Alternative Payment Methods
Semi-Weekly TAG Call Notes
March 5, 2013

I. Changes to Reporting Tools and DSM

- New insurance category ("5") added to capture other government plans including medical security programs (MSP), senior care options (SCO), PACE and Bridge plans.
- The new insurance category will only be collected this year (May 15, 2013) for the new filings (Alternative Payment Methods, Provider Payment Methods, RP Nt. Avg. Dollar). This new insurance category will NOT be collected for the legacy TME And RP files due on May 1, 2013.
    i. Starting next year (2014), the Center will collect information on the new insurance category for legacy TME and RP files.

II. Discussion of Relative Price Network Average Dollar File (Handout 4)

- This tool collects information on the dollar amount associated with the network average relative price (1.0) for each provider type, insurance category and product type.
- This year, payers will report three years of dollar amounts:
    i. CY 2010, CY 2011, CY 2012 for hospitals and other providers
    ii. CY 2009, CY 2010, CY 2011 for physician groups
- Dollar amount is calculated by dividing the total payments (claims + non-claims) by the assigned volume for each provider type, insurance category and product type combination.

III. Additional Information on Upcoming Filings

- Payers should provide the best estimates of their payment information (claims and non-claims) for preliminary TME and RP files due on May 1, 2013 as well as for APM and Provider Payment Methods files due on May 15, 2013.
- APM per member per month budget amount should be for the calendar year being reported

IV. Next Steps

- Next TAG Call on Thursday, March 7th will focus on Legacy RP/TME files
- Finalized reporting tools and DSMs will be loaded to the CHIA website by next week (mid-March)