

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1337	Date: February 5, 2014
	Change Request 8489

SUBJECT: Encounter Data System Payer ID: Payer ID Creation for the Financial Alignment Demonstration for Medicare Medicaid Plans (MMPs)

I. SUMMARY OF CHANGES: Contractors shall make changes where necessary to accommodate the Medicare Advantage Encounter Data System for the Financial Alignment Demonstration (MMPs). Eight Payer IDs will need to be established. The Encounter Data System (EDS) front end contractor is Palmetto, GBA. The address shall be Palmetto, 17 Technology Circle, Columbia, SC 29203. These Payer IDs will only be used in the EDS. No other system or provider is impacted. CWF will update the Carrier table to accommodate this change.

Recommended Payer IDs are: MMP Medicaid A-80891; MMP Medicaid B-80892; MMP Medicaid Dental-80893; MMP NCPDP-80894; MMP Medicaid DME-80895; MMP Medicare A-80888; MMP Medicare B-80889; MMP Medicare DME-80890

EFFECTIVE DATE: July 1, 2014

IMPLEMENTATION DATE: July 7, 2014

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 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 M A C	Shared- System Maintainers				Other
		A	B	H H H		F I S S	M C S	V M S	C W F	
	MMP Medicare DME-80890. All must have the same address:7500 Security Boulevard, Baltimore, MD 21244									

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E M A C	C E D I
		A	B	H H H		
	None					

IV. SUPPORTING INFORMATION

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

"Should" denotes 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): Sharon Winchester, 410-786-4787 or sharon.winchester@cms.hhs.gov

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

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

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