CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1574	Date: November 13, 2015
	Change Request 9381

SUBJECT: Shared System Enhancement 2015: Technical Improvements to the Redesigned Medicare Summary Notice (MSN) process.

I. SUMMARY OF CHANGES: The Centers for Medicare & Medicaid Services (CMS) requests that the Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Shared System Maintainer (SSM) remove bar codes from the Medicare Summary Notice (MSN) and beneficiary checks.

EFFECTIVE DATE: April 1, 2016

*Unless otherwise specified, the effective date is the date of service. IMPLEMENTATION DATE: April 4, 2016

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 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 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.

IV. ATTACHMENTS: One Time Notification

Attachment - One-Time Notification

	Pub. 100-20	Transmittal: 1574	Date: November 13, 2015	Change Request: 9381
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SUBJECT: Shared System Enhancement 2015: Technical Improvements to the Redesigned Medicare Summary Notice (MSN) process.

EFFECTIVE DATE: April 1, 2016

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I. GENERAL INFORMATION

A. Background: The Centers for Medicare & Medicaid Services (CMS) requests that Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Shared System Maintainer (SSM) remove bar code functionality from the Medical Summary Notice (MSN) and beneficiary checks. The DMEPOS SSM no longer needs to produce bar codes on the MSNs and beneficiary checks because the print vendors have this capability. The use of bar codes were used to help with sorting, matching and stuffing MSNs.

B. Policy: Removing logic and data from the ViPs Medicare System (VMS) that is no longer needed will enhance the processing time and remove the need to support unnecessary code in any future changes.

II. BUSINESS REQUIREMENTS TABLE

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

Number	Number Requirement Responsibility									
				A/B		Shared-				Other
		N	MAC M			•	tem			
			1		E	-		aine	1	
		A	В	H	NЛ	F	M		С	
				H	M A	-	C S	M		
				Η	C A	S S	3	S	F	
9381.1	The contractor shall participate in up to two (2) one hour calls with CMS to review and clarify any outstanding questions.							X		
9381.1.1	The contractor shall record and present a summary of the meetings, create and maintain an issues log, and post them on this Change Request up to 48 hours after the meeting has concluded.							X		
9381.2	The contractor shall discontinue applying bar codes on the MSNs and beneficiary checks, when formatting the MSNs and beneficiary checks.							X		
9381.3	The contractor shall restructure the claim page formatter program (VMSMS455) in the MSN process to make it more maintainable.							X		

Number	Requirement	Responsibility								
			A/B	5	D		Sha	red-		Other
		Ν	MA(\mathbf{C}	Μ			tem		
				_	Е	Μ	aint	aine	ers	
		Α	В	Η		F	Μ	V	C	
				Η	Μ	Ι	С	Μ	W	
				Η	А	S	S	S	F	
					С	S				
9381.4	The contractors shall test the changes with their print vendors.				Х					

III. PROVIDER EDUCATION TABLE

Number	Requirement	Re	spoi	nsib	ility	
			A/B		D	С
		1	MAG		Μ	Е
					Е	D
		Α	В	Η		Ι
			_	Н	Μ	
				Н	Α	
					С	
	None					

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): Emma Battista, 410-786-0374 or emma.battista@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: 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 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.

ATTACHMENTS: 0