

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1867	Date: July 14, 2017
	Change Request 9828

SUBJECT: Renovate MCS Correspondence Entry Driver Program H99P1C00

I. SUMMARY OF CHANGES: HPES proposes to renovate the MCS Correspondence Entry driver program H99P1C00 with the goal of improving the maintainability of the renovated programs and improving the overall system sustainability. The H99P1C00 program is the Correspondence entry driver program responsible for the displaying History for a BENE or Provider, applying selection criteria, and initiating several Correspondence transactions, including EO requests, Claim Status Requests, TACs Letters, and manual adjustments. The H99P1C00 is ranked as the most complex MCS program with over 18,000 lines of code and a CycloMatic complexity score of 2016 (very high). With the renovation effort, the single large H99P1C00 program will be broken out into separate programs that more directly correspond to the individual functions. The new smaller programs will be coded to meet MCS coding standards and will be simpler to understand and easier to maintain.

EFFECTIVE DATE: January 1, 2018

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

IMPLEMENTATION DATE: January 2, 2018 - Analysis and Design

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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I. GENERAL INFORMATION

A. Background: Large complex programs like the H99P1C00 are more difficult to maintain and have higher incidences of defects and problems. With this change, the large H99P1C00 program will be broken into multiple smaller programs that are coded to comply with current MCS coding standards. The benefits of this change are realized in easier application maintenance, reduced incidence of defects and problems and improved sustainability of the application. The change reduces overall system complexity, specifically to the MCS online Correspondence entry functions. There will be no impact to other entities with this change as no outward system functionality is changing.

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	Shared-System Maintainers				Other	
		A	B	H H H		F M V C	I C M W	S S S F			
9828.1	MCS shall deliver an analysis document by November 1, 2017 which includes the project plan and Quarterly Level of Effort for the renovation of the MCS Correspondence Entry driver program H99P1C00 to improve maintainability and overall system sustainability with clear concise business requirements that can be used for future CMS CRs.						X				

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility		
		A/B MAC	D M E	C E D

		A	B	H H H	M A C	I
	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: N/A
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Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Rae Ann Sprecher-Frey, 410-786-3110 or rae.sprecher-frey@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