CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1163	<b>Date: January 18, 2013</b>
	Change Request 8149

**SUBJECT: Medicare Remit Easy Print (MREP) Enhancement** 

**I. SUMMARY OF CHANGES:** This Change Request (CR) instructs ViPs to add an enhancemment to Medicare Remit Easy Print (MREP) software based on comments received from users.

EFFECTIVE DATE: April 1, 2013 (For BR 1); July 1, 2013 (For BRs 2 and 3) IMPLEMENTATION DATE: April 1, 2013 (For BR 1); July 1, 2013 (For BRs 2 and 3)

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

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

### III. FUNDING:

For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs) and/or Carriers: No additional funding will be provided by CMS; Contractors activities are to be carried out with their operating budgets.

## 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 obliged 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

<sup>\*</sup>Unless otherwise specified, the effective date is the date of service.

# **Attachment - One-Time Notification**

Pub. 100-20 Transmittal: 1163 Date: January 18, 2013 Change Request: 8149

SUBJECT: Medicare Remit Easy Print (MREP) Enhancement

**EFFECTIVE DATE:** April 1, 2013 (For BR 1); July 1, 2013 (For BRs 2 and 3)

IMPLEMENTATION DATE: April 1, 2013 (For BR 1); July 1, 2013 (For BRs 2 and 3)

### I. GENERAL INFORMATION

**A. Background:** CMS Change Request (CR) 7218 (Transmittal 811 Published on November 12, 2010) instructed VIPs to make the Medicare Remit Easy Print (MREP) software compatible with Microsoft Windows 7 (32 or 64 bit), Vista (32 or 64 bit), and XP (32 or 64 bit) operating systems with the expectation that making the software compatible with multiple operating systems would make it more acceptable to users and providers/suppliers and help transtion to Electronic Remittance Advice (ERA) from paper. It has been reported by a number of users that they are facing some additional issues. This CR is instructing ViPs to analyze the following issue reported and implement fix(es) to address the issue:

The .NET Framework version 1.1, which is currently required by MREP, is incompatible with 64-bit versions of Windows XP, Windows Vista and Windows 7 operating systems.

**B. Policy:** CMS offers free software - Medicare Remit Easy Print (MREP) - to view and print HIPAA compliant Electronic Remittance Advice (Transaction 835 - Health Care Claim Payment/Advice). The software gets enhanced on a regular basis to meet the changing needs of providers/suppliers to help them transition to ERA.

## II. BUSINESS REQUIREMENTS TABLE

*Use "Shall" to denote a mandatory requirement.* 

Number	Requirement	Responsibility														
		A/B		D	F	C	R	,	Shai	ed-		Other				
		MAC		M	Ι	A	Н		Syst	em						
				Е	E	Е	Е	E		R	Н		aint	aine	rs	
		P	P				I	F	M	V	C					
		a	a	M		I		I	C	M	W					
		r	r	A		Е		S	S	S	F					
		t	t	C		R		S								
			ъ													
		A	В													
8149.1	ViPs shall analyze the issue described in the									X						
	Background section that has been reported and design															
	fix(es) as needed.															
8149.2	ViPs shall implement the fix(es) designed under									X						
	Business Requirement 8149.1.															
8149.3	ViPs shall update the MREP manual as needed after									X						
	implementing the fix(es) under 8149.2.															

Number	Requirement	Responsibility														
		A/B		D	F	C	R	Shared-			Other					
		MAC		M	I	A	Н	System								
					Е		Е			R	Н	M	aint	aine	rs	
		P	P			R	Ι	F	M	V	C					
		a	a	M		I		I	C	M	W					
		r	r	A		E		S	S	S	F					
		t	t	C		R		S								
		A	В													
8149.4	Contractors shall notify MREP users of the		X	X		X						CEDI				
	enhancement in MREP software once the fixes are															
	implemented.															

# III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility						
			AC P a r t	D M E M A	FI	C A R R I E R	R H H I	Other
8149.5	A provider education article related to this instruction will be available at http://www.cms.hhs.gov/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 one week of the availability of the provider education 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.	A	X	X		X		

#### IV. SUPPORTING INFORMATION

**Section A:** Recommendations and supporting information associated with listed requirements: N/A *Use "Should" to denote 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):** Sumita Sen, sumita.sen@cms.hhs.gov

**Post-Implementation Contact(s):** Contact your Contracting Officer's Representative (COR) or Contractor Manager, as applicable.

### VI. FUNDING

# Section A: For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs), and/or Carriers:

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### **Section B: For Medicare Administrative Contractors (MACs):**

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