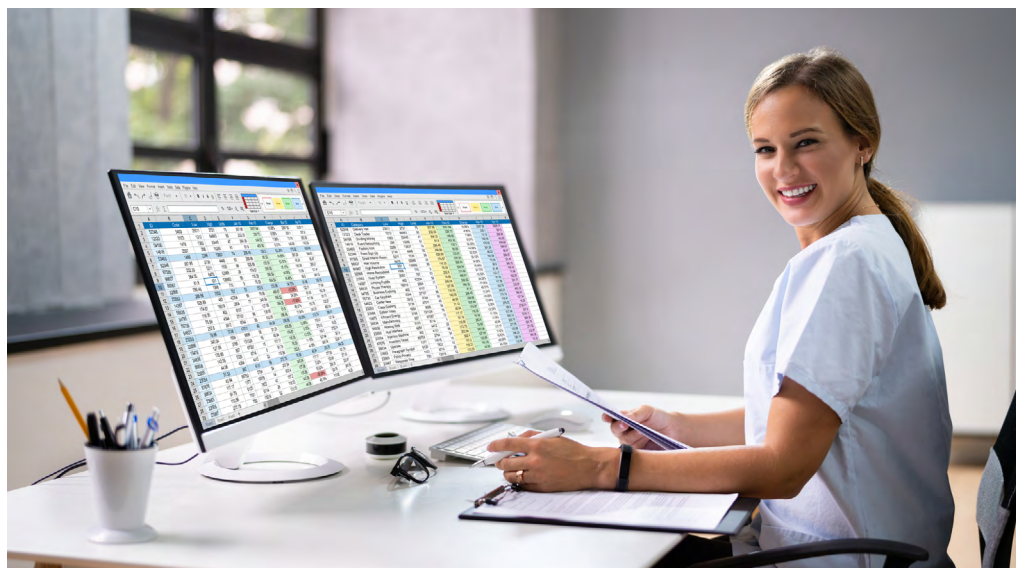# Direct Data Entry: 10-Digit Screen Expansion

The monetary amount fields in the direct data entry (DDE) screens in the Fiscal Intermediary Shared System (FISS) now allow up to 10 digits ($99,999,999.99). CMS discussed these requirements in CR 13138 and CR 13223. Make sure your billing staff knows about these requirements.

Why We Made These Changes

We expanded the FISS monetary amount display screens to accept and process up to 10 digits ($99,999,999.99) to meet the procedures and treatments exceeding the $999,999.99 limitation. The DDE claim record screens now include the necessary 10-digit monetary amount fields to effectively process and pay all claims with monetary amounts up to and including 10 digits. This allows Part A Medicare Administrative Contractors (MACs) to display monetary amounts up to and including 10 digits for institutional claims.

Provider Impact

Take these actions to see the system changes:

- Update your Customer Information Control System (CICS) screen dimension size to 43 X 80

- Notify screen scraping services that these releases implement:
    - **October 2023:**
        - Change MAP1712 – Claim Page 02 to expand:
            - Total Units and Covered Units fields to 10 positions
            - Total charges and Non-covered Charges to allow 11-digit dollar amounts
    - **January 2024:**
        - Change MAP1711 – Claim Page 01 to expand the Value Code fields to 10 positions to allow 10-digit dollar amounts for internal claims processing
        - Change FISS to keep the monetary amount fields on outbound HIPAA 5010 837 at 10 digits

Screen Changes

MAP1712

We changed the Total Units and Covered Units fields to **10 positions** in MAP1712 – Claim Page 02 to allow:

- A 9-digit whole number value (for example, 123456789)
- A 9-digit value containing a decimal with Revenue Code (for example, 12345678.9)

Note: If you enter a 10-digit whole number, the system will remove the first digit.

MAP171A

We changed MAP171A – Claim Page 02 to expand the:

- Total Units and Covered Units fields to **10 positions**
- Total Charge, Patient Paid, Labor amount, Non-Labor amount, and Covered Charge fields to allow 11-digit dollar amounts
- Service Rate field to allow 13-digit amounts (13138.3, 13138.3, Sprint 2)

Note: We expanded MAP171A – Claim Page 02 to 25 lines instead of 24.

MAP171D

We changed MAP171D – Claim Page 02 to expand the:

- Covered Units, Non-covered Units, and Total Non-covered Units fields to **10 positions**
- Covered Charges, Non-covered Charges, and Total Non-Covered Charges fields to allow 11-digit dollar amounts

Note: The Total Units and Covered Units fields will allow a 9-digit whole number value (for example, 123456789) and a 9-digit value including a decimal with Revenue Code (for example, 12345678.9).

MAP1713

We changed MAP1713 – Claim Page 03 to expand the:

- Estimate Amount Due and Due From Patient fields to allow 11-digit dollar amounts

MAP1716

We changed MAP1716 – Claim Page 06 to expand the:

- Coinsurance field to allow 9-digit dollar amounts

- Paid by Patient, GRH Original Reimbursement and Tech Provider Charges fields to allow 11-digit dollar amounts

MAP1741

We changed MAP1741 – Claim Summary Screen to expand the:

- Total Charge field to allow 11-digit dollar amounts

We changed FISS to:

- Make sure the monetary amount fields on outbound HIPAA 5010 837 remain 10 digits
- Create new Line Level Reason Code 19964 to assign when Total Charges, Covered Charges, or Non-covered Charges are greater than 99,999,999.99 on claim lines without Revenue Code 0001

Resources

- [Find your MAC's website](#)

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