

Total Medical Expenses and Relative Prices
Technical Call Summary
May 2 – May 5, 2011

Non-Acute Hospitals Inpatient Records

- If you use a base rate indicator of 3 (standard per unit rate), then the case mix score should be 0.

Payment-lag between new codes

- If there is a lag-time between when a new code is issued and the time that your claims base is updated to reflect that new code, and for that time difference you pay on a percent of charge basis, then report that amount in the “other” category for product type (see Table C: Product Type in the Data Specification Manual).

Hospital-Specific Base Rate Inpatient Reporting for Acute Units with Psychiatric Beds

- When reporting hospital-specific base rates for the psychiatric unit as a psychiatric hospital, payers may report using a standard per unit rate.
- When reporting the hospital-specific base rate for an acute hospital including a psychiatric unit, payers should report using a DRG-based method.

Relative Price File Submission Guidelines

- Changes have been made to the rules for data submission. A new version of the Relative Prices Data Specification Manual with an updated Submission Guideline will be posted soon.
 - The new Submission Guidelines have been emailed to the tmerp email list, with the rule changes highlighted in red.
- The File Layout Example has also been updated and will be posted soon.

Relative Prices Flat File

- The Division is developing a flat file to troubleshoot potential relative price data submission issues. Once this has been finalized the example will be posted on the Division’s website.

We strongly encourage payers to email the tmerp@state.ma.us with any technical or data related questions regarding relative price data submission so that we can incorporate these issues into our troubleshooting.