

**2002-2004 MAX IP Validation Table**  
**State: KY**

Measure	Expected Range	2002		2003		2004		% Change 2002 - 2003	% Change 2003 - 2004	Cross Year Change Within Expected Range (+/-15%)
		Value	Within Range	Value	Within Range	Value	Within Range			
All IP Claims										
Total Number of Claims	N/A	138,527	N/A	105,738	N/A	105,250	N/A	-23.70	-0.46	Yes
	N/A	10.01	N/A	4.81	N/A	10.42	N/A	-51.90	116.60	No
% Encounter Claims *	N/A	0	N/A	0	N/A	0	N/A	.	.	N/A
Total Supplemental Claims	N/A	124,662	N/A	100,652	N/A	94,283	N/A	-19.30	-6.33	Yes
	5-20	31.45	No	12.75	Yes	8.78	Yes	-59.40	-31.10	No
% Crossover	N/A	1.73	N/A	3.62	N/A	8.12	N/A	109.00	124.00	No
% Adjusted Claims	> 1%	94.63	Yes	94.24	Yes	97.61	Yes	-0.41	3.57	Yes
% Standard Adjustments	N/A	\$2,735	N/A	\$3,336	N/A	\$4,050	N/A	21.95	21.42	No
Aver. Amt. Pd Adjust. ( include \$0) FFS Non-Crossover Claims (Type of Claim=1, Crossover Claim Indicator=0)										
Total Number of Claims	N/A	85,461	N/A	87,814	N/A	86,001	N/A	2.75	-2.06	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	.	.	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	\$2000 - \$7000	\$3,463	Yes	\$3,718	Yes	\$4,080	Yes	7.35	9.74	Yes
Aver. Medicaid Amt Paid per Covered Day (>\$0 paid and >0 days claims)	N/A	\$846	N/A	\$893	N/A	\$1,009	N/A	5.49	12.96	Yes
% Claims with TPL	>0 - 10	0.84	Yes	0.83	Yes	0.83	Yes	-0.79	-0.12	Yes
Aver. TPL Paid for claims with TPL	N/A	\$2,050	N/A	\$2,358	N/A	\$2,526	N/A	15.02	7.12	Yes
% Claims with UB-92 Accommodation Codes	95-100	100.00	Yes	100.00	Yes	100.00	Yes	0.00	0.00	Yes
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.14	Yes	1.15	Yes	1.15	Yes	0.55	0.38	Yes
% Claims with UB-92 Ancillary Codes	95-100	99.72	Yes	99.81	Yes	99.96	Yes	0.09	0.15	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	9.08	Yes	9.89	Yes	10.42	Yes	8.88	5.34	Yes
Average LOS	2-<8	4.07	Yes	4.16	Yes	4.04	Yes	2.10	-2.75	Yes
Average Covered Days (> 0 day)	2-<8	4.09	Yes	4.16	Yes	4.04	Yes	1.76	-2.85	Yes
% Begin Date = Admit Date	95-100	97.44	Yes	98.01	Yes	98.61	Yes	0.58	0.61	Yes
% IP Claims (MAX TOS 01)	95-100	98.61	Yes	98.13	Yes	97.50	Yes	-0.49	-0.64	Yes
% Family Planning Claims (pgm type=2)	>0-5	0.03	Yes	0.03	Yes	0.04	Yes	5.78	42.95	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	4.58	Yes	4.78	Yes	4.98	Yes	4.32	4.31	Yes
% Claims with PDX, where length=3	5-30	8.95	Yes	8.24	Yes	7.65	Yes	-7.90	-7.20	Yes
% Claims with PDX, where length=4	15-75	29.69	Yes	29.34	Yes	29.06	Yes	-1.16	-0.98	Yes
% Claims with PDX, where length=5	25-70	61.36	Yes	62.41	Yes	63.29	Yes	1.72	1.41	Yes
% Claims with a procedure code	35-70	48.72	Yes	50.08	Yes	53.23	Yes	2.78	6.30	Yes
Average Number of Procedures for claims with at least 1 procedure code	>1	2.09	Yes	2.11	Yes	2.09	Yes	1.05	-0.95	Yes
% Claims with Procedures that have CPT-4 Indicator	N/A	0.00	N/A	0.00	N/A	0.00	N/A	.	.	N/A
% Claims with Procedures that have ICD-9 Indicator	N/A	99.95	N/A	99.98	N/A	100.00	N/A	0.03	0.02	Yes
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	N/A	.	N/A	.	N/A	.	N/A	.	.	N/A

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

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		Value	Within Range	Value	Within Range	Value	Within Range			
% Claims with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with DRG	>=90	0.00	No	0.00	No	0.00	No	.	.	N/A
% Claims Maternal Delivery Indicator	N/A	20.30	N/A	20.76	N/A	22.63	N/A	2.25	9.04	Yes
% Claims Newborn Delivery Indicator (only for separate infant delivery claims using mother's ID)	N/A	2.26	N/A	2.28	N/A	2.39	N/A	0.85	4.76	Yes
Patient Status										
% Home	75-90	86.82	Yes	88.16	Yes	87.21	Yes	1.55	-1.08	Yes
% Transferred	1-10	10.17	No	10.33	No	11.41	No	1.52	10.46	Yes
% Still a Patient	>0 - 2	2.06	No	0.63	Yes	0.18	Yes	-69.70	-70.60	No
% Died	>0 - 3	0.93	Yes	0.86	Yes	0.95	Yes	-6.85	10.45	Yes
FFS Crossover Claims (Type of Claim=1, Crossover Claim Indicator=1)										
Total Number of Claims	N/A	39,201	N/A	12,838	N/A	8,282	N/A	-67.30	-35.50	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	.	.	N/A
Aver. Medicaid Amount Paid (claims with >\$0 paid)	N/A	\$898	N/A	\$1,047	N/A	\$1,405	N/A	16.55	34.24	No
% Claims with TPL	N/A	0.42	N/A	0.58	N/A	0.39	N/A	40.50	-33.90	No
Aver. TPL Paid -claims with TPL	N/A	\$630	N/A	\$1,026	N/A	\$778	N/A	62.79	-24.20	No
% Claims with UB-92 Accommodation Codes	95-100	26.92	No	63.97	No	85.78	No	137.60	34.10	No
Average # UB-92 Accom. Codes (at least 1 accom code)	>1	1.20	Yes	1.17	Yes	1.12	Yes	-2.58	-4.05	Yes
% Claims with UB-92 Ancillary Codes	95-100	36.23	No	94.50	No	94.80	No	160.80	0.31	Yes
Average # UB-92 Ancillary Codes (at least 1 Ancillary code)	>3	9.71	Yes	8.60	Yes	9.93	Yes	-11.40	15.55	No
Average LOS	2-<8	4.92	Yes	5.38	Yes	5.53	Yes	9.19	2.89	Yes
% Begin Date = Admit Date	95-100	99.37	Yes	98.93	Yes	98.70	Yes	-0.44	-0.24	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	6.16	Yes	5.70	Yes	6.33	Yes	-7.44	11.06	Yes
% Claims with PDX, where length=3	5-30	9.56	Yes	9.00	Yes	8.21	Yes	-5.80	-8.82	Yes
% Claims with PDX, where length=4	15-75	42.23	Yes	41.65	Yes	41.57	Yes	-1.38	-0.19	Yes
% Claims with PDX, where length=5	25-70	48.21	Yes	49.23	Yes	50.22	Yes	2.12	2.01	Yes
% Claims with a procedure code	35-70	36.70	Yes	28.90	No	35.60	Yes	-21.30	23.17	No
Average Number of Procedures for claims with at least 1 procedure code	>1	2.36	Yes	2.26	Yes	2.24	Yes	-4.22	-0.95	Yes
% Claims with Procedures that have CPT-4 Indicator	N/A	0.04	N/A	0.49	N/A	0.07	N/A	1,063.00	-86.00	No
% Claims with Procedures that have ICD-9 Indicator	N/A	96.09	N/A	84.23	N/A	87.14	N/A	-12.30	3.46	Yes
% Claims with Procedures that have CPT-4 Indicator & CPT-4 format of 5n	N/A	100.00	N/A	100.00	N/A	100.00	N/A	0.00	0.00	Yes
% Claims with Procedures that have ICD-9-CM Indicator & ICD-9-CM Format 3n or 4n	N/A	99.93	N/A	99.81	N/A	99.96	N/A	-0.12	0.15	Yes
% Claims with DRG	>=90	0.00	No	0.00	No	0.00	No	.	.	N/A

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