CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 2126	Date: August 10, 2018
	Change Request 10546

SUBJECT: User CR: FISS to Add Location/Statuses to the 6H File Fix

I. SUMMARY OF CHANGES: This Change Request (CR) will update the FISS system to allow claims stuck in certain locations to be moved to a working location so the claim can be finalized, rather than having to do an adjustment to the claim as a workaround. This CR will prevent unnecessary adjustments and ensure these claims are processed timely. While the volume is low, the workaround creates unnecessary burden on the provider and the MAC. This CR is created from MAC UCR JD0029, QCN 170308016, and FS6966.

EFFECTIVE DATE: January 1, 2019
Unless otherwise specified, the effective date is the date of service.
IMPLEMENTATION DATE: January 7, 2019

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 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: 2126	Date: August 10, 2018	Change Request: 10546

SUBJECT: User CR: FISS to Add Location/Statuses to the 6H File Fix

EFFECTIVE DATE: January 1, 2019
*Unless otherwise specified, the effective date is the date of service.
IMPLEMENTATION DATE: January 7, 2019

I.   GENERAL INFORMATION

A.   Background: This Change Request (CR) will update the FISS system to allow claims stuck in certain locations to be moved to working locations so the claim can be finalized, rather than having to do an adjustment to the claim as a workaround. This CR will prevent unnecessary adjustments and ensure these claims are processed timely.

B.   Policy: N/A

II.   BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility								
		A/B MAC			DME	Shared-System Maintainers				Other
		A	B	HHH	MAC	FISS	MCS	VMS	CWF	
10546.1	FISS shall ensure that the following matrix is used for the 'MOVE' Function in the 6H Bene-Claim-File-Fix logic, to allow claims to be moved to a workable status/location: 1. 'SB' may be moved to 'SM', 'IB', 'TB' or 'SB0100'. 2. 'SM' may be moved to 'SM' or 'SB0100', or 'IB9997'. 3. 'IB9900' or 'IB9996' may be moved to 'IB9997'. 4. 'TB9996' may be moved to 'IB9997' or 'TB9997' 5. 'DB' or 'DM' may be moved to 'DB9997' or 'IB9997' 6. 'RB' or 'RM' may be moved to 'RB9997' or 'IB9997' 7. 'SMINAC' may be removed as a defined Status/Location with the addition of 'SM' to 'IB9997' in 1.b.					X				

Number	Requirement	Responsibility								
		A/B MAC			D M E	Shared-System Maintainers				Other
		A	B	H H H	M A C	F I S S	M C S	V M S	C W F	
10546.2	FISS shall **remove** the ability to move claims with the 'MOVE' function to 'PB'. NOTE: If the ability to move any claims to PB9997 is needed, this should be incorporated into the **PAID** function since the move function would not apply a final reason code, i.e., 37192, etc.					X				

III.   PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E	C E D
		A	B	H H H	M A C	I
	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): Stacey Shagena, 410-786-8208 or Stacey.Shagena@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