

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1789	Date: February 3, 2017
	Change Request 9965

SUBJECT: Shared System Enhancement 2016: Common Working File (CWF) to Show Date for Informational Unsolicited Response (IUR) Indicator on Claim History

I. SUMMARY OF CHANGES: The purpose of this change request (CR) is for the Common Working File (CWF) to add a new date field on all CWF history claim layouts to indicate the date when the Information Unsolicited Response (IUR) is generated and the unsolicited indicator is updated, and to display in the Health Insurance Master Record (HIMR).

EFFECTIVE DATE: July 1, 2017

**Unless otherwise specified, the effective date is the date of service.*

IMPLEMENTATION DATE: July 3, 2017

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-*Only One Per Row.*

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
N/A	N/A

III. FUNDING:

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

One Time Notification

Number	Requirement	Responsibility								
		A/B MAC			D M E M A C	Shared-System Maintainers				Other
		A	B	H H H		F I S S	M C S	V M S	C W F	
	claim in history.									
9965.5	CWF shall display the new date field in MM/DD/YY format right next to the existing unsolicited indicator value of the 'UNSOL IND' field on all the following CWF claims history screens: PTBH, DMEH, INPH, OUTH, HHAH, and HOSH. NOTE: Any existing claims with IURs generated prior to implementation of this CR shall have a 'blank' date until another IUR, if applicable, is generated.							X		
9965.6	Contractors shall ensure the new IUR date field is populated correctly on the CWF claims history screens and utilized in their systems.	X	X	X			X			

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E M A C	C E D I
		A	B	H H H		
	None					

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): LuAnn Miller, 410-786-4441 or LuAnn.Miller1@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

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ATTACHMENTS: 0