

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1257	Date: July 19, 2013
	Change Request 8152

SUBJECT: Medicare Appeals System (MAS) Level 1 Implementation

I. SUMMARY OF CHANGES: The purpose of this CR is to notify the contractors of the upcoming outreach efforts and gathering sessions CMS will require in support of the Medicare Appeals System (MAS) Level 1 Implementation. (NOTE: The first phase of the Level 1 implementation will focus on Part A.)

EFFECTIVE DATE: November 28, 2012 - MAS Level 1 Implementation Effort

IMPLEMENTATION DATE: August 19, 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; contractor's activities are to be carried out within 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.*

Number	Requirement	Responsibility											
		A/B MAC			D M E	F I	C A R R I E R	R H I	Shared-System Maintainers				Other
		A	B	H H H					F I S S	M C S	V M S	C W F	
8152.2	The Contractors may attend any or all gathering/informational sessions discussing the level 1 MAS implementation focusing on Part A from February 2013 through Fall 2013. CMS will notify the contractors via email when the initial webinar is scheduled.	X	X		X	X	X						

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility											
		A/B MAC			D M E	F I	C A R R I E R	R H I	Other				
		A	B	H H H					F I S S	M C S	V M S	C W F	
	None												

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

X-Ref Requirement Number	Recommendations or other supporting information:

Section B: All other recommendations and supporting information: See CR.

V. CONTACTS

Pre-Implementation Contact(s): Kimberly Snowden, 410-786-3177 or kimberly.snowden@cms.hhs.gov , Aaron Pleines, Aaron.Pleines@ms.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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