

**Total Medical Expenses and Relative Prices**  
**Technical Call Summary**  
May 16 – May 19, 2011

**PPL record type**

- Only include providers in the PPL record type for which you are reporting corresponding data.

**ORGIDs**

- Hospitals with affiliated rehab centers should report rehab with the acute care hospital.

**Service Groups**

- For data element SL002 in the Service Look-Up record type, the hospital organization type (SL002=1) includes all hospital level services. Distinctions may be made between the hospital type (psychiatric, rehab, chronic, outpatient) in the description (SL005) field with a corresponding unique ID (SL003).
- When reporting in the outpatient hospital record type, only use the service groups you have defined that the specific hospital provides. You do not need to list every defined hospital-level service group if it is not provided by the hospital.
- Only report on the service groups that the specific provider provides. For example, you do not need to list every defined physician level (SL002=2) service group for every individual physician group.

**Providers not included in this filing of Relative Price include**

- Partial psychiatric hospitalizations
- Management Groups that provide health care case management
- Residential Treatment Centers

**Service Mix**

- The service mix proportions should total 1.000 for every provider (ORGID), provider type, insurance category **and product type** combination

**Zip Codes**

- A crosswalk will be posted next week that contains common invalid zip codes that were reported for 2009 TME filings. If you have the time, please verify that your data does not contain any of the old zip codes (the newer ones are supplied). If you used the zip code list posted on the Division's website, then you should not need to do this.