CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 602	Date:
	Change Request 6600

Transmittal 560, dated September 18, 2009, is being rescinded and replaced by Transmittal 602, dated November 27, 2009. The change in the attachment updates instructions to MACs on the development of the Certification Test Package. All other material remains the same.

SUBJECT: HIPAA 5010 Activity - Medicare Administrative Contractor (MAC) Certification Test Package Development

I. SUMMARY OF CHANGES: The certification test (CT) package will be used to ensure that MACs have implemented 5010 changes and other CMS required EDI enhancements as CMS has instructed. Participating MACs will team with the single test contractor (STC) to prepare the test scenarios, use cases and data files that constitute the CT. This change request will capture the level of effort estimate for MAC participation in development of the CT package. The STC has determined the distribution of tasks and defined the deliverable specifications. The MAC is expected to participate in working meetings and to produce the deliverables as defined by STC.

NEW/REVISED MATERIAL EFFECTIVE DATE: JULY 6, 2009

IMPLEMENTATION DATE: September 29, 2009

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.

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:

SECTION A: For Fiscal Intermediaries and Carriers: N/A

SECTION B: 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

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

Attachment – One-Time Notification

Pub. 100-20 Transmittal: 602 Date: November 27, 2009 Change Request: 6600

Transmittal 560, dated September 18, 2009, is being rescinded and replaced by Transmittal 602, dated November 27, 2009. The change in the attachment updates instructions to MACs on the development of the Certification Test Package. All other material remains the same.

SUBJECT: HIPAA 5010 Activity – Medicare Administrative Contractor (MAC) Certification Test Package Development

EFFECTIVE DATE: JULY 6, 2009

IMPLEMENTATION DATE: SEPTEMBER 29, 2009

I. GENERAL INFORMATION

A. Background: The certification test (CT) package will be used to ensure that MACs have implemented 5010 changes and other CMS required EDI enhancements as CMS has instructed. Participating MACs will team with the single test contractor (STC) to prepare the test scenarios, use cases and data files that constitute the CT. This change request (CR) will capture the level of effort (LOE) estimate for MAC participation in development of the CT package. The STC has determined the distribution of tasks and defined the deliverable specifications. The MAC is expected to participate in working meetings and to produce the deliverables as defined by STC.

This CR is directed to Part A & B Medicare Administrative Contractors (A/B MACs) in Jurisdictions 1, 3, 4, 5, 10, 13, and 14, as well as the DME MAC's common electronic data interchange (CEDI) contractor.

Participation requires an existing EDI COTS translator to be updated for 5010; capable of handling the 5010 suite of transactions as well as other ASC X12 error handling transactions (i.e., TA1, 999, 277CA) and claims attachments.

The CEDI was engaged in the development of use/test cases for NCPDP transactions in FY 2009. As the current activity to develop a CT package is an extension of CEDI's previous work, their work products will be required to be updated and aligned with this current effort.

Each participating MAC will base their LOE estimates on specific assignments that will be provided by the STC for each transaction. The STC will assign each MAC a group of lines from the edits spreadsheets for the 837I, 837P, 276/277 transactions. Use case development will be based on respective transaction data elements which are included in the assigned lines. Test cases will be based on each possible 5010 value for each data element; addressing both accept and reject actions for each 5010 value. The number of test cases will exceed the number of use cases for those data elements having multiple 5010 values. For the 835, TA1, 999, and 277CA transactions, use and test cases will be developed using a similar methodology using the transaction flat files in place of edits spreadsheets.

The MACs are instructed to refer to the attached document for STC provided preliminary MAC assignments for use/test case development. For further direction please contact the STC at STC.Admin@palmettogba.com.

All estimates are due in 10 (calendar) days from Issuance.

E-mail your estimates to Amisha Pandya at amisha.pandya@cms.hhs.gov with "Estimate for CMS Certification Test Package" in the subject line.

Estimates for this CR should include a breakdown as part of the LOE response, utilizing the following table to be included in the "Estimate-Specific Comments" portion of the LOE template, to follow applicable phases of the CMS Integrated IT Investment & System Life Cycle (ILC).

Investment Lifecycle Phase	Total Hours	Total Cost
Pre-Implementation - CR Review		
only*		
Analysis Phase		
Design Phase		
Development Phase		

^{*} Not covered by 5010 project funding

B. Policy: Health Insurance Reform: Modifications to the Health Insurance Portability and Accountability Act (HIPAA): Final Rules published in the Federal Register on January 16, 2009 by the Department of Health and Human Services 45 CFR Part 162.

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement

Number	Requirement	Responsibility									
		A	D	F	C	R			Syste		OTHER
		B	M E	I	A R	H H	F	Maint M	ainers V	C	
					R	I	I	C	M	W	
		M A	M A		I E		S	S	S	F	
		C	C		R		S				
6600.1	Participating MACs and CEDI shall provide LOEs (hours	X									CEDI
	and costs) for the design and development of a 5010/D.0										
	certification test package for each of the following phases:										
	1. Design										
	2. Development										
6600.2	CEDI shall provide an additional LOE to update previously										CEDI
	developed use cases for NCPDP and align with the										
	certification test package development activity.										
6600.3	Participating MACs and CEDI shall produce use cases as	X									CEDI
	defined by STC.										
6600.4	Participating MACs and CEDI shall produce test scenarios	X									CEDI
	as defined by STC.										
6600.5	Participating MACs and CEDI shall produce test data files	X									CEDI
	as defined by STC.										

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility									
		Α	D	F	C	R	Sł	nared-	Syste	m	OTHER
		/	M	I	A	Н]	Maint	ainers		
		В	Е		R	Н	F	M	V	C	
					R	I	I	С	M	W	
		M	M		I		S	S	S	F	
		Α	Α		Е		S				
		C	C		R						

Number	Requirement	Re	Responsibility								
		Α	D	F	С	R	Sl	nared-	Syste	m	OTHER
		/	M	I	Α	Н]	Maint	ainers		
		В	Е		R	Н	F	M	V	С	
					R	I	I	C	M	W	
		M	M		I		S	S	S	F	
		Α	Α		Е		S				
		C	C		R						
	None										

IV. SUPPORTING INFORMATION

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

X-Ref	Recommendations or other supporting information:
Requirement	
Number	
	None

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Amisha Pandya, (410) 786-0690, amisha.pandya@cms.hhs.gov Michael Cabral, (410) 786-6168, michael.cabral@cms.hhs.gov

Post-Implementation Contact(s): Amisha Pandya, (410) 786-0690, amisha.pandya@cms.hhs.gov Michael Cabral, (410) 786-6168, michael.cabral@cms.hhs.gov

VI. FUNDING

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

Section B: For Medicare Administrative Contractors (MACs), include the following statement:

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.

Attachment

[&]quot;Should" denotes a recommendation.

STC 5010/D.0 Use/Test Case Development Project

Project Management Office

Document Version: 1.2
Effective Date: October 2009



USE CASE / TEST CASE INSTRUCTION GUIDE

Document Control

This document is managed under version control in the project repository.

Document Revision History

Date	Version H	Author(s)	Description (include references to other documents that initiated the change)
07/10/2009	1.0	Becky Able, Project Lead	Initial Version
09/10/2009	1.1	Becky Able, Project Lead	1.1 Added ICD-10 information
			1.2 Added ICD-10 information
			3.0 Changed 2410 enumeration from J14 to J13
			4.1 Added explanation for number of Use Cases and combine the "accept" with flat file mapping.
			4.2 Changed template to Macro
			4.4 Added flat file mapping to "A" Accept and "S" Edit
			5.2 Added ICD-10 to Test Case Assumptions
			6.2 Added flat file mapping to Test Data Assumptions
			6.3 Added SSN=XXXXXXXXXX to Test Data Preparation
			7.3 Updated timeframes based on Change Request 6600
			Appendix A Use/Test Case Template changed to Macro for spell check and
			expanded cells
10/21/2009	1.2	Becky Able, Project Lead	3.0 Deleted 270/271 transactions from Assignments
			4.4.1 Changed Use Case Template and description.
			4.2.2 Added NEW Use Case Template and description
			4.3.3 Changed Use Case Template Defined Heading
			4.4.3 Added 277 Transaction with value of "2".
			4.4.4 Added MODIFIED Use Case Template
			4.4.5 Added DELETE Use Case Template
			5.5.1 Changed Test Case Worksheet Outline description
			5.5.2 Added NEW Test Case Worksheet
			5.5.3 Changed heading to Test Case Template Defined
			5.5.4 Added MODIFIED Test Case Template and description
			5.5.5 Added DELETE Test Case Template and description
			6.5 Corrected Institutional 837I claim example to reflect Errata.
			Appendix B Weekly Reporting Requirements

Document Approvals

All parties below agree that this document represents the collective best understanding of the guidelines for this project, agree to abide by the terms and conditions, and pledge full commitment and support to the project. These guidelines will be updated as appropriate throughout the life of the project. The relevant stakeholders will be advised of changes via email.

Team Member	Acceptance Type *	Date
Becky Able, <i>Project Lead;</i> Lynn Broadwater, <i>Program Manager;</i> Shannon Ross, <i>Program Manager;</i> Cynthia Lucas, <i>Program Manager;</i> Ann Marie Olano, <i>Program Manager;</i> Tim Pearson, <i>EDI/Systems Lead</i>	PMO Workgroup Approval Meeting	7/29/09

^{*}Acceptance Types: EMAIL - reference email location; FAX or OTHER - reference location.

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1.0 Introduction

1.1 Overview

CMS is working toward implementation of the next version of HIPAA transactions, often referred to as Version 5010/D.0. The A/B MACs will participate in the Testing Phase of this project. This project will address 5010/D.0 changes only. Changes for ICD-10 are not part of this project.

The Certification Test (CT) Package will be used to ensure that MACs have implemented 5010 changes and other CMS required EDI enhancements as CMS has instructed. Participating MACs will team with the Single Test Contractor (STC) to prepare the use cases, test cases, and corresponding data files which constitute the CT. The STC has determined the distribution of tasks and defined the deliverable specifications.

When the ASC X12 5010/NCPDP D.0 transactions are ready for implementation, all A/B MACs will perform certification testing using the CT, and produce reports based on the test results. This testing and reporting will be covered in a later Task Order by CMS.

A use case is defined as a goal-oriented set of interactions between A/B MACs and CEDI and the system under consideration. CMS selected A/B MACs and CEDI are actors outside the system interacting with the system. In the first-round, A/B MACs and CEDI (actors) have a goal of giving assistance to the system by creating use cases/test cases which will determine certification of the system resulting in a test deck of claims. In the second-round, all A/B MACs and CEDI (secondary actors) are those requiring the assistance of the system to determine their certification for EDI 5010 by using the already certified test deck.

A use case is set up by the A/B MACs and CEDI with a particular goal in mind, and completes successfully when the goal is satisfied; in this case the goal is the certification of EDI 5010 transactions. It describes the sequence of interactions between the A/B MACs and CEDI and the system necessary to deliver the service which satisfies the goal. It also includes possible variables which may also satisfy the goal, as well as sequences leading to failure to complete the service because of exceptional behavior, error handling, etc. The system is treated as a "black box", and the interactions with system, including system response, are as perceived from outside the systems. Thus, a use case captures who (A/B MACs and CEDI) does what (test case/use case) with the system, for what purpose (goal) without dealing with system internals.

A complete set of use cases specifies the ways to use the system and the test deck, and therefore defines all behavior required of the system. Use cases should not be confused with the features of the system under consideration. A use case may be related to one or more features, and a feature may be related to one or more use cases.

Generally, use case steps are written in an easy-to-understand structured narrative using the vocabulary of the domain. This is engaging for users who can easily follow and validate the use cases, and the accessibility encourages users to be actively involved in verifying the requirements. Test cases are then used to verify the requirements have been met.

1.2 Purpose / Scope / Objectives

The purpose of this document is to define the procedures for the Certification Test (CT) package development activities. The CT package will consist of use cases, test cases and the data files to support the test cases. The intent of the CT package is to ensure the A/B MACs and CEDI implement the 5010 changes in their front end systems so they execute as a single piece of software with limited exceptions. This project will address 5010/D.0 changes only. Changes for ICD-10 are not part of this project.

A group of contractors has been selected by CMS to participate in development of the CT package. The STC is tasked with management of this development effort. Once all the A/B MACs/CEDI have completed their development and submission of assigned use case / test case / test data to the STC, the STC will combine all the information into a comprehensive package. The CT package then will be distributed to all the Medicare Administrative Contractors to perform their own translator testing.

As the STC begins receiving the use cases / test cases and data files, they will review the template format for compatibility into the Dynamic Object Oriented Requirements System (DOORS) where the information will be loaded and stored. Contractors assigned responsibility to develop use case, test cases, and test data for the test bed will be responsible for the validity of the expected results.

The STC will determine the <u>minimum</u> number of test cases by referring to the 5010 Edits Spreadsheets and counting the available values. This number will be discussed with CMS and the A/B MACs/CEDI to achieve a goal with which to measure progress throughout the development of the use cases and test cases.

CMS expects each 5010 Value and Disposition/Error code to be tested for acceptance and rejection as applicable for inbound transactions. In addition, valid claims covering regular claim submission and those in progress need to be tested thoroughly through the Standard System, although Standard System testing is not part of this project. Use of the Common Edit Module (CEM) will be part of this project in order to utilize the 277CA reject and accept status.

The Certification Test will assure each MAC has implemented the 5010 transactions consistently and is in compliance with the regulation and Technical Report 3 (TR3). Successful execution of the certification test will demonstrate accepted and rejected transactions.

1.3 Contact Information

CMS					
Christine Stahlecker	410-786-6405				
Whitney Korangkool	410-786-0551				
Michael Cabral	410-786-6168				
Mark Matthews	410-786-0458				
Gary Beatty	715-574-9474				
ST	С				
Becky Able	803-763-8473				
Tim Pearson	803-763-1123				
Kim Oswald	803-763-1144				
E-mail to: STC.Admin@PalmettoG	BA.com				

2.0 Schedule



3.0 Assignments

A/B MACs /	CEDI Use Case	/ Test Case Assignments*				
Group	Transaction	Loop/Segment				
J1	8371	ISA/IEA, GS/GE, ST/SE, and BHT through 2300 CN1 - Contract Information				
	837P	ISA/IEA, GS/GE, ST/SE, and BHT through 2300 DTP - Data-Initial Treatment				
J3	8371	2300 HI Treatment Code Information though 2330A NM1 - Other Subscriber Name				
	837P	2330C REF - Other Payer Referring Provider Secondary Identifier through 2410 LIN - Drug Identification				
J4	835	Professional and Institutional				
J5 837I		2300 AMT - Patient Estimated Amount Due through 2300 HI - Principal Procedure Information				
	837P	2300 DTP - Date - Date Last Seen through 2300 HI - Condition Information				
J10	276/277	276/277				
J13	8371	2330A N3 - Other Subscriber Address through 2430 AMT - remaining Patient Liability				
	837P	2410 CTP - Drug Pricing through 2440 FRM – Supporting Documentation				
J14	8371	2300 HI Other Procedure Information through 2300 HI - Condition Information				
	837P	2300 HCP Claim Pricing/Re-pricing Information through 2330C NM1 - Other Payer Referring Provider				
CEDI (DME MAC Front-end Contractor)	837P & NCPDP	The DME MAC common front end contractor will write use and test cases for the DME proposed 5010 edits (from the edit spreadsheet), where edit criteria differs from Part-B. In addition, they will write all NCPDP use and test cases.				

Due to the size of the 2300 and 2410 loops, the writing assignments for the 2300 loop will be assigned to three A/B MACs and for the 2410 two A/B MACs. As such, there will be an alternate enumeration of use cases so those A/B MACs can submit there test cases and data files to the STC as they complete part of their total assignment.

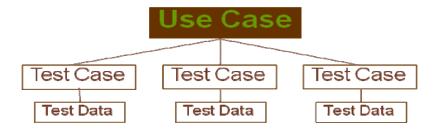
The sequential number or letter of the alphabet will change when the A/B MACs submit their files to the STC. For example, the first submission for J1 would be 2300x1 and the second submission for J1 would be 2300x2.

The enumeration should be as follows:

- For 2300 Loop
 - J1 should use a sequential number "1" through "9" after the first "x" in the Use Case number such as 2300x1 to send test cases as they are completed to the STC.
 - J5 should use the alphabet "A" through "L" after the first "x" such as 2300xA.
 - J14 should begin at the end of the alphabet in reverse "Z" through "M" after the first "X", such as 2300xZ. Use and Test Cases should be sent to the STC weekly. Use Z the first week, Y the second week and so on.
- For 2410 Loop
 - J3 should use the alphabet "A" through "Z" after the first "x" such as 2410xA.
 - J13 should use a sequential number "1" through "9" after the first "x" in the Use Case number, such as 2300x1.

4.0 Use Case Instructions

4.1 Definition



As an assigned A/B MAC, you are to develop use cases for each loop (where loop is applicable) according to the assignment table above. In addition, the use case represents the type of response expected by each of the test cases within the use case. Following the 5010 Edit Spreadsheets as a guide, for each transaction you are assigned you will develop use cases for each loop. In most cases, each loop should have one "accept (in process/flat file mapping)" use case and one "reject" use case. The "reject loop" use case will contain only one test case for the rejection or first negative test of the entire loop. Depending on the type of edit to be received, additional use cases may be needed. For example, each loop will have one 999 use case with multiple test cases, will have one accepted ("A") use case for "good clean" claims in process and flat file mapping, and may have one 277CA use case with multiple test cases. There may be a necessity to have more than one data file per use case if there are elements which will result in a structural error by the translator. In those cases, the assignee would have multiple data files per use case.

For NCPDP, each segment should have one "accept (in process/flat file mapping)" use case, one "reject" use case, and one flat file mapping use case.

4.2 Development of a Use Case

All use cases must be documented on the Use/Test Case template provided in the following file: STC 5010 UCTC MACRO V1.0.xls. Each use case and corresponding test cases will be saved in one Excel spreadsheet. The use case is documented on the first workbook (or tab) of the spreadsheet with all associated test cases on the following workbook (or second tab) of the spreadsheet. Refer to Section 4.4 for the example in the Use Case Template and Instructions section for the layout and required fields.

4.3 Use Case Identifier

A Use Case Identifier is needed to maintain traceability between the use case, the test cases and the data file. This information will be used to track results and help identify all related components when modifications are required to the use case, test cases or data file.

Each Use Case Identifier will be comprised of the Transaction Identifier, Accept/Reject Identifier, the Edit Identifier, and the Loop Identifier. This information will go on the Use/Test Case Template and is documented in the Use Case Template Defined section.

The Use Case Identifier should be placed in the ST02 Transaction Set Control Number of the test case data files. Refer to the Test Data Instructions section for further information on data file preparation.

For NCPDP, the Use Case Identifier should be placed in the 880-K5 Transaction Reference Number field.

The following table illustrates Use Cases values.

Transaction	Accept/Reject	Edit	Loop	Full Use Case ID
I	R	А	XXXXXX	IRAxxxxx
I	R	9	xxxxxx	IR9xxxxxx
I	Α	9	xxxxxx	IA9xxxxxx
Р	R	9	1000Ax	PR91000Ax
Р	Α	7	1000Bx	PA71000Bx
Р	R	7	1000Bx	PR71000Bx
Р	R	9	1000Bx	PR91000Bx
Р	R	9	2010AA	PR92010AA
Р	А	S	2210Dx	PAS2210Dx
Р	А	S	2300x1	PAS2300x1

Since TA1, GS/GE, ST/SE and BHT do not have loops at the high level; these transactions could not utilize a loop number for use case purposes but would be gap filled with lowercase "xxxxxxx".

4.4 Use Case Template and Instructions

			Use Ca	se ID			
A/B MAC ID/CEDI	Use Case ID	Transaction	Accept/ Reject	Edit	Loop#	Narrative	Comments
J1	IRAxxxxxx	-	R	A	xxxxxx	Use Case to verify that a TA1 transaction is generated when envelope error occurs	
J1	PR91000Bx	Р	R	9	1000Bx	Use Case to verify that a 999 transaction is generated when invalid segments or data elements occur within the 1000B loop	

4.4.1 Use Case Template

<u>USE CASE WORKSHEETS:</u> (worksheets 1, 2 and 3) Please note on the new <u>Use Case worksheet</u>: Only enter data in columns A & C-H. Column B (USE CASE ID) contains a formula which will be generated based on the data you provide for Transaction, Accept/Reject, Edit, and Loop. Only one line/row should be on this tab.

4.4.2 NEW Use Case Template

This worksheet is <u>only</u> used for a <u>new</u> Use Case that has <u>not</u> already been submitted. Please do not submit any Use Case that has already been submitted on this worksheet. Only enter data in column A & C-H. Column B (Use Case ID) contains a formula which will be generated based on the data you provide for Transaction, Accept/Reject, Edit, and Loop. Only one line/row should be on this tab.

4.4.3 Use Case Template Defined

A/B MAC ID/ CEDI (Required)

Used for DOORS import to identify the A/B MAC/CEDI

EXAMPLE: J1
EXAMPLE: CEDI

Use Case ID (Required, by formula-DO NOT INPUT)

The Use Case ID identifies the use case and is used during the DOORS import process to link the use cases and test cases together. This cell will automatically be populated when values are entered in columns C, D, E and F with no dashes or symbols.

EXAMPLE: PA72010A

Transaction (Required)

1 byte transaction, valid values are:

I = Institutional P = Professional

D=DME only (CEDI)

N=NCPDP (CEDI)

5=835

6 = 276

7 = 277CA

2 = 277

Accept/Reject/Reject Loop/Flat File (Required)

1 byte accepts or rejects use case results, valid values are:

A = Accept - In process/Flat File mapping

L = Reject Loop*

R = Reject

* The "reject loop" use case will contain only one test case. This test case will be for the first negative test of a loop.

Edit (Required)

1 byte edit, valid values are:

A = TA1 (reject envelop ISA, IEA)

9 = 999

7 = 277CA

5 = 835

S = Claim in Process/Flat File mapping (No errors on the claim – passed to standard system)

T = Transaction Response (CEDI NCPDP only)

Loop # (6 bytes required)

6 byte loop number, any blank byte shall be filled with lowercase "x"

EXAMPLE: 1000Bx EXAMPLE: xxxxxx

Due to the size of the 2300 loop, the writing assignments will be assigned to three A/B MACs. As such, there will be an alternate enumeration of use cases so those A/B MACs can submit there test cases and data files to the STC as they complete part of their total assignment. The enumeration will be as follows:

- J1 should use a sequential number "1" through "9" after the first "x" in the Use Case number such as 2300x1 to send test cases as they are completed to the STC.
- J5 should use the alphabet "A" through "L" after the first "x" such as 2300xA.
- J14 should begin at the end of the alphabet in reverse "Z" through "M" after the first "X" such as 2300xZ.

Narrative (Required)

Purpose of the Use Case:

EXAMPLE: Use Case to verify that a 999 transaction is generated when invalid segments or data elements occur within the 1000B loop

Comments (Not Required)

Any necessary comments from the testing group or CMS, explanation of any changes to the use case in DOORS. Not a required field, may be blank

4.4.4 MODIFIED Use Case Template

This worksheet is <u>only</u> used for a Use Case that has already been submitted, but needs to be <u>modified</u>. Be sure to key the Use Case ID to identify which case needs to be modified. Key the modified data in **red** font. All other data on the line should be in **black** font.

4.4.5 DELETE Use Case Template

This worksheet is only used for a Use Case that has already been submitted, but needs to be completely deleted. Be sure to key the Use Case ID to identify which case needs to be deleted.

4.5 Special Use Case Instructions for CEDI

837P for CEDI (DME MACs)

The STC has determined there are approximately 550 837P test cases needed by CEDI for DME MAC processing. These were identified by using the 837P Edits spreadsheet for differences between Part-B and DME processing.

In order for CEDI to use the Part-B claims deck, CEDI should write Use Cases based on the Loops where they have 5010 Edits different from those used by the Part-B systems. The CEDI Use Case will be different from those of Part-B. CEDI will use "D" as the first letter of their Use Case rather than "P". All other elements comprising the Use Case will be the same.

DA91000Axx

DR92010BBx.

835 for CEDI (DME MACs)

When the 835 Use Case/Test Case is complete, CEDI must review these test cases to ensure all elements have been covered and CEDI must add Use Case/Test Case for any 835 elements for DME MACs only. Any items identified as unique to DME would be utilized by CEDI as a Use Case again beginning with "D".

5.0 Test Case Instructions

5.1 Definition



A Test Case describes each task that will insure 5010 data elements, qualifiers, and data values conform to the TR3.

5.2 Test Case Assumptions

Contractors are expected to validate their test cases.

No test cases will be written for the proposed ICD-10 changes.

5.3 Development of a Test Case

Test cases are to be written utilizing the 837I and 837P edits spreadsheets, the 276/277 edits spreadsheet and 835 flat file as a guide. Other transactions will be addressed at a later date such as 270/271 and the COBC flat file. Each valid value and each invalid value and edit as listed on the 5010 Edits Spreadsheets should have associated test cases developed and linked to a use case. You must develop all necessary test cases to ensure that the 5010 data elements, qualifiers and data values conform to the TR3, including flat file mapping. In addition to creating the test cases, you are expected to create supporting data files for all use case / test cases.

5.4 Test Case Identifier

5.4.1 Test Case Identifier

The Test Case Identifier will be comprised of the Use Case Identifier, Element Identifier, and Test Case Sequence Number separated by periods. This field is automatically populated by the Use Case/Test Case template provided.

The Test Case Sequence Number should start at 0001 (001 for NCPDP only) each time the element identifier changes and sequentially increase by 1 with each new test case. As test cases are written for a particular element ID the first test case begins with 0001(001 for NCPDP).

When creating data files, Test Case Identifiers must be placed in the BHT03 Reference ID for the envelope and provider level test cases and in the CLM01 Patient Control Number for claim level test cases. This is necessary because the BHT03 Reference ID is not on the claim throughout the adjudication process; therefore, the Test Case Identifier must be placed in the CLM01 Patient Control Number as well for testing 835 and COBC files. Refer to the Test Data Instructions section for further information on data file preparation.

For NCPDP, Test Case Field ID must be placed in the 104-A4 Processor Control Number field positions 1 through 7 and the Test Case Sequence Number in 104-A4 Processor Control Number field positions 8 through 10.

5.4.2 Envelope and Provider Level Identifiers

The Envelope and Provider Level Test Case Identifier examples are provided below.

Use Case Identifier	Element Identifier	Test Case Sequence Number	Test Case Identifier		
IRAxxxxxx	ISA	0001	IRAxxxxxx.ISA.0001		
IRAxxxxxx	ISA	0002	IRAxxxxxx.ISA.0002		
IRAxxxxxx	ISA01	0001	IRAxxxxxx.ISA01.0001		
IR91000Bx	NM101	0001	IR91000Bx.NM101.0001		
PA92010AA	NM1	0001	PA92010AA.NM1.0001		
PA92010AA	NM101	0001	PA92010AA.NM101.0001		

5.4.3 Claim Level Identifiers

The Claim Level Test Case Identifier examples are provided below.

The following is an example of Claim Level Test Case Identifiers.

Use Case Identifier	Element Identifier	Test Case Sequence Number	Test Case Identifier
PA92300x1	CLM05-1	0001	PA92300x1.CLM05-1.0001
PR92300x1	CLM05-1	0001	PR92300x1.CLM05-1.0001
PR92300x1	CLM05-1	0002	PR92300x1.CLM05-1.0002
PA92300x2	CLM11-5	0001	PA92300x2.CLM11-5.0001
PR92300x2	CLM11-5	0001	PR92300x2.CLM11-5.0001

5.5 Test Case Template and Instructions

	Test Case ID										
Test Case ID	Use Case Id	Eleme nt ID	Seq#	Bene Info	Prov Info	Intercase Dependencies	Prerequisites for set-up	Purpose of Test Case	Steps to Execute	Expected Results	Comments
IRAxxxxxx.ISA01.0001	IRAxxxxx	ISA01	0001					To insure invalid value in ISA01 generates a TA1 rejection	Enter value of "01" in ISA01	TA105:010 invalid authorization information qualifier value	
PR91000Bx.NM101.0001	PR91000Bx	NM101	0001					To insure invalid value in NM101 generates a 999 rejection	Enter value of "01" in NM01 of 1000B Loop	IK403 = 7: "Invalid Code Value"	

5.5.1 Test Case Template

TEST CASE WORKSHEETS: (Worksheets 4, 5 and 6) Please Note: Only enter data in columns B-L Column A (Test Case ID) contains a formula which will be generated based on the data you provide for Use Case ID, Element ID, and Sequence #. The Use Case ID will be shown exactly as it is on the NEW Use Case worksheet on each row in column B. The row/line count is unlimited on this tab.

5.5.2 NEW Test Case Template

This worksheet is only used for new Test Cases that have not already been submitted. Please do not resubmit any test cases that have already been submitted. Only enter data in columns C-L. Column A (Test Case ID) contains a formula which will be generated based on the data you provide for Use Case ID, Element ID, and Sequence #. Column B contains the Use Case ID number exactly as it is on the NEW Use Case worksheet.

5.5.3 Test Case Template Defined

Test Case ID (No Input Required, by formula)

Test Case ID used to identify the test case. Automatically populated by a formula to concatenate the Use Case Id, Element ID and Seq # (columns B, C and D) separated by periods (.).

EXAMPLE: IRAxxxxxx.ISA01.0001 EXAMPLE: PR91000Bx.NM101.0001

Use Case ID (No Input Required, by formula)

Use Case ID to identify the use case. Cut the Use Case ID from the Use Case Worksheet and place it in this field for all test cases on this worksheet.

Element ID (Required)

Element identifier. Maximum is 7 bytes. FXAMPI F ISA01

Seq # (Required) (Test Case Sequence Number)

A/B MACs - Sequential number beginning with 0001, next sequential number is used until the element identifier changes, then start back with 0001.

CEDI (NCPDP only) Sequential number beginning with 001, next sequential number is used until the element identifier changes, then start back with 001.

Bene Info (Not Required)

Information if a specific beneficiary is needed to receive the expected results. Not a required field, may be blank.

EXAMPLE: Male >age 50

Prov Info (Not Required)

Information if a specific provider is needed to receive the expected results. Not a required field, may be blank.

EXAMPLE: HOSPICE Provider

Intercase Dependencies (Not Required)

Other processing instructions that need to be on the same test claim in order to receive the expected results. Not a required field, may be blank

Prerequisites for set-up (Not Required)

Other processing instructions that need to be performed prior to the test claim processing in order to receive the expected results. Not a required field; may be blank.

Purpose of Test Case (Required)

The actual test case full description should be entered here.

EXAMPLE: To insure invalid value in ISA01 generates a TA1 rejection

Steps to Execute (Required)

List the steps that must be completed in order to complete the test case. The values listed in the 5010 Edits Spreadsheet should be utilized in the steps to execute.

EXAMPLE: Enter value of "01" in ISA01.

Expected Results (Required)

Expected results of the test case when performed. This should come from the 5010 Edits Spreadsheet. EXAMPLE: TA105:010 invalid authorization information qualifier value is received.

Comments (Not Required)

Any necessary comments from the testing group or CMS, explanation of any changes to the test case in DOORS. Not a required field, may be blank

5.5.4 MODIFIED Test Case Template

This worksheet is only used for a Test Case that has already been submitted, but need to be modified. Be sure to key the Use Case ID and Test Case ID to identify which test case needs to be modified. Key the modified data in **red** font. All other data on the line should be in **black** font.

5.5.5 DELETE Test Case Template

This worksheet is only used for a Test Case that has already been submitted, but needs to be completely deleted. Be sure to key the Use Case ID and Test Case ID to identify the Test Case that needs to be deleted.

6.0 Test Data Instructions

6.1 Test Data Definition

Contractors are expected to deliver validated test data files to support all Use Cases / Test Cases that they have been assigned. These test files will either be in the ANSI 5010 format for inbound files such as 837I or will be in the associated Medicare flat file format for outbound files such as 835. These data files should be sent to the STC at the same time as the corresponding completed Use Case/Test Case worksheet is delivered, if possible. The data on these files should not contain any PHI and should be modified following the instructions below.

6.2 Test Data Assumptions

- One ISA-IEA envelop is sent for each Use Case. There may be a necessity to have more than one data file per use case if there are elements which will result in a structural error by the translator. In those cases, the assignee would have multiple data files per use case. These data files should contain complete enveloping.
- All test cases for a use case are on the same data file.
- Data files for "A" accept in process use cases will be "clean" and will not cause any other edits. This encompasses the Flat File mapping as well.
- Data files for an "R" reject use case will have no errors/edits other than those specifically documented in the associated test cases.
- Contractors are expected to validate that the test data files they create support the assigned use and test cases.

6.3 Test Data Preparation

Data files are to be created at your site to support the use case and all of the test cases associated with the use case.

The Use Case Identifier from the Use /Test Case Template should be placed in the ST02 Transaction Set Control Number of the test case data file.

The Test Case Identifier from the Use /Test Case Template must be placed in the BHT03 Reference ID for the envelope and provider level test cases and in the CLM01 Patient Control Number for claim level test cases.

As part of the creation of these supporting files, you must create the files using the following "wild cards" in place of the PHI before sending the data file to the STC. When the A/B MACs and CEDI receive the data files for Certification, they will then be expected to replace the "wild cards" with data needed to process the files through their translators to achieve the expected results.

Submitter ID SSSSS Payor ID PPPP

6.4 Naming Conventions for Data Files

Each completed Use Case / Test Case worksheet should be named with the A/B Mac Id (or CEDI) of the contractor completing the work followed by the Use Case ID.

Example: J1PR91000Bx

In addition to the completed Use Case / Test Case worksheet, an associated data file should be prepared. The file should be generic in nature and changed to not include any PHI. The name of the data file should be the name of the associated Use Case / Test Case worksheet followed by a "D". Please see instructions in the Test Data Definition section for further instructions on building test data files. Should it be determined that more than one data file is needed for a use case, then the data files should include a sequence number as part of the file name.

Example: J1PR91000BxD or J1PR91000Bx1D

6.5 Test Use Case/Test Case/Data Examples

Institutional 837I Claim

Sample Data File

ISA*00* *00* *28*SSSSSS *28*ppppp *090721*1213*^*00501*000000008*0*T*>~GS*HC*SSSSSS*01001*20090721*1213*8 001*X*005010X223A1~ST*837*00000001*005010X223A1~BHT*0019*00*000008*200 90721*1213*CH~NM1*41*2*TEST SUBMITTER*****46*SSSSSS-PER*IC*CONTACT NAME*TE*8005551111*FX*8005551111~NM1*40*2*J1 MEDICARE 'A' - CA, HI, NV****46*PPPPP~HL*1**20*1~NM1*85*2*ABBEY MEMORIAL MEDICAL ANGELES*CA*900332414~REF*EI*EEEEEEEEEEC~PER*IC*ABELE*TE*8005551112*EM*PRO VIDER@TEST.COM~HL*2*1*22*0~SBR*P*18**UNKNOWN*****MA~NM1*IL*1*TEST*PART* A***MI*<mark>111111111F</mark>~N3*123 BROAD ST~N4*COLUMBIA*GA*30303~DMG*D8*19000801*F~NM1*PR*2*J1 MEDICARE 'A' -CA, HI, NV****PI*PPPPP~N4*PAYER CITY NAME*SC*29203~CLM*PARTA*4500***13>A>1**A*Y*Y~DTP*434*RD8*20090701-20090701~CL1**1*01~HI*BK>5758~NM1*71*1*TEST*DR****XX*<mark>AAAAAAAAA</mark>~LX*1~SV 2*0960**4500*UN*0~DTP*472*D8*20090701~SE*28*000000001~GE*1*8001~IEA*1*0 0000008~

Professional 837P Claim

Sample Data File

ISA>00>1234567890>00>1234567890>28>SSSSSS >28>PPPPP >090721>1700>^>00501>90000001>0>P>+~GS>HC>SSSSSS>01001>20090721>1700>7 00000001>X>005010X222~ST>837>00000001>005010X222~BHT>0019>00>0123>2009 0721>1630>CH~NM1>41>2>TEST SUBMITTER>>>>46>SSSSSS~PER>IC>HIPAA HELP DESK>TE>3058881234>FX>3058881235~NM1>40>2>J1 MEDICARE 'B' - CA, HI, NV>>>>46>PPPPP~HL>1>>20>1~NM1>85>2>ABBEY MEMORIAL MEDICAL ANGELES>CA>900332414~REF>EI>EEEEEEEEEEC~PER>IC>ABELE>TE>8005551112>EM>PRO VIDER@TEST.COM~HL>2>1>22>0~SBR>P>18>>UNKNOWN>>>>>MB~NM1>IL>1>TEST>PART> B>>JR.>MI>111111111F~N3>123 BROAD ST~N4>COLUMBIA>GA>30303~DMG>D8>19000801>M~NM1>PR>2>J1 MEDICARE 'B' -CA, HI, NV>>>>PI>PPPPP~N4>DETROIT>MI>482029876~CLM>PARTB>98.50>>>11+B+1>Y>A>Y> Y>P~HI>ABK+J020~NM1>82>1>KAHN>BEN>>>XX>NNNNNNNNNNNNNNNPE>PXC>203BF0100 Y~LX>1~SV1>HC+99201>65.00>UN>1>>>1~DTP>472>D8>20090701~REF>6R>1~LX>2~SV 1>HC+87880>33.50>UN>1>>>1~DTP>472>D8>20090701~REF>6R>2~SE>32>000000001~ GE>1>70000001~IEA>1>90000001~

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Sample Data File ISA>00>1234567890>00>1234567890>28>SSSSSS >28>PPPPP >090721>0900>^>00501>00000001>0>P>: GS>HR>SSSSSS>01001>20090721>0900>00000001>X>005010X212 ST>276>00000001>005010X212 BHT>0010>13>001234>20090721>0900 HL>1>>20>1 NM1>PR>2>J1 MEDICARE 'B' - CA, HI, NV>>>>PI>PPPPP HL>2>1>21>1 HL>3>2>19>1 HL>4>3>22>0 DMG>D8>19000801>M NM1>IL>1>TEST>PART>B>>JR.>MI>111111111F TRN>1>CS1526 REF>EJ>PARTB AMT>T3>98.50 DTP>472>D8>20090701 SE>16>000000001 GE>1>00000001 IEA>1>00000001

277

Resulting Data File

```
ISA>00>1234567890>00>1234567890>28>PPPPPP
                                           >28><mark>SSSSSS</mark>
>090721>0901>^>00501>00000001>0>P>:
GS>HN>SENDER>RECVR>20090721>0901>00000001>X>005010X212
ST>277>000000001>005010X212
BHT>0010>08>54>20090721>0901>DG
HL>1>>20>1
NM1>PR>2>J1 MEDICARE 'B' - CA, HI, NV>>>>PI>PPPPP
HL>2>1>21>1
HL>4>3>22>0
NM1>IL>1>TEST>PART>B>>JR.>MI>111111111F
TRN>2>CS1526
STC>A2:20>20090721>>98.50
REF>1K>AHL-1234
REF>EJ>PARTB
DTP>472>D8>20090701
SE>16>000000001
GE>1>00000001
IEA>1>00000001
```

835

```
Resulting Data File
ISA>00>1234567890>00>1234567890>28>SSSSSS
                                               >28>PPPPP
>090721>1700>^>00501>90000001>0>P>+
GS>HP>SSSSSS>01001>20090721>1700>700000001>X>005010X221
ST>835>000000001
BPR>C>68.65>C>ACH>CTX>01>1234567>DA>123-1234>1FED-
TAXID>>01>9876543>DA>9879876>20090721
TRN>1>9962>1FED-TAXID
N1>PR>J1 MEDICARE 'B' - CA, HI, NV
N3>1234 SECURITY WAY
N4>DETROIT>MI>482029876
PER>BL>FINANCE DEPT.>TE>8002221234
N3>9999A STEVE D SMITHY AVE
N4>LOS ANGELES>CA>900332414
CLP>PARTB>1>98.50>78.50>>MB>AHL-1234
NM1>QC>1>TEST>PART>B>>JR.>MI>111111111F
DTM>050>20090721
DTM>232>20090721
SVC>HC+99201>65.00>45.00
CAS>PI>42>20.00
REF>6R>1
SVC>HC+87880>33.50>33.50
REF>6R>2
SE>21>000000001
GE>1>700000001
```

7.0 Use Case / Test Case File Submission to the STC

7.1 Assumptions

IEA>1>90000001

- Contractors must use the Use/Test Case Template provided as an appendix of this
 document to record all of their use and test cases.
- Contractors should not alter the formula that has been pre-entered into the Use/Test
 Case Template. This formula will automatically calculate the use case id and test case
 ids.
- One Excel spreadsheet is developed for each use case and all associated test cases.
 There should be one tab with the use case with another tab for the associated test cases.
 Each test case under the second tab should be on one individual row.
- No blank rows should be left between test cases.
- Completed use case / test case worksheets are sent to the STC weekly.
- Contractors are expected to verify their own use cases and test cases.
- Contractors are expected to validate their test data files that they create to support assigned use and test cases.

7.2 Naming Conventions

Each completed Use Case / Test Case worksheet should be named with the A/B Mac Id (or CEDI) of the contractor completing the work followed by the Use Case ID.

Example: J1PR91000Bx

In addition to the completed Use Case / Test Case worksheet, an associated data file should be prepared. The file should be generic in nature and changed to not include any PHI. The name of the data file should be the name of the associated Use Case / Test Case worksheet followed by a "D". Please see instructions in the Test Data Definition section for further instructions on building test data files. Should it be determined that more than one data file is needed for a use case, then the data files should include a sequence number as part of the file name.

Example: J1PR91000BxD or J1PR91000Bx1D

7.3 Timeframes for sending to the STC

On a weekly basis you are expected to send completed Use Case / Test Case worksheets and associated data files to the STC via e-mail to STC.ADMIN@PalmettoGBA.com. The email should contain two attachments. One will be the Use Case / Test Case worksheet; the other should be the associated data file using the appropriate naming convention.

The STC will monitor the status of Use Case/Test Case delivery from the A/B MACs and CEDI and provide the ongoing results to CMS. In order to provide statistics to CMS the STC will be using the STC estimate of the minimum number of test cases needed. A/B MACs and CEDI are expected to meet the following goals.

September 2	5%	Use Case/Test Case
September 16	20%	Use Case/Test Case
September 30	35%	Use Case/Test Case
October 14	50%	Use Case/Test Case
October 28	65%	Use Case/Test Case
November 4	80%	Use Case/Test Case
November 18	95%	Use Case/Test Case
December 2	100%	Use Case/Test Case

8.0 Status Meetings

8.1 Use Case / Test Case / Test Data Development Status Calls: 7/09-12/09

When: Bi-Weekly on Wednesday's

Time: 11:00am EST

Conf #: 1-866-752-7170 / PC = 4798584
Facilitator: Becky Able, STC Project Lead
Stakeholders: CMS / STC / A/B MACs / CEDI

Purpose: Initially, the purpose of this bi-weekly call will be to define the use case and test case development activities that will be performed by the selected contractors. Once development activities have begun, this call will address any questions with the use case and test case development process. This call will continue through December 2009 and the frequency may change as time progresses depending on the situation.

8.2 Use Case / Test Case / Test Data Execution Status Calls:

1/10 - 10/10

When: Bi-Weekly on Wednesday's

Time: 11:00am EST

Conf #: 1-866-752-7170 / PC = 4798584
Facilitator: Becky Able, STC Project Lead
Stakeholders: CMS / STC / A/B MACs / CEDI

Purpose: Once the complete Certification Testing Package has been prepared, this call will be used to discuss contractor statuses and issues during the execution of the CT

Package. The timeframe for these calls will coincide with the Implementation/Certification Phase of the 5010 Project Schedule.

Appendix A – Use/Test Case Template

Appendix A is a Macro which has been added to allow spell check within the template while protecting embedded formulas.

When you open the Macro, you may receive a box asking if you want to enable Macros. If you want to use the spell check feature, you need to check "Enable Macros". To use the spell check feature, enter "Ctrl w" and the spell check box will pop up.

A file is provided as Appendix A for the Use Case / Test Case Macro as follows:

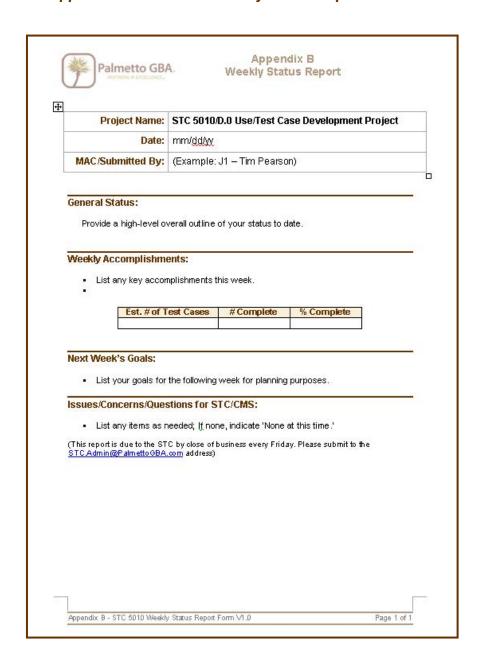
Appendix A - 5010 UCTC Macro.xls

Appendix B - Weekly Reporting Requirements

B.1 Weekly Status Report Form

A template is provided as Appendix B for weekly reporting to the STC throughout the Use Case and Test Case development and execution phases of the project as follows:

Appendix B - STC 5010 Weekly Status Report Form V1.0



B.1.1 Weekly Status Report Form Instructions

This report is due to the STC by close of business every Friday. Please submit to the STC.ADMIN@PalmettoGBA.com address. Filename should be your MAC jurisdiction number followed by a dash and the Friday submission date in the format CCYYMMDD.

Example: J1-20090717