

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1114	Date: August 17, 2012
	Change Request 8012

SUBJECT: New Field Established within FISS and MCS

I. SUMMARY OF CHANGES: This change request instructs the Standard System Maintainers and HIGLAS to create a new reason/discovery code that will give Medicare contractors and CMS the capability to track overpayments identified by ZPIC reviews and OIG audits.

EFFECTIVE DATE: January 1, 2013

IMPLEMENTATION DATE: January 7, 2013

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	

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

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

Attachment - One-Time Notification

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SUBJECT: New Field Established within FISS and MCS

EFFECTIVE DATE: January 1, 2013

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I. GENERAL INFORMATION

A. Background: Currently, overpayments that are identified by Office of Inspector General (OIG) audits and ZPIC reviews are not separately tracked in the shared systems or the Healthcare Integrated General Ledger Accounting System (HIGLAS) by report number. These types of overpayments are generally included in the entire population of overpayments. There isn't a way to tie adjustments to a specific OIG or ZPIC report number.

B. Policy: This change request instructs the Standard System Maintainers and HIGLAS to create a new field that will give Medicare contractors and CMS the capability to insert a 20 character comment. These comments will be used for reporting purposes in the HIGLAS system.

II. BUSINESS REQUIREMENTS TABLE

Use "Shall" to denote a mandatory requirement.

Number	Requirement	Responsibility										
		A/B MAC		D M E M A C	F I	C A R R I E R	R H I	Shared- System Maintainers				Other
		P a r t A	P a r t B					F I S S	M C S	V M S	C W F	
8012.1	The system maintainers shall create a new descriptive field for Medicare contractors to insert a comment.							X	X			HIG LAS
8012.1.1	This field shall be able to hold a 20 alpha-numeric character capacity.							X	X			HIG LAS
8012.1.2	The contents of this field shall be transmitted to HIGLAS.							X	X			
8012.2	Medicare contractors on HIGLAS shall insert the <u>correct</u> OIG report number into this field for OIG adjustments (report number ONLY).	X	X		X	X	X					
8012.2.1	Medicare contractors on HIGLAS shall insert "ZPIC" into this field for ZPIC adjustments.	X	X		X	X	X					
8012.2.2	This field shall be used when generating an adjustment due to an OIG audit or ZPIC review resulting in an overpayment.	X	X		X	X	X					

Number	Requirement	Responsibility										
		A/B MAC		D M E M A C	F I	C A R R I E R	R H I	Shared-System Maintainers				Other
		P a r t A	P a r t B					F I S S	M C S	V M S	C W F	
8012.2.2.1	These requirements do not change the current process of using established reason/discovery codes when adjusting these claims.	X	X		X	X	X					
8012.3	HIGLAS shall receive the information transmitted from the shared system by way of this new field.										HIG LAS	
8012.3.1	The information transmitted by way of this new field shall be included on the HIGLAS receivables balance extract report.										HIG LAS	

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility						
		A/B MAC		D M E M A C	F I	C A R R I E R	R H I	Other
		P a r t A	P a r t B					
	None							

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements:
Use "Should" to denote a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
	None.

Section B: All other recommendations and supporting information:
V. CONTACTS

Pre-Implementation Contact(s): Monica Potee, 410-786-4297 or monica.potee@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:

No additional funding will be provided by CMS; Contractors activities are to be carried out with their operating budgets

Section B: For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS do 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.