	19.86	N/A	20.29	N/A	4.96	2.16	Yes
% Claims(TOC 1,2) TOS 21: PHP Cap Payments	N/A	42.74	N/A	44.24	N/A	47.67	N/A	3.52	7.75	Yes
% Claims(TOC 1,2) TOS 22: PCCM Cap Pay.	N/A	0.70	N/A	0.63	N/A	0.55	N/A	-9.83	-13.80	Yes
Average Paid per HMO Cap Clms (TOS 20)	\$75-\$300	\$202	Yes	\$240	Yes	\$266	Yes	18.33	11.18	Yes
Average Paid per PHP Cap Clms (TOS 21)	\$20-\$250	\$30	Yes	\$29	Yes	\$31	Yes	-2.44	6.42	Yes
Average Paid per PCCM Cap Clms (TOS 22)	3-5	\$6	No	\$6	No	\$6	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	18,052	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	5,304,718	N/A	5,084,855	N/A	4,578,968	N/A	-4.14	-9.95	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	11.00	N/A	11.23	N/A	12.27	N/A	2.15	9.23	Yes
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	2.03	N/A	1.95	N/A	1.79	N/A	-3.78	-8.34	Yes
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	10.58	N/A	7.39	N/A	5.84	N/A	-30.20	-20.90	No
% Other Claims with Span Bills/All Other Claims	N/A	11.86	N/A	12.01	N/A	13.13	N/A	1.25	9.30	Yes
% Claims W/ Service Place 11- Office	50-90	20.44	No	19.07	No	17.70	No	-6.70	-7.15	Yes
% Claims W/ Service Place 12 - Home	>0-5	11.58	No	12.95	No	9.44	No	11.82	-27.10	No
% Claims W/ Service Place 21 - Hospital	>0-5	3.59	Yes	3.86	Yes	3.59	Yes	7.68	-7.08	Yes
% Claims W/ Service Place 32 - NF	>0-5	0.05	Yes	0.03	Yes	0.02	Yes	-36.40	-46.60	No
% Claims W/ Service Place 23 - ER	1-10	1.99	Yes	1.73	Yes	1.26	Yes	-13.10	-27.10	No
% Claims w/ Service Place 22 - OPD	>0-10	21.76	No	19.50	No	18.15	No	-10.40	-6.90	Yes
% Claims W/ Service Place 99 - Unknown/Other	<5	4.07	Yes	3.72	Yes	6.87	No	-8.72	84.61	No
% Claims with TPL	>0 - 15	0.61	Yes	0.56	Yes	0.68	Yes	-8.82	22.15	No
Aver. TPL Paid -claims with TPL	N/A	\$52	N/A	\$71	N/A	\$78	N/A	37.22	8.84	Yes
<b>PERCENT CLAIMS/MAX TOS</b>										
% claims MAX TOS 08: Physicians	10-35	11.78	Yes	10.43	Yes	9.26	No	-11.50	-11.20	Yes
% claims MAX TOS 09: Dental	2-20	0.47	No	0.36	No	0.40	No	-23.50	11.22	Yes
% claims MAX TOS 10: Other Practioner	0.5-8	3.49	Yes	4.86	Yes	4.90	Yes	39.49	0.71	Yes
% claims MAX TOS 11: OPD	3-25	8.81	Yes	7.69	Yes	7.49	Yes	-12.80	-2.53	Yes
% claims MAX TOS 12: Clinic	2-25	3.78	Yes	4.08	Yes	3.86	Yes	7.94	-5.55	Yes
% claims MAX TOS 13: HH	>0-25	0.17	Yes	0.15	Yes	0.15	Yes	-12.50	0.51	Yes
% claims MAX TOS 15: Lab/Xray	4-20	17.39	Yes	17.34	Yes	15.00	Yes	-0.26	-13.50	Yes
% claims MAX TOS 16: Drugs	<3	1.25	Yes	1.00	Yes	1.19	Yes	-19.80	18.90	No
% claims MAX TOS 19: Other Services	<25	8.82	Yes	8.40	Yes	9.17	Yes	-4.79	9.18	Yes

2003-2005 MAX OT VALIDATION TABLE  
STATE: OR

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	3.62	Yes	3.97	Yes	4.44	Yes	9.62	11.83	Yes
% claims MAX TOS 26: Transportation	>1	23.22	Yes	23.33	Yes	24.39	Yes	0.48	4.53	Yes
% claims MAX TOS 24: Sterilizations	N/A	0.01	N/A	0.01	N/A	0.01	N/A	-16.50	3.48	Yes
% claims MAX TOS 25: Abortions	N/A	0.13	N/A	0.14	N/A	0.15	N/A	8.28	5.97	Yes
% claims MAX TOS 30: PCS	>0	1.05	Yes	1.11	Yes	1.52	Yes	6.00	36.44	No
% claims MAX TOS 31: TCM	>0	3.78	Yes	3.53	Yes	4.45	Yes	-6.72	26.24	No
% claims MAX TOS 33: Rehabilitation	>0	1.08	Yes	2.91	Yes	2.60	Yes	169.10	-10.50	Yes
% claims MAX TOS 34: PT/OT/hear/speech	>1	0.45	No	0.32	No	0.19	No	-29.30	-40.40	No
% claims MAX TOS 35: Hospice	>0	0.03	Yes	0.04	Yes	0.05	Yes	16.74	36.09	No
% claims MAX TOS 36: Nurse Midwife	N/A	0.01	N/A	0.02	N/A	0.04	N/A	29.93	150.00	No
% claims MAX TOS 37: Nurse Practitioner	N/A	0.93	N/A	0.74	N/A	0.54	N/A	-20.90	-26.50	No
% claims MAX TOS 38: Private Nursing	N/A	0.04	N/A	0.03	N/A	0.02	N/A	-5.27	-43.40	No
% 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	1.39	N/A	1.49	N/A	1.68	N/A	7.25	12.94	Yes
% claims MAX TOS 53: Psych. Services	>1	8.22	Yes	8.01	Yes	8.45	Yes	-2.59	5.54	Yes
% claims MAX TOS 54: Adult Day Care	>0	0.06	Yes	0.05	Yes	0.04	Yes	-25.40	-24.40	No
% claims MAX TOS 99: Unknown	<1	0.01	Yes	0.01	Yes	0.02	Yes	-13.70	47.59	No
Average Medicaid Amount Paid For Selected MAX TOS (excluding claims with <=\$0 paid)										
Total	N/A	\$121	N/A	\$128	N/A	\$138	N/A	5.82	7.83	Yes
08: Physicians	\$20-90	\$78	Yes	\$82	Yes	\$87	Yes	4.65	7.15	Yes
09: Dental	\$10-60	\$35	Yes	\$36	Yes	\$36	Yes	2.91	0.02	Yes
10: Other Practioner	\$10-100	\$88	Yes	\$49	Yes	\$50	Yes	-43.80	2.10	Yes
11: OPD	\$20-100	\$90	Yes	\$121	No	\$123	No	34.73	1.66	Yes
12: Clinic	\$20-100	\$136	No	\$140	No	\$139	No	3.57	-1.14	Yes
13: HH	N/A	\$85	N/A	\$83	N/A	\$75	N/A	-3.39	-9.37	Yes
15: Lab/Xray	10-60	\$27	Yes	\$29	Yes	\$30	Yes	6.81	2.90	Yes
16: Drugs	10-60	\$19	Yes	\$24	Yes	\$21	Yes	30.07	-14.10	Yes
19: Other Services	N/A	\$362	N/A	\$386	N/A	\$374	N/A	6.74	-3.22	Yes
51: DME	N/A	\$81	N/A	\$69	N/A	\$67	N/A	-15.00	-3.14	Yes
26: Transportation	N/A	\$23	N/A	\$26	N/A	\$25	N/A	11.18	-4.39	Yes
30: PCS	N/A	\$82	N/A	\$77	N/A	\$74	N/A	-5.21	-4.95	Yes
31: Targeted Case Management	N/A	\$390	N/A	\$365	N/A	\$359	N/A	-6.42	-1.63	Yes
33: Rehabilitation	N/A	\$74	N/A	\$81	N/A	\$72	N/A	9.13	-11.10	Yes
34: PT/OT/speech/hear	N/A	\$42	N/A	\$44	N/A	\$47	N/A	6.80	5.71	Yes
35: Hospice	N/A	\$1,011	N/A	\$1,005	N/A	\$839	N/A	-0.61	-16.50	No
52: Residential Care	N/A	\$1,213	N/A	\$1,252	N/A	\$1,256	N/A	3.20	0.35	Yes
53: Psych. Services	N/A	\$182	N/A	\$235	N/A	\$271	N/A	29.12	15.41	No
54: Adult Day Care	N/A	\$476	N/A	\$485	N/A	\$468	N/A	1.95	-3.57	Yes
PERCENT OF CLAIMS BY PROGRAM TYPE (claim type 1)										
% Family Planning (code 2)	N/A	0.30	N/A	0.26	N/A	0.35	N/A	-13.40	32.06	No
% RHC (code 3)	N/A	2.10	N/A	2.60	N/A	1.90	N/A	23.91	-26.80	No
% FQHC (code 4)	N/A	0.00	N/A	0.00	N/A	0.75	N/A	Div by 0	Div by 0	N/A
% IHS (code 5)	N/A	0.51	N/A	0.63	N/A	0.63	N/A	23.13	-0.50	Yes
% Waiver (code 6,7)	N/A	10.58	N/A	10.40	N/A	11.55	N/A	-1.66	11.04	Yes
AVERAGE EXPENDITURES BY PROGRAM										
Family Planning (code 2)	N/A	\$92	N/A	\$76	N/A	\$71	N/A	-17.70	-6.43	Yes

2003-2005 MAX OT VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
RHC (code 3)	N/A	\$143	N/A	\$146	N/A	\$134	N/A	1.66	-8.03	Yes
FQHC (code 4)	N/A	Div by 0	N/A	Div by 0	N/A	\$149	N/A	Div by 0	Div by 0	N/A
IHS (code 5)	N/A	\$172	N/A	\$186	N/A	\$206	N/A	7.87	10.78	Yes
Waiver (code 6, 7)	N/A	\$549	N/A	\$598	N/A	\$609	N/A	8.99	1.82	Yes
% Claims with DX	> 60	62.89	Yes	65.27	Yes	63.37	Yes	3.78	-2.91	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with 1 DX that have 2 DX	N/A	38.11	N/A	35.75	N/A	33.21	N/A	-6.18	-7.12	Yes
% Claims with DX, where length=3	5-25	4.96	No	3.75	No	3.42	No	-24.50	-8.83	Yes
% Claims with DX, where length=4	40-70	44.32	Yes	42.49	Yes	41.55	Yes	-4.13	-2.21	Yes
% Claims with DX, where length=5	20-55	50.72	Yes	53.76	Yes	55.04	No	6.01	2.36	Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	N/A	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	99.01	Yes	99.23	Yes	99.34	Yes	0.22	0.11	Yes
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	43.72	N/A	43.21	N/A	39.25	N/A	-1.18	-9.16	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	26.71	N/A	45.47	N/A	48.76	N/A	70.23	7.22	Yes
% Other National Code Indicator (codes 2-5, 7- 9)/ Claims with Service Codes	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% State Specific Serv. Indicator (10-87)/Claims with Service Codes	N/A	29.56	N/A	11.32	N/A	12.00	N/A	-61.70	5.95	Yes
% 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	29.23	N/A	26.65	N/A	23.80	N/A	-8.84	-10.70	Yes
PERCENT OF CLAIMS BY CLTC CODE										
CLTC 00: not a CLTC claim	N/A	N/A	N/A	N/A	N/A	60.72	N/A	N/A	N/A	N/A
CLTC Non-Waiver Claims (11-20)	N/A	N/A	N/A	N/A	N/A	27.72	N/A	N/A	N/A	N/A
CLTC 11: Non-Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	1.40	N/A	N/A	N/A	N/A
CLTC 12: Non-Waiver PDN	N/A	N/A	N/A	N/A	N/A	0.02	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	0.15	N/A	N/A	N/A	N/A
CLTC 15: Non-Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	0.01	N/A	N/A	N/A	N/A
CLTC 16: Non-Waiver Rehab	N/A	N/A	N/A	N/A	N/A	1.96	N/A	N/A	N/A	N/A
CLTC 17: Non-Waiver TCM	N/A	N/A	N/A	N/A	N/A	0.12	N/A	N/A	N/A	N/A
CLTC 18: Non-Waiver Transportation	N/A	N/A	N/A	N/A	N/A	21.42	N/A	N/A	N/A	N/A
CLTC 19: Non-Waiver Hospice	N/A	N/A	N/A	N/A	N/A	0.05	N/A	N/A	N/A	N/A
CLTC 20: Non-Waiver DME	N/A	N/A	N/A	N/A	N/A	2.59	N/A	N/A	N/A	N/A
CLTC Waiver Claims (30-40)	N/A	N/A	N/A	N/A	N/A	11.55	N/A	N/A	N/A	N/A
CLTC 30: Other Waiver	N/A	N/A	N/A	N/A	N/A	9.73	N/A	N/A	N/A	N/A
CLTC 31: Waiver Personal Care	N/A	N/A	N/A	N/A	N/A	0.12	N/A	N/A	N/A	N/A
CLTC 32: Waiver PDN	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 33: Waiver Adult Day	N/A	N/A	N/A	N/A	N/A	0.04	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  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
CLTC 35: Waiver Residential Care	N/A	N/A	N/A	N/A	N/A	1.67	N/A	N/A	N/A	N/A
CLTC 36: Waiver Rehab	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 37: Waiver TCM	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 38: Waiver Transportation	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 39: Waiver Hospice	N/A	N/A	N/A	N/A	N/A	0.00	N/A	N/A	N/A	N/A
CLTC 40: Waiver DME	N/A	N/A	N/A	N/A	N/A	0.00	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	594,148	N/A	351,078	N/A	367,554	N/A	-40.90	4.69	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	3.48	N/A	3.76	N/A	2.50	N/A	8.08	-33.50	No
% OPD Claims with Span Bill/ All OPD Claims(TOS 11)	N/A	7.93	N/A	10.44	N/A	9.24	N/A	31.59	-11.40	Yes
% HH Claims with Span Bill/All HH Claims (TOS 13)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Other Claims with Span Bills/All Other Claims	N/A	1.94	N/A	2.82	N/A	1.53	N/A	45.10	-45.80	No
<b>PERCENT CLAIMS/MAX TOS (excluding 20-22)</b>										
% claims MAX TOS 08: Physicians	N/A	12.25	N/A	19.12	N/A	16.22	N/A	56.06	-15.20	No
% claims MAX TOS 10: Other Practioner	N/A	0.98	N/A	1.57	N/A	1.71	N/A	59.46	9.04	Yes
% claims MAX TOS 11: OPD	N/A	25.68	N/A	12.38	N/A	12.63	N/A	-51.80	2.04	Yes
% claims MAX TOS 12: Clinic	N/A	0.18	N/A	0.33	N/A	0.62	N/A	78.86	87.97	No
% claims MAX TOS 13: HH	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 15: Lab/Xray	N/A	22.98	N/A	8.97	N/A	7.01	N/A	-61.00	-21.80	No
% claims MAX TOS 19: Other Services	N/A	0.36	N/A	0.32	N/A	0.47	N/A	-10.40	45.24	No
% claims MAX TOS 51: DME	N/A	33.13	N/A	49.83	N/A	44.71	N/A	50.41	-10.30	Yes
% claims MAX TOS 26: Transportation	N/A	0.46	N/A	0.77	N/A	0.39	N/A	67.06	-48.80	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	0.00	N/A	0.00	N/A	0.00	N/A	-100.00	Div by 0	N/A
% claims MAX TOS 33: Rehabilitation	N/A	0.18	N/A	0.72	N/A	4.02	N/A	310.30	458.80	No
% claims MAX TOS 34: PT/OT/hear/speech	N/A	0.29	N/A	0.17	N/A	0.17	N/A	-41.40	-0.92	Yes
% claims MAX TOS 35: Hospice	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 52: Residential Care	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A
% claims MAX TOS 53: Psych. Services	N/A	2.38	N/A	4.17	N/A	9.08	N/A	75.17	117.70	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	\$127	N/A	\$52	N/A	\$52	N/A	-58.70	-0.23	Yes
% Claims with DX	N/A	99.77	N/A	99.61	N/A	99.87	N/A	-0.16	0.26	Yes
% Claims with DX (MAX TOS 8, 11, 12)	85-100	100.00	Yes	100.00	Yes	99.99	Yes	0.00	-0.01	Yes
% Claims with 1 DX that have 2 DX	N/A	54.65	N/A	41.89	N/A	43.89	N/A	-23.30	4.76	Yes
% Claims with DX, where length=3	5-25	11.90	Yes	11.12	Yes	10.75	Yes	-6.58	-3.33	Yes
% Claims with DX, where length=4	40-70	35.23	No	32.17	No	32.50	No	-8.68	1.02	Yes
% Claims with DX, where length=5	20-55	52.87	Yes	56.71	No	56.75	No	7.26	0.08	Yes
% OPD Claims with Service Code or UB-92/OPD Claims (TOS 11)	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% HH Claims with Service Code or UB-92/HH Claims (TOS13)	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	N/A
% Other Claims with Service Codes/All Other Claims (Excluding OPD/HH)	98-100	95.76	No	99.81	Yes	99.85	Yes	4.23	0.04	Yes

2003-2005 MAX OT VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Change Within Expected Range
% CPT-4 Service Code Indicator (code 01)/Claims with Service Codes	N/A	56.29	N/A	41.69	N/A	41.13	N/A	-25.90	-1.34	Yes
% HCPCS (II & III) Service Codes Indicator (code 06)/Claims with Service Codes	N/A	40.03	N/A	58.31	N/A	58.87	N/A	45.66	0.96	Yes
% Other Codes Indicator /Claims with Service Codes	N/A	3.68	N/A	0.00	N/A	0.00	N/A	-100.00	90.01	No

2003-2005 MAX RX VALIDATION TABLE  
STATE: OR

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	4,324,612	N/A	4,182,550	N/A	3,966,568	N/A	-3.28	-5.16	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	4,324,612	N/A	4,182,550	N/A	3,966,568	N/A	-3.28	-5.16	Yes
% Adjusted Claims	N/A	0.95	N/A	1.64	N/A	1.40	N/A	71.33	-14.60	Yes
% Standard Adjustments	> 1%	99.83	Yes	99.97	Yes	100.00	Yes	0.15	0.02	Yes
Aver. Amt. Pd Adjust. ( include \$0)	N/A	\$67	N/A	\$116	N/A	\$98	N/A	72.89	-15.70	No
Total number of claims with missing Medicaid eligibility (excludes S-SCHIP only)	N/A	N/A	N/A	N/A	N/A	1,307	N/A	N/A	N/A	N/A
<b>FFS Claims (Type of Claim=1)</b>										
Total Number of Claims	N/A	4,324,612	N/A	4,182,550	N/A	3,966,568	N/A	-3.28	-5.16	Yes
% Claims with> \$0 Paid	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with< \$0 Paid	0	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$15-\$60	\$54	Yes	\$57	Yes	\$62	No	5.62	8.21	Yes
% Claims with TPL	>0 - 15	1.53	Yes	3.68	Yes	4.48	Yes	140.30	21.91	No
Aver. TPL Paid for claims with TPL	N/A	\$55	N/A	\$54	N/A	\$59	N/A	-2.03	9.63	Yes
% Family Planning Claims (program type=2)	N/A	0.95	N/A	0.94	N/A	0.80	N/A	-0.81	-15.20	No
% Drug Claims (TOS 16)	95-99	100.00	No	100.00	No	100.00	No	0.00	0.00	Yes
% DME Claims (TOS 51)	>0 - 6	0.00	No	0.00	No	0.00	No	Div by 0	Div by 0	N/A
% Drug Claims with Quantity	>98	99.98	Yes	99.96	Yes	99.96	Yes	-0.01	0.00	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	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with Medispan	98-100	99.68	Yes	99.79	Yes	99.79	Yes	0.11	-0.01	Yes
% Claims with AHFS	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with Generic (GTC)	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% Claims with GC3	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
<b>NDC Configuration Indicator</b>										
% Prescription (codes 0-3)	N/A	77.82	N/A	74.98	N/A	74.58	N/A	-3.65	-0.53	Yes
% Products (codes 4-6)	N/A	22.08	N/A	24.94	N/A	25.33	N/A	12.95	1.60	Yes
% HRI (code 7)	N/A	0.10	N/A	0.08	N/A	0.08	N/A	-21.30	2.00	Yes
% Claims with Smart Key	98-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
% OTC-Drug Class	N/A	6.84	N/A	7.50	N/A	8.64	N/A	9.74	15.23	No
% Prescription-Drug Class	N/A	93.16	N/A	92.50	N/A	91.35	N/A	-0.72	-1.23	Yes
% Multiple Source (Code Y)	N/A	60.03	N/A	63.56	N/A	64.57	N/A	5.87	1.59	Yes
% Single Source (Code N)	N/A	36.52	N/A	31.23	N/A	32.21	N/A	-14.50	3.15	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: OR

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	641,656	N/A	602,938	N/A	565,361	N/A	-6.03	-6.23	10% (+/-)	Yes
Total Medicaid Amount Paid	N/A	\$2,121,251,977	N/A	\$2,255,345,703	N/A	\$2,405,143,126	N/A	6.32	6.64	15% (+/-)	Yes
% with no services (Code 0)	N/A	9.53	N/A	13.43	N/A	11.93	N/A	40.94	-11.20	N/A	N/A
% with FFS only claims (Code 1)	N/A	6.62	N/A	5.79	N/A	4.60	N/A	-12.50	-20.70	N/A	N/A
% with only cap claims (Code 2)	N/A	14.83	N/A	12.36	N/A	11.41	N/A	-16.70	-7.63	N/A	N/A
% with only encounter claims (Code 3)	N/A	0.05	N/A	0.08	N/A	0.11	N/A	78.93	35.24	N/A	N/A
% with FFS and cap claims (Code 4)	N/A	15.97	N/A	14.26	N/A	12.95	N/A	-10.70	-9.16	N/A	N/A
% with cap and encounter claims only (Code 5)	N/A	21.26	N/A	23.77	N/A	27.05	N/A	11.79	13.80	N/A	N/A
% with FFS and encounter claims only (Code 6)	N/A	0.03	N/A	0.05	N/A	0.04	N/A	86.08	-25.80	N/A	N/A
% with FFS, cap and encounter records (Code 7)	N/A	31.71	N/A	30.26	N/A	31.91	N/A	-4.57	5.45	N/A	N/A
# with claims and missing Medicaid eligibility (excludes S-SCHIP only)	N/A	2,049	N/A	2,292	N/A	1,916	N/A	11.86	-16.40	N/A	N/A
% with claims and missing Medicaid eligibility (excludes S-SCHIP only)	<2%	0.32	Yes	0.38	Yes	0.34	Yes	19.04	-10.80	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	381	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	0.07	N/A	N/A	N/A	N/A	N/A
Expenditures for people missing Medicaid eligibility (excludes S-SCHIP only enrollees)	N/A	\$1,460,563	N/A	\$1,213,575	N/A	\$1,242,598	N/A	-16.90	2.39	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	\$772,804	N/A	N/A	N/A	N/A	N/A
<b>S-SCHIP ENROLLMENT</b>											
# with ONLY S-SCHIP enrollment	N/A	20,620	N/A	21,477	N/A	24,855	N/A	4.16	15.73	N/A	N/A
% with ONLY S-SCHIP enrollment	N/A	3.21	N/A	3.56	N/A	4.40	N/A	10.84	23.42	N/A	N/A
# with ANY S-SCHIP enrollment	N/A	45,438	N/A	47,381	N/A	53,601	N/A	4.28	13.13	N/A	N/A
% with ANY S-SCHIP enrollment	N/A	7.08	N/A	7.86	N/A	9.48	N/A	10.97	20.65	N/A	N/A
Total PYE ANY S-SCHIP enrollment	N/A	21,554	N/A	22,995	N/A	27,566	N/A	6.69	19.88	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	618,987	N/A	579,169	N/A	538,590	N/A	-6.43	-7.01	10% (+/-)	Yes
Total Medicaid PYE (Person Years of Enrollment)	N/A	419,168	N/A	415,076	N/A	402,787	N/A	-0.98	-2.96	10% (+/-)	Yes
# with any M-SCHIP enrollment (Medicaid enrollees)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
Total PYE any M-SCHIP	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	N/A	N/A
<b>Eligibility Demographics</b>											
% Records with Valid SSN Format	>=95%	93.74	No	93.18	No	93.14	No	-0.60	-0.04	10% (+/-)	Yes
% Records whose MSIS SSN passed High Group Test (Code 1)	>95%	N/A	No	N/A	No	93.04	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	0.10	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	1,525	No	1,028	No	908	No	-32.60	-11.70	N/A	N/A
% with External SSN from EDB (Code 1)	N/A	N/A	N/A	N/A	N/A	17.45	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%	98.62	Yes	99.73	Yes	99.87	Yes	1.13	0.13	10% (+/-)	Yes
% with Valid 5 Digit Zip Code Format	>=95%	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	10% (+/-)	Yes
% Enrollees who Died During Year	0.1-3%	1.08	Yes	1.17	Yes	1.29	Yes	8.18	9.61	10% (+/-)	Yes
% White	N/A	71.99	N/A	70.02	N/A	69.16	N/A	-2.75	-1.22	10% (+/-)	Yes
% Black	N/A	4.36	N/A	4.43	N/A	4.48	N/A	1.590	1.10	10% (+/-)	Yes
% Native American/Alaskan Native	N/A	2.35	N/A	2.50	N/A	2.41	N/A	6.177	-3.42	10% (+/-)	Yes
% Asian	N/A	2.83	N/A	2.89	N/A	2.81	N/A	2.348	-2.95	N/A	N/A
% Native Hawaiian or other Pacific Islander	N/A	0.09	N/A	0.13	N/A	0.22	N/A	44.30	67.05	N/A	N/A
% More than one race	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	N/A	N/A
% Unknown race	<5%	1.12	Yes	1.22	Yes	20.93	No	9.081	1,614.00	N/A	N/A
% Hispanic/Latino (included with race categories prior to 2005)	N/A	17.26	N/A	18.82	N/A	3.47	N/A	9.017	-81.60	10% (+/-)	No
% of Hispanic/Latino with unknown race	N/A	N/A	N/A	N/A	N/A	100.00	N/A	N/A	N/A	N/A	N/A
% Age 0	2-8%	3.50	Yes	3.89	Yes	4.32	Yes	11.13	11.11	10% (+/-)	No
% Age 0-20 Years	49-74%	46.76	No	50.09	Yes	54.06	Yes	7.13	7.93	10% (+/-)	Yes
% Age > 64 Years	5-18%	8.18	Yes	8.61	Yes	9.29	Yes	5.27	7.86	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%	39.24	No	43.54	Yes	49.62	Yes	10.96	13.96	10% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: OR

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	84,906	N/A	83,499	N/A	84,833	N/A	-1.66	1.60	10% (+/-)	Yes
Total EDB Dual PYE	N/A	71,806	N/A	73,104	N/A	74,523	N/A	1.81	1.94	15% (+/-)	Yes
% Age > 64 Years who are EDB Duals	>=90%	96.29	Yes	96.47	Yes	96.53	Yes	0.19	0.07	10% (+/-)	Yes
% MAX Aged Groups (11,21,31,41,51) who are EDB Duals	>=90%	97.65	Yes	97.94	Yes	97.70	Yes	0.29	-0.24	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) who are EDB Duals	30-55%	47.23	Yes	46.32	Yes	45.83	Yes	-1.94	-1.06	10% (+/-)	Yes
% EDB Only (50)	<5%	6.88	No	3.82	Yes	3.61	Yes	-44.50	-5.61	N/A	N/A
% EDB QMB Only (51)	N/A	12.58	N/A	13.50	N/A	14.22	N/A	7.34	5.33	N/A	N/A
% EDB QMB Plus (52)	N/A	36.28	N/A	38.95	N/A	39.65	N/A	7.37	1.80	N/A	N/A
% EDB SLMB Only (53)	N/A	7.24	N/A	7.92	N/A	8.44	N/A	9.43	6.58	N/A	N/A
% EDB SLMB Plus (54)	N/A	6.58	N/A	6.40	N/A	6.42	N/A	-2.70	0.25	N/A	N/A
% EDB ODWI (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	4.08	N/A	3.67	N/A	2.73	N/A	-10.10	-25.50	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	26.37	N/A	25.74	N/A	24.93	N/A	-2.39	-3.14	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	504	N/A	654	N/A	699	N/A	29.76	6.88	10% (+/-)	Yes
% Non-EDB Duals Without Valid SSN	N/A	0.00	N/A	0.15	N/A	0.00	N/A	Div by 0	-100.00	10% (+/-)	No
% Non-EDB Duals who are Children/Adults	N/A	2.78	N/A	14.07	N/A	2.43	N/A	406.40	-82.70	10% (+/-)	No
% EDB Duals with Spanish Language	N/A	0.68	N/A	0.81	N/A	0.91	N/A	19.37	13.01	15% (+/-)	Yes
% EDB Duals with EDB Date of Death During Year	6-10%	8.28	Yes	7.96	Yes	8.01	Yes	-3.91	0.68	15% (+/-)	Yes
% EDB Duals with Medicaid Reported HIC	N/A	95.11	N/A	97.93	N/A	98.83	N/A	2.96	0.92	15% (+/-)	Yes
% EDB Duals with Medicaid reported HIC = Medicare HIC	N/A	87.38	N/A	88.07	N/A	86.41	N/A	0.79	-1.88	15% (+/-)	Yes
TOTAL EDB DUAL ENROLLEES IN JUNE	N/A	79,115	N/A	78,409	N/A	79,894	N/A	-0.89	1.89	10% (+/-)	Yes
<b>June Medicare Type</b>											
June % with Part A Medicare	N/A	1.66	N/A	1.47	N/A	1.71	N/A	-11.40	16.73	15% (+/-)	No
June % with Part B Medicare	N/A	6.21	N/A	6.44	N/A	6.37	N/A	3.76	-1.14	15% (+/-)	Yes
June % Part A/B Medicare	N/A	92.14	N/A	92.09	N/A	91.92	N/A	-0.05	-0.19	15% (+/-)	Yes
<b>Original Reason for Medicare Entitlement</b>											
% Aged (Code 0)	N/A	47.49	N/A	47.48	N/A	46.70	N/A	-0.02	-1.63	15% (+/-)	Yes
% Disabled (Code 1)	N/A	51.32	N/A	51.40	N/A	52.13	N/A	0.15	1.41	15% (+/-)	Yes
% ESRD (Code 2)	N/A	0.45	N/A	0.46	N/A	0.42	N/A	3.03	-8.24	15% (+/-)	Yes
% Disabled with ESRD (Code 3)	N/A	0.74	N/A	0.66	N/A	0.75	N/A	-11.40	13.28	15% (+/-)	Yes
<b>Other Eligibility Characteristics (All Enrollees)</b>											
% MAX Aged Groups (11,21,31,41,51) >64 Years	>=99%	99.44	Yes	99.79	Yes	99.78	Yes	0.34	0.00	10% (+/-)	Yes
% MAX Disabled Groups (12,22,32,42,52) >64 Years	N/A	1.31	N/A	1.09	N/A	1.14	N/A	-17.40	4.58	10% (+/-)	Yes
% MAX Child Grps (14,16, 24, 34, 44, 48, 54) <21 Years	>=98%	99.98	Yes	99.98	Yes	99.45	Yes	0.01	-0.53	10% (+/-)	Yes
% MAX Adult Groups (15,17,25,35,45,55) >20 Years	>=80%	93.35	Yes	93.05	Yes	93.30	Yes	-0.32	0.27	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	100.00	No	N/A	N/A	N/A	N/A
% MAX 1115 waiver enrollees (Waiver Type=1,5,6,A,F) in MAX 1115 expansion group (MASBOE=51,52,54,55)	N/A	N/A	N/A	N/A	N/A	8.08	N/A	N/A	N/A	N/A	N/A
<b>MAX Aged Total</b>											
11: Aged, Cash	N/A	48,747	N/A	48,132	N/A	48,516	N/A	-1.26	0.80	10% (+/-)	Yes
21: Aged, MN	N/A	13,711	N/A	13,980	N/A	14,114	N/A	1.96	0.96	10% (+/-)	Yes
31: Aged, Poverty	N/A	255	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
41: Other Aged	N/A	11,395	N/A	11,444	N/A	11,741	N/A	0.43	2.60	10% (+/-)	Yes
51: 1115 Aged	N/A	23,386	N/A	22,708	N/A	22,660	N/A	-2.90	-0.21	10% (+/-)	Yes
<b>MAX Disabled Total</b>											
12: Disabled, Cash	N/A	0	N/A	0	N/A	1	N/A	Div by 0	Div by 0	10% (+/-)	N/A
22: Disabled, MN	N/A	74,394	N/A	74,871	N/A	78,905	N/A	0.64	5.39	10% (+/-)	Yes
32: Disabled, Poverty	N/A	48,236	N/A	49,381	N/A	50,668	N/A	2.37	2.61	10% (+/-)	Yes
42: Other Disabled	N/A	1,125	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
52: 1115 Disabled	N/A	9,327	N/A	10,035	N/A	10,785	N/A	7.59	7.47	10% (+/-)	Yes
<b>MAX Child Total</b>											
14: AFDC Child, Cash	N/A	15,706	N/A	15,455	N/A	17,443	N/A	-1.60	12.86	10% (+/-)	No
	N/A	0	N/A	0	N/A	9	N/A	Div by 0	Div by 0	10% (+/-)	N/A
	N/A	264,456	N/A	267,083	N/A	273,095	N/A	0.99	2.25	10% (+/-)	Yes
	N/A	62,645	N/A	71,692	N/A	74,105	N/A	14.44	3.37	10% (+/-)	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
16: AFDC-U Child, Cash	N/A	4,831	N/A	5,498	N/A	4,550	N/A	13.81	-17.20	10% (+/-)	No
24: AFDC Child, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
34: Child Poverty	N/A	139,222	N/A	127,249	N/A	123,855	N/A	-8.60	-2.67	10% (+/-)	Yes
44: Other Child	N/A	41,737	N/A	45,453	N/A	52,000	N/A	8.90	14.40	10% (+/-)	No
48: Foster Care Child	N/A	16,021	N/A	17,191	N/A	18,428	N/A	7.30	7.20	10% (+/-)	Yes
54: 1115 Child	N/A	0	N/A	0	N/A	157	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Adult Total	N/A	231,390	N/A	189,083	N/A	138,074	N/A	-18.30	-27.00	10% (+/-)	No
15: AFDC Adult, Cash	N/A	30,192	N/A	36,490	N/A	36,751	N/A	20.86	0.72	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	3,689	N/A	4,085	N/A	3,250	N/A	10.73	-20.40	10% (+/-)	No
25: AFDC Adult, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
35: Adult, Poverty	N/A	16,948	N/A	17,336	N/A	18,341	N/A	2.29	5.80	10% (+/-)	Yes
45: Other Adult	N/A	43,261	N/A	44,843	N/A	39,761	N/A	3.66	-11.30	10% (+/-)	No
55: 1115 Adult	N/A	137,300	N/A	86,329	N/A	39,971	N/A	-37.10	-53.70	10% (+/-)	No
<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	11,162	N/A	10,964	N/A	10,894	N/A	-1.77	-0.64	N/A	N/A
% enrollees with any ILTC claims	N/A	1.80	N/A	1.89	N/A	2.02	N/A	4.98	6.85	N/A	N/A
% AGED enrollees with any ILTC claims	N/A	16.68	N/A	16.24	N/A	16.16	N/A	-2.65	-0.50	N/A	N/A
% DISABLED enrollees with any ILTC claims	N/A	2.91	N/A	3.03	N/A	2.90	N/A	4.23	-4.44	N/A	N/A
% CHILD enrollees with any ILTC claims	N/A	0.28	N/A	0.30	N/A	0.27	N/A	7.40	-8.98	N/A	N/A
% ADULT enrollees with any ILTC claims	N/A	0.06	N/A	0.05	N/A	0.02	N/A	-23.20	-49.00	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	38,060	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	7.07	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	40.72	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	22.15	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	0.16	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	0.28	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	3,028	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	36,880	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	6.85	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	40.52	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	21.65	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees in Section 1915(c) waiver	N/A	N/A	N/A	N/A	N/A	0.04	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	0.02	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	28,970	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	0	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	7,815	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	95	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	14.54	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	15.21	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	49.96	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	496,710	N/A	N/A	N/A	15% (+/-)	No
% AGED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	89.00	N/A	N/A	N/A	15% (+/-)	No
% DISABLED enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	92.44	N/A	N/A	N/A	15% (+/-)	No
% CHILD enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	95.57	N/A	N/A	N/A	15% (+/-)	No
% ADULT enrollees with any 1115 waiver	N/A	N/A	N/A	N/A	N/A	86.62	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	73.98	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	464,724	N/A	N/A	N/A	15% (+/-)	No

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
% AGED enrollees with any 1915(b) waiver	N/A	N/A	N/A	N/A	N/A	88.74	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	92.09	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	95.57	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	63.75	N/A	N/A	N/A	15% (+/-)	No
% with any HMO/HIO enrollment	N/A	N/A	N/A	N/A	N/A	73.82	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	496,710	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	295	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	37,484	N/A	37,435	N/A	30,574	N/A	-0.13	-18.30	N/A	N/A
# Aliens with ANY restricted benefits	N/A	39,124	N/A	38,860	N/A	31,551	N/A	-0.68	-18.80	N/A	N/A
# PYE Aliens with ANY restricted benefits	N/A	22,772	N/A	23,807	N/A	19,737	N/A	4.55	-17.10	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	13,637	N/A	19,621	N/A	20,433	N/A	43.88	4.14	N/A	N/A
# EDB Duals with ANY restricted benefits enrollment	N/A	21,864	N/A	22,556	N/A	23,448	N/A	3.17	3.96	N/A	N/A
# PYE EDB Duals with ANY restricted benefits	N/A	16,622	N/A	18,406	N/A	18,938	N/A	10.74	2.89	N/A	N/A
% EDB Duals with ONLY restricted benefits enrollment	N/A	N/A	N/A	N/A	N/A	24.09	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>											
TOTAL ENROLLEES IN JUNE	N/A	413,170	N/A	423,206	N/A	405,014	N/A	2.43	-4.30	15% (+/-)	Yes
June % Full Scope Benefits (Code 1)	>80%	74.86	No	76.60	No	83.27	Yes	2.33	8.71	15% (+/-)	Yes
June % Restricted Benefits Alien (Code 2)	<5%	5.52	No	6.02	No	4.92	Yes	9.23	-18.30	15% (+/-)	No
June % Restricted Benefits Dual (Code 3)	<5%	4.15	Yes	4.40	Yes	4.69	Yes	5.87	6.58	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%	15.48	No	12.98	No	7.13	No	-16.10	-45.10	15% (+/-)	No
June % Restricted Benefits Family Planning (Code 6)	<5%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Unknown Benefits (Code 9)	0%	0.00	Yes	0.00	Yes	0.00	Yes	Div by 0	Div by 0	15% (+/-)	N/A
June % Restricted Benefits Pharm Plus Non-Dual Enrollee (Code X)	N/A	N/A	N/A	N/A	N/A	0.00	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%	4.48	Yes	4.59	Yes	3.90	Yes	2.36	-15.00	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
June Total Enrollees with TANF Flag (Code 2)	N/A	65,170	N/A	45,194	N/A	45,376	N/A	-30.70	0.40	15% (+/-)	Yes
June # with M-SCHIP (Code 2) - Child (<19 Years)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
June # with M-SCHIP (Code 2) - Adult (>18 Years)	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
June # with S-SCHIP Flag (Code 3) - Child (<19 Years)	N/A	8,523	N/A	8,519	N/A	10,156	N/A	-0.05	19.22	15% (+/-)	No
June # with S-SCHIP Flag (Code 3) - Adult (>18 Years)	N/A	109	N/A	148	N/A	188	N/A	35.78	27.03	15% (+/-)	No
<b>Medicaid Expenditures</b>											
Total Medicaid Amt Paid	N/A	\$2,105,695,974	N/A	\$2,254,132,128	N/A	\$2,403,900,528	N/A	7.05	6.64	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$3,402	N/A	\$3,892	N/A	\$4,463	N/A	14.41	14.68	15% (+/-)	Yes
25th Percentile	N/A	\$376	N/A	\$445	N/A	\$610	N/A	18.35	37.08	15% (+/-)	No
50th Percentile (Median)	N/A	\$1,044	N/A	\$1,183	N/A	\$1,330	N/A	13.31	12.43	15% (+/-)	Yes
75th Percentile	N/A	\$2,772	N/A	\$3,796	N/A	\$4,537	N/A	36.94	19.52	15% (+/-)	No
95th Percentile	N/A	\$14,139	N/A	\$15,338	N/A	\$16,804	N/A	8.48	9.56	15% (+/-)	Yes
99th Percentile	N/A	\$38,335	N/A	\$42,248	N/A	\$47,083	N/A	10.21	11.44	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$10,770	N/A	\$10,659	N/A	\$11,170	N/A	-1.03	4.80	15% (+/-)	Yes
MAX Disabled	N/A	\$10,342	N/A	\$10,780	N/A	\$11,237	N/A	4.23	4.24	10% (+/-)	Yes
MAX Child	N/A	\$1,602	N/A	\$1,671	N/A	\$1,844	N/A	4.29	10.35	10% (+/-)	No
MAX Adult	N/A	\$1,675	N/A	\$2,579	N/A	\$3,416	N/A	53.98	32.45	10% (+/-)	No
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$9,856	N/A	\$9,595	N/A	\$10,104	N/A	-2.65	5.30	15% (+/-)	Yes
MAX Aged	N/A	\$10,771	N/A	\$10,674	N/A	\$11,198	N/A	-0.91	4.91	10% (+/-)	Yes
MAX Disabled	N/A	\$9,030	N/A	\$8,380	N/A	\$8,809	N/A	-7.20	5.12	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	\$36,443	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	\$17,776	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	\$26,960	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	\$16,341	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	\$16,708	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	Div by 0	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	\$14,330	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	\$69,830	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	\$7,789	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	\$8,290	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	Div by 0	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	\$5,540	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	\$40,314	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	\$15,182,555	N/A	\$19,771,713	N/A	\$21,635,790	N/A	30.23	9.43	N/A	N/A
Avg Medicaid Paid for Alien enrollees with restricted benefits ONLY	N/A	\$405	N/A	\$528	N/A	\$708	N/A	30.40	33.98	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	\$8,038,640	N/A	\$3,408,567	N/A	\$3,191,502	N/A	-57.60	-6.37	N/A	N/A
Avg Medicaid Paid for EDB Duals with only restricted benefit enrollment	N/A	\$589	N/A	\$174	N/A	\$156	N/A	-70.50	-10.10	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	567,866	N/A	522,113	N/A	487,583	N/A	-8.06	-6.61	10% (+/-)	Yes
MAX Aged Total	N/A	40,166	N/A	37,263	N/A	37,404	N/A	-7.23	0.38	10% (+/-)	Yes
MAX Disabled Total	N/A	69,340	N/A	66,119	N/A	69,584	N/A	-4.65	5.24	10% (+/-)	Yes
MAX Child Total	N/A	253,439	N/A	255,727	N/A	260,985	N/A	0.90	2.06	10% (+/-)	Yes
MAX Adult Total	N/A	204,921	N/A	163,004	N/A	119,610	N/A	-20.50	-26.60	10% (+/-)	No
Total Medicaid PYE (Person Years of Enrollment)	N/A	385,701	N/A	374,748	N/A	365,866	N/A	-2.84	-2.37	10% (+/-)	Yes
Total EDB Duals	N/A	71,231	N/A	63,844	N/A	64,384	N/A	-10.40	0.85	10% (+/-)	Yes
MAX Aged	N/A	39,021	N/A	36,270	N/A	36,290	N/A	-7.05	0.06	10% (+/-)	Yes
MAX Disabled	N/A	30,086	N/A	25,927	N/A	26,840	N/A	-13.80	3.52	10% (+/-)	Yes
<b>Total Medicaid Amount Paid</b>											
Total Medicaid Amt Paid	N/A	\$2,082,474,779	N/A	\$2,230,951,848	N/A	\$2,379,073,236	N/A	7.13	6.64	15% (+/-)	Yes
Average Medicaid Amt Paid per Enrollee	N/A	\$3,667	N/A	\$4,273	N/A	\$4,879	N/A	16.52	14.19	15% (+/-)	Yes
<b>AVG MEDICAID AMT PD/ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
MAX Aged	N/A	\$12,976	N/A	\$13,738	N/A	\$14,455	N/A	5.88	5.22	15% (+/-)	Yes
MAX Disabled	N/A	\$11,035	N/A	\$12,172	N/A	\$12,715	N/A	10.31	4.46	10% (+/-)	Yes
MAX Child	N/A	\$1,666	N/A	\$1,738	N/A	\$1,916	N/A	4.32	10.20	10% (+/-)	No
MAX Adult	N/A	\$1,824	N/A	\$2,881	N/A	\$3,793	N/A	57.96	31.64	10% (+/-)	No
<b>AVG MEDICAID AMT PD/EDB DUAL ENROLLEE</b>											
All EDB Dual Enrollees	N/A	\$11,635	N/A	\$12,496	N/A	\$13,264	N/A	7.40	6.14	15% (+/-)	Yes
MAX Aged	N/A	\$13,043	N/A	\$13,842	N/A	\$14,592	N/A	6.13	5.42	10% (+/-)	Yes
MAX Disabled	N/A	\$10,406	N/A	\$11,120	N/A	\$11,795	N/A	6.86	6.07	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	91.40	N/A	93.55	N/A	97.04	N/A	2.35	3.74	25% (+)	Yes
Total MC Enrollees	N/A	519,049	N/A	488,427	N/A	473,168	N/A	-5.90	-3.12	25% (+)	Yes
Aged	N/A	36,625	N/A	35,531	N/A	35,777	N/A	-2.99	0.69	25% (+)	Yes
Disabled	N/A	63,039	N/A	62,878	N/A	65,210	N/A	-0.26	3.71	25% (+)	Yes
Child	N/A	244,895	N/A	248,613	N/A	255,155	N/A	1.52	2.63	25% (+)	Yes
Adult	N/A	174,490	N/A	141,405	N/A	117,026	N/A	-19.00	-17.20	25% (+)	Yes
% of MC Enrollees in HMO/HIO (Dups)	N/A	78.18	N/A	77.21	N/A	77.65	N/A	-1.24	0.57	25% (+)	Yes
% of MC Enrollees in Dental (Dups)	N/A	88.62	N/A	91.78	N/A	95.48	N/A	3.57	4.03	25% (+)	Yes
% of MC Enrollees in BHO (Dups)	N/A	91.50	N/A	92.99	N/A	94.67	N/A	1.63	1.80	25% (+)	Yes
% 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	0.12	N/A	0.14	N/A	0.16	N/A	12.85	16.34	25% (+)	Yes
% of MC Enrollees in PCCM (Dups)	N/A	3.37	N/A	3.37	N/A	3.25	N/A	0.13	-3.69	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	-100.00	25% (+)	No
% EDB Duals ever enrolled in HMO/HIOs	<20%	45.92	No	48.98	No	53.55	No	6.66	9.33	25% (+)	Yes
% EDB Duals in PHP only or PHP/PCCM only	N/A	42.31	N/A	46.52	N/A	42.99	N/A	9.97	-7.59	25% (+)	Yes
% EDB Duals in PCCM only	N/A	0.11	N/A	0.12	N/A	0.09	N/A	11.57	-22.00	25% (+)	Yes
% Section 1915(c) waiver enrollees ever enrolled in HMO/HIOs	N/A	N/A	N/A	N/A	N/A	49.96	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	45.99	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	0.13	N/A	N/A	N/A	25% (+)	No
TOTAL ENROLLEES IN JUNE	N/A	379,627	N/A	381,107	N/A	368,001	N/A	0.39	-3.44	25% (+)	Yes
June % HMO/HIO only (Code 1)	N/A	5.73	N/A	4.57	N/A	0.44	N/A	-20.20	-90.30	25% (+)	No

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
June % Dental Plan only (Code 2)	N/A	4.72	N/A	4.55	N/A	5.28	N/A	-3.63	15.97	25% (+)	Yes
June % BHO only (Code 3)	N/A	4.28	N/A	3.09	N/A	2.65	N/A	-27.80	-14.20	25% (+)	Yes
June % PCCM only (Code 4)	N/A	0.29	N/A	0.24	N/A	0.04	N/A	-18.20	-81.90	25% (+)	No
June % Other MC only (Code 5)	N/A	0.12	N/A	0.13	N/A	0.16	N/A	12.59	17.56	25% (+)	Yes
June % HMO/HIO & Dental (Code 6)	N/A	3.17	N/A	2.99	N/A	3.05	N/A	-5.81	2.00	25% (+)	Yes
June % HMO/HIO & BHO (Code 7)	N/A	2.02	N/A	3.61	N/A	1.53	N/A	78.22	-57.70	25% (+)	No
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	47.97	N/A	52.23	N/A	65.51	N/A	8.88	25.43	25% (+)	No
June % Dental & PCCM (Code 10)	N/A	0.22	N/A	0.19	N/A	0.17	N/A	-15.50	-10.90	25% (+)	Yes
June % BHO & PCCM (Code 11)	N/A	0.25	N/A	0.25	N/A	0.12	N/A	-0.18	-50.00	25% (+)	No
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	2.02	N/A	2.14	N/A	2.51	N/A	6.10	17.17	25% (+)	Yes
June % Dental & BHO (Code 14)	N/A	11.60	N/A	10.50	N/A	13.30	N/A	-9.49	26.63	25% (+)	No
June % Other Combinations (Code 15)	N/A	0.01	N/A	0.01	N/A	0.01	N/A	-60.20	50.16	25% (+)	No
June % FFS Only (Code 16)	N/A	17.59	N/A	15.51	N/A	5.24	N/A	-11.80	-66.20	25% (+)	No
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	\$790,673,326	N/A	\$932,156,769	N/A	\$1,080,796,613	N/A	17.89	15.95	15% (+/-)	No
HMO/HIO	N/A	\$594,021,259	N/A	\$733,165,022	N/A	\$848,454,242	N/A	23.42	15.72	15% (+/-)	No
PHP	N/A	\$196,006,779	N/A	\$198,406,819	N/A	\$231,828,603	N/A	1.22	16.85	15% (+/-)	No
PCCM	N/A	\$645,288	N/A	\$584,928	N/A	\$513,768	N/A	-9.35	-12.20	15% (+/-)	Yes
Ratio of Cap Claims to PME (person mo. enroll.) in MC	-9-2	2.45	No	2.50	No	2.59	No	2.12	3.51	15% (+/-)	Yes
HMO/HIO	-9-2	1.03	Yes	1.04	Yes	1.03	Yes	0.60	-0.38	15% (+/-)	Yes
PHP	-9-2	1.79	Yes	1.77	Yes	1.81	Yes	-1.02	2.33	15% (+/-)	Yes
PCCM	-9-2	0.84	No	0.77	No	0.70	No	-8.86	-9.15	15% (+/-)	Yes
Average Cap Payment for PME in MC	N/A	\$206	N/A	\$234	N/A	\$260	N/A	13.69	11.28	15% (+/-)	Yes
HMO/HIO	N/A	\$214	N/A	\$248	N/A	\$275	N/A	15.90	10.74	15% (+/-)	Yes
PHP	N/A	\$54	N/A	\$51	N/A	\$56	N/A	-5.13	8.88	15% (+/-)	Yes
PCCM	N/A	\$5	N/A	\$5	N/A	\$4	N/A	-8.86	-9.15	15% (+/-)	Yes
<b>Persons enrolled in PHP only or PHP/PCCM only</b>											
Total Cap Payments	N/A	\$53,643,332	N/A	\$56,830,335	N/A	\$64,248,466	N/A	5.94	13.05	15% (+/-)	Yes
Total Medicaid Amt Paid	N/A	\$668,534,876	N/A	\$731,945,503	N/A	\$741,209,657	N/A	9.49	1.27	15% (+/-)	Yes
Count of Enrollees	N/A	112,639	N/A	110,778	N/A	105,570	N/A	-1.65	-4.70	15% (+/-)	Yes
<b>Persons enrolled in PCCM only</b>											
Total Cap Payments	N/A	\$21,164	N/A	\$14,430	N/A	\$9,670	N/A	-31.80	-33.00	15% (+/-)	No
Count of Enrollees	N/A	623	N/A	528	N/A	164	N/A	-15.20	-68.90	15% (+/-)	No
<b>Persons ever enrolled in HMO/HIOs during year</b>											
Count of Enrollees	N/A	405,787	N/A	377,121	N/A	367,434	N/A	-7.06	-2.57	15% (+/-)	Yes
Aged	N/A	16,903	N/A	16,086	N/A	17,589	N/A	-4.83	9.34	25% (+)	Yes
Disabled	N/A	44,949	N/A	42,771	N/A	45,787	N/A	-4.85	7.05	25% (+)	Yes
Child	N/A	200,307	N/A	204,700	N/A	209,123	N/A	2.19	2.16	25% (+)	Yes
Adult	N/A	143,628	N/A	113,564	N/A	94,935	N/A	-20.90	-16.40	25% (+)	Yes
Total Ever Enrolled in HMO/HIO PYE	N/A	231,224	N/A	246,220	N/A	257,271	N/A	6.49	4.49	25% (+)	Yes
Total Cap Payments	N/A	\$737,008,830	N/A	\$875,312,004	N/A	\$1,016,538,477	N/A	18.77	16.13	15% (+/-)	No
Average Cap Payments	N/A	\$1,816	N/A	\$2,321	N/A	\$2,767	N/A	27.79	19.20	15% (+/-)	No
Aged	N/A	\$3,431	N/A	\$3,455	N/A	\$3,874	N/A	0.70	12.11	15% (+/-)	Yes
Disabled	N/A	\$5,986	N/A	\$7,053	N/A	\$7,617	N/A	17.82	8.00	15% (+/-)	Yes
Child	N/A	\$1,078	N/A	\$1,121	N/A	\$1,311	N/A	4.03	16.91	15% (+/-)	No
Adult	N/A	\$1,351	N/A	\$2,541	N/A	\$3,428	N/A	88.09	34.95	15% (+/-)	No
Total FFS Payments	N/A	\$586,383,242	N/A	\$549,480,373	N/A	\$561,239,475	N/A	-6.29	2.14	15% (+/-)	Yes
Average FFS Payments per enrollee	N/A	\$1,445.05	N/A	\$1,457	N/A	\$1,527	N/A	0.83	4.83	15% (+/-)	Yes
Aged	N/A	\$8,067.51	N/A	\$8,113	N/A	\$8,504	N/A	0.56	4.83	15% (+/-)	Yes
Disabled	N/A	\$5,033.90	N/A	\$4,914	N/A	\$5,074	N/A	-2.38	3.25	15% (+/-)	Yes
Child	N/A	\$654.45	N/A	\$632	N/A	\$626	N/A	-3.46	-0.99	15% (+/-)	Yes
Adult	N/A	\$645.13	N/A	\$700	N/A	\$511	N/A	8.48	-26.90	15% (+/-)	No
<b>Total FFS Payments by Type of Service</b>											
IP	N/A	\$40,444,991	N/A	\$41,787,538	N/A	\$36,539,762	N/A	3.32	-12.60	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
ILTC	N/A	\$103,370,417	N/A	\$103,482,594	N/A	\$109,576,099	N/A	0.11	5.89	15% (+/-)	Yes
Drug	N/A	\$101,473,166	N/A	\$95,368,839	N/A	\$101,312,401	N/A	-6.02	6.23	15% (+/-)	Yes
All Other (excluding cap payments)	N/A	\$341,094,668	N/A	\$308,841,402	N/A	\$313,811,213	N/A	-9.46	1.61	15% (+/-)	Yes
Average FFS Payments by Type of Service											
IP	N/A	\$100	N/A	\$111	N/A	\$99	N/A	11.17	-10.30	15% (+/-)	Yes
ILTC	N/A	\$255	N/A	\$274	N/A	\$298	N/A	7.72	8.68	15% (+/-)	Yes
Drug	N/A	\$250	N/A	\$253	N/A	\$276	N/A	1.13	9.03	15% (+/-)	Yes
All Other (excluding cap payments)	N/A	\$841	N/A	\$819	N/A	\$854	N/A	-2.57	4.29	15% (+/-)	Yes
<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	123,560	N/A	112,420	N/A	90,245	N/A	-9.02	-19.70	15% (+/-)	No
Total Non-Dual FFS Recipients	N/A	86,695	N/A	83,161	N/A	71,711	N/A	-4.08	-13.80	15% (+/-)	Yes
Total Non-Dual FFS PYE	N/A	68,096	N/A	68,357	N/A	61,419	N/A	0.38	-10.10	15% (+/-)	Yes
MAX Aged Total	N/A	466	N/A	370	N/A	395	N/A	-20.60	6.76	10% (+/-)	Yes
11: Aged, Cash	N/A	59	N/A	98	N/A	106	N/A	66.10	8.16	10% (+/-)	Yes
21: Aged, MN	N/A	4	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
31: Aged, Poverty	N/A	212	N/A	72	N/A	84	N/A	-66.00	16.67	10% (+/-)	No
41: Other Aged	N/A	191	N/A	200	N/A	205	N/A	4.71	2.50	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 Total	N/A	9,361	N/A	12,232	N/A	13,638	N/A	30.67	11.49	10% (+/-)	No
12: Disabled, Cash	N/A	7,574	N/A	9,726	N/A	9,743	N/A	28.41	0.17	10% (+/-)	Yes
22: Disabled, MN	N/A	98	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
32: Disabled, Poverty	N/A	40	N/A	281	N/A	404	N/A	602.50	43.77	10% (+/-)	No
42: Other Disabled	N/A	1,649	N/A	2,225	N/A	3,487	N/A	34.93	56.72	10% (+/-)	No
52: 1115 Disabled	N/A	0	N/A	0	N/A	4	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Child Total	N/A	53,128	N/A	51,023	N/A	51,860	N/A	-3.96	1.64	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	10,240	N/A	12,682	N/A	13,143	N/A	23.85	3.64	10% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	816	N/A	744	N/A	522	N/A	-8.82	-29.80	10% (+/-)	No
24: AFDC Child, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
34: Child Poverty	N/A	29,484	N/A	24,507	N/A	23,489	N/A	-16.90	-4.15	10% (+/-)	Yes
44: Other Child	N/A	6,308	N/A	6,445	N/A	7,751	N/A	2.17	20.26	10% (+/-)	No
48: Foster Care Child	N/A	6,280	N/A	6,645	N/A	6,930	N/A	5.81	4.29	10% (+/-)	Yes
54: 1115 Child	N/A	0	N/A	0	N/A	25	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Adult Total	N/A	60,605	N/A	48,795	N/A	24,352	N/A	-19.50	-50.10	10% (+/-)	No
15: AFDC Adult, Cash	N/A	4,783	N/A	6,726	N/A	6,673	N/A	40.62	-0.79	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	826	N/A	694	N/A	495	N/A	-16.00	-28.70	10% (+/-)	No
25: AFDC Adult, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
35: Adult, Poverty	N/A	3,928	N/A	3,925	N/A	4,359	N/A	-0.08	11.06	10% (+/-)	No
45: Other Adult	N/A	3,438	N/A	3,656	N/A	4,020	N/A	6.34	9.96	10% (+/-)	Yes
55: 1115 Adult	N/A	47,630	N/A	33,794	N/A	8,805	N/A	-29.00	-73.90	10% (+/-)	No
# Non-Dual FFS Enrollees w/ MSIS Dual Code/No EDB Confirmation	N/A	320	N/A	371	N/A	385	N/A	15.94	3.77	10% (+/-)	Yes
Total FFS Medicaid Amt Paid	N/A	\$254,589,857	N/A	\$319,058,777	N/A	\$318,937,811	N/A	25.32	-0.04	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per Non-Dual FFS Enrollee	N/A	\$2,060	N/A	\$2,838	N/A	\$3,534	N/A	37.74	24.52	15% (+/-)	No
Avg FFS Medicaid Amt Paid per Non-Dual FFS Recipient (User of any service)	N/A	\$2,937	N/A	\$3,837	N/A	\$4,448	N/A	30.65	15.92	15% (+/-)	No
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX ELIG GRP</b>											
All Aged	N/A	\$11,256	N/A	\$10,118	N/A	\$10,042	N/A	-10.10	-0.75	15% (+/-)	Yes
11: Aged, Cash	N/A	\$8,657	N/A	\$6,774	N/A	\$9,087	N/A	-21.70	34.14	15% (+/-)	No
21: Aged, MN	N/A	\$131	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
31: Aged, Poverty	N/A	\$8,407	N/A	\$93	N/A	\$165	N/A	-98.90	76.78	15% (+/-)	No
41: Other Aged	N/A	\$15,453	N/A	\$15,366	N/A	\$14,583	N/A	-0.56	-5.10	15% (+/-)	Yes
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	\$11,169	N/A	\$12,201	N/A	\$12,141	N/A	9.24	-0.50	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$11,472	N/A	\$12,208	N/A	\$12,842	N/A	6.42	5.19	15% (+/-)	Yes
22: Disabled, MN	N/A	\$559	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
32: Disabled, Poverty	N/A	\$1,747	N/A	\$9,292	N/A	\$10,838	N/A	431.80	16.63	15% (+/-)	No
42: Other Disabled	N/A	\$10,636	N/A	\$12,539	N/A	\$10,346	N/A	17.89	-17.50	15% (+/-)	No
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	\$497	N/A	Div by 0	Div by 0	15% (+/-)	N/A

2003-2005 MAX PSF VALIDATION TABLE  
STATE: OR

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	\$1,190	N/A	\$1,431	N/A	\$1,528	N/A	20.24	6.77	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$780	N/A	\$979	N/A	\$1,067	N/A	25.56	8.93	15% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	\$633	N/A	\$933	N/A	\$1,685	N/A	47.27	80.70	15% (+/-)	No
24: AFDC Child, MN	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
34: Child, Poverty	N/A	\$663	N/A	\$949	N/A	\$1,076	N/A	43.10	13.41	15% (+/-)	Yes
44: Other Child	N/A	\$2,037	N/A	\$2,456	N/A	\$2,112	N/A	20.57	-14.00	15% (+/-)	Yes
48: Foster Care Child	N/A	\$3,555	N/A	\$3,133	N/A	\$3,274	N/A	-11.90	4.51	15% (+/-)	Yes
54: 1115 Child	N/A	Div by 0	N/A	Div by 0	N/A	\$77	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Adult	N/A	\$1,346	N/A	\$1,907	N/A	\$2,881	N/A	41.70	51.07	15% (+/-)	No
15: AFDC Adult, Cash	N/A	\$2,163	N/A	\$2,740	N/A	\$2,800	N/A	26.63	2.19	15% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	\$1,174	N/A	\$1,742	N/A	\$2,111	N/A	48.42	21.15	15% (+/-)	No
25: AFDC Adult, MN	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
35: Adult, Poverty	N/A	\$2,119	N/A	\$2,307	N/A	\$2,564	N/A	8.86	11.17	15% (+/-)	Yes
45: Other Adult	N/A	\$1,485	N/A	\$1,876	N/A	\$2,060	N/A	26.33	9.83	15% (+/-)	Yes
55: 1115 Adult	N/A	\$1,193	N/A	\$1,702	N/A	\$3,517	N/A	42.65	106.70	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$40,611,908	N/A	\$63,305,384	N/A	\$66,131,858	N/A	55.88	4.47	15% (+/-)	Yes
IP: Number of Users	N/A	9,390	N/A	9,390	N/A	8,599	N/A	0.64	-8.42	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$4,353	N/A	\$6,742	N/A	\$7,691	N/A	54.88	14.07	15% (+/-)	Yes
IP: Average Medicaid Covered Days Per User	N/A	5	N/A	5	N/A	6	N/A	4.69	9.96	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$75,342	N/A	\$54,794	N/A	\$171,367	N/A	-27.30	212.70	15% (+/-)	No
MH Aged: Number of Users	N/A	3	N/A	5	N/A	7	N/A	66.67	40.00	15% (+/-)	No
MH Aged: Avg Medicaid Pd per User	N/A	\$25,114	N/A	\$10,959	N/A	\$24,481	N/A	-56.40	123.40	15% (+/-)	No
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$6,883,321	N/A	\$8,266,984	N/A	\$7,017,662	N/A	20.10	-15.10	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	188	N/A	213	N/A	216	N/A	13.30	1.41	15% (+/-)	Yes
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$36,613	N/A	\$38,812	N/A	\$32,489	N/A	6.01	-16.30	15% (+/-)	No
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$2,754,319	N/A	\$3,377,474	N/A	\$2,821,227	N/A	22.62	-16.50	15% (+/-)	No
ICF/MR: Number of Users	N/A	11	N/A	14	N/A	11	N/A	27.27	-21.40	15% (+/-)	No
ICF/MR: Avg Medicaid Pd per User	N/A	\$250,393	N/A	\$241,248	N/A	\$256,475	N/A	-3.65	6.31	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$11,337,401	N/A	\$14,229,546	N/A	\$16,559,237	N/A	25.51	16.37	15% (+/-)	No
NF Number of Users	N/A	483	N/A	592	N/A	597	N/A	22.57	0.84	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$23,473	N/A	\$24,036	N/A	\$27,737	N/A	2.40	15.40	15% (+/-)	No
Physician: Total Medicaid Paid (TOS 08)	N/A	\$23,229,120	N/A	\$25,806,137	N/A	\$24,712,602	N/A	11.09	-4.24	15% (+/-)	Yes
Physician: Number of Users	N/A	50,503	N/A	50,217	N/A	40,765	N/A	-0.57	-18.80	15% (+/-)	No
Physician: Avg Medicaid Pd per User	N/A	\$460	N/A	\$514	N/A	\$606	N/A	11.73	17.97	15% (+/-)	No
Dental: Total Medicaid Paid (TOS 09)	N/A	\$389,789	N/A	\$294,345	N/A	\$330,196	N/A	-24.50	12.18	15% (+/-)	Yes
Dental: Number of Users	N/A	2,102	N/A	1,458	N/A	1,572	N/A	-30.60	7.82	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$185	N/A	\$202	N/A	\$210	N/A	8.87	4.05	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$6,107,034	N/A	\$5,680,477	N/A	\$5,220,797	N/A	-6.98	-8.09	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	12,448	N/A	12,631	N/A	11,420	N/A	1.47	-9.59	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$491	N/A	\$450	N/A	\$457	N/A	-8.33	1.65	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$23,714,232	N/A	\$32,114,350	N/A	\$31,838,352	N/A	35.42	-0.86	15% (+/-)	Yes
OPD Number of Users	N/A	35,710	N/A	34,768	N/A	32,387	N/A	-2.64	-6.85	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$664	N/A	\$924	N/A	\$983	N/A	39.09	6.43	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$11,110,462	N/A	\$14,919,050	N/A	\$13,840,278	N/A	34.28	-7.23	15% (+/-)	Yes
Clinic: Number of Users	N/A	21,035	N/A	23,942	N/A	22,042	N/A	13.82	-7.94	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$528	N/A	\$623	N/A	\$628	N/A	17.98	0.77	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$479,259	N/A	\$458,550	N/A	\$426,522	N/A	-4.32	-6.98	15% (+/-)	Yes
HH: Number of Users	N/A	505	N/A	513	N/A	456	N/A	1.58	-11.10	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$949	N/A	\$894	N/A	\$935	N/A	-5.81	4.64	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$13,926,667	N/A	\$17,032,108	N/A	\$14,966,447	N/A	22.30	-12.10	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	46,433	N/A	47,165	N/A	39,091	N/A	1.58	-17.10	15% (+/-)	No
Lab/Xray:Avg Medicaid Pd per User	N/A	\$300	N/A	\$361	N/A	\$383	N/A	20.40	6.02	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$44,578,443	N/A	\$54,372,890	N/A	\$56,571,999	N/A	21.97	4.04	15% (+/-)	Yes
Drugs: Number of Users	N/A	64,147	N/A	62,572	N/A	53,334	N/A	-2.46	-14.80	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$695	N/A	\$869	N/A	\$1,061	N/A	25.04	22.07	15% (+/-)	No
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$15,717,020	N/A	\$18,803,821	N/A	\$17,399,131	N/A	19.64	-7.47	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: OR

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	7,907	N/A	4,206	N/A	4,464	N/A	-46.80	6.13	15% (+/-)	Yes
Other Services: Avg Medicaid Pd per User	N/A	\$1,988	N/A	\$4,471	N/A	\$3,898	N/A	124.90	-12.80	15% (+/-)	Yes
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$4,335,340	N/A	\$5,275,905	N/A	\$4,772,563	N/A	21.70	-9.54	15% (+/-)	Yes
Transportation: Number of Users	N/A	5,986	N/A	6,347	N/A	5,972	N/A	6.03	-5.91	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$724	N/A	\$831	N/A	\$799	N/A	14.77	-3.86	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$196,932	N/A	\$240,733	N/A	\$329,453	N/A	22.24	36.85	15% (+/-)	No
PCS: Number of Users	N/A	370	N/A	440	N/A	448	N/A	18.92	1.82	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$532	N/A	\$547	N/A	\$735	N/A	2.79	34.41	15% (+/-)	No
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$17,311,912	N/A	\$13,431,486	N/A	\$14,647,577	N/A	-22.40	9.05	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	8,383	N/A	7,152	N/A	8,219	N/A	-14.70	14.92	15% (+/-)	Yes
Target Case Management: Avg Medicaid Pd per User	N/A	\$2,065	N/A	\$1,878	N/A	\$1,782	N/A	-9.06	-5.10	15% (+/-)	Yes
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$848,288	N/A	\$2,358,544	N/A	\$1,742,922	N/A	178.00	-26.10	15% (+/-)	No
Rehab Services: Number of Users	N/A	1,853	N/A	4,187	N/A	3,805	N/A	126.00	-9.12	15% (+/-)	Yes
Rehab Services: Avg Medicaid Pd per User	N/A	\$458	N/A	\$563	N/A	\$458	N/A	23.05	-18.70	15% (+/-)	No
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$677,176	N/A	\$610,847	N/A	\$358,002	N/A	-9.79	-41.40	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	1,380	N/A	1,293	N/A	966	N/A	-6.30	-25.30	15% (+/-)	No
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$491	N/A	\$472	N/A	\$371	N/A	-3.73	-21.60	15% (+/-)	No
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$1,079,591	N/A	\$1,349,467	N/A	\$1,287,950	N/A	25.00	-4.56	15% (+/-)	Yes
Hospice: Number of Users	N/A	149	N/A	205	N/A	228	N/A	37.58	11.22	15% (+/-)	Yes
Hospice: Avg Medicaid Pd per User	N/A	\$7,246	N/A	\$6,583	N/A	\$5,649	N/A	-9.15	-14.20	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$9,476,358	N/A	\$10,102,678	N/A	\$9,966,503	N/A	6.61	-1.35	15% (+/-)	Yes
DME: Number of Users	N/A	18,274	N/A	21,959	N/A	20,000	N/A	20.17	-8.92	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$519	N/A	\$460	N/A	\$498	N/A	-11.30	8.32	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$2,690,666	N/A	\$3,083,700	N/A	\$3,140,034	N/A	14.61	1.83	15% (+/-)	Yes
Residential Care: Number of Users	N/A	238	N/A	229	N/A	243	N/A	-3.78	6.11	15% (+/-)	Yes
Residential Care: Avg Medicaid Pd per User	N/A	\$11,305	N/A	\$13,466	N/A	\$12,922	N/A	19.11	-4.04	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$14,108,754	N/A	\$20,733,113	N/A	\$21,646,176	N/A	46.95	4.40	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	11,053	N/A	11,226	N/A	10,225	N/A	1.57	-8.92	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$1,276	N/A	\$1,847	N/A	\$2,117	N/A	44.69	14.62	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$20,922	N/A	\$19,585	N/A	\$9,677	N/A	-6.39	-50.60	15% (+/-)	No
Adult Day Care: Number of Users	N/A	7	N/A	6	N/A	5	N/A	-14.30	-16.70	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$2,989	N/A	\$3,264	N/A	\$1,935	N/A	9.21	-40.70	15% (+/-)	No
<b>AVG FFS MEDICAID AMT PD/NON-DUAL FFS ENROLLEE BY MAX TOS</b>											
Inpatient Hospital (TOS 01)	N/A	\$329	N/A	\$563	N/A	\$733	N/A	71.33	30.13	15% (+/-)	No
Aged	N/A	\$630	N/A	\$496	N/A	\$445	N/A	-21.30	-10.40	15% (+/-)	Yes
Disabled	N/A	\$1,365	N/A	\$2,265	N/A	\$2,461	N/A	65.96	8.67	15% (+/-)	Yes
Child	N/A	\$165	N/A	\$265	N/A	\$308	N/A	60.20	16.37	15% (+/-)	No
Adult	N/A	\$310	N/A	\$449	N/A	\$674	N/A	45.03	50.10	15% (+/-)	No
ILTC (TOS=02,04,05,07)	N/A	\$170	N/A	\$231	N/A	\$294	N/A	35.38	27.65	15% (+/-)	No
Aged	N/A	\$3,373	N/A	\$4,202	N/A	\$4,825	N/A	24.56	14.84	15% (+/-)	Yes
Disabled	N/A	\$1,395	N/A	\$1,401	N/A	\$1,369	N/A	0.41	-2.25	15% (+/-)	Yes
Child	N/A	\$116	N/A	\$139	N/A	\$115	N/A	19.68	-17.80	15% (+/-)	No
Adult	N/A	\$4	N/A	\$3	N/A	\$2	N/A	-31.20	-24.90	15% (+/-)	No
Drugs (TOS=16)	N/A	\$361	N/A	\$484	N/A	\$627	N/A	34.06	29.61	15% (+/-)	No
Aged	N/A	\$1,215	N/A	\$1,375	N/A	\$1,438	N/A	13.18	4.61	15% (+/-)	Yes
Disabled	N/A	\$2,537	N/A	\$2,463	N/A	\$2,440	N/A	-2.93	-0.92	15% (+/-)	Yes
Child	N/A	\$104	N/A	\$116	N/A	\$140	N/A	11.82	21.04	15% (+/-)	No
Adult	N/A	\$244	N/A	\$365	N/A	\$635	N/A	50.05	73.71	15% (+/-)	No
All Other Services	N/A	\$1,201	N/A	\$1,561	N/A	\$1,880	N/A	29.99	20.46	15% (+/-)	No
Aged	N/A	\$6,038	N/A	\$4,046	N/A	\$3,334	N/A	-33.00	-17.60	15% (+/-)	No
Disabled	N/A	\$5,872	N/A	\$6,073	N/A	\$5,871	N/A	3.42	-3.33	15% (+/-)	Yes
Child	N/A	\$805	N/A	\$911	N/A	\$965	N/A	13.19	5.93	15% (+/-)	Yes
Adult	N/A	\$789	N/A	\$1,090	N/A	\$1,570	N/A	38.18	44.05	15% (+/-)	No
<b>% OF NON-DUAL FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TOS</b>											
% Non-Dual FFS Enrollees with IP Claims (TOS=01)	N/A	7.55	N/A	8.35	N/A	9.53	N/A	10.62	14.08	15% (+/-)	Yes
Aged	N/A	14.16	N/A	4.86	N/A	4.81	N/A	-65.70	-1.13	15% (+/-)	Yes
Disabled	N/A	13.44	N/A	13.62	N/A	13.43	N/A	1.35	-1.43	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
Child	N/A	6.83	N/A	7.79	N/A	7.47	N/A	14.02	-4.19	15% (+/-)	Yes
Adult	N/A	7.22	N/A	7.64	N/A	11.81	N/A	5.89	54.55	15% (+/-)	No
% Non-Dual FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	0.55	N/A	0.73	N/A	0.92	N/A	32.41	25.63	15% (+/-)	No
Aged	N/A	15.45	N/A	18.11	N/A	17.72	N/A	17.20	-2.13	15% (+/-)	Yes
Disabled	N/A	4.16	N/A	4.39	N/A	4.09	N/A	5.65	-6.80	15% (+/-)	Yes
Child	N/A	0.32	N/A	0.37	N/A	0.36	N/A	13.21	-2.67	15% (+/-)	Yes
Adult	N/A	0.08	N/A	0.07	N/A	0.07	N/A	-19.60	9.30	15% (+/-)	Yes
% with ratio of ILTC days/enroll days > 1	N/A	2.05	N/A	2.55	N/A	0.60	N/A	24.51	-76.40	15% (+/-)	No
% Non-Dual FFS Enrollees with Drug Claims (TOS=16)	N/A	51.92	N/A	55.66	N/A	59.10	N/A	7.21	6.18	15% (+/-)	Yes
Aged	N/A	68.88	N/A	62.43	N/A	57.47	N/A	-9.37	-7.95	15% (+/-)	Yes
Disabled	N/A	79.83	N/A	75.87	N/A	68.63	N/A	-4.96	-9.55	15% (+/-)	Yes
Child	N/A	47.36	N/A	49.52	N/A	52.59	N/A	4.57	6.20	15% (+/-)	Yes
Adult	N/A	51.47	N/A	56.95	N/A	67.64	N/A	10.66	18.76	15% (+/-)	No
% Non-Dual FFS Enrollees with All Other Claims	N/A	65.05	N/A	69.43	N/A	74.84	N/A	6.73	7.80	15% (+/-)	Yes
Aged	N/A	79.18	N/A	69.46	N/A	66.84	N/A	-12.30	-3.78	15% (+/-)	Yes
Disabled	N/A	87.14	N/A	88.25	N/A	87.21	N/A	1.28	-1.18	15% (+/-)	Yes
Child	N/A	64.95	N/A	69.19	N/A	70.51	N/A	6.53	1.91	15% (+/-)	Yes
Adult	N/A	61.61	N/A	64.95	N/A	77.27	N/A	5.43	18.97	15% (+/-)	No
Avg # IP Days per Non-Dual FFS User	N/A	5	N/A	5	N/A	6	N/A	4.69	9.96	15% (+/-)	Yes
Aged	N/A	6	N/A	8	N/A	5	N/A	21.92	-27.70	15% (+/-)	No
Disabled	N/A	11	N/A	12	N/A	13	N/A	6.71	12.58	15% (+/-)	Yes
Child	N/A	3	N/A	3	N/A	4	N/A	0.43	6.84	15% (+/-)	Yes
Adult	N/A	4	N/A	4	N/A	3	N/A	-9.49	-13.90	15% (+/-)	Yes
Avg # ILTC Days per Non-Dual FFS User	N/A	150	N/A	143	N/A	144	N/A	-4.43	0.56	15% (+/-)	Yes
Aged	N/A	220	N/A	197	N/A	192	N/A	-10.40	-2.45	15% (+/-)	Yes
Disabled	N/A	165	N/A	149	N/A	153	N/A	-10.10	2.79	15% (+/-)	Yes
Child	N/A	123	N/A	130	N/A	113	N/A	5.72	-13.30	15% (+/-)	Yes
Adult	N/A	26	N/A	23	N/A	12	N/A	-9.07	-47.10	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	\$1,539,206	N/A	\$1,770,923	N/A	\$1,690,578	N/A	15.05	-4.54	15% (+/-)	Yes
FP: Number of Users	N/A	5,684	N/A	5,844	N/A	5,119	N/A	2.82	-12.40	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$271	N/A	\$303	N/A	\$330	N/A	11.90	8.98	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$6,525,459	N/A	\$10,316,825	N/A	\$6,772,412	N/A	58.10	-34.40	15% (+/-)	No
RHC: Number of Users	N/A	13,954	N/A	16,155	N/A	13,018	N/A	15.77	-19.40	15% (+/-)	No
RHC: Avg Medicaid Pd per User	N/A	\$468	N/A	\$639	N/A	\$520	N/A	36.56	-18.50	15% (+/-)	No
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$0	N/A	\$0	N/A	\$2,313,010	N/A	Div by 0	Div by 0	15% (+/-)	N/A
FQHC: Number of Users	N/A	0	N/A	0	N/A	5,569	N/A	Div by 0	Div by 0	15% (+/-)	N/A
FQHC: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	\$415	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$2,680,998	N/A	\$4,380,817	N/A	\$4,504,159	N/A	63.40	2.82	15% (+/-)	Yes
IHS: Number of Users	N/A	2,298	N/A	3,089	N/A	2,874	N/A	34.42	-6.96	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$1,167	N/A	\$1,418	N/A	\$1,567	N/A	21.56	10.51	15% (+/-)	Yes
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$23,661,827	N/A	\$30,273,613	N/A	\$29,847,879	N/A	27.94	-1.41	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	2,713	N/A	3,246	N/A	3,139	N/A	19.65	-3.30	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$8,722	N/A	\$9,326	N/A	\$9,509	N/A	6.93	1.96	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	\$42,878,766	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	8,606	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	\$4,982	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$4,994	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$4,757	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$16,603	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,192	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	9.54	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	51.65	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	59.67	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.35	N/A	N/A	N/A	15% (+/-)	No

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	N/A	N/A	N/A	N/A	0.33	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	\$30,639,753	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	3,391	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	\$9,036	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$7,012	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$8,864	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$16,603	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,192	N/A	N/A	N/A	15% (+/-)	No
% Non-Dual FFS Enrollees with CLTC Claims (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	3.76	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	31.39	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	22.02	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.35	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.33	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	\$29,847,879	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	3,139	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	\$9,509	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$7,160	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$9,221	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$19,505	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,514	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	3.48	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	30.38	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	20.66	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.29	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.21	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	38,519	N/A	32,572	N/A	29,904	N/A	-15.40	-8.19	15% (+/-)	Yes
Number of EDB Dual FFS Recipients	N/A	36,636	N/A	30,743	N/A	28,184	N/A	-16.10	-8.32	15% (+/-)	Yes
Total EDB Dual FFS PYE	N/A	31,153	N/A	27,537	N/A	25,209	N/A	-11.60	-8.45	15% (+/-)	Yes
% EDB Only Dual (Code 50)	N/A	8.94	N/A	5.27	N/A	4.72	N/A	-41.10	-10.50	15% (+/-)	Yes
% QMB Only (Code 51)	N/A	10.72	N/A	1.61	N/A	1.51	N/A	-84.90	-6.19	15% (+/-)	Yes
% QMB Plus (Code 52)	N/A	34.72	N/A	43.39	N/A	42.64	N/A	24.96	-1.74	15% (+/-)	Yes
% SLMB Only (Code 53)	N/A	2.47	N/A	0.42	N/A	0.61	N/A	-83.10	44.96	15% (+/-)	No
% SLMB Plus (Code 54)	N/A	8.88	N/A	10.13	N/A	10.35	N/A	14.04	2.16	15% (+/-)	Yes
% QDWI (Code 55)	N/A	0.00	N/A	0.00	N/A	0.00	N/A	Div by 0	Div by 0	15% (+/-)	N/A
% QI 1 (Code 56)	N/A	1.10	N/A	0.10	N/A	0.10	N/A	-90.50	-0.69	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	33.17	N/A	39.07	N/A	40.07	N/A	17.81	2.56	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	22,797	N/A	20,807	N/A	19,420	N/A	-8.73	-6.67	10% (+/-)	Yes
11: Aged, Cash	N/A	4,937	N/A	5,171	N/A	4,484	N/A	4.74	-13.30	10% (+/-)	No
21: Aged, MN	N/A	250	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
31: Aged, Poverty	N/A	2,035	N/A	260	N/A	279	N/A	-87.20	7.31	10% (+/-)	Yes
41: Other Aged	N/A	15,575	N/A	15,376	N/A	14,656	N/A	-1.28	-4.68	10% (+/-)	Yes
51: 1115 Aged	N/A	0	N/A	0	N/A	1	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled EDB Dual FFS Total	N/A	15,030	N/A	11,116	N/A	10,159	N/A	-26.00	-8.61	10% (+/-)	Yes
12: Disabled, Cash	N/A	5,242	N/A	5,306	N/A	4,803	N/A	1.22	-9.48	10% (+/-)	Yes
22: Disabled, MN	N/A	1,024	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
32: Disabled, Poverty	N/A	3,484	N/A	419	N/A	386	N/A	-88.00	-7.88	10% (+/-)	Yes
42: Other Disabled	N/A	5,280	N/A	5,391	N/A	4,967	N/A	2.10	-7.86	10% (+/-)	Yes
52: 1115 Disabled	N/A	0	N/A	0	N/A	3	N/A	Div by 0	Div by 0	10% (+/-)	N/A
Total FFS Medicaid Amt Paid	N/A	\$450,540,953	N/A	\$430,073,544	N/A	\$417,882,206	N/A	-4.54	-2.83	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Dual	N/A	\$11,697	N/A	\$13,204	N/A	\$13,974	N/A	12.89	5.83	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	\$12,298	N/A	\$13,989	N/A	\$14,827	N/A	13.75	5.99	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$13,408	N/A	\$14,690	N/A	\$15,438	N/A	9.56	5.09	15% (+/-)	Yes
11: Aged, Cash	N/A	\$9,391	N/A	\$8,257	N/A	\$8,558	N/A	-12.10	3.65	15% (+/-)	Yes
21: Aged, MN	N/A	\$485	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
31: Aged, Poverty	N/A	\$1,919	N/A	\$2,369	N/A	\$2,840	N/A	23.46	19.88	15% (+/-)	No
41: Other Aged	N/A	\$16,390	N/A	\$17,062	N/A	\$17,784	N/A	4.10	4.23	15% (+/-)	Yes
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$9,492	N/A	\$10,929	N/A	\$11,374	N/A	15.14	4.07	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$9,142	N/A	\$7,675	N/A	\$8,076	N/A	-16.00	5.23	15% (+/-)	Yes
22: Disabled, MN	N/A	\$994	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
32: Disabled, Poverty	N/A	\$2,833	N/A	\$3,615	N/A	\$4,633	N/A	27.59	28.17	15% (+/-)	No
42: Other Disabled	N/A	\$15,882	N/A	\$14,701	N/A	\$15,094	N/A	-7.44	2.68	15% (+/-)	Yes
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	\$171	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	\$7,137,644	N/A	\$5,196,239	N/A	\$5,245,733	N/A	-27.20	0.95	15% (+/-)	Yes
IP: Number of Users	N/A	4,480	N/A	1,086	N/A	841	N/A	-75.80	-22.60	15% (+/-)	No
IP: Average Medicaid Pd per User	N/A	\$1,593	N/A	\$4,785	N/A	\$6,237	N/A	200.30	30.36	15% (+/-)	No
IP: Average Medicaid Covered Days Per User	N/A	5	N/A	6	N/A	7	N/A	3.10	19.57	15% (+/-)	No
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$3,621,674	N/A	\$3,813,311	N/A	\$3,718,183	N/A	5.29	-2.49	15% (+/-)	Yes
MH Aged: Number of Users	N/A	50	N/A	52	N/A	51	N/A	4.00	-1.92	15% (+/-)	Yes
MH Aged: Avg Medicaid Pd per User	N/A	\$72,433	N/A	\$73,333	N/A	\$72,906	N/A	1.24	-0.58	15% (+/-)	Yes
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$0	N/A	\$0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IP Psych < 21: Number of Users	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IP Psych<21 :Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$8,748,050	N/A	\$8,691,424	N/A	\$8,023,876	N/A	-0.65	-7.68	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	38	N/A	36	N/A	34	N/A	-5.26	-5.56	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$230,212	N/A	\$241,428	N/A	\$235,996	N/A	4.87	-2.25	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$132,065,472	N/A	\$147,541,581	N/A	\$153,858,876	N/A	11.72	4.28	15% (+/-)	Yes
NF Number of Users	N/A	6,277	N/A	6,211	N/A	5,999	N/A	-1.05	-3.41	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$21,040	N/A	\$23,755	N/A	\$25,647	N/A	12.91	7.97	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$2,944,260	N/A	\$2,891,934	N/A	\$2,606,143	N/A	-1.78	-9.88	15% (+/-)	Yes
Physician: Number of Users	N/A	17,920	N/A	15,482	N/A	13,064	N/A	-13.60	-15.60	15% (+/-)	No
Physician: Avg Medicaid Pd per User	N/A	\$164	N/A	\$187	N/A	\$199	N/A	13.69	6.80	15% (+/-)	Yes
Dental: Total Medicaid Paid (TOS 09)	N/A	\$47,050	N/A	\$55,447	N/A	\$56,664	N/A	17.85	2.20	15% (+/-)	Yes
Dental: Number of Users	N/A	215	N/A	201	N/A	211	N/A	-6.51	4.98	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$219	N/A	\$276	N/A	\$269	N/A	26.06	-2.65	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$282,538	N/A	\$282,413	N/A	\$334,845	N/A	-0.04	18.57	15% (+/-)	No
Other Practitioner: Number of Users	N/A	3,380	N/A	3,362	N/A	3,402	N/A	-0.53	1.19	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$84	N/A	\$84	N/A	\$98	N/A	0.49	17.17	15% (+/-)	No
OPD: Total Medicaid Paid (TOS 11)	N/A	\$25,095,921	N/A	\$4,854,012	N/A	\$4,957,041	N/A	-80.70	2.12	15% (+/-)	Yes
OPD Number of Users	N/A	13,007	N/A	8,119	N/A	7,666	N/A	-37.60	-5.58	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$1,929	N/A	\$598	N/A	\$647	N/A	-69.00	8.16	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$1,079,830	N/A	\$1,180,642	N/A	\$1,460,365	N/A	9.34	23.69	15% (+/-)	No
Clinic: Number of Users	N/A	2,400	N/A	2,432	N/A	2,792	N/A	1.33	14.80	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$450	N/A	\$485	N/A	\$523	N/A	7.90	7.74	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$36,115	N/A	\$52,188	N/A	\$24,920	N/A	44.51	-52.20	15% (+/-)	No
HH: Number of Users	N/A	65	N/A	57	N/A	40	N/A	-12.30	-29.80	15% (+/-)	No
HH: Avg Medicaid Pd per User	N/A	\$556	N/A	\$916	N/A	\$623	N/A	64.79	-32.00	15% (+/-)	No
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$19,309,926	N/A	\$1,501,915	N/A	\$1,396,668	N/A	-92.20	-7.01	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	15,390	N/A	9,480	N/A	7,859	N/A	-38.40	-17.10	15% (+/-)	No
Lab/Xray:Avg Medicaid Pd per User	N/A	\$1,255	N/A	\$158	N/A	\$178	N/A	-87.40	12.17	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$85,775,566	N/A	\$88,315,314	N/A	\$86,533,804	N/A	2.96	-2.02	15% (+/-)	Yes
Drugs: Number of Users	N/A	34,572	N/A	28,866	N/A	26,242	N/A	-16.50	-9.09	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$2,481	N/A	\$3,059	N/A	\$3,298	N/A	23.31	7.78	15% (+/-)	Yes
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$68,254,877	N/A	\$68,742,278	N/A	\$57,706,527	N/A	0.71	-16.10	15% (+/-)	No
Other Services: Number of Users	N/A	13,894	N/A	11,326	N/A	10,120	N/A	-18.50	-10.60	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
Other Services: Avg Medicaid Pd per User	N/A	\$4,913	N/A	\$6,069	N/A	\$5,702	N/A	23.55	-6.05	15% (+/-)	Yes
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$7,909,946	N/A	\$8,790,268	N/A	\$7,219,123	N/A	11.13	-17.90	15% (+/-)	No
Transportation: Number of Users	N/A	11,720	N/A	11,280	N/A	10,492	N/A	-3.75	-6.99	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$675	N/A	\$779	N/A	\$688	N/A	15.46	-11.70	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$2,413,863	N/A	\$2,276,283	N/A	\$2,352,540	N/A	-5.70	3.35	15% (+/-)	Yes
PCS: Number of Users	N/A	4,797	N/A	4,211	N/A	3,735	N/A	-12.20	-11.30	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$503	N/A	\$541	N/A	\$630	N/A	7.42	16.52	15% (+/-)	No
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$28,366	N/A	\$21,403	N/A	\$27,148	N/A	-24.50	26.84	15% (+/-)	No
Target Case Management: Number of Users	N/A	50	N/A	31	N/A	74	N/A	-38.00	138.70	15% (+/-)	No
Target Case Management: Avg Medicaid Pd per User	N/A	\$567	N/A	\$690	N/A	\$367	N/A	21.70	-46.90	15% (+/-)	No
Rehab Services: Total Medicaid Pd (TOS 33)	N/A	\$507,281	N/A	\$1,464,460	N/A	\$1,136,668	N/A	188.70	-22.40	15% (+/-)	No
Rehab Services: Number of Users	N/A	2,817	N/A	4,235	N/A	3,345	N/A	50.34	-21.00	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$180	N/A	\$346	N/A	\$340	N/A	92.03	-1.73	15% (+/-)	Yes
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$175,512	N/A	\$33,310	N/A	\$24,583	N/A	-81.00	-26.20	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	502	N/A	305	N/A	250	N/A	-39.20	-18.00	15% (+/-)	No
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$350	N/A	\$109	N/A	\$98	N/A	-68.80	-9.96	15% (+/-)	Yes
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$382,802	N/A	\$534,396	N/A	\$509,019	N/A	39.60	-4.75	15% (+/-)	Yes
Hospice: Number of Users	N/A	66	N/A	58	N/A	58	N/A	-12.10	0.00	15% (+/-)	Yes
Hospice: Avg Medicaid Pd per User	N/A	\$5,800	N/A	\$9,214	N/A	\$8,776	N/A	58.86	-4.75	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$15,838,738	N/A	\$9,366,364	N/A	\$7,997,168	N/A	-40.90	-14.60	15% (+/-)	Yes
DME: Number of Users	N/A	16,335	N/A	15,541	N/A	14,207	N/A	-4.86	-8.58	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$970	N/A	\$603	N/A	\$563	N/A	-37.80	-6.60	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$54,667,716	N/A	\$59,061,651	N/A	\$56,840,087	N/A	8.04	-3.76	15% (+/-)	Yes
Residential Care: Number of Users	N/A	5,419	N/A	5,620	N/A	5,462	N/A	3.71	-2.81	15% (+/-)	Yes
Residential Care: Avg Medicaid Pd per User	N/A	\$10,088	N/A	\$10,509	N/A	\$10,406	N/A	4.17	-0.98	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$12,962,729	N/A	\$14,586,611	N/A	\$15,313,051	N/A	12.53	4.98	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	4,692	N/A	2,612	N/A	2,419	N/A	-44.30	-7.39	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$2,763	N/A	\$5,584	N/A	\$6,330	N/A	102.10	13.36	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$920,347	N/A	\$624,180	N/A	\$316,797	N/A	-32.20	-49.20	15% (+/-)	No
Adult Day Care: Number of Users	N/A	241	N/A	170	N/A	88	N/A	-29.50	-48.20	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$3,819	N/A	\$3,672	N/A	\$3,600	N/A	-3.86	-1.95	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS DUAL BY SELECTED TYPE OF SERVICE</b>											
Inpatient Hospital (TOS=01)	N/A	\$185	N/A	\$160	N/A	\$175	N/A	-13.90	9.96	15% (+/-)	Yes
Aged	N/A	\$180	N/A	\$121	N/A	\$143	N/A	-32.70	17.75	15% (+/-)	No
Disabled	N/A	\$175	N/A	\$173	N/A	\$197	N/A	-1.04	13.65	15% (+/-)	Yes
ILTC (TOS=02,04,05,07)	N/A	\$3,750	N/A	\$4,914	N/A	\$5,538	N/A	31.04	12.70	15% (+/-)	Yes
Aged	N/A	\$5,430	N/A	\$6,643	N/A	\$7,380	N/A	22.34	11.09	15% (+/-)	Yes
Disabled	N/A	\$1,373	N/A	\$1,963	N/A	\$2,193	N/A	42.94	11.75	15% (+/-)	Yes
Drugs (TOS=16)	N/A	\$2,227	N/A	\$2,711	N/A	\$2,894	N/A	21.76	6.73	15% (+/-)	Yes
Aged	N/A	\$1,952	N/A	\$2,282	N/A	\$2,417	N/A	16.86	5.94	15% (+/-)	Yes
Disabled	N/A	\$2,693	N/A	\$3,590	N/A	\$3,788	N/A	33.33	5.50	15% (+/-)	Yes
All Other Services	N/A	\$5,535	N/A	\$5,419	N/A	\$5,367	N/A	-2.09	-0.96	15% (+/-)	Yes
Aged	N/A	\$5,846	N/A	\$5,645	N/A	\$5,499	N/A	-3.44	-2.59	15% (+/-)	Yes
Disabled	N/A	\$5,251	N/A	\$5,203	N/A	\$5,196	N/A	-0.92	-0.13	15% (+/-)	Yes
<b>% OF FFS DUALS WITH CLAIMS BY SELECTED TYPE OF SERVICE</b>											
% FFS Duals with IP Claims (TOS=01)	N/A	11.63	N/A	3.33	N/A	2.81	N/A	-71.30	-15.70	15% (+/-)	No
Aged	N/A	11.81	N/A	3.22	N/A	2.85	N/A	-72.70	-11.40	15% (+/-)	Yes
Disabled	N/A	11.49	N/A	3.15	N/A	2.44	N/A	-72.60	-22.50	15% (+/-)	No
% FFS Duals with ILTC Claims (TOS=02,04,05,07)	N/A	16.49	N/A	19.30	N/A	20.29	N/A	17.07	5.14	15% (+/-)	Yes
Aged	N/A	24.92	N/A	26.95	N/A	27.81	N/A	8.12	3.21	15% (+/-)	Yes
Disabled	N/A	4.41	N/A	6.10	N/A	6.56	N/A	38.27	7.48	15% (+/-)	Yes
% FFS Duals with Drug Claims (TOS=16)	N/A	89.75	N/A	88.62	N/A	87.75	N/A	-1.26	-0.98	15% (+/-)	Yes
Aged	N/A	90.18	N/A	89.10	N/A	88.05	N/A	-1.19	-1.19	15% (+/-)	Yes
Disabled	N/A	89.91	N/A	88.31	N/A	87.08	N/A	-1.78	-1.40	15% (+/-)	Yes
% FFS Duals with All Other Claims	N/A	85.35	N/A	88.21	N/A	88.16	N/A	3.36	-0.06	15% (+/-)	Yes
Aged	N/A	86.38	N/A	88.09	N/A	87.53	N/A	1.98	-0.64	15% (+/-)	Yes
Disabled	N/A	84.48	N/A	89.22	N/A	89.21	N/A	5.62	-0.01	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: OR

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	5	N/A	6	N/A	7	N/A	3.10	19.57	15% (+/-)	No
Aged	N/A	5	N/A	5	N/A	6	N/A	-12.10	27.04	15% (+/-)	No
Disabled	N/A	6	N/A	7	N/A	8	N/A	27.87	15.89	15% (+/-)	No
Avg # ILTC Days per FFS Dual User (TOS 02, 04, 05, 07)	N/A	208	N/A	207	N/A	199	N/A	-0.54	-4.06	15% (+/-)	Yes
Aged	N/A	208	N/A	208	N/A	199	N/A	-0.01	-4.36	15% (+/-)	Yes
Disabled	N/A	207	N/A	196	N/A	193	N/A	-5.44	-1.40	15% (+/-)	Yes
<b>FFS EXPENDITURES AND USERS BY MAX PROGRAM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$145,305	N/A	\$121,961	N/A	\$123,510	N/A	-16.10	1.27	15% (+/-)	Yes
FP: Number of Users	N/A	568	N/A	491	N/A	447	N/A	-13.60	-8.96	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$256	N/A	\$248	N/A	\$276	N/A	-2.90	11.24	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$787,736	N/A	\$777,837	N/A	\$615,344	N/A	-1.26	-20.90	15% (+/-)	No
RHC: Number of Users	N/A	2,042	N/A	1,965	N/A	1,912	N/A	-3.77	-2.70	15% (+/-)	Yes
RHC: Avg Medicaid Pd per User	N/A	\$386	N/A	\$396	N/A	\$322	N/A	2.61	-18.70	15% (+/-)	No
FQHC: Total Medicaid Paid (Program Type 4)	N/A	\$0	N/A	\$0	N/A	\$324,466	N/A	Div by 0	Div by 0	15% (+/-)	N/A
FQHC: Number of Users	N/A	0	N/A	0	N/A	1,063	N/A	Div by 0	Div by 0	15% (+/-)	N/A
FQHC: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	\$305	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$275,005	N/A	\$373,190	N/A	\$523,951	N/A	35.70	40.40	15% (+/-)	No
IHS: Number of Users	N/A	184	N/A	183	N/A	203	N/A	-0.54	10.93	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$1,495	N/A	\$2,039	N/A	\$2,581	N/A	36.44	26.57	15% (+/-)	No
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$131,919,880	N/A	\$138,503,207	N/A	\$127,321,317	N/A	4.99	-8.07	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	16,909	N/A	16,324	N/A	15,082	N/A	-3.46	-7.61	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$7,802	N/A	\$8,485	N/A	\$8,442	N/A	8.75	-0.50	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	\$145,953,206	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	21,860	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	\$6,677	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$6,820	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$6,376	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	73.10	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	76.91	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	68.02	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	\$129,181,545	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	15,241	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	\$8,476	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$8,216	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$9,215	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	50.97	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	57.61	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	39.77	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	\$127,321,317	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	15,082	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	\$8,442	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$8,175	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$9,195	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	50.43	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	57.00	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	39.38	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	162,079	N/A	144,992	N/A	120,149	N/A	-10.50	-17.10	15% (+/-)	No
# FFS Recipients	N/A	123,331	N/A	113,904	N/A	99,895	N/A	-7.64	-12.30	15% (+/-)	Yes
% FFS Enrollees who are Recipients	65-90%	76.09	Yes	78.56	Yes	83.14	Yes	3.24	5.84	15% (+/-)	Yes
% Aged who are Recipients	90-100%	95.28	Yes	94.29	Yes	93.90	Yes	-1.04	-0.41	15% (+/-)	Yes
% Disabled who are Recipients	85-100%	93.58	Yes	92.71	Yes	91.96	Yes	-0.93	-0.81	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: OR

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%	70.26	No	73.78	No	75.71	No	5.01	2.62	15% (+/-)	Yes
% Adults who are Recipients	80-100%	66.91	No	70.07	No	81.62	Yes	4.73	16.49	15% (+/-)	No
Total FFS PYE	N/A	99,249	N/A	95,894	N/A	86,628	N/A	-3.38	-9.66	15% (+/-)	Yes
MAX Aged Total	N/A	23,263	N/A	21,177	N/A	19,815	N/A	-8.97	-6.43	10% (+/-)	Yes
11: Aged, Cash	N/A	4,996	N/A	5,269	N/A	4,590	N/A	5.46	-12.90	10% (+/-)	No
21: Aged, MN	N/A	254	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
31: Aged, Poverty	N/A	2,247	N/A	332	N/A	363	N/A	-85.20	9.34	10% (+/-)	Yes
41: Other Aged	N/A	15,766	N/A	15,576	N/A	14,861	N/A	-1.21	-4.59	10% (+/-)	Yes
51: 1115 Aged	N/A	0	N/A	0	N/A	1	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Disabled Total	N/A	24,391	N/A	23,348	N/A	23,797	N/A	-4.28	1.92	10% (+/-)	Yes
12: Disabled, Cash	N/A	12,816	N/A	15,032	N/A	14,546	N/A	17.29	-3.23	10% (+/-)	Yes
22: Disabled, MN	N/A	1,122	N/A	0	N/A	0	N/A	-100.00	Div by 0	10% (+/-)	N/A
32: Disabled, Poverty	N/A	3,524	N/A	700	N/A	790	N/A	-80.10	12.86	10% (+/-)	No
42: Other Disabled	N/A	6,929	N/A	7,616	N/A	8,454	N/A	9.92	11.00	10% (+/-)	No
52: 1115 Disabled	N/A	0	N/A	0	N/A	7	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Child Total	N/A	53,132	N/A	51,027	N/A	51,862	N/A	-3.96	1.64	10% (+/-)	Yes
14: AFDC Child, Cash	N/A	10,240	N/A	12,682	N/A	13,144	N/A	23.85	3.64	10% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	816	N/A	744	N/A	522	N/A	-8.82	-29.80	10% (+/-)	No
24: AFDC Child, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
34: Child Poverty	N/A	29,484	N/A	24,507	N/A	23,489	N/A	-16.90	-4.15	10% (+/-)	Yes
44: Other Child	N/A	6,309	N/A	6,446	N/A	7,751	N/A	2.17	20.25	10% (+/-)	No
48: Foster Care Child	N/A	6,283	N/A	6,648	N/A	6,931	N/A	5.81	4.26	10% (+/-)	Yes
54: 1115 Child	N/A	0	N/A	0	N/A	25	N/A	Div by 0	Div by 0	10% (+/-)	N/A
MAX Adult Total	N/A	61,293	N/A	49,440	N/A	24,675	N/A	-19.30	-50.10	10% (+/-)	No
15: AFDC Adult, Cash	N/A	4,817	N/A	6,770	N/A	6,731	N/A	40.54	-0.58	10% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	828	N/A	697	N/A	498	N/A	-15.80	-28.60	10% (+/-)	No
25: AFDC Adult, MN	N/A	0	N/A	0	N/A	0	N/A	Div by 0	Div by 0	10% (+/-)	N/A
35: Adult, Poverty	N/A	3,932	N/A	3,934	N/A	4,368	N/A	0.05	11.03	10% (+/-)	No
45: Other Adult	N/A	3,457	N/A	3,675	N/A	4,038	N/A	6.31	9.88	10% (+/-)	Yes
55: 1115 Adult	N/A	48,259	N/A	34,364	N/A	9,040	N/A	-28.80	-73.70	10% (+/-)	No
Total FFS Medicaid Amt Paid	N/A	\$705,130,810	N/A	\$749,132,321	N/A	\$736,820,017	N/A	6.24	-1.64	15% (+/-)	Yes
Average FFS Medicaid Amt Paid per FFS Enrollee	N/A	\$4,351	N/A	\$5,167	N/A	\$6,133	N/A	18.76	18.69	15% (+/-)	No
Average FFS Medicaid Amt Paid per FFS Recipient (User of any svc)	N/A	\$5,717	N/A	\$6,577	N/A	\$7,376	N/A	15.03	12.15	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT PD/FFS ENROLLEE BY MAX ELIGIBILITY GROUP</b>											
All Aged	N/A	\$13,365	N/A	\$14,611	N/A	\$15,331	N/A	9.32	4.93	15% (+/-)	Yes
11: Aged, Cash	N/A	\$9,382	N/A	\$8,230	N/A	\$8,571	N/A	-12.30	4.14	15% (+/-)	Yes
21: Aged, MN	N/A	\$479	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
31: Aged, Poverty	N/A	\$2,531	N/A	\$1,876	N/A	\$2,221	N/A	-25.90	18.42	15% (+/-)	No
41: Other Aged	N/A	\$16,379	N/A	\$17,040	N/A	\$17,740	N/A	4.04	4.10	15% (+/-)	Yes
51: 1115 Aged	N/A	Div by 0	N/A	Div by 0	N/A	\$0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Disabled	N/A	\$10,136	N/A	\$11,596	N/A	\$11,814	N/A	14.41	1.88	15% (+/-)	Yes
12: Disabled, Cash	N/A	\$10,519	N/A	\$10,608	N/A	\$11,269	N/A	0.85	6.23	15% (+/-)	Yes
22: Disabled, MN	N/A	\$956	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
32: Disabled, Poverty	N/A	\$2,821	N/A	\$5,894	N/A	\$7,806	N/A	108.90	32.44	15% (+/-)	No
42: Other Disabled	N/A	\$14,633	N/A	\$14,069	N/A	\$13,136	N/A	-3.86	-6.63	15% (+/-)	Yes
52: 1115 Disabled	N/A	Div by 0	N/A	Div by 0	N/A	\$357	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Child	N/A	\$1,191	N/A	\$1,432	N/A	\$1,530	N/A	20.18	6.89	15% (+/-)	Yes
14: AFDC Child, Cash	N/A	\$780	N/A	\$979	N/A	\$1,075	N/A	25.56	9.77	15% (+/-)	Yes
16: AFDC-U Child, Cash	N/A	\$633	N/A	\$933	N/A	\$1,685	N/A	47.27	80.70	15% (+/-)	No
24: AFDC Child, MN	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
34: Child, Poverty	N/A	\$663	N/A	\$949	N/A	\$1,076	N/A	43.10	13.41	15% (+/-)	Yes
44: Other Child	N/A	\$2,037	N/A	\$2,457	N/A	\$2,112	N/A	20.61	-14.00	15% (+/-)	Yes
48: Foster Care Child	N/A	\$3,563	N/A	\$3,136	N/A	\$3,275	N/A	-12.00	4.45	15% (+/-)	Yes
54: 1115 Child	N/A	Div by 0	N/A	Div by 0	N/A	\$77	N/A	Div by 0	Div by 0	15% (+/-)	N/A
All Adult	N/A	\$1,366	N/A	\$1,940	N/A	\$2,940	N/A	42.09	51.53	15% (+/-)	No
15: AFDC Adult, Cash	N/A	\$2,194	N/A	\$2,761	N/A	\$2,852	N/A	25.82	3.31	15% (+/-)	Yes
17: AFDC-U Adult, Cash	N/A	\$1,172	N/A	\$1,769	N/A	\$2,169	N/A	50.96	22.57	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
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Measure	Expected Range	2003 Value	2003 Within Range	2004 Value	2004 Within Range	2005 Value	2005 Within Range	% Change 2003 - 2004	% Change 2004 - 2005	Cross Year Expected Range	Cross Year Within Range
25: AFDC Adult, MN	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	N/A	Div by 0	Div by 0	15% (+/-)	N/A
35: Adult, Poverty	N/A	\$2,122	N/A	\$2,307	N/A	\$2,564	N/A	8.75	11.15	15% (+/-)	Yes
45: Other Adult	N/A	\$1,501	N/A	\$1,897	N/A	\$2,067	N/A	26.38	8.97	15% (+/-)	Yes
55: 1115 Adult	N/A	\$1,215	N/A	\$1,745	N/A	\$3,620	N/A	43.62	107.50	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX TOS</b>											
IP: Total Medicaid Paid (TOS 01)	N/A	\$47,749,552	N/A	\$68,501,623	N/A	\$71,377,591	N/A	43.46	4.20	15% (+/-)	Yes
IP: Number of Users	N/A	13,810	N/A	10,476	N/A	9,440	N/A	-24.10	-9.89	15% (+/-)	Yes
IP: Average Medicaid Pd per User	N/A	\$3,458	N/A	\$6,539	N/A	\$7,561	N/A	89.12	15.63	15% (+/-)	No
IP: Average Medicaid Covered Days Per User	N/A	5	N/A	5	N/A	6	N/A	1.88	10.73	15% (+/-)	Yes
MH Aged: Total Medicaid Paid (TOS 02)	N/A	\$3,697,016	N/A	\$3,868,105	N/A	\$3,889,550	N/A	4.63	0.55	15% (+/-)	Yes
MH Aged: Number of Users	N/A	53	N/A	57	N/A	58	N/A	7.55	1.75	15% (+/-)	Yes
MH Aged: Avg Medicaid Pd per User	N/A	\$69,755	N/A	\$67,861	N/A	\$67,061	N/A	-2.71	-1.18	15% (+/-)	Yes
IP Psych < 21: Total Medicaid Paid (TOS 04)	N/A	\$6,883,321	N/A	\$8,266,984	N/A	\$7,017,662	N/A	20.10	-15.10	15% (+/-)	No
IP Psych < 21: Number of Users	N/A	188	N/A	213	N/A	216	N/A	13.30	1.41	15% (+/-)	Yes
IP Psych<21 :Avg Medicaid Pd per User	N/A	\$36,613	N/A	\$38,812	N/A	\$32,489	N/A	6.01	-16.30	15% (+/-)	No
ICF/MR: Total Medicaid Pd (TOS 05)	N/A	\$11,502,369	N/A	\$12,068,898	N/A	\$10,845,103	N/A	4.93	-10.10	15% (+/-)	Yes
ICF/MR: Number of Users	N/A	49	N/A	50	N/A	45	N/A	2.04	-10.00	15% (+/-)	Yes
ICF/MR: Avg Medicaid Pd per User	N/A	\$234,742	N/A	\$241,378	N/A	\$241,002	N/A	2.83	-0.16	15% (+/-)	Yes
NF: Total Medicaid Paid (TOS 07)	N/A	\$143,402,873	N/A	\$161,771,127	N/A	\$170,418,113	N/A	12.81	5.35	15% (+/-)	Yes
NF Number of Users	N/A	6,760	N/A	6,803	N/A	6,596	N/A	0.64	-3.04	15% (+/-)	Yes
NF:Avg Medicaid Pd per User	N/A	\$21,213	N/A	\$23,779	N/A	\$25,837	N/A	12.10	8.65	15% (+/-)	Yes
Physician: Total Medicaid Paid (TOS 08)	N/A	\$26,173,380	N/A	\$28,698,071	N/A	\$27,318,745	N/A	9.65	-4.81	15% (+/-)	Yes
Physician: Number of Users	N/A	68,423	N/A	65,699	N/A	53,829	N/A	-3.98	-18.10	15% (+/-)	No
Physician: Avg Medicaid Pd per User	N/A	\$383	N/A	\$437	N/A	\$508	N/A	14.19	16.19	15% (+/-)	No
Dental: Total Medicaid Paid (TOS 09)	N/A	\$436,839	N/A	\$349,792	N/A	\$386,860	N/A	-19.90	10.60	15% (+/-)	Yes
Dental: Number of Users	N/A	2,317	N/A	1,659	N/A	1,783	N/A	-28.40	7.47	15% (+/-)	Yes
Dental: Avg Medicaid Pd per User	N/A	\$189	N/A	\$211	N/A	\$217	N/A	11.83	2.91	15% (+/-)	Yes
Other Practitioner: Total Medicaid Pd (TOS 10)	N/A	\$6,389,572	N/A	\$5,962,890	N/A	\$5,555,642	N/A	-6.68	-6.83	15% (+/-)	Yes
Other Practitioner: Number of Users	N/A	15,828	N/A	15,993	N/A	14,822	N/A	1.04	-7.32	15% (+/-)	Yes
Other Practitioner: Avg Medicaid Pd per User	N/A	\$404	N/A	\$373	N/A	\$375	N/A	-7.64	0.53	15% (+/-)	Yes
OPD: Total Medicaid Paid (TOS 11)	N/A	\$48,810,153	N/A	\$36,968,362	N/A	\$36,795,393	N/A	-24.30	-0.47	15% (+/-)	Yes
OPD Number of Users	N/A	48,717	N/A	42,887	N/A	40,053	N/A	-12.00	-6.61	15% (+/-)	Yes
OPD: Avg Medicaid Pd per User	N/A	\$1,002	N/A	\$862	N/A	\$919	N/A	-14.00	6.58	15% (+/-)	Yes
Clinic: Total Medicaid Paid (TOS 12)	N/A	\$12,190,292	N/A	\$16,099,692	N/A	\$15,300,643	N/A	32.07	-4.96	15% (+/-)	Yes
Clinic: Number of Users	N/A	23,435	N/A	26,374	N/A	24,834	N/A	12.54	-5.84	15% (+/-)	Yes
Clinic: Avg Medicaid Pd per User	N/A	\$520	N/A	\$610	N/A	\$616	N/A	17.35	0.93	15% (+/-)	Yes
HH: Total Medicaid Paid (TOS 13)	N/A	\$515,374	N/A	\$510,738	N/A	\$451,442	N/A	-0.90	-11.60	15% (+/-)	Yes
HH: Number of Users	N/A	570	N/A	570	N/A	496	N/A	0.00	-13.00	15% (+/-)	Yes
HH: Avg Medicaid Pd per User	N/A	\$904	N/A	\$896	N/A	\$910	N/A	-0.90	1.58	15% (+/-)	Yes
Lab/Xray: Total Medicaid Paid (TOS 15)	N/A	\$33,236,593	N/A	\$18,534,023	N/A	\$16,363,115	N/A	-44.20	-11.70	15% (+/-)	Yes
Lab/Xray: Number of Users	N/A	61,823	N/A	56,645	N/A	46,950	N/A	-8.38	-17.10	15% (+/-)	No
Lab/Xray:Avg Medicaid Pd per User	N/A	\$538	N/A	\$327	N/A	\$349	N/A	-39.10	6.52	15% (+/-)	Yes
Drugs: Total Medicaid Paid (TOS 16)	N/A	\$130,354,009	N/A	\$142,688,204	N/A	\$143,105,803	N/A	9.46	0.29	15% (+/-)	Yes
Drugs: Number of Users	N/A	98,719	N/A	91,438	N/A	79,576	N/A	-7.38	-13.00	15% (+/-)	Yes
Drugs: Avg Medicaid Pd per User	N/A	\$1,320	N/A	\$1,560	N/A	\$1,798	N/A	18.18	15.24	15% (+/-)	No
Other Services: Total Medicaid Paid (TOS 19)	N/A	\$83,971,897	N/A	\$87,546,099	N/A	\$75,105,658	N/A	4.26	-14.20	15% (+/-)	Yes
Other Services: Number of Users	N/A	21,801	N/A	15,532	N/A	14,584	N/A	-28.80	-6.10	15% (+/-)	Yes
Other Services: Avg Medicaid Pd per User	N/A	\$3,852	N/A	\$5,636	N/A	\$5,150	N/A	46.34	-8.63	15% (+/-)	Yes
Transportation: Total Medicaid Paid (TOS 26)	N/A	\$12,245,286	N/A	\$14,066,173	N/A	\$11,991,686	N/A	14.87	-14.70	15% (+/-)	Yes
Transportation: Number of Users	N/A	17,706	N/A	17,627	N/A	16,464	N/A	-0.45	-6.60	15% (+/-)	Yes
Transportation: Avg Medicaid Pd per User	N/A	\$692	N/A	\$798	N/A	\$728	N/A	15.38	-8.73	15% (+/-)	Yes
PCS: Total Medicaid Paid (TOS 30)	N/A	\$2,610,795	N/A	\$2,517,016	N/A	\$2,681,993	N/A	-3.59	6.55	15% (+/-)	Yes
PCS: Number of Users	N/A	5,167	N/A	4,651	N/A	4,183	N/A	-9.99	-10.10	15% (+/-)	Yes
PCS: Avg Medicaid Pd per User	N/A	\$505	N/A	\$541	N/A	\$641	N/A	7.10	18.48	15% (+/-)	No
Target Case Management: Total Medicaid Pd (TOS 31)	N/A	\$17,340,278	N/A	\$13,452,889	N/A	\$14,674,725	N/A	-22.40	9.08	15% (+/-)	Yes
Target Case Management: Number of Users	N/A	8,433	N/A	7,183	N/A	8,293	N/A	-14.80	15.45	15% (+/-)	No
Target Case Management: Avg Medicaid Pd per User	N/A	\$2,056	N/A	\$1,873	N/A	\$1,770	N/A	-8.92	-5.52	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: OR

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	\$1,355,569	N/A	\$3,823,004	N/A	\$2,879,590	N/A	182.00	-24.70	15% (+/-)	No
Rehab Services: Number of Users	N/A	4,670	N/A	8,422	N/A	7,150	N/A	80.34	-15.10	15% (+/-)	No
Rehab Services: Avg Medicaid Pd per User	N/A	\$290	N/A	\$454	N/A	\$403	N/A	56.38	-11.30	15% (+/-)	Yes
PT/OT/Speech/Hear: Total Medicaid Paid (TOS 34)	N/A	\$852,688	N/A	\$644,157	N/A	\$382,585	N/A	-24.50	-40.60	15% (+/-)	No
PT/OT/Speech/Hear: Number of Users	N/A	1,882	N/A	1,598	N/A	1,216	N/A	-15.10	-23.90	15% (+/-)	No
PT/OT/Speech/Hear: Avg Medicaid Pd per User	N/A	\$453	N/A	\$403	N/A	\$315	N/A	-11.00	-21.90	15% (+/-)	No
Hospice: Total Medicaid Paid (TOS 35)	N/A	\$1,462,393	N/A	\$1,883,863	N/A	\$1,796,969	N/A	28.82	-4.61	15% (+/-)	Yes
Hospice: Number of Users	N/A	215	N/A	263	N/A	286	N/A	22.33	8.75	15% (+/-)	Yes
Hospice: Avg Medicaid Pd per User	N/A	\$6,802	N/A	\$7,163	N/A	\$6,283	N/A	5.31	-12.30	15% (+/-)	Yes
DME: Total Medicaid Paid (TOS 51)	N/A	\$25,315,096	N/A	\$19,469,042	N/A	\$17,963,671	N/A	-23.10	-7.73	15% (+/-)	Yes
DME: Number of Users	N/A	34,609	N/A	37,500	N/A	34,207	N/A	8.35	-8.78	15% (+/-)	Yes
DME: Avg Medicaid Pd per User	N/A	\$731	N/A	\$519	N/A	\$525	N/A	-29.00	1.15	15% (+/-)	Yes
Residential Care: Total Medicaid Paid (TOS 52)	N/A	\$57,358,382	N/A	\$62,145,351	N/A	\$59,980,121	N/A	8.35	-3.48	15% (+/-)	Yes
Residential Care: Number of Users	N/A	5,657	N/A	5,849	N/A	5,705	N/A	3.39	-2.46	15% (+/-)	Yes
Residential Care: Avg Medicaid Pd per User	N/A	\$10,139	N/A	\$10,625	N/A	\$10,514	N/A	4.79	-1.05	15% (+/-)	Yes
Psych. Services: Total Medicaid Paid (TOS 53)	N/A	\$27,071,483	N/A	\$35,319,724	N/A	\$36,959,227	N/A	30.47	4.64	15% (+/-)	Yes
Psych. Services: Number of Users	N/A	15,745	N/A	13,838	N/A	12,644	N/A	-12.10	-8.63	15% (+/-)	Yes
Psych. Services: Avg Medicaid Pd per User	N/A	\$1,719	N/A	\$2,552	N/A	\$2,923	N/A	48.45	14.52	15% (+/-)	Yes
Adult Day Care: Total Medicaid Paid (TOS 54)	N/A	\$941,269	N/A	\$643,765	N/A	\$326,474	N/A	-31.60	-49.30	15% (+/-)	No
Adult Day Care: Number of Users	N/A	248	N/A	176	N/A	93	N/A	-29.00	-47.20	15% (+/-)	No
Adult Day Care: Avg Medicaid Pd per User	N/A	\$3,795	N/A	\$3,658	N/A	\$3,510	N/A	-3.63	-4.03	15% (+/-)	Yes
<b>AVG FFS MEDICAID AMT Pd/FFS ENROLLEE BY SELECTED MAX TOS</b>											
Inpatient Hospital (TOS=01)	N/A	\$295	N/A	\$472	N/A	\$594	N/A	60.37	25.74	15% (+/-)	No
Aged	N/A	\$189	N/A	\$128	N/A	\$149	N/A	-32.50	16.42	15% (+/-)	No
Disabled	N/A	\$632	N/A	\$1,269	N/A	\$1,494	N/A	100.90	17.77	15% (+/-)	No
Child	N/A	\$165	N/A	\$265	N/A	\$310	N/A	60.20	17.10	15% (+/-)	No
Adult	N/A	\$313	N/A	\$458	N/A	\$680	N/A	46.57	48.45	15% (+/-)	No
ILTC (TOS=02,04,05,07)	N/A	\$1,021	N/A	\$1,283	N/A	\$1,599	N/A	25.63	24.70	15% (+/-)	No
Aged	N/A	\$5,389	N/A	\$6,600	N/A	\$7,329	N/A	22.48	11.04	15% (+/-)	Yes
Disabled	N/A	\$1,382	N/A	\$1,668	N/A	\$1,721	N/A	20.76	3.16	15% (+/-)	Yes
Child	N/A	\$116	N/A	\$139	N/A	\$115	N/A	19.68	-17.80	15% (+/-)	No
Adult	N/A	\$4	N/A	\$3	N/A	\$2	N/A	-29.30	-24.90	15% (+/-)	No
Drugs (TOS=16)	N/A	\$804	N/A	\$984	N/A	\$1,191	N/A	22.36	21.03	15% (+/-)	No
Aged	N/A	\$1,938	N/A	\$2,266	N/A	\$2,398	N/A	16.94	5.82	15% (+/-)	Yes
Disabled	N/A	\$2,633	N/A	\$3,000	N/A	\$3,015	N/A	13.92	0.53	15% (+/-)	Yes
Child	N/A	\$104	N/A	\$116	N/A	\$140	N/A	11.61	20.70	15% (+/-)	No
Adult	N/A	\$253	N/A	\$379	N/A	\$671	N/A	49.67	77.08	15% (+/-)	No
All Other Services	N/A	\$2,231	N/A	\$2,427	N/A	\$2,748	N/A	8.83	13.20	15% (+/-)	Yes
Aged	N/A	\$5,850	N/A	\$5,617	N/A	\$5,456	N/A	-3.98	-2.87	15% (+/-)	Yes
Disabled	N/A	\$5,489	N/A	\$5,659	N/A	\$5,583	N/A	3.09	-1.34	15% (+/-)	Yes
Child	N/A	\$805	N/A	\$911	N/A	\$965	N/A	13.14	5.93	15% (+/-)	Yes
Adult	N/A	\$796	N/A	\$1,100	N/A	\$1,586	N/A	38.26	44.19	15% (+/-)	No
<b>% OF FFS ENROLLEES WITH CLAIMS BY SELECTED MAX TYPE OF SERVICE</b>											
% FFS Enrollees with IP Claims (TOS=01)	N/A	8.52	N/A	7.23	N/A	7.86	N/A	-15.20	8.74	15% (+/-)	Yes
Aged	N/A	11.86	N/A	3.25	N/A	2.89	N/A	-72.60	-11.00	15% (+/-)	Yes
Disabled	N/A	12.24	N/A	8.63	N/A	8.74	N/A	-29.40	1.18	15% (+/-)	Yes
Child	N/A	6.83	N/A	7.79	N/A	7.47	N/A	14.02	-4.16	15% (+/-)	Yes
Adult	N/A	7.24	N/A	7.68	N/A	11.81	N/A	6.11	53.86	15% (+/-)	No
% FFS Enrollees with ILTC Claims (TOS=02,04,05,07)	N/A	4.34	N/A	4.90	N/A	5.74	N/A	12.99	17.10	15% (+/-)	No
Aged	N/A	24.73	N/A	26.79	N/A	27.61	N/A	8.32	3.05	15% (+/-)	Yes
Disabled	N/A	4.31	N/A	5.20	N/A	5.14	N/A	20.65	-1.16	15% (+/-)	Yes
Child	N/A	0.32	N/A	0.37	N/A	0.36	N/A	13.21	-2.66	15% (+/-)	Yes
Adult	N/A	0.09	N/A	0.07	N/A	0.08	N/A	-24.70	11.97	15% (+/-)	Yes
% FFS Enrollees with Drug Claims (TOS=16)	N/A	60.91	N/A	63.06	N/A	66.23	N/A	3.54	5.02	15% (+/-)	Yes
Aged	N/A	89.75	N/A	88.64	N/A	87.44	N/A	-1.24	-1.35	15% (+/-)	Yes
Disabled	N/A	86.04	N/A	81.80	N/A	76.51	N/A	-4.94	-6.47	15% (+/-)	Yes
Child	N/A	47.36	N/A	49.53	N/A	52.60	N/A	4.57	6.19	15% (+/-)	Yes

2003-2005 MAX PSF VALIDATION TABLE  
STATE: OR

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	51.70	N/A	57.23	N/A	67.95	N/A	10.70	18.73	15% (+/-)	No
% FFS Enrollees with All Other Claims	N/A	69.87	N/A	73.65	N/A	78.16	N/A	5.40	6.12	15% (+/-)	Yes
Aged	N/A	86.24	N/A	87.77	N/A	87.12	N/A	1.77	-0.74	15% (+/-)	Yes
Disabled	N/A	85.50	N/A	88.71	N/A	88.07	N/A	3.76	-0.73	15% (+/-)	Yes
Child	N/A	64.95	N/A	69.19	N/A	70.51	N/A	6.53	1.90	15% (+/-)	Yes
Adult	N/A	61.70	N/A	65.08	N/A	77.48	N/A	5.47	19.05	15% (+/-)	No
Avg # IP Days per FFS User	N/A	5	N/A	5	N/A	6	N/A	1.88	10.73	15% (+/-)	Yes
Aged	N/A	5	N/A	5	N/A	6	N/A	-11.00	24.69	15% (+/-)	No
Disabled	N/A	8	N/A	11	N/A	13	N/A	39.67	15.46	15% (+/-)	No
Child	N/A	3	N/A	3	N/A	4	N/A	0.43	7.60	15% (+/-)	Yes
Adult	N/A	4	N/A	4	N/A	3	N/A	-9.11	-14.40	15% (+/-)	Yes
Avg # ILTC Days per FFS User	N/A	202	N/A	200	N/A	192	N/A	-1.40	-3.80	15% (+/-)	Yes
Aged	N/A	209	N/A	208	N/A	199	N/A	-0.15	-4.34	15% (+/-)	Yes
Disabled	N/A	192	N/A	175	N/A	175	N/A	-8.69	-0.14	15% (+/-)	Yes
Child	N/A	123	N/A	130	N/A	113	N/A	5.72	-13.30	15% (+/-)	Yes
Adult	N/A	24	N/A	23	N/A	13	N/A	-3.93	-45.70	15% (+/-)	No
<b>FFS EXPENDITURES AND USERS BY MAX PGM TYPE</b>											
FP: Total Medicaid Paid (Program Type 2)	N/A	\$1,684,511	N/A	\$1,892,884	N/A	\$1,814,088	N/A	12.37	-4.16	15% (+/-)	Yes
FP: Number of Users	N/A	6,252	N/A	6,335	N/A	5,566	N/A	1.33	-12.10	15% (+/-)	Yes
FP: Average Medicaid Pd per User	N/A	\$269	N/A	\$299	N/A	\$326	N/A	10.90	9.08	15% (+/-)	Yes
RHC: Total Medicaid Paid (Program Type 3)	N/A	\$7,313,195	N/A	\$11,094,662	N/A	\$7,387,756	N/A	51.71	-33.40	15% (+/-)	No
RHC: Number of Users	N/A	15,996	N/A	18,120	N/A	14,930	N/A	13.28	-17.60	15% (+/-)	No
RHC: Avg Medicaid Pd per User	N/A	\$457	N/A	\$612	N/A	\$495	N/A	33.92	-19.20	15% (+/-)	No
FOHC: Total Medicaid Paid (Program Type 4)	N/A	\$0	N/A	\$0	N/A	\$2,637,476	N/A	Div by 0	Div by 0	15% (+/-)	N/A
FOHC: Number of Users	N/A	0	N/A	0	N/A	6,632	N/A	Div by 0	Div by 0	15% (+/-)	N/A
FOHC: Avg Medicaid Pd per User	N/A	Div by 0	N/A	Div by 0	N/A	\$398	N/A	Div by 0	Div by 0	15% (+/-)	N/A
IHS: Total Medicaid Pd (Program Type 5)	N/A	\$2,956,003	N/A	\$4,754,007	N/A	\$5,028,110	N/A	60.83	5.77	15% (+/-)	Yes
IHS: Number of Users	N/A	2,482	N/A	3,272	N/A	3,077	N/A	31.83	-5.96	15% (+/-)	Yes
IHS: Avg Medicaid Pd per User	N/A	\$1,191	N/A	\$1,453	N/A	\$1,634	N/A	22.00	12.47	15% (+/-)	Yes
Section 1915(c) Waiver: Total Medicaid Paid (Program Types 6 and 7)	N/A	\$155,581,707	N/A	\$168,776,820	N/A	\$157,169,196	N/A	8.48	-6.88	15% (+/-)	Yes
Section 1915(c) Waiver: Number of Users	N/A	19,622	N/A	19,570	N/A	18,221	N/A	-0.27	-6.89	15% (+/-)	Yes
Section 1915(c) Waiver: Avg Medicaid Pd per User	N/A	\$7,929	N/A	\$8,624	N/A	\$8,626	N/A	8.77	0.02	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	\$188,831,972	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	30,466	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	\$6,198	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$6,795	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$5,500	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$16,514	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,459	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	25.36	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	76.41	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	63.23	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.36	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.38	N/A	N/A	N/A	15% (+/-)	No
Total FFS CLTC Expenditures (excludes CLTC Codes 16-20)	N/A	N/A	N/A	N/A	N/A	\$159,821,298	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	18,632	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	\$8,578	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$8,203	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$9,065	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$16,514	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,459	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	15.51	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	57.08	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	29.60	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.36	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.38	N/A	N/A	N/A	15% (+/-)	No

2003-2005 MAX PSF VALIDATION TABLE  
STATE: OR

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	\$157,169,196	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	18,221	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	\$8,626	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	\$8,164	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	\$9,206	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	\$19,505	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	\$1,855	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	15.17	N/A	N/A	N/A	15% (+/-)	No
Aged	N/A	N/A	N/A	N/A	N/A	56.47	N/A	N/A	N/A	15% (+/-)	No
Disabled	N/A	N/A	N/A	N/A	N/A	28.65	N/A	N/A	N/A	15% (+/-)	No
Child	N/A	N/A	N/A	N/A	N/A	0.29	N/A	N/A	N/A	15% (+/-)	No
Adult	N/A	N/A	N/A	N/A	N/A	0.26	N/A	N/A	N/A	15% (+/-)	No