

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-20 One-Time Notification</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
<b>Transmittal 1944</b>	<b>Date: October 27, 2017</b>
	<b>Change Request 10332</b>

**SUBJECT: MCS Analysis Only: Undeliverable Medicare Summary Notices (UMSNs) - Beneficiary Do Not Forward Process**

**I. SUMMARY OF CHANGES:** This Change Request (CR) provides hours for the Multi-Carrier System (MCS) to perform analysis and develop business requirements to implement a Beneficiary Do Not Forward (DNF) process for MCS and Railroad Beneficiaries.

**EFFECTIVE DATE: April 1, 2018**

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

**IMPLEMENTATION DATE: April 2, 2018**

*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.

<b>R/N/D</b>	<b>CHAPTER / SECTION / SUBSECTION / TITLE</b>
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

<b>Pub. 100-20</b>	<b>Transmittal: 1944</b>	<b>Date: October 27, 2017</b>	<b>Change Request: 10332</b>
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**EFFECTIVE DATE: April 1, 2018**

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**IMPLEMENTATION DATE: April 2, 2018**

## I. GENERAL INFORMATION

**A. Background:** Currently, there is no process in place to withhold payments for beneficiaries who are on a Do Not Forward (DNF) notice due to a bad address. The Healthcare Integrated General Ledger System (HIGLAS) will develop changes to implement a beneficiary DNF process that mirrors the current provider DNF process. The Multi-Carrier System (MCS) will need to make changes to accept the HIGLAS changes as well as develop a process for Railroad Retirement Board (RRB) beneficiaries to match this process.

**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			
10332.1	MCS shall perform analysis to develop business requirements for system changes to react to the HIGLAS changes for a new beneficiary DNF process, as outlined in the draft requirements in attachment A.							X				
10332.2	MCS shall perform analysis to develop business requirements for system changes to implement a beneficiary DNF process for the RRB beneficiaries.							X				
10332.3	MCS shall email business requirements for an implementation CR to Stacey Shagena at Stacey.Shagena@cms.hhs.gov 30 days after issuance.							X				
10332.4	MCS, HIGLAS, and the MACs shall attend up to 3 one-hour calls to resolve any differences between HIGLAS and MCS requirements for the final implementation CR, to be scheduled by MCS. Calls may be before or after the delivery of business requirements (BR 3) as needed by MCS.		X					X			HIGLAS	

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	

### 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: N/A

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

### V. CONTACTS

**Pre-Implementation Contact(s):** Stacey Shagena, 410-786-8208 or Stacey.Shagena@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: 1**

