

Division of Health Care Finance and Policy

TME/RP TAG Call Summary

Week of May 14th – 18th, 2012

1) TME Zip Code Reporting

- a. Only report current Massachusetts zip codes. Exclude zip codes where employer plan is based in MA, but zip codes are out of state (usually near state borders)

2) Relative Price Reporting

- a. Capitation Reporting
 - i. Report capitation amount less any claims paid to other providers as non-claims payments for capitated group
 - ii. Report claims paid to other providers on behalf of capitated group in the corresponding file (eg., hospital inpatient, physician group) as claims payments

3) Relative Price IT specification Update

- a. Numbering of service groups for Other Providers
 - i. Start the number with the organization type number for data field SL003
 1. Example, 301 for service group 1 for ambulatory surgical centers (org. type 3); 401 for service group 1 for community health centers (org. type 4), etc...
 - ii. Addition of rule to data fields HOM008, PGM009, PPM009
 1. For the multiplier indicator, there can only be one value for each combination of provider, insurance category, product type, service lookup ID. (The rules will be redlined in the RP DSM 05-18-12).

4) Other Provider Reporting

- a. Report the providers with revenue above 3% *within* each organization type and insurance category.

5) DHCFP Actions

- a. Updated Relative Price Data Specification Manual 05-18-12 posted on the Division's website.
- b. Updated Relative Price provider list 05-18-12 posted on the Division's website.