CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1272	Date: August 2, 2013
	Change Request 8398

#### SUBJECT: CEDI Removal of 4010A1 Jobs and Processes

**I. SUMMARY OF CHANGES:** The purpose of the change request to to direct the Common Electronic Data Interchange (CEDI) contractor to remove all jobs and processes associated with accepting and processing the Accredited Standards Committee (ASC) X12 version 4010A1 and the National Council for Prescription Drug Programs (NCPDP) version 5.1claims. With the transition to ASC X12 version 5010 and NCPDP version D.0 in April 2012, there is no longer a need for CEDI and any subcontractors to update a maintain the obsolete formats.

#### **EFFECTIVE DATE: October 1, 2013 IMPLEMENTATION DATE: October 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	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: 1272	Date: August 2, 2013	Change Request: 8398

SUBJECT: CEDI Removal of 4010A1 Jobs and Processes

**EFFECTIVE DATE:** October 1, 2013 **IMPLEMENTATION DATE:** October 7, 2013

# I. GENERAL INFORMATION

**A. Background:** The Centers for Medicare and Medicaid Services (CMS) implemented the next version of the Health Insurance Portability and Accountability Act (HIPAA) transactions. The Secretary of the Department of Health and Human Services (DHHS) has adopted Accredited Standards Committee (ASC) X12 Version 5010 and the National Council for Prescription Drug Programs (NCPDP) Version D.0 as the next HIPAA transaction standards for covered entities to exchange HIPAA transactions.

The purpose of the change request to direct the Common Electronic Data Interchange (CEDI) contractor to remove all jobs and processes associated with accepting and processing the Accredited Standards Committee (ASC) X12 version 4010A1 and the National Council for Prescription Drug Programs (NCPDP) version 5.1claims. With the transition to ASC X12 version 5010 and NCPDP version D.0 in April 2012, there is no longer a need for CEDI and any subcontractors to update a maintain the obsolete formats.

**B. Policy:** Health Insurance Portability and Accountability Act of 1996 (HIPAA), the Final Rule as published in the Federal Register on January 16, 2009, by the Department of Health and Human Services, 45 CFR Part 162.

# II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement Responsibility																																																			
		A/B MAC																												MAC			-													C A R	R H H		Sha Sys aint	tem		Other
		A	В	H H H	M A C		R I E R	Ι	F I S S	M C S	V M S	-																																								
8398.1	The contractor shall perform an analysis to identify all jobs and processes that are used solely for versions 4010A1 and 5.1 that are no longer needed.												CEDI																																							
8398.1.1	The contractor shall remove all jobs and processes that are determined to be no longer needed for Durable Medical Equipment (DME) claims processing.												CEDI																																							
8398.2	The contractor shall perform an analysis to identify all jobs and processes that are used for versions 4010A1 and 5.1 but may also be used for version 5010 and D.0 that are no longer needed.												CEDI																																							

Number	Requirement	Responsibility											
		A/B		D	F	C	R	Shared-			Other		
		MAC		Μ	Ι	Α	H System						
					Е		R	Η	Μ	aint	aine	ers	
		Α	В	Η			R	Ι	F	Μ	V	С	
				Η	Μ		Ι		Ι	С	Μ	W	
				Η	А		E		S	S	S	F	
					С		R		S				
8398.2.1	The contractor shall remove any jobs and												CEDI
	processes that are determined to be no longer												
	needed for Durable Medical Equipment (DME)												
	claims processing.												

#### III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility								
			A/B MAC B		D M E M A	F I	C A R I E R	R H H I	Other	
	None				U		Ν			

#### 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):** Jason Jackson, 410-786-6156 or jason.jackson@cms.hhs.gov, Angie Bartlett, 410-786-2865 or angie.bartlett@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.