CMS Manual System	Department of Health & Human Services
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services
Transmittal 318	Date: FEBREUARY 8, 2008
	Change Request 5828

Subject: Create User Account for Next Generation Desktop (NGD) on Common Working File (CWF)

I. SUMMARY OF CHANGES: The Next Generation Desktop does not have a user ID on the Common Working File (CWF). In order for the call center agents to update MSP records (provide simple terminations), the Next Generation Desktop updates local carrier (MCS), DMAC (VMS), and FI (FISS) systems, which in turn update the MSP records on CWF. In order to provide better visibility to the COBC contractor into the various updates to the records, Office of Financial Management (OFM) and Office of Beneficiary Information Services (OBIS) would like CWF user accounts created for the Next Generation Desktop with the ability to update MSP records in CWF directly.

New / Revised Material Effective Date: July 1, 2008

Implementation Date: July 7, 2008

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:

SECTION A: For Fiscal Intermediaries and Carriers:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their operating budgets.

SECTION B: For Medicare Administrative Contractors (MACs): Not Applicable.

IV. ATTACHMENTS:

One-Time Notification

*Unless otherwise specified, the effective date is the date of service.

Attachment – One-Time Notification

	I	Pub. 100-20	Transmittal: 318	Date: February 8, 2008	Change Request: 5828
--	---	-------------	------------------	------------------------	----------------------

SUBJECT: Create User Account for Next Generation Desktop on CWF

Effective Date: July 1, 2008

Implementation Date: July 7, 2008

I. GENERAL INFORMATION

A. Background:

The Next Generation Desktop does not have a User ID on the Common Working File (CWF). In order for the call center agents to update Medicare Secondary Payer (MSP) records (provide simple terminations), the Next Generation Desktop updates the local carrier (MCS, VMS and FISS) systems which in turn update the MSP records on the CWF. In order to provide better visibility to the COBC contractor into the various updates to the records, Office of Financial Management (OFM) and the Office of Beneficiary Information Services (OBIS) request contractor number 11140 to be used by the Next Generation Desktop (Beneficiary Contact Center contractor) to update working aged MSP records directly in CWF.

B. Policy: N/A

II. BUSINESS REQUIREMENTS TABLE

Use "Shall" to denote a mandatory requirement

Number	Requirement		-		ty (p	lace a	an "Y	ζ" in	each	app	licable
		col	umn)							
_		A	D	F	C	R	Sl	ared-	Syste	m	OTHER
		/	M	I	A	Н]	Maint	ainers		
		В	E		R	Н	F	M	V	С	
					R	I	I	C	M	W	
		M	M		I		S	S	S	F	
		A	A		E		S				
		C	С		R						
5828.1	CWF shall use and accept contractor number 11140 when the									X	
	NGD is applying simple terminations to working aged records										
	only.										
5828.2	CWF shall send the IUR as they do today.									X	
5828.3	CWF shall not accept or apply a simple termination date from									X	
	contractor number 11140 for those MSP records with originating										
	contractor number 11100.										

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A /	D M	F I	C A	R H		nared- Mainta			OTHER
		B M A	E M A		R R I E	H	F I S S	M C S	V M S	C W F	
	N/A	C			IX.						

IV. SUPPORTING INFORMATION

[Note: Use this section for any supporting information, such as Definitions of Key Terms, Design Considerations, Contractor Financial Reporting, Dependencies, and / or Testing Considerations.]

Section A: For any recommendations and supporting information associated with listed requirements, use the box below: *Use "Should" to denote a recommendation.*

X-Ref Requirement Number	Recommendations or other supporting information:
	N/A

Section B: For all other recommendations and supporting information, use this space:

V. CONTACTS

Pre-Implementation Contact(s): N/A

Post-Implementation Contact(s): N/A

VI. FUNDING

Section A: For Fiscal Intermediaries (FIs), Carriers, and Regional Home Health Carriers (RHHIs) use only one of the following statements:

No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.

Section B: For Medicare Administrative Contractors (MACs), use the following statement: N/A