



# DHCS: CY2009 RDT Template

## Enhancements for CY2009 RDT Template

### Enhancements

#### Changes to Already Existing RDT template Schedules

- Instructions/Logic – the following tabs have been updated with more descriptive explanations/instructions:
  - Instructions – includes detailed instructions for all new schedules.
  - COS grouping – updated with current information.
  - Aid-Code Mapping – updated with current information.
  - Delivery Definition – updated with current information.
  - AIDS Mapping – updated with current information.
  - Rx Specialty – provides a list of specialty drugs to help plans fill out Schedule 1-D.

- Schedule 1:

- COS order has been altered to match CRCS sheets.

CY08 RDT COS Order	CRCS Sheet COS Order	Grouping
Inpatient Hospital	Inpatient Hospital	<b>Facility</b>
Outpatient Facility	Outpatient Facility	
Emergency Room Facility	Emergency Room Facility	
Physician Primary Care	Long-Term Care Facility	<b>Physician</b>
Physician Specialty	Physician Primary Care	
Other Medical Professional	Physician Specialty	
Pharmacy	FQHC	
Laboratory and Radiology	Other Medical Professional	
FQHC	Pharmacy	<b>Other</b>
Long-Term Care Facility	Laboratory and Radiology	
Transportation	Transportation	
Other	Other	

- Schedule 1-A:
  - When reporting global subcapitation expenditures (if applicable), Health Plans should now also enter the COS cost percentage distribution for each COA.
- Schedule D-1:
  - A comparison of birth rate reported (calculated using RDT MMs and birth counts) to the birth rate used for the 1011 rate setting maternity carve-out has been added.
- Schedule 6 (now named Schedule 6a):
  - New Layout – all Revenue, Expense, and Admin fields are still included.
    - Admin costs (direct Medi-Cal) will be populated from the new “Schedule 6b”
- Schedule 7:
  - Changes in reporting format – Health Plans enter claim dollars in lag triangle for claims incurred January 2008 – December 2009 and paid through June 2010.
    - **Categories of Aid** – All COA’s combined
    - **Categories of Service** – Facility Inpatient (Inpatient Hospital), Facility Outpatient (Outpatient Facility and Emergency Room Facility), Physician (Physician Primary Care, Physician Specialty, Other Medical Professional, and FQHC), Pharmacy (Pharmacy), LTC (Long-Term Care Facility), and All Others (Laboratory and Radiology, Transportation, and Other). Note: COHS plans are required to fill in the LTC COS lag; Two-Plan and GMC plans may roll the LTC costs into the All Others COS lag.
- Schedule 8:
  - Certificate Statement – Include in the certification language a reference that the HP has read the



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instructions and followed them.

### **New RDT template Schedules**

- Pharmacy Request (**Schedule 1-D**) – the additional information sheet that was included in the HP Discussion Guide has a dedicated tab in the CY2009 template.
  - Detailed Administrative Costs (**Schedule 6b**) – allows MCO's to break out administrative costs in more detail to enable DHCS/Mercer to better identify the driving factors and trends of the administrative load.
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