CMS Manual System	Department of Health & Human Services (DHHS)				
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)				
Transmittal 1981	Date: December 1, 2017				
	Change Request 10378				

SUBJECT: Fiscal Year (FY) 2014 and 2015 Worksheet S-10 Revisions: Further Extension for All Inpatient Prospective Payment System (IPPS) Hospitals

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to clarify deadlines for uploading revised or initial Worksheet S-10 submissions to HCRIS for FY 2014 or FY 2015 cost reports that have not been final settled.

EFFECTIVE DATE: January 2, 2018

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

IMPLEMENTATION DATE: January 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*.

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

Pub. 100-20 Transmittal: 1981 Date: December 1, 2017 Change Request: 10378

SUBJECT: Fiscal Year (FY) 2014 and 2015 Worksheet S-10 Revisions: Further Extension for All Inpatient Prospective Payment System (IPPS) Hospitals

EFFECTIVE DATE: January 2, 2018

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

IMPLEMENTATION DATE: January 2, 2018

I. GENERAL INFORMATION

A. Background: CMS has extended the deadline to resubmit certain Worksheet S-10 data from October 31, 2017 until January 2, 2018 for all IPPS hospitals. For revisions to be considered, we modified the deadline such that amended FY 2014 and FY 2015 cost reports, due to revised or initial submissions of Worksheet S-10, must be received by Medicare Administrative Contractors (MACs) on or before January 2, 2018.

If an IPPS hospital whose FY 2014 or FY 2015 cost report has been final settled requests to revise Worksheet S-10 for that FY 2014 or FY 2015 cost report and the request is received on or before December 1, 2017, MACs shall issue a Notice of Reopening (NOR) in order to reopen the cost report for revisions to Worksheet S-10, create and input Worksheet S-10 adjustments to the most recently final settled cost report, issue a revised notice of program reimbursement (RNPR), and upload the FY 2014 or FY 2015 revised cost report to the Health Care Provider Cost Report Information System (HCRIS) on or before December 31, 2017.

If an IPPS hospital whose FY 2014 or FY 2015 cost report has been final settled requests to revise Worksheet S-10 for that FY 2014 or FY 2015 cost report and the request is received between December 2, 2017 and January 2, 2018 (inclusive of those dates), MACs shall issue an NOR in order to reopen the cost report for revisions to Worksheet S-10, create and input Worksheet S-10 adjustments to the most recently final settled cost report, issue an RNPR, and upload the FY 2014 or FY 2015 revised cost report to HCRIS on or before January 31, 2018.

If an IPPS hospital whose FY 2014 or FY 2015 cost report has not been final settled requests to revise Worksheet S-10 for that FY 2014 or FY 2015 cost report, providers shall submit an amended cost report with Worksheet S-10 revisions only. MACs will review, accept and upload the amended cost reports in accordance with the deadlines outlined in this CR.

Cost reports amended to revise only Worksheet S-10 shall not require a tentative settlement.

This CR supersedes the previous deadline in Change Request (CR) 10026 (issued June 30, 2017) with respect to the dates by which MACs shall issue an NOR in order to accept a revised or newly submitted Worksheet S-10, issue an RNPR, and upload the FY 2014 or FY 2015 revised cost report to HCRIS.

MACs should continue to use the information contained in CR 10026 or other previous instructions with respect to FY 2014 and FY 2015 Worksheet S-10 revisions for any matters not addressed in this CR.

B. Policy: CMS is allowing hospitals to resubmit certain Worksheet S-10 data from FY 2014 and FY 2015 cost reports, provided that they are received by Medicare Administrative Contractors (MACs) on or before January 2, 2018.

II. BUSINESS REQUIREMENTS TABLE "Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Re	espo	nsil	bilit	y				
			A/B		D		Sha			Other
		N	MA(M		Sys			
					Е		aint			
		A	В	H H	M	F I	M C	V M		
				Н	A	S	S	S	F	
				-11	C	S			•	
10378.1	If an IPPS hospital whose FY 2014 or FY 2015 cost	X								
	report has been final settled requests to revise									
	Worksheet S-10 for that FY 2014 or FY 2015 cost									
	report and the request is received on or before									
	December 1, 2017, MACs shall issue a Notice of									
	Reopening (NOR) in order to reopen the cost report									
	for revisions to Worksheet S-10, create and input									
	Worksheet S-10 adjustments to the most recently final									
	settled cost report, issue a revised notice of program									
	reimbursement (RNPR), and upload the FY 2014 or									
	FY 2015 revised cost report to the Health Care									
	Provider Cost Report Information System (HCRIS) on or before December 31, 2017.									
10378.2	If an IPPS hospital whose FY 2014 or FY 2015 cost	X								
10376.2	report has been final settled requests to revise	1								
	Worksheet S-10 for that FY 2014 or FY 2015 cost									
	report and the request is received between December									
	2, 2017 and January 2, 2018 (inclusive of those dates),									
	MACs shall issue an NOR in order to reopen the cost									
	report for revisions to Worksheet S-10, create and									
	input Worksheet S-10 adjustments to the most recently									
	final settled cost report, issue an RNPR, and upload									
	the FY 2014 or FY 2015 revised cost report to HCRIS									
	on or before January 31, 2018.									
10378.3	If an IPPS hospital whose FY 2014 or FY 2015 cost	X								
	report has not been final settled requests to revise									
	Worksheet S-10 for that FY 2014 or FY 2015 cost									
	report, providers shall submit an amended cost report									
	with Worksheet S-10 revisions only. MACs will									
	review, accept and upload the amended cost reports in									
	accordance with the deadlines outlined in this CR.									

III. PROVIDER EDUCATION TABLE

Number	Requirement	irement Responsibility		,		
			A/B MA(D M E	C E D
		A	В	H H H	M A C	I
10378.4	MLN Article: A provider education article related to this instruction will be available at http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/ shortly after the CR is released. You will receive notification of the article release via the established "MLN Matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web sites and include information about it in a listserv message within 5 business days after receipt of the notification from CMS announcing the availability of the article. In addition, the provider education article shall be included in the contractor's next regularly scheduled bulletin. Contractors are free to supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.					

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A *"Should" denotes a recommendation.*

X-Ref	Recommendations or other supporting information:
Requirement	
Number	

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

V. CONTACTS

Pre-Implementation Contact(s): Kimberly Go, 410-786-4560 or kimberly.go@cms.hhs.gov.

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

VI. FUNDING

Section A: 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.

ATTACHMENTS: 0