| CMS Manual System | Department of Health & Human Services (DHHS) Centers for Medicare & | | | | | |
|--|---|--|--|--|--|--|
| Pub. 100-20 One-Time Notification | | | | | | |
| | Medicaid Services (CMS) | | | | | |
| Transmittal 135 | Date: JANUARY 21, 2005 | | | | | |
| | CHANGE REQUEST 3597 | | | | | |

SUBJECT: Shared System Maintainer Hours for Resolution of Problems Detected During Health Insurance Portability and Accountability Act (HIPAA) Transaction Release Testing

I. SUMMARY OF CHANGES: This transmittal provides updated information regarding the hours reserved to correct problems in the July 2005 release. Hours were previously reserved for the April 2005 release. Hours will also be reserved in the July 2005 release of each shared system maintainer for HIPAA transaction programming to rectify identified problems, allow submitter testing to be expanded, if necessary, and enable successful use of the affected transactions in production. The CMS Maintenance Lead for each shared system will coordinate prioritization of current and future problems for correction by that shared system.

NEW/REVISED MATERIAL - EFFECTIVE DATE: July 1, 2005 *IMPLEMENTATION DATE: July 5, 2005

Disclaimer for manual changes only: The revision date and transmittal number apply to the red italicized material only. 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 not updated.)
(R = REVISED, N = NEW, D = DELETED)

| R/N/D | CHAPTER/SECTION/SUBSECTION/TITLE |
|-------|----------------------------------|
| N/A | |
| | |
| | |
| | |

*III. FUNDING:

These instructions shall be implemented within your current operating budget.

IV. ATTACHMENTS:

| | Business Requirements |
|---|-------------------------------|
| | Manual Instruction |
| | Confidential Requirements |
| X | One-Time Notification |
| | Recurring Update Notification |

^{*}Medicare contractors only

Attachment – One-Time Notification

| Pub. 100-20 Transmittal: 135 Date: January 21, 2005 Change Request 3597 |
|---|
|---|

SUBJECT: Shared System Maintainer Hours for Resolution of Problems Detected During Health Insurance Portability and Accountability Act (HIPAA) Transaction Release Testing

I. GENERAL INFORMATION

- **A. Background:** Hours need to be reserved in the July 2005 release of each shared system maintainer and the Common Working File for HIPAA transaction programming to rectify problems.
- **B. Policy:** HIPAA transactions must comply with the implementation guides. If errors are detected, error resolution must occur in a timely manner.
- C. Provider Education: None.

II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement "Should" denotes an optional requirement

| Requirement Number | Requirements | Responsibility ("X" indicates the columns that apply) | | | | | | | | |
|-----------------------|--|---|------------------|---------------------------------|-----------------------|-----------------------------|---|---|------------------|-------|
| | | FI | R H H I | C a r r i e r | D M E R C | Shar Main F I S | | • | m C W F | Other |
| 3597.1 | Shared System Maintainers shall reserve hours in the July 2005 release for HIPAA transaction programming to rectify identified problems. | | | | | X | X | X | X | |

III. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

| X-Ref Requirement # | Instructions |
|---------------------|--------------|
| | |

B. Design Considerations: N/A

| X-Ref Requirement # | Recommendation for Medicare System Requirements |
|---------------------|---|
| | |

C. Interfaces: N/A

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: N/A

F. Testing Considerations: N/A

IV. SCHEDULE, CONTACTS, AND FUNDING

| Effective Date*: July 1, 2005 Implementation Date: July 5, 2005 | These instructions shall be implemented within your current operating budget. |
|--|---|
| Pre-Implementation Contact(s): Joy Glass, 410-786-6125 jglass@cms.hhs.gov | |
| Post-Implementation Contact(s): Joy Glass, 410-786-6125 jglass@cms.hhs.gov | |

 $^{{}^*}$ Unless otherwise specified, the effective date is the date of service.