CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1138	Date: November 1, 2012
	Change Request 8083

SUBJECT: Adding Bankruptcy Status Field to the Recovery Audit Contractor Daily and Weekly Reports

I. SUMMARY OF CHANGES: The purpose of this CR is to modify/enhance the Recovery Audit Data Warehouse Transaction Reports to reflect a new "Bankruptcy" field. By adding this new ("Bankruptcy") field to the existing Recovery Audit Data Warehouse reports, the RACDW and Recovery Auditors will be able to identify the bankruptcy status of providers through the transactions reports.

EFFECTIVE DATE: April 1, 2013

IMPLEMENTATION DATE: April 1, 2013 (April 2013 release)

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

Pub. 100-20 Transmittal: 1138 Date: November 1, 2012 Change Request: 8083

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EFFECTIVE DATE: April 1, 2013

IMPLEMENTATION DATE: April 1, 2013 (April 2013 release)

I. GENERAL INFORMATION

- **A. Background:** The purpose of this CR is to modify/enhance the Recovery Audit Data Warehouse Transaction Reports to reflect a new "Bankruptcy" field. By adding this new ("Bankruptcy") field to the existing Recovery Audit Data Warehouse reports, the RACDW and Recovery Auditors will be able to identify the bankruptcy status of providers through the transactions reports.
- **B.** Policy: Section 302 of the Tax Relief and Health Care Act of 2006 requires the Secretary of the Department of Health and Human Services (the Secretary) to utilize Recovery Auditors under the Medicare Integrity Program to identify underpayments and overpayments and recoup overpayments under the Medicare program associated with services for which payment is made under part A or B of title XVIII of the Social Security Act.

CMS is required to actively review Medicare payments for services to determine accuracy and if errors are noted to pursue the collection of any payment that it determines was in error.

II. BUSINESS REQUIREMENTS TABLE

Use "Shall" to denote a mandatory requirement.

Number	Requirement	Responsibility												
		A	/B	D	F	С	R		Shai	red-		Other		
		MAC		M	I	A	Н	System						
					Е			R	Н	M	aint	aine	rs	
		P	P			R	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						
		A	В											
8083.1	A bankruptcy status indicator field shall be added to all									X				
	Recovery Audit Data Warehouse transaction reports.													
8083.2	The status indicator field shall be a yes or no field.									X				
8083.3	The MAC/Contractor shall complete the bankruptcy			X										
	status indicator field for all providers in a bankruptcy													
	status.													

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility							
			P a r t	D M E M A C	FI	C A R R I E R	R H H I	Other	
	None								

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A *Use "Should" to denote 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): Alpheus Parkes, 410-786-0282 or alpheus.parkes@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.