

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1815	Date: April 7, 2017
	Change Request 9975

SUBJECT: Common Working File (CWF) to Archive Inactive Part B Consistency Edits

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is for CWF to archive the code and update associated documentation for the inactive Part B consistency edits, 68X2, 84X2, 84X3, and 97X2.

EFFECTIVE DATE: October 1, 2017

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

IMPLEMENTATION DATE: October 2, 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

Attachment - One-Time Notification

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SUBJECT: Common Working File (CWF) to Archive Inactive Part B Consistency Edits

EFFECTIVE DATE: October 1, 2017

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IMPLEMENTATION DATE: October 2, 2017

I. GENERAL INFORMATION

A. Background: The Centers for Medicare & Medicaid Services (CMS) instructs CWF to archive the code and update associated documentation for the inactive Part B consistency edits, 68X2, 84X2, 84X3, and 97X2.

Due to CMS CR 9379 'Part B Detail Line Expansion - Trailer 08 Update', CMS determined that certain consistency edits are no longer valid in CWF. The CWF maintainer completed analysis to determine the validity of the edits in CWF in the April 2017 Release and identified the inactive edits.

B. Policy: N/A

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

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	
9975.1	<p>The contractor shall archive the code and update associated documentation for the inactive Part B consistency edit, 68X2, for Part B claims/HUBC.</p> <p>The edit was put in place to edit HCPCS code '76092' when the sex code was not equal to 'F'. This code was deleted on 12/31/2006 and replaced with HCPCS code '77057' with the implementation of CMS CR 5327, which also created consistency edit 59X5 to edit procedure code '77057' when the sex code is equal to 'Male'.</p>		X						X	
9975.2	<p>The contractor shall archive the code and update associated documentation for the inactive Part B consistency edits, 84X2 and 84X3, for Part B claims/HUBC as the edits are created for DME claims before DME claims are setup to process separately by CWF.</p>		X						X	

Number	Requirement	Responsibility									
		A/B MAC			DME MAC	Shared-System Maintainers				Other	
		A	B	H H H		F I S S	M C S	V M S	C W F		
	Under CMS CR 8418 CWF created the HUDC claim record for DME claims processing and created separate consistency, utilization and A/B crossover edits for the HUDC transaction.										
9975.3	The contractor shall archive the code and update associated documentation for the inactive Part B consistency edit, 97X2, for Part B claims/HUBC. This edit was set up for the Gramm/Rudman Reduction for the claims processing period of 3/1/1986 to 9/30/1986.		X							X	

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		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): Vinay Vuyyuru, 410-786-9111 or Vinay.Vuyyuru@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