

# One-Time Notification

## Table of Contents

Transmittals through Transmittal Number 2220, dated January 11, 2019, are included in this update. As new transmittals are issued, they will be identified on this page.

<b>FILE</b>	<b>COMM. DATE</b>	<b>SUBJECT/SUMMARY OF CHANGES</b>	<b>IMPL DATE</b>	<b>CR NUM</b>
<a href="#">R2220OTN</a>	01/11/2019	Direct Mailing Notification to MACs Regarding Addressing the Opioid Crisis	02/15/19	11069
<a href="#">R2219OTN</a>	01/11/2019	Shared System Enhancement 2018: Enhance Common Working File (CWF) Internal Testing Facility (ITF) Response Records	04/01/19	10974
<a href="#">R2218OTN</a>	01/04/2019	ViPS Medicare System (VMS) Prepayment Review File	04/01/19	10461
<a href="#">R2217OTN</a>	12/28/2018	Multi-Carrier System (MCS) Prepayment Review File	04/01/19	10460

<a href="#">R2216OTN</a>	12/28/2018	Clarification of Part B Recovery Audit Contractor (RAC) Appeals Case File Sharing Process	07/01/19	11037
<a href="#">R2215OTN</a>	12/28/2018	Analysis of the Combined Common Edits/Enhancements Module (CCEM) and MSSQL and Oracle Relational Data Base Management Systems	07/01/19	11050
<a href="#">R2214OTN</a>	12/14/18	Transitioning the Pricing, Data Analysis and Coding (PDAC) to the New Contractor	01/14/19	11071
<a href="#">R2213OTN</a>	12/14/18	Implementing the Revised Patient's Request for Medical Payment Form CMS-1490S, Version 01/18	01/07/19	10957
<a href="#">R2209OTN</a>	12/07/18	Analysis and Implementation for First Coast Service Options (FCSO) and Novitas for the CMS Enterprise Identity Management OKTA/Saviynt Migration	01/16/19	10791
<a href="#">R2208OTN</a>	11/30/18	Implementing the Insertion of a Sheet of Paper Promoting the Electronic Medicare Summary Notices (eMSNs) into Mailed Medicare Summary Notices (MSNs)	01/07/19	10910

<a href="#">R2206OTN</a>	11/21/18	Implementation of a Bundled Payment for Multi-Component Durable Medical Equipment (DME)	01/07/19	10854
<a href="#">R2204OTN</a>	11/14/18	Update to the Long Description for Spanish Records on The Procedure Descriptor Master File for all Adds and Updates That Were Not Loaded with Change Request (CR) 10286	01/07/19	10977
<a href="#">R2203OTN</a>	11/09/18	User CR: FISS to Add Location/Statuses to the 6H File Fix	01/07/19	10546
<a href="#">R2202OTN</a>	11/09/18	International Classification of Diseases, 10th Revision (ICD-10) and Other Coding Revisions to National Coverage Determination (NCDs)	04/01/19	11005
<a href="#">R2201OTN</a>	11/09/18	User CR: Fiscal Intermediary Shared System (FISS) - Implementation of the Molecular Diagnostic Services (MoIDX)	04/01/19	10760
<a href="#">R2200OTN</a>	11/09/18	International Classification of Diseases, Tenth Revision (ICD-10) and Other Coding Revisions to National Coverage Determinations (NCDs)	01/07/19	10859

<a href="#">R2199OTN</a>	11/09/18	Appeon PowerBuilder Upgrade Analysis Only	04/01/19	11041
<a href="#">R2198OTN</a>	11/09/18	Enhancing the Verification Process of Common Working File (CWF) Part A Provider Inquiries	04/01/19	10983
<a href="#">R2197OTN</a>	11/09/18	ViPS Medicare System (VMS) Prepayment Review File	04/01/19	10461
<a href="#">R2196OTN</a>	11/09/18	Analysis to Create a Standard Coded List of Document Types to be used by Review Contractors (RC) for Requesting Documentation in Pre-Pay and Post-Pay Additional Documentation Request (ADR) Letters (and/or Electronic Medical Documentation Requests (eMDR) via the Electronic Submission of Medical Documentation (esMD) System)	04/01/19	11001
<a href="#">R2195OTN</a>	11/09/18	Analysis to Discuss and Resolve the Challenges Around the Design of (Pre-/Post-Pay) Electronic Medical Documentation Requests (eMDR) via the Electronic Submission of Medical Documentation (esMD) System	04/01/19	11002

<a href="#">R2194OTN</a>	11/02/18	Medicare Cost Report E-Filing (MCR eF)	01/02/19	10611
<a href="#">R2193OTN</a>	11/02/18	Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Update	01/07/19	10838
<a href="#">R2192OTN</a>	11/02/18	Implementation of Healthcare Common Procedure Coding System (HCPCS) Code J3591 and Additional Changes for End Stage Renal Disease (ESRD) Claims	01/07/19	10851
<a href="#">R2191OTN</a>	11/02/18	Multi-Carrier System (MCS) Prepayment Review File	04/01/19	10460
<a href="#">R2190OTN</a>	11/02/18	Shared System Enhancement 2018: Improve Organization of the International Code of Diseases, Tenth Revision (ICD-10) File during Creation	04/01/19	11009
<a href="#">R2189OTN</a>	11/02/18	User CR: Update FISS Utility to Retain Original Claim Receipt Date	04/01/19	10903

<a href="#">R2188OTN</a>	11/02/18	Fiscal Intermediary Standard System (FISS) Prepayment Review Report	04/01/19	10414
<a href="#">R2187OTN</a>	11/02/18	Shared System Enhancement 2018: Rewrite Fiscal Intermediary Shared System (FISS) module FSSB6001, Common Working File (CWF) Unsolicited Response Function	04/01/19	11010
<a href="#">R2186OTN</a>	11/02/18	Shared System Enhancement 2018: Analysis to Minimize Data for Medicare Beneficiary Database (MBD) Extract	04/01/19	10975
<a href="#">R2185OTN</a>	11/02/18	User Change Request (CR): Multi-Carrier System (MCS) - Enhance System Control Facility (SCF) to Add Fraud Prevention System (FPS) Criteria	04/01/19	10680
<a href="#">R2183OTN</a>	11/02/18	Shared System Enhancement 2018: Move Authorized Reason Code Override Processing to FSSBSTUF	04/01/19	11011
<a href="#">R2182OTN</a>	11/02/18	User Change Request (CR): Multi-Carrier System (MCS) - Analysis to Enhance the Maximum Claim Counter Process for Edits and Audits	04/01/19	10655

<a href="#">R2181OTN</a>	11/02/18	User CR: ViPS Medicare System (VMS) Changes to Bypass Claim Edit 0192 on an Adjustment Claim when Payment was Suppressed on the Previous Adjustment	04/01/19	10724
<a href="#">R2180OTN</a>	11/02/18	FISS Integrated Outpatient Code Editor (IOCE) Claim and Return Buffer Interface Changes Related to new Contractor Line Level Bypass Updates	04/01/19	10988
<a href="#">R2179OTN</a>	11/02/18	User Change Request (CR): ViPS Medicare System (VMS) Changes to Edit Dispensing and Supply Fee Codes Allowed when Related Drug Codes are Denied in Batch	04/01/19	10580
<a href="#">R2178OTN</a>	11/02/18	Removal of the Provider Requirement for Reporting on an Institutional Claim a Value Code (VC) 05 - Professional Component-Split Implementation	04/01/19	10986
<a href="#">R2176OTN</a>	11/02/18	Revision of Skilled Nursing Facility (SNF) Consolidated Billing (CB) Edits for Ambulance Services Rendered to Beneficiaries in a Part A SNF Stay	04/01/19	10955
<a href="#">R2175OTN</a>	10/26/18	Shared System Enhancement 2018: Establish a HMBI Query/Response Log	04/01/19	11008

<a href="#">R2174OTN</a>	10/26/18	Correction to Common Working File (CWF) Informational Unsolicited Response (IUR) 7272 for Intervening Stay	04/01/19	10960
<a href="#">R2173OTN</a>	10/26/18	Shared System Enhancement 2018: Renovate 2029 Serial Date Processing – Analysis Only	04/01/19	10944
<a href="#">R2172OTN</a>	10/26/18	Shared System Enhancement 2018: Remove Obsolete VIPS Medicare System (VMS) logic Related to the ViPS Medicare Automated Parameter (VMAP) Carrier Parameter Table	04/01/19	10949
<a href="#">R2171OTN</a>	10/26/18	Analysis to Implement Changes to Regulations Allowing Inpatient Prospective Payment System (IPPS)-Excluded Hospitals to Operate IPPS-Excluded Units	04/01/19	10953
<a href="#">R2170OTN</a>	10/26/18	Analysis of the Combined Common Edits/Enhancements Module (CCEM) and Intelligent Data Stream (IDS) Reporting Software to Ensure Effective Operation Under Java Version 8	04/01/19	10993
<a href="#">R2168OTN</a>	10/26/18	Provider Enrollment Chain and Ownership System (PECOS) Data Source Change	01/01/19	10413



<a href="#">R2167OTN</a>	10/26/18	Decommissioning of the Client Letter Application within VIPS Medicare System (VMS)	04/01/19	10996
<a href="#">R2166OTN</a>	10/26/18	Shared System Enhancement 2018: Enhance Common Working File (CWF) Internal Testing Facility (ITF) Response Records	04/01/19	10974
<a href="#">R2165OTN</a>	10/26/18	Fiscal Intermediary Shared System (FISS) AGILE Development and Implementation of Application Programming Interface (API) for Medicare Administrative Contractors (MACs)	04/01/19	11013
<a href="#">R2164OTN</a>	10/26/18	Shared System Enhancement 2018: Enhance Common Working File (CWF) Data Extract Process	04/01/19	10976
<a href="#">R2163OTN</a>	10/26/18	Shared System Enhancement 2018 ViPS Medicare Systems (VMS): Streamline the use of Assembler Language Code (ALC) Modules	04/01/19	10946
<a href="#">R2162OTN</a>	10/26/18	Modify Common Working File (CWF) Editing to Apply Code G0476 to Female Beneficiaries Only	04/01/19	10623

<a href="#">R2161OTN</a>	10/26/18	Shared System Enhancement 2018: Remove Default Automated Development System (ADS) and Field ADS Questions	04/01/19	10943
<a href="#">R2160OTN</a>	10/26/18	Shared System Enhancement 2018: Eliminate action code logic	04/01/19	10945
<a href="#">R2159OTN</a>	10/26/18	Shared System Enhancement 2018: Remove Remaining Obsolete Access Restriction by Granular User Services (ARGUS) Processing	04/01/19	10934
<a href="#">R2158OTN</a>	10/26/18	Shared System Enhancement 2018: Establish Beneficiary Data Streaming (BDS) Log Files	04/01/19	11007
<a href="#">R2157OTN</a>	10/26/18	Systems Changes to Address Acute Kidney Injury (AKI) Claims and Outlier Payments	04/01/19	10985
<a href="#">R2156OTN</a>	10/26/18	Update to Common Working File (CWF) Edit of Medicare Advantage (MA) Enrollees' Inpatient Claims from Approved Teaching Hospitals Billed with Indirect Medical Education (IME) or Coverage with Evidence Development (CED)	04/01/19	10959

<a href="#">R2154OTN</a>	10/26/18	Shared System Enhancement 2018: Streamline National Provider Identifier (NPI) Processing in the VIPS Medicare System (VMS)	04/01/19	10948
<a href="#">R2153OTN</a>	10/26/18	Medicare Cost Report E-Filing (MCR eF)	06/12/18	10611
<a href="#">R2152OTN</a>	10/12/18	Procedures for Shared Systems to Handle Foreign (non US) Addresses	01/07/19	10844
<a href="#">R2151OTN</a>	10/12/18	Updating Calendar Year (CY) 2019 Medicare Diabetes Prevention Program (MDPP) Payment Rates	01/07/19	10970
<a href="#">R2149OTN</a>	10/05/18	Analysis to Implement the Skilled Nursing Facility (SNF) Patient Driven Payment Model (PDPM)	04/01/19	10950
<a href="#">R2148OTN</a>	10/05/18	Claim Based Incentive Programs - Non-Assigned Claim Update	04/01/19	10804

<a href="#">R2147OTN</a>	10/05/18	Update to the Long Description for Spanish Records on The Procedure Descriptor Master File for all Adds and Updates That Were Not Loaded with Change Request (CR) 10286	11/06/18	10977
<a href="#">R2146OTN</a>	10/05/18	Update to Common Working File (CWF) Benefit Period Logic for Occurrence Code 22 on Skilled Nursing Facility (SNF) and Swing Bed Inpatient Claims	04/01/19	10922
<a href="#">R2145OTN</a>	10/05/18	Shared System Enhancement 2018: Implementation of the Medicare Summary Notice (MSN) Zip Code Analyzer Tool	04/01/19	10935
<a href="#">R2144OTN</a>	10/01/18	User CR: FISS to Add Location/Statuses to the 6H File Fix	01/07/19	10546
<a href="#">R2143OTN</a>	09/28/18	Implementation of the Award for the Jurisdiction F (J-F) Part A and Part B Medicare Administrative Contractor (JF A/B MAC)	11/30/18	10917
<a href="#">R2142OTN</a>	09/28/18	New Modifier for Expanding the Use of Telehealth for Individuals with Stroke	01/07/19	10883

<a href="#">R2141OTN</a>	09/21/18	Implementing the Insertion of a Sheet of Paper Promoting the Electronic Medicare Summary Notices (eMSNs) into Mailed Medicare Summary Notices (MSNs)	01/02/19	10910
<a href="#">R2139OTN</a>	09/14/18	Monthly Status Report (MSR) Excel Data Template Updates and Implementation of Medicare Administrative Contractor (MAC)/Centers for Medicare & Medicaid Services (CMS) Data Exchange (MDX) Portal System - This CR Rescinds and Fully Replaces CR 10399.	09/27/18	10870
<a href="#">R2138OTN</a>	09/11/18	International Classification of Diseases, Tenth Revision (ICD-10) and Other Coding Revisions to National Coverage Determinations (NCDs)	09/28/18	10859
<a href="#">R2137OTN</a>	09/06/18	National Correct Coding Initiative (NCCI) Add-on Codes for Non-Outpatient Prospective Payment System (OPPS) Institutional Providers Implementation	10/01/18	10504
<a href="#">R2136OTN</a>	09/05/18	Standardization of Case File Transmittal and Provider Information Processes, Bankruptcy, Payment Hold, and Cancellation Reporting Between the Medicare Administrative Contractors (MAC) and the Recovery Audit Contractor (RAC)	10/01/18	10369
<a href="#">R2135OTN</a>	08/31/18	Medicare Appeals System (MAS) Part B and Durable Medical Equipment (DME) Data Collection Web Services Pilot	10/01/18	10829

<a href="#">R2134OTN</a>	08/24/18	Shared System Enhancement 2015: Resolve Operating Report (ORPT) Issues - Development and Implementation	07/03/17	9734
<a href="#">R2133OTN</a>	08/17/18	Clarification of Policies Related to Reasonable Cost Payment for Nursing and Allied Health Education Programs	01/07/19	10552
<a href="#">R2132OTN</a>	08/17/18	User CR: MCS - Enhance H9 Screen to Hold Information After Claim Finalizes	01/07/19	10650
<a href="#">R2131OTN</a>	08/17/18	Ensuring Home Health Standardized Amounts Are Reflected in the National Claims History	01/07/19	10523
<a href="#">R2126OTN</a>	08/10/18	User CR: FISS to Add Location/Statuses to the 6H File Fix	01/07/19	10546
<a href="#">R2122OTN</a>	08/10/18	International Code of Diseases, Tenth Revision (ICD-10) and Other Coding Revisions to National Coverage Determinations (NCDs)	01/07/19	10859

<a href="#">R2120OTN</a>	08/10/18	New CWF Edit for Part A Outpatient Medicare Advantage (MA), Health Maintenance Organization (HMO)	01/07/19	10813
<a href="#">R2119OTN</a>	08/10/18	Process Improvement for Recovery Audit Contractor (RAC) Mass Adjustment Input File – Underpayment Adjustment Enhancement	01/07/19	10493
<a href="#">R2116OTN</a>	08/10/18	Modifications to the National Coordination of Benefits Agreement (COBA) Medicare Crossover Process	01/07/19	10815
<a href="#">R2115OTN</a>	08/10/18	Correct the CWF Handling of Beneficiaries with 14+ MSP Occurrences for HETS	01/07/19	10811
<a href="#">R2113OTN</a>	08/10/18	Combined Common Edits/Enhancements Module (CCEM) Updates for JAVA (version 6) to JAVA (version 7)	01/07/19	10822
<a href="#">R2112OTN</a>	08/10/18	User CR: FISS to Add Additional Search Features to Provider Direct Data Entry (DDE) Screen	01/07/19	10542

<a href="#">R2111OTN</a>	08/10/18	Modifications Within Common Working File (CWF) to Adjustment Claims Exceeding Annual Therapy Threshold	01/07/19	10810
<a href="#">R2109OTN</a>	12/14/18	Guidance for Medicare Administrative Contractors (MACs) Processing Beneficiary and Family Centered Care (BFCC) Quality Improvement Organizations (QIO) Two-Midnight (2MN) Short Stay Review (SSR) Determinations	11/13/18	10600
<a href="#">R2108OTN</a>	08/03/18	Shared System Enhancement 2015: Identify Inactive Medicare Demonstration Projects within the Fiscal Intermediary Shared System - (Removing /Archiving demonstration codes 44 and 47)	01/07/19	10846
<a href="#">R2106OTN</a>	08/03/18	Procedures for Shared Systems to Handle Foreign (non US) Addresses	01/07/19	10844
<a href="#">R2105OTN</a>	08/03/18	User CR: MCS - Analysis to Expand Narrative File Message Number Range	01/07/19	10637
<a href="#">R2104OTN</a>	08/03/18	Analysis of the Structured Data Elements for Sending Additional Documentation Request (ADR) Decision Letters and Prior Authorization/Pre-Claim Review (PA/PCR) Decision Letters Electronically via the Electronic Submission of Medical Documentation (esMD) System	11/05/18	10807



<a href="#">R2102OTN</a>	08/03/18	Shared System Enhancement 2014: Implementation of Fiscal Intermediary Shared System (FISS) Obsolete On-Request Jobs - Phase 3	01/07/19	10814
<a href="#">R2101OTN</a>	08/03/18	Shared System Enhancement 2014: Implementation of Fiscal Intermediary Shared System (FISS) Obsolete On-Request Jobs - Phase 4	01/07/19	10551
<a href="#">R2100OTN</a>	07/20/18	Analysis for First Coast Service Options (FCSO) and Novitas for the Security Assertion Markup Language 2.0 (SAML 2.0) Migration	07/30/18	10790
<a href="#">R2099OTN</a>	07/20/18	Client Letter Code Removal and Decommission in the ViPS Medicare System (VMS)	01/07/19	10835
<a href="#">R2098OTN</a>	07/12/18	Implementation of Automating First Claim Review in Serial Claims for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)	07/02/18	10426
<a href="#">R2097OTN</a>	06/26/18	Clean-up of Fiscal Intermediary Shared System (FISS) Reason Codes and Quarterly Reports	10/01/18	10255

<a href="#">R2096OTN</a>	09/22/18	Global Surgical Days for Critical Access Hospital (CAH) Method II	07/02/18	10425
<a href="#">R2095OTN</a>	06/20/18	Revisions to the Telehealth Billing Requirements for Distant Site Services	10/01/18	10583
<a href="#">R2094OTN</a>	06/20/18	Update to the Hospital Transfer Policy for Early Discharges to Hospice Care	10/01/18	10602
<a href="#">R2093OTN</a>	06/07/2018	Standardization of Case File Transmittal and Provider Information Processes, Bankruptcy, Payment Hold, and Cancellation Reporting Between the Medicare Administrative Contractors (MAC) and the Recovery Audit Contractor (RAC)	10/01/18	10369
<a href="#">R2092OTN</a>	06/08/2018	Analysis for First Coast Service Options (FCSO) and Novitas for the Security Assertion Markup Language 2.0 (SAML 2.0) Migration	06/25/18	10790
<a href="#">R2090OTN</a>	05/24/18	Use the VMAP/4D States Table in all VMS Address Processing	10/01/18	10524

<a href="#">R2086OTN</a>	05/04/18	Combined Common Edits/Enhancements Module (CCEM) Updates for Apache POI (version 3.14.0) to Apache POI (version 3.17) and Analysis from JAVA (version 6) to JAVA (version 7)	10/01/18	10625
<a href="#">R2085OTN</a>	05/04/18	Implementation of Procedures for Undeliverable Medicare Summary Notices (uMSNs) and Summary MSNs for Previously Undeliverable MSNs for FISS and MCS (No-Pay only)	10/01/18	10035
<a href="#">R2084OTN</a>	05/04/18	Analysis and Design for Fiscal Intermediary Shared System (FISS), Multi-Carrier System (MCS), and Viable Information Processing System (VIPS) Medicare System (VMS) Prepayment Review Report	10/01/18	10608
<a href="#">R2083OTN</a>	05/04/18	Implementation of Changes to the Pre-Payment Additional Documentation Request (ADR) Letters for Medical Review	10/01/18	10525
<a href="#">R2082OTN</a>	05/04/18	Analysis for Mandatory Support of Review Contractors to Send Electronic Medical Documentation Requests (eMDR) to Participating Providers via the Electronic Submission of Medical Documentation (esMD) System	10/01/18	10526
<a href="#">R2081OTN</a>	05/11/18	Transition Letter Writing from Client Letter Software to the Durable Medical Equipment (DME) Medicare Administrative Contractors (MACs)	10/01/18	10634

<a href="#">R2080OTN</a>	05/04/18	Fee-For-Service (FFS) Shared System Maintainers (SSMs) Standardized Release Identification (ID) Format	10/01/18	10562
<a href="#">R2079OTN</a>	05/04/18	Identifying and Eliminating Discrepancies between the Provider Enrollment, Chain and Ownership System (PECOS) and the Fiscal Intermediary Shared System (FISS)	10/01/18	10564
<a href="#">R2077OTN</a>	05/04/18	Clean-up of Fiscal Intermediary Shared System (FISS) Reason Codes and Quarterly Reports	10/01/18	10255
<a href="#">R2076OTN</a>	05/04/18	International Code of Diseases, Tenth Revision (ICD-10) and Other Coding Revisions to National Coverage Determinations (NCDs)	10/01/18	10622
<a href="#">R2075OTN</a>	04/30/18	Medicare Cost Report E-Filing (MCR eF)	06/12/18	10611
<a href="#">R2074OTN</a>	04/27/18	Modifying FISS Part B Claims Overlap Edits	10/01/18	10518

<a href="#">R2073OTN</a>	04/27/18	Use the VMAP/4D States Table in all VMS Address Processing	10/01/18	10524
<a href="#">R2072OTN</a>	04/27/18	Implementation of Business Requirements to Increase Claim Counter Maximum and Create Auto-Deletion Utility	10/01/18	10522
<a href="#">R2071OTN</a>	05/01/18	Phase 4 - Updating the Fiscal Intermediary Shared System (FISS) to Make Payment for Drugs and Biologicals Services for Outpatient Prospective Payment System (OPPS) Providers	10/01/18	10519
<a href="#">R2070OTN</a>	04/27/18	Shared System Enhancement 2015: Identify Inactive Medicare Demonstration Projects within the Fiscal Intermediary Shared System - (Removing/Archiving Demonstration Codes 51 and 56)	10/01/18	10508
<a href="#">R2069OTN</a>	04/27/18	Shared System Enhancement 2014: Implementation of Fiscal Intermediary Shared System (FISS) Obsolete On-Request Jobs - Phase 3	10/01/18	10496
<a href="#">R2068OTN</a>	04/27/18	Common Working File (CWF) Split Medicare Part A Claims to Carry 50 Lines per Segment Rather than 100 Lines per Segment	10/01/18	10495

<a href="#">R2067OTN</a>	04/27/18	Shared System Enhancement 2014: Implementation of Fiscal Intermediary Shared System (FISS) Obsolete On-Request Jobs - Phase 2	10/01/18	10469
<a href="#">R2066OTN</a>	04/27/18	Enhancement for Undeliverable Pay Medicare Summary Notices (MSNs) for Multi-Carrier System (MCS) Users	10/01/18	10439
<a href="#">R2065OTN</a>	04/27/18	Part B Detail Line Expansion - Multi- Carrier System (MCS) Phase 9	10/1/18	10034
<a href="#">R2064OTN</a>	04/27/18	Part B Detail Line Expansion - Fiscal Intermediary Shared System (FISS)	07/02/18	10628
<a href="#">R2063OTN</a>	04/27/18	Processing Instructions to Update the Identification Code Qualifier Being Used in the NM108 Data Element at the 2100 Loop, NM1- Patient Name Segment in the 835 Guide	10/1/18	10565
<a href="#">R2062OTN</a>	04/27/18	Updates to Peritoneal Dialysis Claims Processing, Provider Statistical and Reimbursement Report (PSR) and Payment for Ultrafiltration for Beneficiaries with Acute Kidney Injury (AKI)	10/01/18	10574

<a href="#">R2057OTN</a>	04/27/18	Common Working File (CWF) to Increase Next Eligible Date Occurrences to 99 for Preventative Services	10/01/18	10532
<a href="#">R2056OTN</a>	04/27/18	User CR: Develop Enhanced Claims Search Reporting in Fiscal Intermediary Shared System (FISS) - Phase 1	10/01/18	10533
<a href="#">R2055OTN</a>	04/27/18	Update to the Hospital Transfer Policy for Early Discharges to Hospice Care	10/01/18	10602
<a href="#">R2054OTN</a>	04/13/18	Change in Type of Service (TOS) for Current Procedural Terminology (CPT) Code 77067	04/13/18	10607
<a href="#">R2051OTN</a>	04/04/18	Claims Processing Actions to Implement Certain Provisions of the Bipartisan Budget Act of 2018	04/02/18	10531
<a href="#">R2050OTN</a>	04/03/18	Modifications to the Implementation of the Paperwork (PWK) Segment of the Electronic Submission of Medical Documentation (esMD) System	07/02/18	10397

<a href="#">R2049OTN</a>	03/30/18	National Supplier Clearinghouse (NSC) Numbers Shortage for Walgreen TIN	04/02/18	10594
<a href="#">R2048OTN</a>	03/23/18	Fiscal Intermediary Shared System (FISS) Internal Crosswalk Modification	07/02/18	10554
<a href="#">R2047OTN</a>	03/23/18	Claims Processing Actions to Implement Certain Provisions of the Bipartisan Budget Act of 2018	04/02/18	10531
<a href="#">R2045OTN</a>	03/16/18	Identifying and Eliminating Discrepancies in Shared System Enrollment Data and Provider Enrollment Chain and Ownership System (PECOS) Data	07/02/18	10411
<a href="#">R2044OTN</a>	03/16/18	National Correct Coding Initiative (NCCI) Add-on Codes for Non-Outpatient Prospective Payment System (OPPS) Institutional Providers Implementation	04/02/18	10504
<a href="#">R2043OTN</a>	03/16/18	The Supplemental Security Income (SSI)/Medicare Beneficiary Data for Fiscal Year 2016 for Inpatient Prospective Payment System (IPPS) Hospitals, Inpatient Rehabilitation Facilities (IRFs), and Long Term Care Hospitals (LTCH)	04/16/18	10527



<a href="#">R2042OTN</a>	03/16/18	Adjustments to Qualified Medicare Beneficiary (QMB) Claims Processed Under CR 9911	09/20/18	10494
<a href="#">R2041OTN</a>	03/13/18	Redesign of Flu Vaccines in Fiscal Intermediary Shared System (FISS)	07/02/18	10415
<a href="#">R2040OTN</a>	03/02/18	Appropriate Use Criteria for Advanced Diagnostic Imaging – Voluntary Participation and Reporting Period - Claims Processing Requirements – HCPCS Modifier QQ	07/02/18	10481
<a href="#">R2039OTN</a>	02/28/18	ICD-10 and Other Coding Revisions to National Coverage Determinations (NCDs)	04/02/18	10473
<a href="#">R2034OTN</a>	02/16/18	Identifying and Eliminating Discrepancies in Shared System Enrollment Data and Provider Enrollment Chain and Ownership System (PECOS) Data	07/02/18	10411
<a href="#">R2033OTN</a>	02/16/18	ICD-10 and Other Coding Revisions to National Coverage Determinations (NCDs)	04/02/18	10473

<a href="#">R2032OTN</a>	02/16/18	Provider Enrollment, Chain, and Ownership System (PECOS) Extract Changes for Multi-Carrier System (MCS) - Analysis Only	07/02/18	10455
<a href="#">R2031OTN</a>	02/16/18	Modifications to the Implementation of the Paperwork (PWK) Segment of the Electronic Submission of Medical Documentation (esMD) System	07/02/18	10397
<a href="#">R2030OTN</a>	02/02/18	Shared System Enhancement 2014: Implementation of Fiscal Intermediary Shared System (FISS) Obsolete Core Reports - Phase 3	07/02/18	10464
<a href="#">R2029OTN</a>	02/02/18	Implementation of Automating First Claim Review in Serial Claims for prosthetics, Orthotics, and Supplies (DMEPOS) Durable Medical Equipment, P	07/02/18	10426
<a href="#">R2028OTN</a>	02/02/18	Shared System Enhancement 2014: Implementation of Fiscal Intermediary Shared System (FISS) Obsolete Financial Reports - Phase 3	07/02/18	10463
<a href="#">R2026OTN</a>	02/02/18	Part B Detail Line Expansion - Multi-Carrier System (MCS) Phase 8	07/02/18	10033

<a href="#">R2025OTN</a>	02/02/18	Shared System Enhancement 2014: Implementation of Fiscal Intermediary Shared System (FISS) Obsolete On-Request Jobs - Phase 1	07/02/18	10451
<a href="#">R2022OTN</a>	01/26/18	Modifications to the National Coordination of Benefits Agreement (COBA) Crossover Process	04/02/18	10292
<a href="#">R2021OTN</a>	01/26/18	Shared System Enhancement 2014: Implementation of Fiscal Intermediary Shared System (FISS) Obsolete Financial Reports - Phase 2	07/02/18	10437
<a href="#">R2019OTN</a>	01/26/18	Redesign of Flu Vaccines in Fiscal Intermediary Shared System (FISS)	07/02/18	10415
<a href="#">R2018OTN</a>	01/26/18	Shared System Enhancement 2014: Implementation of Fiscal Intermediary Shared System (FISS) Obsolete Core Reports - Phase 2	07/02/18	10444
<a href="#">R2017OTN</a>	01/26/18	Updates to Common Working File (CWF) Edits for Acute Kidney Injury (AKI) Claims	07/02/18	10430

<a href="#">R2016OTN</a>	01/26/18	Part B Detail Line Expansion - VMS	07/02/18	10032
<a href="#">R2015OTN</a>	01/26/18	Updates to the Common Working File (CWF) to Allow Entry Code 9 Durable Medical Equipment (DME) Claims to Process Correctly	07/02/18	10376
<a href="#">R2014OTN</a>	01/26/18	Identifying Prior Hospice Days When Calculating Hospice Routine Home Care Payments After a Transfer	07/02/18	10180
<a href="#">R2013OTN</a>	01/26/18	Global Surgical Days for Critical Access Hospital (CAH) Method II	07/02/18	10425
<a href="#">R2012OTN</a>	01/26/18	Analysis of Reject Responses for Prior Authorization/Pre-Claim Review Requests (PA/PCR) via the Electronic Submission of Medical Documentation (esMD) System and Usage of Standardized Review Reason Codes and Statements	07/02/18	10396
<a href="#">R2011OTN</a>	01/26/18	Shared System Enhancement 2015: Identify Inactive Medicare Demonstration Codes 46, 48, and 49 within the Fiscal Intermediary Shared System (FISS)	07/02/18	10401

<a href="#">R2010OTN</a>	01/26/18	Analysis Only: Procedures to Handle Foreign (non US) Addresses	07/02/18	10428
<a href="#">R2008OTN</a>	01/24/18	Shared System Enhancement 2015: Identify Inactive Medicare Demonstration Projects Within the Common Working File (CWF)	04/02/18	10017
<a href="#">R2006OTN</a>	01/19/18	Monthly Status Report (MSR) Excel Data Template Updates and Implementation of MAC/CMS Data Exchange (MDX) Portal System	02/20/18	10399
<a href="#">R2005OTN</a>	01/18/18	ICD-10 and Other Coding Revisions to National Coverage Determinations (NCDs)	01/29/18	10318
<a href="#">R2000OTN</a>	01/12/18	MCS Proof of Concept to Convert Existing MCSDT Window to Utilize API Technology	07/02/18	10449
<a href="#">R1999OTN</a>	01/10/18	Implementation of the Transitional Drug Add-On Payment Adjustment	01/02/18	10065

<a href="#">R1998OTN</a>	01/04/18	HIGLAS Enhancement Required for Implementation of Overpayment based Denials	04/02/18	10166
<a href="#">R1997OTN</a>	01/05/18	Enhancement to the Recovery Audit Contractor (RAC) Mass Adjustment Input File	07/02/18	10394
<a href="#">R1996OTN</a>	01/05/18	Analyze Common Working File (CWF) System and Identify Layouts with Minimum FILLER Areas Available	04/02/18	10387
<a href="#">R1994OTN</a>	12/28/17	Suppression of the Standard Paper Remittance Advice (SPR) in 45 Days if Also Receiving Electronic Remittance Advice (ERA)	01/02/18	10151
<a href="#">R1993OTN</a>	12/29/17	Analyze the Common Working File (CWF) System and Identify Customer Information Control System (CICS) Screens Requiring Expansion	04/02/18	10389
<a href="#">R1991OTN</a>	12/29/17	Method of Cost Settlement for Inpatient Services for Rural Hospitals Participating Under the Rural Community Hospital Demonstration	01/29/18	10373

<a href="#">R1990OTN</a>	12/21/17	Suppression of the Standard Paper Remittance Advice (SPR) in 45 Days if Also Receiving Electronic Remittance Advice (ERA)	01/02/18	10151
<a href="#">R1989OTN</a>	12/20/17	Fiscal Intermediary Shared Systems (FISS) Enhancements to the Mass Adjustment of Process Recovery Audit Contractor (RAC) Claims	04/02/18	10304
<a href="#">R1988OTN</a>	12/19/17	National Provider Identification Crosswalk System (NPICS) Retirement Analysis Only - Engage Shared Systems Maintainers (SSMs) and Medicare Administrative Contractors (MACs) in Meetings and Correspondence Related to the NPICS Retirement with the Integrated Data Repository (IDR) Team	01/02/18	10007
<a href="#">R1987OTN</a>	12/15/17	Archiving National Provider Identifier Crosswalk System (NPICS) System Logic in the Durable Medical Equipment (DME) Claims Processing System	04/02/18	10279
<a href="#">R1985OTN</a>	12/13/17	Analysis Only- Medicare Reporting on the Return of Self-Identified Overpayments	07/02/18	10127

<a href="#">R1982OTN</a>	12/01/17	Line Level versus Claim Level Reporting – Analysis Only	01/02/18	10150
<a href="#">R1981OTN</a>	12/01/17	Fiscal Year (FY) 2014 and 2015 Worksheet S-10 Revisions: Further Extension for All Inpatient Prospective Payment System (IPPS) Hospitals	01/02/18	10378
<a href="#">R1980OTN</a>	11/29/17	Shared System Enhancement 2015: Removing/Archiving Obsolete On Request Jobs within the Multi-Carrier System (MCS)	04/02/18	10290
<a href="#">R1978OTN</a>	11/17/17	Implementation of Changes to Certificate of Medical Necessity (CMN) and CMN DME Information Form (CMN DIF) as a result of the New Medicare Card Project	04/02/18	10367
<a href="#">R1976OTN</a>	11/09/17	Common Working File (CWF) to Modify CWF Provider Queries to Only Accept National Provider Identifier (NPI) as valid Provider Number	01/02/18	10098
<a href="#">R1975OTN</a>	11/09/17	ICD-10 and Other Coding Revisions to National Coverage Determinations (NCDs)	12/29/17	10318



<a href="#">R1974OTN</a>	11/09/17	Revision of PWK (Paperwork) Fax/Mail Cover Sheets	04/02/18	10124
<a href="#">R1973OTN</a>	11/09/17	Multi-Carrier System (MCS) Modernization Proof of Concept Number 8	04/02/18	10375
<a href="#">R1972OTN</a>	11/09/17	Analysis Only: Develop Enhanced Claims Search Reporting in Fiscal Intermediary Shared System (FISS)	04/02/18	10364
<a href="#">R1971OTN</a>	11/09/17	Modifications to the National Coordination of Benefits Agreement (COBA) Crossover Process	04/02/18	10292
<a href="#">R1970OTN</a>	11/09/17	Establish an Automated Process For Creating Mass Adjustments Utilizing Expert Claims Processing System (ECPS) - Analysis Only	04/02/18	10363
<a href="#">R1969OTN</a>	11/09/17	Partial Settlement of 2-Midnight Policy Court Cases	12/11/17	10337

<a href="#">R1968OTN</a>	11/09/17	Tracking Status of Claims Adjustments	04/02/18	10288
<a href="#">R1967OTN</a>	11/08/17	CICS Region Merge(s) for A/B MACs - Analysis Only	01/02/18	10191
<a href="#">R1966OTN</a>	11/03/17	Out-of-Jurisdiction Providers (OJP) and Qualified Chain Providers (QCP) Move to Correct A/B MAC Jurisdiction - Analysis CR Only	01/02/18	10192
<a href="#">R1965OTN</a>	11/03/17	Shared System Enhancement 2015: Resolve Operating Report (ORPT) Issues - Development and Implementation	07/03/17	9734
<a href="#">R1964OTN</a>	11/03/17	Fee For Service (FFS) Applications Upgrade Customer Information Control System (CICS) to Transaction Server (TS) v5.2	01/02/18	9961
<a href="#">R1962OTN</a>	11/03/17	Shared System Enhancement 2014: Implementation of Fiscal Intermediary Shared System (FISS) Obsolete Core Reports - Phase 1	04/02/18	10294

<a href="#">R1960OTN</a>	11/03/17	Implementation of the Award for the Jurisdiction Part A and Part B Medicare Administrative Contractor (JJ A/B MAC)	01/29/18	10316
<a href="#">R1959OTN</a>	11/03/17	Analysis Only: VMS Accreditation Logic Related to HCPCS Codes Contained in Multiple Product and Service Codes	04/02/18	10300
<a href="#">R1958OTN</a>	11/03/17	Shared System Enhancement 2014: Implementation of Fiscal Intermediary Shared System (FISS) Obsolete Financial and Expert Claims Processing System (ECPS) Reports - Phase 1	04/02/18	10293
<a href="#">R1957OTN</a>	11/03/17	Shared System Enhancement 2015: Identify Inactive Medicare Demonstration Projects Within the Common Working File (CWF) - Removing/Archiving demonstration codes 51 and 56	04/02/18	10251
<a href="#">R1956OTN</a>	11/01/17	Analysis and Design Working Sessions for the Development of a Pre-Payment Common Additional Documentation Request (ADR) Letter	10/02/17	9936
<a href="#">R1954OTN</a>	10/27/17	New Common Working File (CWF) Medicare Secondary Payer (MSP) Type for Liability Medicare Set-Aside Arrangements (LMSAs) and No-Fault Medicare Set-Aside Arrangements (NFMSAs)	07/03/17	9893

<a href="#">R1953OTN</a>	10/27/17	Shared System Enhancement 2014: Implementation of Fiscal Intermediary Shared System (FISS) Obsolete On-Request Jobs - Phase 1	11/06/17	10305
<a href="#">R1952OTN</a>	10/27/17	Calculating Interim Rates for Graduate Medical Education (GME) Payments to New Teaching Hospitals	10/23/17	10240
<a href="#">R1951OTN</a>	10/27/17	Shared System Enhancement 2015: Removing/Archiving Obsolete On Request Jobs within the Multi-Carrier System (MCS)	04/02/18	10290
<a href="#">R1950OTN</a>	10/27/17	Fiscal Intermediary Shared System (FISS) and VIPS Medicare Shared System (VMS) to Update Records Based on the Automation of Prior Authorization (PA) Requests/Pre- Claim Reviews (PCR) and their Responses with Multiple Services (for programs like Home Health (HH))	04/02/18	10282
<a href="#">R1949OTN</a>	10/27/17	Remove Obsolete Edits from the Fiscal Intermediary Shared Systems (FISS)	04/02/18	10274
<a href="#">R1948OTN</a>	10/27/17	Archiving National Provider Identifier Crosswalk System (NPICS) System Logic in the Muti-Carrier System (MCS)	04/02/18	10278

<a href="#">R1947OTN</a>	10/27/17	Health Insurance Portability and Accountability Act (HIPAA) Electronic Data Interchange (EDI) Front End Updates for April 2018	04/02/18	10260
<a href="#">R1946OTN</a>	10/27/17	Shared System Enhancement 2015: Removing/Archiving Obsolete Reports within the Multi-Carrier System (MCS)	04/02/18	10289
<a href="#">R1945OTN</a>	10/27/17	Add Date of Receipt to the Beneficiary Data Streamlining (BDS) Part A Claims Layout	04/02/18	10326
<a href="#">R1944OTN</a>	10/27/17	MCS Analysis Only: Undeliverable Medicare Summary Notices (UMSNs) - Beneficiary Do Not Forward Process	04/02/18	10332
<a href="#">R1943OTN</a>	10/27/17	Assign the Correct 935 Indicator on Adjustment Claims Submitted through the Provider Portal	04/02/18	10301
<a href="#">R1942OTN</a>	10/27/17	Common Working File (CWF) to Medicare Beneficiary Database (MBD) Extract File Changes for Detailed Skilled Nursing Facility Data to Support HIPAA Eligibility Transaction System (HETS)	04/02/18	10111

<a href="#">R1941OTN</a>	10/27/17	Transitional Drug Add-on Payment Adjustment (TDAPA) for patients with Acute Kidney Injury (AKI)	04/02/18	10281
<a href="#">R1939OTN</a>	10/27/17	Fiscal Intermediary Shared Systems (FISS) Enhancements to the Mass Adjustment of Process Recovery Audit Contractor (RAC) Claims	04/02/18	10304
<a href="#">R1938OTN</a>	10/27/17	Archiving National Provider Identifier Crosswalk System (NPICS) System Logic in the Durable Medical Equipment (DME) Claims Processing System	04/02/18	10279
<a href="#">R1937OTN</a>	10/27/17	Provider Education and Referral Reporting	11/27/17	10263
<a href="#">R1936OTN</a>	10/19/17	Modifications to the National Coordination of Benefits Agreement (COBA) Crossover Process	01/02/18	10155
<a href="#">R1935OTN</a>	10/19/17	FISS Process Enhancements – Analysis Only	01/02/18	10119

<a href="#">R1933OTN</a>	10/06/17	Shared System Enhancement 2015: Identify Inactive Medicare Demonstration Projects within the Fiscal Intermediary Shared System - (Removing/Archiving demonstration codes 38, 42 and 43)	04/02/18	10250
<a href="#">R1930OTN</a>	10/06/17	Shared System Enhancement 2014: Implementation of Fiscal Intermediary Shared System (FISS) Obsolete On-Request Jobs - Phase 1	11/06/17	10305
<a href="#">R1927OTN</a>	09/29/17	Shared System Enhancement 2014: Implementation of Fiscal Intermediary Shared System (FISS) Obsolete Core Reports	10/30/17	10252
<a href="#">R1923OTN</a>	09/22/17	Calculating Interim Rates for Graduate Medical Education (GME) Payments to New Teaching Hospitals	10/23/17	10240
<a href="#">R1922OTN</a>	09/22/17	Shared System Enhancement 2014: Implementation of Fiscal Intermediary Shared System (FISS) Obsolete Financial and Expert Claims Processing System (ECPS) Reports	10/23/17	10253
<a href="#">R1919OTN</a>	09/15/17	Targeted Probe and Educate	10/01/17	10249

<a href="#">R1918OTN</a>	09/13/17	Correcting Payment of Inpatient Prospective Payment System (IPPS) Transfer Claims Assigned to Medicare Severity-Diagnosis Related Group (MS DRG) 385 and Allowing Part A Deductible on Medicare Secondary Payer (MSP) Same Day Transfer Inpatient Claims	01/02/18	10145
<a href="#">R1917OTN</a>	09/13/17	Shared System Enhancement 2014 – Identification of Fiscal Intermediary Standard System (FISS) Obsolete Reports - Analysis Only	10/02/17	9564
<a href="#">R1915OTN</a>	09/08/17	Medicare Administrative Contractor (MAC) and Pricing, Data Analysis and Coding (PDAC) Contractor Implementation of the New Medicare Card Project	04/02/18	10112
<a href="#">R1913OTN</a>	09/06/17	FISS Integrated Outpatient Code Editor (IOCE) Claim and Return Buffer Interface Changes Related to OPSS 2018 Annual Updates	01/02/18	10116
<a href="#">R1912OTN</a>	09/01/17	HIGLAS Enhancement Required for Implementation of Overpayment based Denials	04/02/18	10166
<a href="#">R1910OTN</a>	08/18/17	Guidance on Implementing System Edits for Certain Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS)	10/02/17	9904



<a href="#">R1909OTN</a>	08/18/17	Implementation of Section 1557 for Medicare Redetermination Notices (MRNs) by Adding a Notice and Tagline Sheet	10/02/17	9938
<a href="#">R1906OTN</a>	08/18/17	Out-of-Jurisdiction Providers (OJP) and Qualified Chain Providers (QCP) Move to Correct A/B MAC Jurisdiction - Analysis CR Only	01/02/18	10192
<a href="#">R1905OTN</a>	08/18/17	Modify VMS Accreditation Logic to Accept Additional Modifiers	01/02/18	10217
<a href="#">R1904OTN</a>	08/18/17	Multi-Carrier System (MCS), Fiscal Intermediary Shared System (FISS) and ViPS Medicare Shared System (VMS) Automation of Prior Authorization (PA) Requests/Pre-Claim Reviews (PCR) and their Responses with Multiple Services (for programs like Home Health (HH)) via the Electronic Submission of Medical Documentation (esMD) System	01/02/18	10087
<a href="#">R1903OTN</a>	08/11/17	Implement Changes to Effect the Functionality of Combination Force Codes in the ViPS Medicare System (VMS)	01/02/18	10225

<a href="#">R1901OTN</a>	08/11/17	Automating the HCPCS Load Process	01/02/18	10215
<a href="#">R1900OTN</a>	08/11/17	CICS Region Merge(s) for A/B MACs - Analysis Only	01/02/18	10191
<a href="#">R1896OTN</a>	08/04/17	Shared System Enhancement 2015: Identify Inactive Medicare Demonstration Projects within the Fiscal Intermediary Shared System - (Removing/Archiving demonstration codes 03, 04 and 15)	01/02/18	10171
<a href="#">R1895OTN</a>	08/04/17	System Changes to Implement Section 15010 of the 21st Century Cures Act, Temporary Exception for Certain Severe Wound Discharges from Certain Long-Term Care Hospitals (LTCHs)	01/02/18	10185
<a href="#">R1893OTN</a>	08/04/17	Combined Common Edits/Enhancements Module (CCEM) Updates to Business and Holiday Tables	01/02/18	10201
<a href="#">R1892OTN</a>	08/04/17	Shared System Enhancement 2015: Identify Inactive Medicare Demonstration Projects within the Fiscal Intermediary Shared System	01/02/18	10126

<a href="#">R1891OTN</a>	08/04/17	Provider-Based Determination	11/06/17	10095
<a href="#">R1890OTN</a>	08/04/17	Suppression of the Standard Paper Remittance Advice (SPR) in 45 Days if also receiving Electronic Remittance Advice (ERA)	01/02/18	10151
<a href="#">R1889OTN</a>	08/04/17	Implementation of the Transitional Drug Add-On Payment Adjustment	01/02/18	10065
<a href="#">R1887OTN</a>	07/28/17	Shared System Enhancement 2015: Identify Inactive Medicare Demonstration Projects Within the Common Working File (CWF)	07/03/17	10017
<a href="#">R1885OTN</a>	07/27/17	Shared System Maintainers (SSMs) Standardized Release Identification (ID) Format Analysis and Design	01/02/18	10129
<a href="#">R1884OTN</a>	07/27/17	Analysis Only- Medicare Reporting on the Return of Self-Identified Overpayments	01/02/18	10127

<a href="#">R1883OTN</a>	07/28/17	System Changes to Implement Section 15009 of the 21st Century Cures Act, Temporary Exception for Certain Spinal Cord Specialty Hospitals under the Long Term Care Hospital (LTCH) Prospective Payment System (PPS)	01/02/18	10182
<a href="#">R1880OTN</a>	07/27/17	Shared Savings Program (SSP) Demonstration Code 77 Modification	01/02/18	10144
<a href="#">R1879OTN</a>	07/27/17	Common Working File (CWF) to Increase the Next Eligible Date Occurrences for Preventive Services to 99 Occurrences - Analysis	01/02/18	10022
<a href="#">R1877OTN</a>	07/27/17	Common Working File (CWF) to Modify CWF Provider Queries to Only Accept National Provider Identifier (NPI) as valid Provider Number	01/02/18	10098
<a href="#">R1876OTN</a>	07/27/17	Modifications to the National Coordination of Benefits Agreement (COBA) Crossover Process	01/02/18	10155
<a href="#">R1875OTN</a>	07/27/17	ICD-10 Coding Revisions to National Coverage Determinations (NCDs)	09/13/17	10184

<a href="#">R1874OTN</a>	07/27/17	Implementation CR: Integrating NLR into the HQR system	01/02/18	10134
<a href="#">R1873OTN</a>	07/28/17	Line Level versus Claim Level Reporting – Analysis Only	01/02/18	10150
<a href="#">R1872OTN</a>	07/27/17	Common Working File (CWF) to Add User Identification (ID) Information to CWF Provider Queries Audit File(s)	01/02/18	10130
<a href="#">R1871OTN</a>	07/27/17	FISS Process Enhancements – Analysis Only	01/02/18	10119
<a href="#">R1870OTN</a>	07/27/17	Correcting Payment of Inpatient Prospective Payment System (IPPS) Transfer Claims Assigned to Medicare Severity-Diagnosis Related Group (MS DRG) 385 and Allowing Part A Deductible on Medicare Secondary Payer (MSP) Same Day Transfer Inpatient Claims	01/02/18	10145
<a href="#">R1868OTN</a>	07/14/17	Fee For Service (FFS) Applications Upgrade Customer Information Control System (CICS) to Transaction Server (TS) v5.2	10/02/17	9961

<a href="#">R1867OTN</a>	07/14/17	Renovate MCS Correspondence Entry Driver Program H99P1C00	01/02/18	9828
<a href="#">R1866OTN</a>	07/14/17	National Provider Identification Crosswalk System (NPICS) Retirement Analysis Only - Engage Shared Systems Maintainers (SSMs) and Medicare Administrative Contractors (MACs) in Meetings and Correspondence Related to the NPICS Retirement with the Integrated Data Repository (IDR) Team	01/02/18	10007
<a href="#">R1865OTN</a>	07/14/17	Health Insurance Portability and Accountability Act (HIPAA) Electronic Data Interchange (EDI) Front End Updates for January 2018	01/02/18	10162
<a href="#">R1863OTN</a>	06/30/17	The Supplemental Security Income (SSI)/Medicare Beneficiary Data for Fiscal Year 2015 for Inpatient Prospective Payment System (IPPS) Hospitals, Inpatient Rehabilitation Facilities (IRFs), and Long Term Care Hospitals (LTCH)	7/31/17	10026
<a href="#">R1862OTN</a>	06/30/17	Introductory Letters for Suppliers and Providers Related to the Prior Authorization for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Items	07/31/17	10146
<a href="#">R1861OTN</a>	06/29/17	Targeted Probe and Educate Pilot	07/03/17	10073

<a href="#">R1860OTN</a>	06/23/17	Updates to the CMS-855R Processing Guide	07/25/17	10114
<a href="#">R1859OTN</a>	06/22/17	Common Working File (CWF) to Archive Inactive Part B Consistency Edits	10/02/17	9975
<a href="#">R1855OTN</a>	05/02/17	Targeted Probe and Educate Pilot	07/03/17	10073
<a href="#">R1854OTN</a>	05/26/17	ICD-10 Coding Revisions to National Coverage Determinations (NCDs)	10/2/17	10086
<a href="#">R1849OTN</a>	05/12/17	Implementation of Modifier CG for Type of Bill 72x	10/02/17	9989
<a href="#">R1847OTN</a>	05/12/17	Common Working File (CWF) to reject CWF Provider Queries containing Health Insurance Claim Numbers (HICNs) starting with '9'	10/02/17	10097

<a href="#">R1846OTN</a>	05/12/17	MCS Implementation of the Restructured Clinical Lab Fee Schedule	10/02/17	10057
<a href="#">R1844OTN</a>	05/05/17	Modification to Two Fiscal Intermediary Shared System (FISS) Edits Created Through Change Request (CR) 9681	10/02/17	10103
<a href="#">R1843OTN</a>	05/05/17	Analysis for Common Working File (CWF) to Medicare Beneficiary Database (MBD) Extract File Changes for Detailed Skilled Nursing Facility Data to Support HIPAA Eligibility Transaction System (HETS)	10/02/17	10050
<a href="#">R1842OTN</a>	05/05/17	Remove HSQLDB from the Combined Common Edits/Enhancements Module (CCEM)	10/02/17	10088
<a href="#">R1841OTN</a>	05/05/17	Medicare Fee-for-Service Recovery Audit Contractor (RAC) Data Centers	06/06/17	10051
<a href="#">R1840OTN</a>	05/05/17	Update FISS Editing to Include All Three Patient Reason for Visit Code Fields	10/02/17	9672



<a href="#">R1839OTN</a>	04/28/17	Implementation of Section 1557 for Medicare Redetermination Notices (MRNs) by Adding a Notice and Tagline Sheet	10/02/17	9938
<a href="#">R1838OTN</a>	04/28/17	Part B Detail Line Expansion - Common Working File (CWF)	10/02/17	10031
<a href="#">R1837OTN</a>	04/28/17	Shared System Enhancement 2015: Identify Inactive Medicare Demonstration Projects within the Fiscal Intermediary Shared System (Analysis Only)	10/02/17	10019
<a href="#">R1836OTN</a>	04/28/17	Analysis Only-Provider Number Validation Update for the Shared Systems Maintainer (SSM)	10/02/17	9999
<a href="#">R1835OTN</a>	04/28/17	Reason Codes 36233 and 36330 Bypass for Claims Submitted on the 72x Type of Bill for Services Provided to Beneficiaries with Acute Kidney Injury (AKI) and edits related to not separately payable drugs	10/02/17	9987
<a href="#">R1834OTN</a>	04/28/17	Analysis and Design Working Sessions for the Development of a Pre-Payment Common Additional Documentation Request (ADR) Letter	10/02/17	9936

<a href="#">R1833OTN</a>	04/28/17	Implementing the remittance advice messaging for the 20-hour weekly minimum for Partial Hospitalization Program services	10/02/17	9880
<a href="#">R1832OTN</a>	04/28/17	Update FISS Editing to Include the Admitting Diagnosis Code Field	10/02/17	9753
<a href="#">R1831OTN</a>	04/28/17	Introductory Letters for Suppliers and Providers Related to the Prior Authorization for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Items	05/30/17	10068
<a href="#">R1819OTN</a>	04/07/17	Update to Common Working File (CWF) Blood Editing on Medicare Advantage (MA) Enrollees' Inpatient Claims for Indirect Medical Education (IME) Payment	10/02/17	10012
<a href="#">R1818OTN</a>	04/07/17	Annual Updates to the Prior Authorization/Pre-Claim Review Federal Holiday Schedule Tables for Generating Reports	10/02/17	9995
<a href="#">R1817OTN</a>	04/07/17	Enrollment Data Base (EDB) and Common Working File (CWF) Data Resync - Analysis and Design	10/02/17	9994

<a href="#">R1815OTN</a>	04/07/07	Common Working File (CWF) to Archive Inactive Part B Consistency Edits	10/02/17	9975
<a href="#">R1814OTN</a>	03/31/17	Shared System Enhancement 2014 – Identification of Fiscal Intermediary Standard System (FISS) Obsolete Reports - Analysis Only	10/03/16	9564
<a href="#">R1813OTN</a>	03/31/17	Shared System Enhancement 2015: Identify Inactive Medicare Demonstration Projects Within the Common Working File (CWF)	07/03/17	10017
<a href="#">R1812OTN</a>	03/31/17	HIGLAS Connectivity Updates and Testing	05/30/17	10042
<a href="#">R1811OTN</a>	03/29/17	Shared System Enhancement 2014 – Identification of Fiscal Intermediary Shared System (FISS) Obsolete On-Request Jobs - Analysis Only	04/03/17	9566
<a href="#">R1809OTN</a>	03/24/17	Client Letter v5.2 Upgrade - DME MAC Training and Testing	04/24/17	10027

<a href="#">R1808OTN</a>	03/24/17	Advanced Provider Screening (APS) Phase 1 Go-Live	05/15/17	9983
<a href="#">R1807OTN</a>	03/17/17	Intern and Resident Information System (IRIS) Data Upload into STAR	04/17/17	9984
<a href="#">R1803OTN</a>	02/17/17	Innovation Payment Contractor (IPC) for D1 D4 File Exchange	07/03/17	9899
<a href="#">R1799OTN</a>	02/17/17	Preventing Hospice Notices of Election with Future Dates	07/03/17	9932
<a href="#">R1798OTN</a>	02/17/17	ICD-10 Coding Revisions to National Coverage Determinations (NCDs)	03/20/17	9982
<a href="#">R1797OTN</a>	02/10/17	Guidance on Implementing System Edits for Certain Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS)	07/03/17	9904

<a href="#">R1796OTN</a>	02/10/17	Processing Updates for VMS From Provider Enrollment, Chain and Ownership System (PECOS) Extract File	07/03/17	9962
<a href="#">R1795OTN</a>	02/10/17	Advance Care Planning (ACP) Implementation for Outpatient Prospective Payment System (OPPS) Claims	07/03/17	9862
<a href="#">R1794OTN</a>	02/10/17	Provider Enrollment, Chain and Ownership System (PECOS) Extract File - Analysis	07/03/17	9949
<a href="#">R1792OTN</a>	02/03/17	ICD-10 Coding Revisions to National Coverage Determination (NCDs)	03/03/17	9861
<a href="#">R1791OTN</a>	02/03/17	Change to Beneficiary Liability and Cost Report Days for Sub-clause (II) Long Term Care Hospitals (LTCHs)	07/03/17	9912
<a href="#">R1790OTN</a>	02/03/17	Shared System Enhancement 2016: Complete Disablement of Health Maintenance Organization (HMO) Inquiry Transaction, HIHO, and Related Vestige Within Common Working File (CWF)	07/03/17	9974

<a href="#">R1789OTN</a>	02/03/17	Shared System Enhancement 2016: Common Working File (CWF) to Show Date for Informational Unsolicited Response (IUR) Indicator on Claim History	07/03/17	9965
<a href="#">R1788OTN</a>	02/03/17	Combined Common Edits/Enhancements (CCEM) Proxool and Apache Software Upgrades	07/03/17	9929
<a href="#">R1787OTN</a>	02/03/17	New Common Working File (CWF) Medicare Secondary Payer (MSP) Type for Liability Medicare Set-Aside Arrangements (LMSAs) and No-Fault Medicare Set-Aside Arrangements (NFMSAs)	07/03/17	9893
<a href="#">R1786OTN</a>	02/03/17	Update for Additional International Classification of Diseases (ICD)-10 Codes for the System Changes to Implement Section 231 of the Consolidated Appropriations Act, 2016, Temporary Exception for Certain Severe Wound Discharges From Certain Long-Term Care Hospitals (LTCHs)	07/03/17	9872
<a href="#">R1785OTN</a>	02/03/17	Payment for Oxygen Volume Adjustments and Portable Oxygen Equipment- FISS	07/03/17	9928
<a href="#">R1783OTN</a>	02/02/17	Implementing FISS Updates to Accommodate Section 603 Bipartisan Budget Act of 2015 - Phase 2	07/03/17	9907

<a href="#">R1776OTN</a>	01/27/17	Instructions to Hospitals on the Election of a Medicare-Supplemental Security Income (SSI) Component of the Disproportionate Share (DSH) Payment Adjustment for Cost Reports that Involve SSI Ratios for Fiscal Year (FY) 2004 and earlier, or SSI Ratios for Hospital Cost-reporting Periods for Patient Discharges Occurring before October 1, 2004	01/19/17	9896
<a href="#">R1775OTN</a>	01/27/17	Updated Editing of Professional Therapy Services	07/03/17	9933
<a href="#">R1774OTN</a>	01/13/17	Shared System Enhancement 2014 – Identification of Fiscal Intermediary Standard System (FISS) Obsolete Reports - Analysis Only	10/03/16	9564
<a href="#">R1772OTN</a>	01/11/17	Common Working File (CWF) Reorganization of Daily Beneficiary Extract Files	04/03/17	9787
<a href="#">R1771OTN</a>	01/10/17	Fraud Prevention System (FPS) 2 Edit Migration Testing	02/21/17	9920
<a href="#">R1770OTN</a>	01/06/17	Modifications to the National Coordination of Benefits Agreement (COBA) Crossover Process	04/03/17	9681

<a href="#">R1769OTN</a>	01/06/17	eMSN and Alternate Format MSN Service Improvements	01/03/17	9731
<a href="#">R1768OTN</a>	01/06/17	Shared System Enhancement 2015: Resolve Operating Report (ORPT) Issues - Development and Implementation	07/3/17	9734
<a href="#">R1767OTN</a>	01/06/17	Health Insurance Portability and Accountability Act (HIPAA) Electronic Data Interchange (EDI) Front End Updates for July 2017	07/3/17	9881
<a href="#">R1765OTN</a>	12/23/16	SSNRI: MAC-Only Analysis and Planning for the Social Security Number Removal Initiative (SSNRI) Project	02/24/17	9884
<a href="#">R1758OTN</a>	11/23/16	Updates for the Shared System Maintainers to implement the Social Security Number Removal Initiative (SSNRI)	04/03/17	9858
<a href="#">R1757OTN</a>	11/18/16	Issuing Compliance Letters to Specific Providers and Suppliers Regarding Inappropriate Billing of Qualified Medicare Beneficiaries (QMBs) for Medicare Cost-Sharing	12/16/16	9817



<a href="#">R1756OTN</a>	11/18/16	Analysis Only - Modification of Process for Handling the Provider Enrollment Chain Ownership System (PECOS) Extract File	04/03/17	9560
<a href="#">R1755OTN</a>	11/18/16	ICD-10 Coding Revisions to National Coverage Determination (NCDs)	01/20/17	9861
<a href="#">R1754OTN</a>	11/18/16	Common Working File and Fraud Prevention System 2.0 Predictive Modeling and Edits, Data Feed Migration	01/03/17	9853
<a href="#">R1753OTN</a>	11/18/16	Coding Revisions to National Coverage Determination (NCDs)	01/03/17	9751
<a href="#">R1752OTN</a>	11/18/16	System Specific Enhancement 2014: String Testing Automation	07/05/16	9224
<a href="#">R1751OTN</a>	11/18/16	Adding a Foreign Language Tagline Sheet to Medicare Summary Notices (MSNs)	12/05/16	9617

<a href="#">R1750OTN</a>	11/10/16	Increasing the Number of Address Fields in MCS to Match the Address Fields in CWF in Order to Improve the Undeliverable Medicare Summary Notices (uMSNs) Situation: Phase One of Improving FFS9372	04/03/17	9857
<a href="#">R1748OTN</a>	11/08/16	Adding a Foreign Language Tagline Sheet to Medicare Summary Notices (MSNs)	10/28/16	9617
<a href="#">R1747OTN</a>	11/04/16	Issuing Compliance Letters to Specific Providers and Suppliers Regarding Inappropriate Billing of Qualified Medicare Beneficiaries (QMBs) for Medicare Cost-Sharing	04/03/17	9817
<a href="#">R1746OTN</a>	11/04/16	Medicare Electronic Health Record (EHR) Incentive Program – Analysis of Meaningful Use Hospital Transition into Hospital Quality Reporting System	04/03/17	9836
<a href="#">R1745OTN</a>	11/04/16	Part B Detail Line Expansion - Checkpoint Discussion Meetings	04/03/17	9840
<a href="#">R1744OTN</a>	11/04/16	Audit Trail for Reason Code Edit Changes	04/03/17	9366

<a href="#">R1743OTN</a>	11/04/16	Modifications to the National Coordination of Benefits Agreement (COBA) Crossover Process	04/03/17	9808
<a href="#">R1740OTN</a>	10/28/16	Shared System Enhancement 2015: National Coverage Determination (NCD) – Fiscal Intermediary Shared System (FISS) Implementation	04/03/17	9783
<a href="#">R1738OTN</a>	10/27/16	Network Fee Reduction for Acute Kidney Injury (AKI) services submitted on Type of Bill 72x	04/03/17	9814
<a href="#">R1736OTN</a>	10/27/16	Shared System Enhancement 2014 – Identification of Fiscal Intermediary Shared System (FISS) Obsolete On-Request Jobs - Analysis Only	04/03/17	9566
<a href="#">R1735OTN</a>	10/27/16	System Specific Enhancement 2014: Retaining Most Recent Update for Auxiliary (Aux) File Data in Common Working File (CWF)	04/03/17	9786
<a href="#">R1734OTN</a>	10/27/16	Phase 3 - Updating the Fiscal Intermediary Shared System (FISS) to Make Payment for Drugs and Biologicals Services for Outpatient Prospective Payment System (OPPS) Providers	04/03/17	9742

<a href="#">R1733OTN</a>	10/27/16	Modifications to the National Coordination of Benefits Agreement (COBA) Crossover Process	04/03/17	9681
<a href="#">R1732OTN</a>	10/27/16	Phase Three: Changing Fiscal Intermediary Shared System (FISS) Action on Informational Unsolicited Responses (IURs) From Canceled Claims to Adjustments	04/03/17	9816
<a href="#">R1731OTN</a>	10/26/16	Fiscal Intermediary Shared System (FISS) Health Information Technology for Economic and Clinical Health (HITECH) Quarterly Report	01/03/17	9555
<a href="#">R1730OTN</a>	10/21/16	Part B Detail Line Expansion – MCS Phase 5	04/03/17	9800
<a href="#">R1729OTN</a>	10/21/16	Analysis Only - Populate MCS PE Screens from PECOS (Phased Approach)	04/03/17	9805
<a href="#">R1728OTN</a>	10/21/16	Part B Detail Line Expansion – MCS Phase 6	04/03/17	9801

<a href="#">R1725OTN</a>	10/13/16	Changes to the End-Stage Renal Disease (ESRD) Facility Claim (Type of Bill 72X) to Accommodate Dialysis Furnished to Beneficiaries with Acute Kidney Injury (AKI)	01/03/17	9598
<a href="#">R1724OTN</a>	10/07/16	Common Working File (CWF) Reorganization of Daily Beneficiary Extract Files	04/03/17	9787
<a href="#">R1722OTN</a>	09/29/16	Updating the Fiscal Intermediary Shared System (FISS) to Make Payment for Drugs and Biologicals Services for Outpatient Prospective Payment System (OPPS) Providers	07/05/16	9479
<a href="#">R1721OTN</a>	09/29/16	Adding a Foreign Language Tagline Sheet to Medicare Summary Notices (MSNs)	12/05/16	9617
<a href="#">R1720OTN</a>	09/23/16	Reporting of All Recovery Auditor-Initiated Claim Adjustments and their Subsequent Adjustments for Periodic Interim Payment (PIP) Facilities	01/03/17	9662
<a href="#">R1718OTN</a>	09/15/16	Common Working File (CWF) to Remove Remaining Federal Tax Information (FTI) Received through the Internal Revenue Service (IRS), Social Security Administration (SSA), Centers for Medicare and Medicaid Services (CMS) Medicare Secondary Payer (MSP) Data Match Program from CWF	01/03/17	9699

<a href="#">R1717OTN</a>	09/15/16	Section 504: Adding a Qualified Reader Preference in Alternate Formats	01/03/17	9730
<a href="#">R1716OTN</a>	09/16/16	Affordable Care Act - Operating Rules - Requirements for Phase II and Phase III Compliance for Batch Processing	04/03/17	9358
<a href="#">R1715OTN</a>	09/16/16	Updates to the 72X Type of Bill for Home and Self-Dialysis Training, Retraining, and Nocturnal Hemodialysis	01/03/17	9609
<a href="#">R1714OTN</a>	09/01/16	Shared System Enhancement 2014 – Identification of Fiscal Intermediary Standard System (FISS) Obsolete Reports - Analysis Only	10/02/17	9564
<a href="#">R1713OTN</a>	09/01/16	Editing Update for Screening for Sexually Transmitted Infections	01/03/17	9719
<a href="#">R1712OTN</a>	08/30/16	Shared System Enhancement 2014 – Identification of Fiscal Intermediary Standard System (FISS) Obsolete Reports - Analysis Only	10/01/16	9564

<a href="#">R1711OTN</a>	08/26/16	Medicare Appeals System (MAS) Level 1 Part A and Home, Health, Hospice (HHH) Onboarding Effort	12/31/16	9683
<a href="#">R1710OTN</a>	08/26/16	Adding a Foreign Language Tagline Sheet to Medicare Summary Notices (MSNs)	10/28/16	9617
<a href="#">R1708OTN</a>	08/19/16	Coding Revisions to National Coverage Determination (NCDs)	01/03/17	9751
<a href="#">R1707OTN</a>	08/12/16	eMSN and Alternate Format MSN Service Improvements	01/03/17	9731
<a href="#">R1706OTN</a>	08/05/16	Health Insurance Portability and Accountability Act (HIPAA) Electronic Data Interchange (EDI) Front End Updates for January 2017	01/03/17	9666
<a href="#">R1704OTN</a>	08/05/16	Implementing Provider File Updates and PECOS to FISS Interface Via Extract File Updates to Accommodate Section 603 Bipartisan Budget Act of 2015	01/03/17	9613

<a href="#">R1703OTN</a>	08/05/16	Recovery Auditor Mass Adjustment and Reporting Process Enhancements - Analysis Only	01/03/17	9587
<a href="#">R1702OTN</a>	08/05/16	Section 504: Adding a Qualified Reader Preference in Alternate Formats	01/03/17	9730
<a href="#">R1701OTN</a>	08/05/16	Combined Common Edits/Enhancements (CCEM) Third Party Software Upgrades	01/03/17	9738
<a href="#">R1699OTN</a>	08/05/16	Appropriate Use Criteria for Advanced Imaging – Analysis and Design	01/03/17	9707
<a href="#">R1698OTN</a>	08/05/16	Editing Update for Screening for Sexually Transmitted Infections	01/03/17	9719
<a href="#">R1697OTN</a>	08/05/16	Reporting of All Recovery Auditor-Initiated Claim Adjustments and their Subsequent Adjustments for Periodic Interim Payment (PIP) Facilities	01/03/17	9662



<a href="#">R1696OTN</a>	08/05/16	Shared System Enhancement 2014 - Additional Removal of Obsolete Reports and On-Request Jobs from the ViPS Medicare System (VMS) -- Implementation	01/03/17	9618
<a href="#">R1695OTN</a>	08/05/16	Fiscal Intermediary Shared System (FISS) Health Information Technology for Economic and Clinical Health (HITECH) Quarterly Report	01/03/17	9555
<a href="#">R1693OTN</a>	07/29/16	Common Working File (CWF) to Remove Remaining Federal Tax Information (FTI) Received through the Internal Revenue Service (IRS), Social Security Administration (SSA), Centers for Medicare and Medicaid Services (CMS) Medicare Secondary Payer (MSP) Data Match Program from CWF	01/03/17	9699
<a href="#">R1688OTN</a>	07/29/16	Part B Detail Line Expansion – MCS Phase 2	01/03/17	9653
<a href="#">R1687OTN</a>	07/29/16	Common Working File (CWF) to Locate Medicare Beneficiary Record and Provide Responses to Provider Queries	01/03/17	9740
<a href="#">R1686OTN</a>	07/29/16	Part B Detail Line Expansion – MCS Phase 7	01/03/17	9663

<a href="#">R1685OTN</a>	07/29/16	Update the Primary Insurer's Policy Number of the Insured Field to 17 Bytes on the Health Insurance Master Record (HIMR) Screen Found in the Medicare Secondary Payer (MSP) Auxiliary File	01/03/17	9728
<a href="#">R1683OTN</a>	07/21/16	Shared Savings Program (SSP) Accountable Care Organization (ACO) Qualifying Stay Edits	10/03/17	9568
<a href="#">R1681OTN</a>	07/15/16	The Supplemental Security Income (SSI)/Medicare Beneficiary Data for Fiscal Year 2014 for Inpatient Prospective Payment System (IPPS) Hospitals, Inpatient Rehabilitation Facilities (IRFs), and Long Term Care Hospitals (LTCH)	08/16/17	9648
<a href="#">R1679OTN</a>	07/01/16	Shared Savings Program (SSP) Accountable Care Organization (ACO) Qualifying Stay Edits	01/03/17	9568
<a href="#">R1677OTN</a>	06/23/16	Revised Fee Schedules for Healthcare Common Procedure Coding System (HCPCS) Code E1012 in Association with Change Request 9642	07/05/16	9692
<a href="#">R1675OTN</a>	06/16/16	System Changes to Implement Section 231 of the Consolidated Appropriations Act, 2016, Temporary Exception for Certain Severe Wound Discharges From Certain Long-Term Care Hospitals (LTCHs)	10/03/16	9599

<a href="#">R1674OTN</a>	06/17/16	Medicare Administrative Contractors (MACs) Analysis of the Proposed Contract CMS Security Clause Update	07/18/16	9645
<a href="#">R1673OTN</a>	06/10/16	Shared System Enhancement 2015 Analysis and Design HUOPCUT Hospice Period and Health Maintenance Organization (HMO) Processing	06/20/16	9419
<a href="#">R1672OTN</a>	06/03/16	Coding Revisions to National Coverage Determinations (NCDs)	10/3/16	9631
<a href="#">R1671OTN</a>	06/02/16	Payment Change for Group 3 Complex Rehabilitative Power Wheelchairs Accessories and Seat and Back Cushions under Section 2 of the Patient Access and Medicare Protection Act (PAMPA) for Home Health Claims	10/3/16	9586
<a href="#">R1670OTN</a>	05/20/16	Shared System Enhancement 2014 – Identification of Fiscal Intermediary Standard System (FISS) Obsolete Reports - Analysis Only	10/03/16	9564
<a href="#">R1669OTN</a>	05/20/16	Guidance on Implementing System Edits for Certain Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS)	10/03/16	9371

<a href="#">R1668OTN</a>	05/13/16	National Provider Identifier Crosswalk System (NPICS) Retirement Analysis Only - Engage Shared Systems Maintainers and Medicare Administrative Contractors (MACs) in Meetings and Correspondence Related to the NPICS Retirement with the Stakeholders	10/03/16	9604
<a href="#">R1667OTN</a>	05/12/16	Analysis Only CR - Medicare ID end-date	10/03/16	9605
<a href="#">R1665OTN</a>	05/13/16	Coding Revisions to National Coverage Determinations (NCDs)	10/03/16	9631
<a href="#">R1664OTN</a>	05/13/16	Reporting Medicare Administrative Contractor (MAC) Provider Education Website Analytic Data to the Provider Customer Service Program Contractor Information Database (PCID)	06/14/16	9619
<a href="#">R1660OTN</a>	05/06/16	Shared Savings Program (SSP) Accountable Care Organization (ACO) Qualifying Stay Edits	10/03/16	9568
<a href="#">R1659OTN</a>	05/06/16	Convert Assembler Code to COBOL or Best Coding Language to Improve MCS System Maintainability and Sustainability, Analysis only	10/03/16	9624

<a href="#">R1658OTN</a>	04/29/16	Coding Revisions to National Coverage Determinations	07/05/16	9540
<a href="#">R1657OTN</a>	04/29/16	Issuing Continuing Compliance Letters to Specific Providers and Suppliers	02/22/16	9462
<a href="#">R1655OTN</a>	04/29/16	Recurring calls with the Fiscal Intermediary Shared System (FISS) for any in-depth discussions	10/03/16	9556
<a href="#">R1654OTN</a>	04/29/16	System Changes to Implement Section 231 of the Consolidated Appropriations Act, 2016, Temporary Exception for Certain Severe Wound Discharges From Certain Long-Term Care Hospitals (LTCHs)	10/03/16	9599
<a href="#">R1653OTN</a>	04/29/16	New State Code for AZ, ID, NY, and WV	10/03/16	9567
<a href="#">R1652OTN</a>	04/29/16	Analysis Only: To Obtain a Rough Order of Magnitude (ROM) from Durable Medical Equipment Medicare Administrative Contractors (DME MACs), GDIT/VMS, the National Supplier Clearinghouse (NSC) and the Common Electronic Data Interchange (CEDI) Contractor to Develop and Implement a Process for DME MAC Provider Self-Service	10/03/16	9593

		Internet Portal Authentication of Medicare Providers Using EDI Enrollment Data Elements		
<a href="#">R1651OTN</a>	04/28/16	National Provider Identifier Crosswalk System (NPICS) Retirement Analysis Only - Engage Shared Systems Maintainers and Medicare Administrative Contractors (MACs) in Meetings and Correspondence Related to the NPICS Retirement with the Stakeholders	10/03/16	9604
<a href="#">R1650OTN</a>	04/28/16	Shared System Enhancement 2015: Archive/Remove Inactive Medicare Demonstration Projects	10/03/16	9473
<a href="#">R1649OTN</a>	04/28/16	Phase 2 of Updating the Fiscal Intermediary Shared System (FISS) to Make Payment for Drugs and Biologicals Services for Outpatient Prospective Payment System (OPPS) Providers	10/03/16	9601
<a href="#">R1647OTN</a>	04/28/16	Payment Change for Group 3 Complex Rehabilitative Power Wheelchairs Accessories and Seat and Back Cushions under Section 2 of the Patient Access and Medicare Protection Act (PAMPA) for Home Health Claims	10/03/16	9586
<a href="#">R1646OTN</a>	04/28/16	Upgrade (Jaspersoft) reporting software for the Combined Common Edits/Enhancement Module (CCEM)	10/03/16	9592

<a href="#">R1645OTN</a>	04/28/16	Analysis of the Combined Common Edits/Enhancements Module (CCEM) 3rd Party Software	10/03/16	9594
<a href="#">R1644OTN</a>	04/26/16	Reclassification of Certain Durable Medical Equipment HCPCS Codes Included in Competitive Bidding Programs (CBP) from the Inexpensive and Routinely Purchased Payment Category to the Capped Rental Payment Category	07/05/16	8822
<a href="#">R1640OTN</a>	04/01/16	End Stage Renal Disease (ESRD) Cost Audits	05/02/16	9534
<a href="#">R1639OTN</a>	03/24/16	Reporting Principal and Interest Amounts When Refunding Previously Recouped Money on the Remittance Advice (RA)	04/04/16	9168
<a href="#">R1636OTN</a>	03/11/16	Implementation of the Award for Jurisdiction B Durable Medical Equipment (DME) Medicare Administrative Contractor (MAC) Workload	07/05/16	9526
<a href="#">R1635OTN</a>	03/11/16	VIPS Medicare System (VMS), Analysis and Design for Jurisdiction A (JA) and Jurisdiction B (JB) Durable Medical Equipment (DME) Medicare Administrative Contractors (MACs) Transitions	07/05/16	9574

<a href="#">R1634OTN</a>	03/11/16	Implementation of the Award for Jurisdiction A Durable Medical Equipment (DME) Medicare Administrative Contractor (MAC) Workload	07/05/16	9546
<a href="#">R1633OTN</a>	03/11/16	Settlement Effectuation Instructions for the Department of Health and Human Services' (DHHS) Office of Medicare Hearings and Appeals (OMHA) Settlement Conference Facilitation (SCF) Pilot Related to Part A Appeals (Phase 3)	04/11/16	9521
<a href="#">R1631OTN</a>	02/26/16	Shared System Enhancement 2015 Edit Control/Override Table, Analysis and Design	07/05/16	9418
<a href="#">R1630OTN</a>	02/26/16	Coding Revisions to National Coverage Determinations	07/05/16	9540
<a href="#">R1627OTN</a>	02/16/16	Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Competitive Bidding Program (CBP): Implementation of Round 2 Re-compete of the DMEPOS CBP Program and National Mail Order (NMO) Re-compete	07/05/16	9490
<a href="#">R1626OTN</a>	02/19/16	Reclassification of Certain Durable Medical Equipment HCPCS Codes Included in Competitive Bidding Programs (CBP) from the Inexpensive and Routinely Purchased Payment Category to the Capped Rental Payment Category	07/05/16	8822



<a href="#">R1625OTN</a>	02/05/16	Identifying "No Documentation" Medical Necessity Denials for Claims Flagged for Recovery Auditor Review	07/06/16	8913
<a href="#">R1624OTN</a>	02/05/16	System Specific Enhancement 2015: Fiscal Intermediary Standard System (FISS) Enhanced Purge Process	07/05/16	9399
<a href="#">R1623OTN</a>	02/05/16	Using scrubbed Medicare beneficiary/legal rep address data within the Fee-For-Service (FFS) systems - Analysis and Design	07/05/16	9464
<a href="#">R1622OTN</a>	02/05/16	Shared System Enhancement 2015 Analysis and Design HUOPCUT Hospice Period and Health Maintenance Organization (HMO) Processing	07/05/16	9419
<a href="#">R1620OTN</a>	02/05/16	Shared System Enhancement 2015: National Coverage Determination (NCD) Analysis Process	07/05/16	9414
<a href="#">R1619OTN</a>	02/05/16	Revision to Fiscal Intermediary Shared System (FISS) Lab Travel Allowance Editing to Include New Specimen Collection Code G0471	07/05/16	9471

<a href="#">R1618OTN</a>	02/05/16	System Specific Enhancement 2015: Replace FISS ACS/Development Letters with HP Exstream, Analysis Only	07/05/16	9398
<a href="#">R1617OTN</a>	02/04/16	System Specific Enhancement 2014: String Testing Automation	07/05/16	9224
<a href="#">R1616OTN</a>	02/04/16	Updating the Fiscal Intermediary Shared System (FISS) to Make Payment for Drugs and Biologicals Services for Outpatient Prospective Payment System (OPPS) Providers	07/05/16	9479
<a href="#">R1615OTN</a>	02/04/16	Advance Care Planning (ACP) Services furnished by Rural Health Clinics (RHCs)	07/05/16	9503
<a href="#">R1610OTN</a>	02/04/16	System Specific Enhancement 2014: Fiscal Intermediary Standard System (FISS) Edit/Rules Engine Analysis and Design	07/05/16	9211
<a href="#">R1609OTN</a>	02/04/16	Accredited Standards Committee (ASC) X12 Healthcare Claims Acknowledgement (277CA) Flat File Update	07/05/16	9454

<a href="#">R1607OTN</a>	01/29/16	Shared System Enhancement 2015 Improve Efficiency of Drug Code, Provider, and Procedure and Diagnosis Codes Processing, Analysis and Design	07/05/16	9420
<a href="#">R1606OTN</a>	01/29/16	Shared System Enhancement 2015 Edit Control/Override Table, Analysis and Design	07/05/16	9418
<a href="#">R1605OTN</a>	01/29/16	Common Working File (CWF) Daily Beneficiary Extract Files Reaching Maximum Record Size, Analysis and Design for Possible Data Reorganization	07/05/16	9451
<a href="#">R1604OTN</a>	01/29/16	Part B Detail Line Expansion – MCS Phase 3	07/05/16	9539
<a href="#">R1603OTN</a>	01/29/16	Part B Detail Line Expansion – MCS Phase 1	07/05/16	9537
<a href="#">R1602OTN</a>	01/29/16	Part B Detail Line Expansion – MCS Phase 4	07/05/16	9538

<a href="#">R1601OTN</a>	01/29/16	Payment Clarification for the Purchase of Used Inexpensive and Routinely Purchased Durable Medical Equipment (DME) when Previously Rented	07/05/16	9491
<a href="#">R1600OTN</a>	01/29/16	Award of Medicare Administrative Contractor (MAC) Contract for Jurisdiction 15	03/01/16	9456
<a href="#">R1598OTN</a>	01/29/16	Shared System Enhancement 2015 Resolve Operating Report (ORPT) Issues, Analysis and Design	07/05/16	9417
<a href="#">R1597OTN</a>	01/29/16	System Specific Enhancement 2014: Create A Single Trailer-Generating Module in Common Working File (CWF)	07/05/16	9184
<a href="#">R1596OTN</a>	01/26/16	Required Billing Updates for Rural Health Clinics	04/04/16	9269
<a href="#">R1595OTN</a>	01/22/16	Issuing Continuing Compliance Letters to Specific Providers and Suppliers	02/22/16	9462

<a href="#">R1593OTN</a>	01/22/16	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for July 2016	07/05/16	9496
<a href="#">R1592OTN</a>	01/15/16	Award of Durable Medical Equipment (DME) Medicare Administrative Contractor (MAC) Contract for Jurisdiction D	03/01/16	9453
<a href="#">R1591OTN</a>	01/08/16	Changes to the Medicare Electronic Health Record (EHR) Incentive Program Payment Adjustment beginning January 1, 2016	01/04/16	9441
<a href="#">R1590OTN</a>	01/05/16	Implementation of Procedures for Undeliverable Medicare Summary Notices (uMSNs)	04/04/16	9372
<a href="#">R1589OTN</a>	12/31/15	Updating Scanning for the Information Security and Privacy Group (ISPG) Enterprise Vulnerability Management Program (EVMP)	02/01/16	9445
<a href="#">R1588OTN</a>	12/24/15	Settlement Effectuation Instructions for the Department of Health and Human Services' (DHHS) Office of Medicare Hearings and Appeals (OMHA) Settlement Conference Facilitation (SCF) Pilot	01/13/16	9217

<a href="#">R1587OTN</a>	12/17/15	Instruction to Apply the Part A Deductible on a Medicare Secondary Payer (MSP) Inpatient Same Day Transfer Claim	04/04/16	9394
<a href="#">R1586OTN</a>	12/17/15	Eliminate Two Case-mix Payment Adjustments (Monoclonal Gammopathy and Bacterial Pneumonia) Available Under the End State Renal Disease (ESRD) Prospective Payment System (PPS) in Accordance With Section 632 of the American Taxpayer Relief Act (ATRA)	01/04/16	9268
<a href="#">R1585OTN</a>	12/16/15	Modifications to the National Coordination of Benefits Agreement (COBA) Crossover Process	07/05/16	9054
<a href="#">R1583OTN</a>	12/11/15	Settlement Effectuation Instructions for the Department of Health and Human Services' (DHHS) Office of Medicare Hearings and Appeals (OMHA) Settlement Conference Facilitation (SCF) Pilot	01/13/16	9217
<a href="#">R1580OTN</a>	12/03/15	ICD-10 Conversion/Coding Infrastructure Revisions to National Coverage Determinations (NCDs)-- 3rd Maintenance CR	01/04/16	9252
<a href="#">R1578OTN</a>	11/19/15	System Specific Enhancement 2014: Process Health Maintenance Organization (HMO) edits in a single module in Common Working File (CWF) Analysis Only	04/04/16	9185

<a href="#">R1577OTN</a>	11/20/15	System Specific Enhancement 2015: Remove Direct Claim Updates within the Daily Batch Cycle Analysis and Design CR	04/04/16	9400
<a href="#">R1575OTN</a>	11/13/15	Shared System Enhancement 2015: Identify Inactive Medicare Demonstration Projects (Analysis Only)	04/04/16	9325
<a href="#">R1574OTN</a>	11/13/15	Shared System Enhancement 2015: Technical Improvements to the Redesigned Medicare Summary Notice (MSN) process	04/04/16	9381
<a href="#">R1573OTN</a>	11/13/15	Shared System Enhancement 2014 - Removal of Obsolete Reports and On-Request Jobs from the ViPS Medicare System (VMS) -- Implementation	04/04/16	9421
<a href="#">R1572OTN</a>	11/06/15	Removal of Device Portion from Certain Discontinued Device- Intensive Ambulatory Surgical Center (ASC) Procedures Prior to the Administration of Anesthesia	04/04/16	9297
<a href="#">R1570OTN</a>	11/06/15	Reporting Principal and Interest Amounts When Refunding Previously Recouped Money on the Remittance Advice (RA)	04/04/16	9168

<a href="#">R1569OTN</a>	11/06/15	Shared System Enhancement 2015: Combined Common Edits/Enhancements Module (CCEM) Claim Tracking and Logging	04/04/16	9425
<a href="#">R1568OTN</a>	11/06/15	Implementation of Procedures for Undeliverable Medicare Summary Notices (uMSNs)	04/04/16	9372
<a href="#">R1567OTN</a>	11/06/15	System Specific Enhancements 2014: Retaining most recent update for Auxiliary (Aux) file data in Common Working File (CWF) Analysis Only	04/04/16	9186
<a href="#">R1565OTN</a>	11/06/15	System Specific Enhancement 2015: Fiscal Intermediary Standard System (FISS) Extend Hard Segregation of Security	04/04/16	9402
<a href="#">R1564OTN</a>	11/06/15	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for April 2016	04/04/16	9405
<a href="#">R1561OTN</a>	11/06/15	Part B Detail Line Expansion - Trailer 08 Update	04/04/16	9379



<a href="#">R1560OTN</a>	11/05/15	Instruction to Apply the Part A Deductible on a Medicare Secondary Payer (MSP) Inpatient Same Day Transfer Claim	04/04/16	9394
<a href="#">R1559OTN</a>	11/05/15	Shared System Enhancement 2015: Modify Purged Claim History to Improve Efficiency	04/04/16	9422
<a href="#">R1557OTN</a>	11/05/15	System Specific Enhancement 2015: Archive Competitive Bidding Demonstration Logic in ViPS Medicare System (VMS)	04/04/16	9376
<a href="#">R1556OTN</a>	11/05/15	Shared System Enhancement 2015: Eliminate Remaining Uses of AREAFILE and CUSTCHRG Virtual Storage Access Method Files	04/04/16	9373
<a href="#">R1554OTN</a>	11/05/15	System Specific Enhancements 2014: Retaining Most Recent Update for Auxiliary (Aux) File Data in Common Working File (CWF)	04/04/16	9337
<a href="#">R1553OTN</a>	11/05/15	New State Code for CT, MA, NJ, PR, GA, NC, SC, TN, AR, OK, CO, CA, OR, LA, NM, TX and WA	04/04/16	9300

<a href="#">R1552OTN</a>	11/05/15	Medicare Remit Easy Print (MREP) Upgrade	04/04/16	9291
<a href="#">R1551OTN</a>	11/05/15	System Specific Enhancements 2014: Move PAP smear Risk Indicator (PAPRI) and Technical (TECH)/Professional (PROF) Dates to Screening Auxiliary file	04/04/16	9188
<a href="#">R1550OTN</a>	11/05/15	System Specific Enhancement 2014: Process Health Maintenance Organization (HMO) edits in a single module in Common Working File (CWF)	04/04/16	9185
<a href="#">R1549OTN</a>	10/30/15	Shared System Enhancement 2014 - Removal of Railroad Board (RRB) obsolete reports identified by Multi-Carrier System (MCS) Shared System Maintainer (SSM)	04/04/16	9294
<a href="#">R1548OTN</a>	10/30/15	Analysis Only: To Obtain the Level of Effort (LOE) from Medicare Administrative Contractors (MACs) to Implement Multifactor Authentication (MFA) as an Option for Non-Organization Users and to also Obtain the Level of Effort (LOE) from Medicare Administrative Contractors (MACs) to Implement Multifactor Authentication (MFA) as a Requirement for Non-Organization Users	12/02/15	9309

<a href="#">R1545OTN</a>	09/30/15	Procedures for Processing Under Tolerance Part A 935, Part A-Other, Part A and B Healthcare Professional Shortage Area (HPSA), and Part A-Provider Recovery Audit Contractor (RAC) Identified debts in the Healthcare Integrated General Ledger Accounting System (HIGLAS)	07/05/16	9221
<a href="#">R1544OTN</a>	09/22/15	Implementation of Long-Term Care Hospital (LTCH) Prospective Payment System (PPS) Based on Specific Clinical Criteria	07/06/15	9015
<a href="#">R1542OTN</a>	09/04/15	Implementation of Biosimilar Claim Modifiers	01/04/16	9284
<a href="#">R1541OTN</a>	08/28/15	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for October 2015	10/01/15	9145
<a href="#">R1540OTN</a>	08/28/15	Modification to the Telehealth Originating Site Facility Fee Billing Requirements for Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHCs)	10/05/15	9144
<a href="#">R1539OTN</a>	08/28/15	Implementing the Insertion of a Sheet of Paper Promoting the Electronic Medicare Summary Notices (eMSNs) into Mailed Medicare Summary Notices (MSNs)	09/29/15	9275

<a href="#">R1538OTN</a>	08/28/15	Medicare Prior Authorization of Power Mobility Devices (PMDs) Demonstration: Advance Determination of Medicare Coverage (ADMC) Reviews for Beneficiaries Who Have Representative Payees	09/29/15	9286
<a href="#">R1537OTN</a>	08/21/15	ICD-10 Conversion/Coding Infrastructure Revisions to National Coverage Determinations (NCDs)-- 3rd Maintenance CR	01/04/16	9252
<a href="#">R1536OTN</a>	08/21/15	Increasing Tax Withholding to 100 Percent for Internal Revenue Service (IRS) Federal Payment Levy Program (FPLP)	10/16/15	9285
<a href="#">R1535OTN</a>	08/14/15	International Classification of Diseases, 10th Revision (ICD-10) Additional Acknowledgement Testing Reporting	09/15/15	9256
<a href="#">R1534OTN</a>	08/07/15	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for January 2016	01/04/16	9259
<a href="#">R1533OTN</a>	08/07/15	Update Hard Coded Audit 205A MSP Return Code 3925 and Edit 152D	01/04/16	9237

<a href="#">R1528OTN</a>	08/06/15	Reporting of Anti-Cancer and Anti-Emetic Drugs	01/04/16	9255
<a href="#">R1527OTN</a>	08/06/15	Update for Paper Claims Processing Under the Administrative Simplification Compliance Act (ASCA)	09/08/15	9210
<a href="#">R1525OTN</a>	08/06/15	Add Original Common Working Files (CWF) Occurrence Number to the CWF Feed to MBD	01/04/16	9209
<a href="#">R1524OTN</a>	08/06/15	Medicare Remit Easy Print (MREP) Upgrade	01/04/16	9203
<a href="#">R1523OTN</a>	07/31/15	Procedures for Processing Under Tolerance Part A 935, Part A-Other, Part A and B Healthcare Professional Shortage Area (HPSA), and Part A-Provider Recovery Audit Contractor (RAC) Identified debts in the Healthcare Integrated General Ledger Accounting System (HIGLAS)	04/04/16	9221
<a href="#">R1522OTN</a>	07/31/15	Data Act Treasury Referral Timeframe and Reporting - DME MAC Changes	08/31/15	9193

<a href="#">R1521OTN</a>	07/24/15	CMS Information Security Acceptable Risk Safeguards Update - Multifactor Authentication	09/25/15	9277
<a href="#">R1519OTN</a>	07/10/15	Medicare Appeals System (MAS) Upgrade	07/27/15	9208
<a href="#">R1518OTN</a>	07/10/15	Contractor Reporting of Operational and Workload Data (CROWD) Form 5 Remittance Advice Reporting	08/11/15	9181
<a href="#">R1517OTN</a>	07/02/15	Tester Resolution Reports for International Classification of Diseases, Tenth Revision (ICD-10) Limited End to End Testing with Submitters	05/29/15	9137
<a href="#">R1516OTN</a>	07/02/15	Analysis and Design for Part B Detail Line Expansion	10/05/15	9096
<a href="#">R1514OTN</a>	07/02/15	Award of Medicare Administrative Contractor (MAC) Contract for Jurisdiction J	06/01/15	8960

<a href="#">R1511OTN</a>	06/12/15	Classification of Speech Generating Devices (SGD) and Accessories under the Payment Category for Inexpensive or Routinely Purchased Durable Medical Equipment	10/05/15	9179
<a href="#">R1510OTN</a>	06/12/15	Award of Medicare Administrative Contractor (MAC) Contract for Jurisdiction M	07/13/15	9171
<a href="#">R1508OTN</a>	06/05/15	The Supplemental Security Income (SSI)/Medicare Beneficiary Data for Fiscal Year 2013 for Inpatient Prospective Payment System (IPPS) Hospitals, Inpatient Rehabilitation Facilities (IRFs), and Long Term Care Hospitals (LTCH)	07/06/15	9195
<a href="#">R1507OTN</a>	05/22/15	HIGLAS Release 12 (R12) Upgrade and Organizational Transitions for A/B MACs - R12 Upgrade	06/23/15	9135
<a href="#">R1505OTN</a>	05/22/15	Analysis for Inserting a Pre-printed Sheet of Paper in Medicare Summary Notice (MSN) Envelopes	06/23/15	9161
<a href="#">R1504OTN</a>	05/20/15	ICD-10 Conversion/Coding Infrastructure Revisions/ICD-9 Updates to National Coverage Determinations (NCDs)--2nd Maintenance CR	06/22/15	9087

<a href="#">R1503OTN</a>	05/15/15	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for July 2015	07/06/15	9064
<a href="#">R1502OTN</a>	05/15/15	Analysis - Procedures for Undeliverable Medicare Summary Notices (MSNs)	10/05/15	9047
<a href="#">R1500OTN</a>	05/08/15	IDR Shared Systems Daily Claims Feeds Expansion to Accommodate Medical Review Data Elements	10/05/15	9126
<a href="#">R1499OTN</a>	05/08/15	Section 504: Implement National Medicare Summary Notices (MSNs) in Alternate Formats	10/05/15	9153
<a href="#">R1498OTN</a>	05/08/15	Modifications to the National Coordination of Benefits Agreement (COBA) Crossover Process	10/05/15	9054
<a href="#">R1497OTN</a>	05/08/15	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for October 2015	10/01/15	9145



<a href="#">R1496OTN</a>	05/08/15	Modification to the Telehealth Originating Site Facility Fee Billing Requirements for Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHCs)	10/05/15	9144
<a href="#">R1495OTN</a>	08/19/15	Revision to Medicare Code Editor (MCE) Edit, Procedure Inconsistent with Length of Stay (LOS) for International Classification of Diseases, Tenth Revision, Procedure Classification System (ICD-10-PCS) Respiratory Ventilation, Greater than 96 Consecutive Hours	10/05/15	9117
<a href="#">R1494OTN</a>	08/19/15	Updates of Medicare Severity Diagnosis Related Groups (MS-DRGs) to the List Subject to Inpatient Prospective Payment System (IPPS) Replaced Devices Offered without Cost or with a Credit Policy	10/05/15	9121
<a href="#">R1492OTN</a>	05/05/15	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for July 2015	07/06/15	9064
<a href="#">R1491OTN</a>	05/01/15	Identification of Obsolete Shared System Maintainer (SSM) On-Request Jobs - FISS and VMS	10/05/15	9102
<a href="#">R1490OTN</a>	05/01/15	Identification of Obsolete Shared System Maintainer (SSM) Reports - FISS and VMS	10/05/15	9103

<a href="#">R1489OTN</a>	05/01/15	Analysis and Design for Part B Detail Line Expansion	10/05/15	9096
<a href="#">R1488OTN</a>	04/17/15	The Supplemental Security Income (SSI)/Medicare Beneficiary Data for Fiscal Year 2012 for Inpatient Prospective Payment System (IPPS) Hospitals, Inpatient Rehabilitation Facilities (IRFs), and Long Term Care Hospitals (LTCH)	05/18/15	8835
<a href="#">R1486OTN</a>	04/10/15	Increasing Tax Withholding to 30% for IRS Federal Payment Levy Program (FPLP)	06/19/15	9154
<a href="#">R1485OTN</a>	04/10/15	Continuation of Systematic Validation of Payment Group Codes for Prospective Payment Systems (PPS) Based on Patient Assessments	07/06/15	9132
<a href="#">R1483OTN</a>	03/31/15	Identifying "No Documentation" Medical Necessity Denials for Claims Flagged for Recovery Auditor Review	07/06/15	8913
<a href="#">R1482OTN</a>	03/27/15	Use of Modifiers KK, KG, KU, and KW under the Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Competitive Bidding Program	07/06/15	9059

<a href="#">R1481OTN</a>	03/27/15	Tester Resolution Reports for International Classification of Diseases, Tenth Revision (ICD-10) Limited End to End Testing with Submitters	05/29/15	9137
<a href="#">R1480OTN</a>	03/26/15	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for July 2015	07/06/15	9064
<a href="#">R1478OTN</a>	03/06/15	ICD-10 Conversion/Coding Infrastructure Revisions/ICD-9 Updates to National Coverage Determinations (NCDs)--2nd Maintenance CR	04/06/15	9087
<a href="#">R1476OTN</a>	02/26/15	International Classification of Diseases, Tenth Revision (ICD-10) Limited End-to-end Testing with Submitters for 2015	01/05/15	8867
<a href="#">R1475OTN</a>	02/27/15	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for April 2015	04/06/15	8851
<a href="#">R1473OTN</a>	02/27/15	Correction of the Maintenance of the Medicare Status Code	07/06/15	9080

<a href="#">R1470OTN</a>	02/13/15	Durable Medical Equipment Prosthetics Orthotics and Supplies (DMEPOS) Competitive Bidding Program (CBP): Additional Instructions for Grandfathered Items Subject to CBP	07/06/15	9060
<a href="#">R1469OTN</a>	02/13/15	Develop Rough Order of Magnitude (ROM) for Appeals Workload in Preparation for Implementation of International Classification of Diseases-10th Revision (ICD-10)	03/16/15	9036
<a href="#">R1468OTN</a>	02/13/15	Identification of Obsolete Shared System Maintainer (SSM) Reports	07/06/15	9022
<a href="#">R1467OTN</a>	02/13/15	Reporting Force Balance Claim Payment on the Electronic Remittance Advice (ERA) 835 and Cross Over Beneficiary (COB) 837 Claim Transactions	07/06/15	9050
<a href="#">R1466OTN</a>	02/13/15	Use of Modifiers KK, KG, KU, and KW under the Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Competitive Bidding Program	07/06/15	9059
<a href="#">R1463OTN</a>	02/06/15	Identification of Obsolete Shared System Maintainer (SSM) On- Request Jobs	07/06/15	9023

<a href="#">R1462OTN</a>	02/06/15	Identifying “No Documentation” Medical Necessity Denials for Claims Flagged for Recovery Auditor Review	10/05/15	8913
<a href="#">R1460OTN</a>	01/30/15	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for July 2015	07/06/15	9064
<a href="#">R1459OTN</a>	01/30/15	Continuation of Systematic Validation of Payment Group Codes for Prospective Payment Systems (PPS) Based on Patient Assessments	07/06/15	9016
<a href="#">R1458OTN</a>	01/30/15	Fee for Service Beneficiary Data Streamlining (FFS BDS) Phase II Beneficiary Address Analysis and Design	07/06/15	9029
<a href="#">R1457OTN</a>	01/30/15	Renaming PPS-FLX6- PAYMENT Field in the Inpatient Prospective Payment System (IPPS) Pricer Output	07/06/15	9031
<a href="#">R1456OTN</a>	01/30/15	Phase Two: Changing Fiscal Intermediary Shared System (FISS) Action on Informational Unsolicited Responses (IURs) From Canceled Claims to Adjustments	07/06/15	8990

<a href="#">R1455OTN</a>	01/30/15	Corrections to Processing Service Facility Information on Hospice Claims	07/06/15	9042
<a href="#">R1450OTN</a>	01/09/15	Moratorium on Classification of Long-Term Care Hospitals (LTCH) or Satellites/Increase in Certified LTCH Beds	02/10/15	9025
<a href="#">R1449OTN</a>	12/19/14	2015 Electronic Health Record System Payment Adjustment Letter	12/29/14	9024
<a href="#">R1446OTN</a>	12/05/14	IDR Shared Systems Daily Claims Feeds Expansion to Accommodate Medical Review Data Elements	01/05/15	8823
<a href="#">R1445OTN</a>	12/05/14	Rescind and Replace of CR 8409: Reclassification of Certain Durable Medical Equipment from the Inexpensive and Routinely Purchased Payment Category to the Capped Rental Payment Category	04/07/14	8566
<a href="#">R1444OTN</a>	11/06/14	Analysis and Design to Automate Adjustments That Are Completed In The Common Working File (CWF) When Inpatient (INP) Or Skilled Nursing Facility (SNF) Claims Are Processed Out Of Sequence	04/06/15	8934

<a href="#">R1441OTN</a>	11/06/14	Implementation Instructions for the A/B and DME Medicare Administrative Contractors (MACs) and their Designated Shared Systems to Send the Correct Cost Avoided Indicator and Special Project Type to the Common Working File (CWF) To Ensure Correct Savings is Applied Both to the Medicare Secondary Payer (MSP) Savings Report and the Originating Contractor	04/06/15	8762
<a href="#">R1440OTN</a>	11/06/14	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for April 2015	04/06/15	8851
<a href="#">R1438OTN</a>	11/06/14	Data Quality between the Fiscal Intermediary Shared System (FISS) and the Common Working File (CWF)	04/06/15	8931
<a href="#">R1437OTN</a>	11/06/14	Data Quality Between the Multi Carrier System (MCS) and ViPS Medicare System (VMS) and the Common Working File (CWF)	04/06/15	8930
<a href="#">R1436OTN</a>	11/06/14	Fee for Service Beneficiary Data Streamlining (FFS BDS) Phase II Analysis	04/06/15	8915

<a href="#">R1435OTN</a>	11/06/14	New Informational Unsolicited Response (IUR) Process for Durable Medical Equipment (DME) Items Furnished during a Part A Hospital Inpatient Stay	04/06/15	8844
<a href="#">R1434OTN</a>	11/06/14	Payment for G0101 and Q0091 in Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHCs) that Bill under the All-Inclusive Rate (AIR) System	04/06/15	8927
<a href="#">R1433OTN</a>	11/06/14	Additional Instruction on the Use of Claims Adjustment Reason Codes (CARCs) and Remittance Advice Remark Codes (RARCs) with Regard to Operating Rule: 360 Compliance	04/06/15	8790
<a href="#">R1429OTN</a>	10/01/14	Fee for Service Beneficiary Data Streamlining (FFS BDS) Updates to Operational Issues	01/05/15	8677
<a href="#">R1428OTN</a>	09/24/14	Correction to Hospice Notice of Revocation Processing	01/05/15	8795
<a href="#">R1424OTN</a>	08/22/14	IDR Shared Systems Daily Claims Feeds Expansion to Accommodate Medical Review Data Elements	01/05/15	8823



<a href="#">R1423OTN</a>	08/22/14	International Classification of Diseases, 10th Revision (ICD-10) Testing - Acknowledgement Testing with Providers	09/30/14	8858
<a href="#">R1422OTN</a>	08/15/14	Specific Modifiers for Distinct Procedural Services	01/05/14	8863
<a href="#">R1421OTN</a>	08/15/14	Revised Modification to the Medically Unlikely Edit (MUE) Program	01/05/14	8853
<a href="#">R1420OTN</a>	08/15/14	DMEPOS Competitive Bidding Program (CBP): Correction to VMS Processing of Wheelchair Accessory Claims for Round 2	01/05/15	8864
<a href="#">R1418OTN</a>	08/08/14	Implement Operating Rules - Phase III ERA EFT: CORE 360 Uniform Use of Claim Adjustment Reason Codes (CARC) and Remittance Advice Remark Codes (RARC) Rule - Update from CAQH CORE - July 1, 2014 version <b>3.1.1</b>	09/02/14	8711
<a href="#">R1414OTN</a>	08/01/14	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for January 2015	01/05/15	8753

<a href="#">R1413OTN</a>	08/01/14	Medicare Remit Easy Print (MREP) Enhancement	01/05/15	8856
<a href="#">R1412OTN</a>	08/01/14	Modifying FISS Part B Claims Overlap Edits related to CMS-1599-F	01/05/15	8820
<a href="#">R1411OTN</a>	08/01/14	Removal of User-Controlled Effective Date to Apply Therapy Caps to Critical Access Hospital (CAH) Claims	01/05/15	8686
<a href="#">R1410OTN</a>	08/01/14	Instructions for Removing Logic Involving the IUR Implemented with CR8271	01/05/15	8573
<a href="#">R1409OTN</a>	08/01/14	IDR Shared Systems Daily Claims Feeds Expansion to Accommodate Ambulance Data Elements	01/05/15	8741
<a href="#">R1408OTN</a>	08/01/14	Fee for Service Beneficiary Data Streamlining (FFS BDS) Updates to Operational Issues	01/05/15	8677

<a href="#">R1407OTN</a>	08/01/14	Inpatient Hospital Claims and Medicare Secondary Payer (MSP) Claims with Medicare Coinsurance Days and/or Medicare Lifetime Reserve Days Occurring in the Seventh or More Calendar Years – Analysis and Design Only	01/05/15	8555
<a href="#">R1406OTN</a>	08/01/14	Add Smoking Cessation Initial Session Date to the Common Working File (CWF) to Medicare Beneficiary Database (MBD) Extract File	01/05/15	8631
<a href="#">R1405OTN</a>	08/01/14	Diagnosis Reporting on Home Health Claims	01/05/15	8813
<a href="#">R1404OTN</a>	08/01/14	Modify the Daily Common Working File (CWF) to Medicare Beneficiary Database (MBD) File to no longer include Preventive Healthcare Common Procedure Coding System (HCPCS) Codes that have been terminated	01/05/15	8745
<a href="#">R1403OTN</a>	08/01/14	Change in Applying Co-insurance and Lifetime Reserve (LTR) Amounts on Informational Only Claims with Condition Code (CC) 04	01/05/15	8704
<a href="#">R1401OTN</a>	08/01/14	Fee for Service Beneficiary Data Streamlining (FFS BDS) - Phase II - Auxiliary Data	01/05/15	8681

<a href="#">R1399OTN</a>	08/01/14	Federally Qualified Health Centers Prospective Payment System- Recurring File Updates	01/05/15	8854
<a href="#">R1397OTN</a>	07/25/14	Consolidation of HIGLAS Organizations for a MAC - Organization Merges	07/27/14	8817
<a href="#">R1396OTN</a>	07/25/14	Clarification of Remittance Advice Code Combination Reports Generated by Shared Systems	07/07/14	8616
<a href="#">R1395OTN</a>	07/16/14	Implementation of a Prospective Payment System (PPS) for Federally Qualified Health Centers (FQHCs)	10/6/14	8743
<a href="#">R1392OTN</a>	06/25/14	Implement Operating Rules - Phase III ERA EFT: CORE 360 Uniform Use of Claim Adjustment Reason Codes (CARC) and Remittance Advice Remark Codes (RARC) Rule - Update from CAQH CORE - June 1, 2014 version <b>3.1.0</b>	09/02/14	8711
<a href="#">R1390OTN</a>	06/06/14	Implementing the Re-competition Award for the Jurisdiction N (formerly Jurisdiction 9) Part A/Part B Medicare Administrative Contractor (A/B MAC) Workload	07/08/14	8759

<a href="#">R1388OTN</a>	05/23/14	ICD-10 Conversion/Coding Infrastructure Revisions/ICD-9 Updates to National Coverage Determinations (NCDs)-- Maintenance CR	10/06/14	8691
<a href="#">R1386OTN</a>	05/16/14	Modifying the Daily Common Working File (CWF) to Medicare Beneficiary Database (MBD) File to Include Diagnosis Codes on the Health Insurance Portability and Accountability Act Eligibility Transaction System (HETS) 270/271 Transactions	10/06/14	8456
<a href="#">R1385OTN</a>	05/16/14	Additional States Requiring Payment Edits for DMEPOS Suppliers of Prosthetics and Certain Custom-Fabricated Orthotics. Update to CR 3959 and CR 8390	06/17/14	8730
<a href="#">R1384OTN</a>	05/16/14	Posting the Limiting Charge after Applying the Electronic Health Record (EHR) and Physician Quality Reporting System (PQRS) Negative Adjustments	10/06/14	8667
<a href="#">R1383OTN</a>	05/09/14	Implementation of a Prospective Payment System (PPS) for Federally Qualified Health Centers (FQHCs)	10/06/14	8743
<a href="#">R1380OTN</a>	05/02/14	Present on Admission (POA) Indicator Editing for Maryland Waiver Hospitals	10/06/14	8709

<a href="#">R1379OTN</a>	05/02/14	Anesthesiologist/Certified Registered Nurse Anesthetist (CRNA) Related Services in a Method II Critical Access Hospital (CAH)	10/06/14	8708
<a href="#">R1378OTN</a>	05/02/14	Implement Operating Rules - Phase III ERA EFT: CORE 360 Uniform Use of Claim Adjustment Reason Codes (CARC) and Remittance Advice Remark Codes (RARC) Rule - Update from CAQH CORE - June 1, 2014 version 3.0.5	10/06/14	8711
<a href="#">R1377OTN</a>	05/01/14	Hewlett Packard Enterprise Services, LLC (HPES) Shared Systems Maintainer (SSM) support for Medicare Administrator Contractors (MACs) testing and inquiries for the Combined Common Edits/Enhancements Module (CCEM) for Part A and Part B	10/06/14	8722
<a href="#">R1376OTN</a>	05/01/14	Return Maintenance of the ANSILIST to the Durable Medical Equipment (DME) Medicare Administrative Contractors (MACs)	10/06/14	8729
<a href="#">R1375OTN</a>	05/01/14	Adding New MSP Data Fields to the CWF Daily File	10/06/14	8733
<a href="#">R1374OTN</a>	05/01/14	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for October 2014	10/06/14	8700

<a href="#">R1373OTN</a>	04/28/14	CWF Editing for Vaccines Furnished at Hospice - Correction	04/07/14	8620
<a href="#">R1371OTN</a>	04/18/14	Instructions to Contractors for Implementing Section 5506 of the Affordable Care Act (ACA) - Preservation of Resident Cap Positions from Closed Teaching Hospitals – Rounds 1, 2, 3 and After	05/19/14	8633
<a href="#">R1370OTN</a>	04/10/14	Implement Operating Rules - Phase III ERA EFT: CORE 360 Uniform Use of Claim Adjustment Reason Codes (CARC) and Remittance Advice Remark Codes (RARC) Rule - Update from CAQH CORE - February 1, 2014 version 3.0.4	07/07/14	8651
<a href="#">R1369OTN</a>	04/10/14	Clarification of Remittance Advice Code Combination Reports Generated by Shared Systems	10/06/14	8616
<a href="#">R1367OTN</a>	04/09/14	Implementation of NACHA Operating Rules for Health Care Electronic Funds Transfers (EFT)	07/07/14	8629
<a href="#">R1366OTN</a>	04/08/14	Termination of the Common Working File ELGA, ELGH, HIQA, HIQH, and HUQA Part A Provider Queries	04/07/14	8248

<a href="#">R1365OTN</a>	04/02/14	Reporting principal and interest amounts when refunding previously recouped money on the Remittance Advice (RA)	10/06/14	8485
<a href="#">R1363OTN</a>	03/28/14	Implement Operating Rules - Phase III ERA EFT: CORE 360 Uniform Use of Claim Adjustment Reason Codes (CARC) and Remittance Advice Remark Codes (RARC) Rule - Update from CAQH CORE - February 1, 2014 version 3.0.4	06/30/14	8651
<a href="#">R1362OTN</a>	03/25/14	Rescind and Replace of CR 8409: Reclassification of Certain Durable Medical Equipment from the Inexpensive and Routinely Purchased Payment Category to the Capped Rental Payment Category	04/07/14	8566
<a href="#">R1361OTN</a>	03/25/14	Implementation of NACHA Operating Rules for Health Care Electronic Funds Transfers (EFT)	07/07/14	8629
<a href="#">R1360OTN</a>	03/18/14	Implement Operating Rules - Phase III ERA EFT: CORE 360 Uniform Use of Claim Adjustment Reason Codes (CARC) and Remittance Advice Remark Codes (RARC) Rule - Update from CAQH CORE - October 1, 2013 version 3.0.3	05/05/14	8518
<a href="#">R1359OTN</a>	03/18/14	The Coordination of Benefits Contractor (COBC) to Remove and No Longer Apply Federal Tax Information (FTI) Received through the Internal Revenue Service (IRS), Social Security Administration (SSA), Centers for Medicare and Medicaid Services (CMS) Medicare	07/07/14	8353



		Secondary Payer (MSP) Data Match Program on the Common Working File (CWF)		
<a href="#">R1358OTN</a>	03/14/14	Implement Operating Rules - Phase III ERA EFT: CORE 360 Uniform Use of Claim Adjustment Reason Codes (CARC) and Remittance Advice Remark Codes (RARC) Rule - Update from CAQH CORE - October 1, 2013 version 3.0.3	04/07/14	8518
<a href="#">R1357OTN</a>	03/07/14	International Classification of Diseases, 10th Revision (ICD-10) Testing with Providers through the Common Edits and Enhancements Module (CEM) and Common Electronic Data Interchange (CEDI)	03/12/14	8465
<a href="#">R1356OTN</a>	03/06/14	Modifying the Daily Common Working File (CWF) to Medicare Beneficiary Database (MBD) File to Include Diagnosis Codes on the Health Insurance Portability and Accountability Act Eligibility Transaction System (HETS) 270/271 Transactions	10/06/14	8456
<a href="#">R1352OTN</a>	02/21/14	International Classification of Diseases, Tenth Revision (ICD-10) Limited End to End Testing with Submitters	07/07/14	8602
<a href="#">R1351OTN</a>	02/21/14	Implementation of HIPAA Standards and Operating Rules for Health Care Electronic Funds Transfers	07/07/14	8619

<a href="#">R1350OTN</a>	02/21/14	Clarification of Remittance Advice Code Combination Reports Generated by Shared Systems	07/07/14	8616
<a href="#">R1349OTN</a>	02/21/14	Implementation of NACHA Operating Rules for Health Care Electronic Funds Transfers (EFT)	07/07/14	8629
<a href="#">R1348OTN</a>	02/21/14	Handling Bankrupt Suppliers within VMS	04/06/15	8502
<a href="#">R1347OTN</a>	02/14/14	Inpatient Prospective Payment System (IPPS) Hospital Extensions per the Pathway for SGR Reform Act of 2013	04/07/14	8627
<a href="#">R1345OTN</a>	02/14/14	Implementing Operating Rule (OR)-Phase III ERA Or Dual Delivery of ERA and Paper Remittance	07/07/14	8570
<a href="#">R1344OTN</a>	02/07/14	Fee for Service Beneficiary Data Streamlining (FFS BDS)	07/07/14	8603

<a href="#">R1342OTN</a>	02/06/14	Reporting principal and interest amounts when refunding previously recouped money on the Remittance Advice (RA)	07/07/14	8485
<a href="#">R1341OTN</a>	02/06/14	Changing Fiscal Intermediary Shared System (FISS) Action on Informational Unsolicited Responses (IURs) From Canceled Claims to Adjustments	07/07/14	8554
<a href="#">R1340OTN</a>	02/06/14	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for July 2014	07/07/14	8571
<a href="#">R1339OTN</a>	02/06/14	CWF Editing for Vaccines Furnished at Hospice - Correction	04/07/14	8620
<a href="#">R1337OTN</a>	02/05/14	Encounter Data System Payer ID: Payer ID Creation for the Financial Alignment Demonstration for Medicare Medicaid Plans (MMPs)	07/07/14	8489
<a href="#">R1336OTN</a>	02/05/14	Modifying the Daily Common Working File (CWF) to Medicare Beneficiary Database (MBD) File to Include Diagnosis Codes on the Health Insurance Portability and Accountability Act Eligibility Transaction System (HETS) 270/271 Transactions	07/07/14	8456

<a href="#">R1334OTN</a>	01/24/14	Occurrence Span Code 72; Identification of Outpatient Time Associated with an Inpatient Hospital Admission and Inpatient Claim for Payment	02/25/14	8586
<a href="#">R1330OTN</a>	12/27/13	Revised Beneficiary Liability and Messages Associated with Denials for Claims for Services Furnished to Incarcerated Beneficiaries	04/07/14	8488
<a href="#">R1329OTN</a>	12/26/13	Immediate Suspension of Postpayment Patient Status Reviews of Inpatient Hospital Admissions 10/1/13-12/31/13	12/02/13	8508
<a href="#">R1326OTN</a>	12/06/13	Informational Unsolicited Response (IUR) or Reject for Ambulance SNF to SNF Transfer	04/07/14	8408
<a href="#">R1323OTN</a>	11/29/13	Medicare Appeals System (MAS) Level 1 Implementation	12/06/13	8354
<a href="#">R1322OTN</a>	11/22/13	Merge of the Daily CMS-1522 PULSE Roll-Up Number Report Data for A/B MAC Workloads	01/27/14	8529

<a href="#">R1320OTN</a>	11/22/13	Revised Beneficiary Liability and Messages Associated with Denials for Claims for Services Furnished to Incarcerated Beneficiaries	02/24/14	8488
<a href="#">R1318OTN</a>	11/15/13	Use of Claim Adjustment Reason Code 23	04/07/14	8297
<a href="#">R1316OTN</a>	11/15/13	Implement Operating Rules - Phase III ERA EFT: CORE 360 Uniform Use of Claim Adjustment Reason Codes (CARC) and Remittance Advice Remark Codes (RARC) Rule - Update from CAQH CORE - October 1, 2013 version 3.0.3	04/07/14	8518
<a href="#">R1315OTN</a>	11/15/13	Immediate Suspension of Postpayment Patient Status Reviews of Inpatient Hospital Admissions 10/1/13-12/31/13	12/02/13	8508
<a href="#">R1314OTN</a>	11/13/13	Implementation of the Award for the Jurisdiction K (JK) Part A and Part B Medicare Administrative Contractor (A/B MAC) to National Government Services	10/07/13	8303
<a href="#">R1313OTN</a>	11/07/13	Termination of the Common Working File ELGA, ELGH, HIQA, HIQH, and HUQA Part A Provider Queries	04/07/14	8248

<a href="#">R1312OTN</a>	11/07/13	Common Working File (CWF) and Fiscal Intermediary Standard System (FISS) Informational Unsolicited Response (IUR) or Denial of Inpatient Services Related to a Hospice Terminal Diagnosis	04/07/14	8273
<a href="#">R1311OTN</a>	11/06/13	Informational Unsolicited Response (IUR) or Reject for Ambulance SNF to SNF Transfer	04/07/14	8408
<a href="#">R1310OTN</a>	11/06/13	HCPCS Analysis CR for Conversion of Old HCPCS Code to New	04/07/14	8451
<a href="#">R1309OTN</a>	11/06/13	FISS Claims Processing Update for Ambulance Services	04/07/14	8251
<a href="#">R1308OTN</a>	11/06/13	MREP and PC Print Updates for Operating Rules Phase III 360 Rule Compliance	04/07/14	8479
<a href="#">R1307OTN</a>	11/06/13	The Coordination of Benefits Contractor (COBC) to Remove and No Longer Apply Federal Tax Information (FTI) Received through the Internal Revenue Service (IRS), Social Security Administration (SSA), Centers for Medicare and Medicaid Services (CMS) Medicare Secondary Payer (MSP) Data Match Program on the Common Working	04/07/14	8353

		File (CWF)		
<a href="#">R1305OTN</a>	11/06/13	Denial for Power Mobility Device (PMD) Claim from a Supplier of Durable Medical, Orthotics, Prosthetics, and Supplies (DMEPOS) When Ordered By a Non-Authorized Provider	04/07/14	8239
<a href="#">R1303OTN</a>	11/01/13	International Classification of Diseases, 10th Revision (ICD-10) Testing with Providers through the Common Edits and Enhancements Module (CEM) and Common Electronic Data Interchange (CEDI)	03/03/14	8465
<a href="#">R1302OTN</a>	11/01/13	Braille and Large Print Medicare Summary Notices	01/06/14	8260
<a href="#">R1301OTN</a>	10/18/13	Virtual Data Center Contract (VDC) Workload Realignment	10/07/13	8449
<a href="#">R1299OTN</a>	09/30/13	MCS Prepayment Review Report	10/07/13	8224

<a href="#">R1298OTN</a>	09/30/13	CWF Editing for Vaccines Furnished at Hospice	10/07/13	8098
<a href="#">R1297OTN</a>	09/27/13	VMS Prepayment Review Report	10/07/13	8225
<a href="#">R1293OTN</a>	09/13/13	Display of ICD-10 Local Coverage Determinations (LCDs) on the Medicare Coverage Database (MCD)	04/10/13	8348
<a href="#">R1291OTN</a>	08/30/13	Standardizing the standard - Operating Rules for code usage in Remittance Advice	10/07/13	8182
<a href="#">R1290OTN</a>	08/27/13	MCS Prepayment Review Report	10/07/13	8224
<a href="#">R1288OTN</a>	08/23/13	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for January 2014	01/06/14	8345



<a href="#">R1286OTN</a>	08/16/13	Handling Bankrupt Suppliers within VMS	01/06/14	8414
<a href="#">R1285OTN</a>	08/16/13	Further Instruction to Use Non-Alert Remittance Advice Remark Codes (RARCs)	10/07/13	8391
<a href="#">R1283OTN</a>	08/15/13	Multi Carrier System (MCS) Modifications to Liability Assignment Regarding Therapy Cap Claim Denials	08/16/13	8321
<a href="#">R1281OTN</a>	08/16/13	Implement Operating Rules - Phase III ERA EFT: CORE 360 Uniform Use of Claim Adjustment Reason Codes (CARC) and Remittance Advice Remark Codes (RARC) Rule - Update from CAQH CORE	01/06/14	8365
<a href="#">R1280OTN</a>	08/16/13	Ambulatory Surgical Center Quality Reporting (ASCQR) Program Payment Reduction (MIEA-TRCHA, 2006) - Implementation	01/06/14	8349
<a href="#">R1277OTN</a>	08/09/13	Medicare Physician Fee Schedule Database (MPFSDB) Field Revisions for the New Purchased Diagnostic Test (PDT) Indicator and New Effective Date Field	01/06/14	8388

<a href="#">R1276OTN</a>	08/09/13	Revision to the CWF Edit for Technical Component (TC) of Pathology Services Occurring on the Same Day as an Outpatient Hospital Visit	01/06/14	8399
<a href="#">R1274OTN</a>	08/02/13	The Supplemental Security Income (SSI)/Medicare Beneficiary Data for Fiscal Year 2011 for Inpatient Prospective Payment System (IPPS) Hospitals, Inpatient Rehabilitation Facilities (IRFs), and Long Term Care Hospitals (LTCH)	09/03/13	8406
<a href="#">R1272OTN</a>	08/02/13	CEDI Removal of 4010A1 Jobs and Processes	10/07/13	8398
<a href="#">R1271OTN</a>	08/02/13	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for January 2014	01/06/14	8345
<a href="#">R1268OTN</a>	07/26/13	Update to Post Acute Transfer Edit 7272 to Extend Home Health Agency CMS Certification Number (CCN) Range and Add Bypass	01/06/14	8367
<a href="#">R1266OTN</a>	07/26/13	Common Working File (CWF) Informational Unsolicited Response (IUR) and Reject for Hospital to Hospital Transfers	01/06/14	8231

<a href="#">R1264OTN</a>	07/26/13	Addition of the End Stage Renal Disease (ESRD) Facilities Located in the Pacific Rim to the ESRD Prospective Payment System (PPS)	01/06/14	8368
<a href="#">R1262OTN</a>	07/26/13	Informational Unsolicited Response (IUR) or Reject for Add-On Codes billed without respective Primary Codes	01/06/14	8271
<a href="#">R1261OTN</a>	07/26/13	Fee for Service Beneficiary Data Streamlining (FFS BDS) Local Beneficiary File Analysis	01/06/14	8285
<a href="#">R1259OTN</a>	07/25/13	HIPAA 5010 and D.0 2013 Annual Recertification	08/26/13	8352
<a href="#">R1258OTN</a>	07/25/13	Redaction of Health Insurance Claim Numbers (HICNs) in Medicare Redetermination Notices (MRNs)	01/06/14	8268
<a href="#">R1257OTN</a>	07/19/13	Medicare Appeals System (MAS) Level 1 Implementation	08/19/13	8152

<a href="#">R1253OTN</a>	07/10/13	Change in Creation Date for CMS Standard Edit/Audit/Reason Code Reports	07/19/13	7846
<a href="#">R1252OTN</a>	07/09/13	Standardizing the Standard - Phase I	01/06/14	7910
<a href="#">R1251OTN</a>	06/27/13	Affordable Care Act (ACA) Model 4 Bundled Payments for Care Improvement - Episode of Care - Implementation Phase 3	07/01/13	8070
<a href="#">R1250OTN</a>	06/25/13	Incentive Payment Related to Prior Authorization for Power Mobility Devices (PMD)	07/01/13	8056
<a href="#">R1248OTN</a>	06/14/13	Multi Carrier System (MCS) Modifications to Liability Assignment Regarding Therapy Cap Claim Denials	10/07/13	8321
<a href="#">R1247OTN</a>	06/10/13	Implementation of CMS Ruling 1455-R (Medicare Program; Part B Billing in Hospitals)	07/01/13	8277

<a href="#">R1246OTN</a>	06/07/13	Implementation of the Award for the Jurisdiction K (JK) Part A and Part B Medicare Administrative Contractor (A/B MAC) to National Government Services	10/07/13	8303
<a href="#">R1245OTN</a>	06/07/13	Implementing the Re-competition Award for the Jurisdiction L (formerly Jurisdiction 12) Part A/Part B Medicare Administrative Contractor (A/B MAC) Workload	07/01/13	8327
<a href="#">R1244OTN</a>	05/31/13	Common Working File (CWF) Informational Unsolicited Response (IUR) or Reject for a new patient visit billed by the same physician or physician group within the past three years	10/07/13	8165
<a href="#">R1243OTN</a>	05/31/13	Implementation of CMS Ruling 1455-R (Medicare Program; Part B Billing in Hospitals)	07/01/13	8277
<a href="#">R1242OTN</a>	05/30/13	Change in Creation Date for CMS Standard Edit/Audit/Reason Code Reports	06/21/13	7846
<a href="#">R1240OTN</a>	07/19/13	Affordable Care Act (ACA) Model 4 Bundled Payments for Care Improvement Episode of Care Implementation Phase Two	04/01/13	7887

<a href="#">R1239OTN</a>	05/21/13	New Healthcare Common Procedure Coding System (HCPCS) Codes for Customized Durable Medical Equipment	07/01/13	8158
<a href="#">R1237OTN</a>	05/17/13	Analysis and Design of VMS for implementing system changes for handling Bankrupt Suppliers	10/07/13	8310
<a href="#">R1236OTN</a>	05/22/13	Standardizing the Standard - Phase I	01/06/14	7910
<a href="#">R1234OTN</a>	05/10/13	MSP Claims and use of CARC 23 - Analysis and Design	10/07/13	8308
<a href="#">R1232OTN</a>	05/06/13	New Healthcare Common Procedure Coding System (HCPCS) Codes for Customized Durable Medical Equipment	07/01/13	8158
<a href="#">R1231OTN</a>	05/03/13	Common Working File (CWF) Informational Unsolicited Response (IUR) or Reject for a new patient visit billed by the same physician or physician group within the past three years	10/07/13	8165

<a href="#">R1228OTN</a>	05/02/13	Debts Referred to Treasury through the Healthcare Integrated General Ledger Accounting System (HIGLAS)	10/07/13	8216
<a href="#">R1227OTN</a>	05/02/13	Update to the Common Working File (CWF) Qualifying Stay Edit for Skilled Nursing Facility (SNF) and Swing Bed (SB) Providers	10/07/13	8210
<a href="#">R1225OTN</a>	05/02/13	Reporting of Principal and Interest when returning previously recouped money - Analysis	10/07/13	8092
<a href="#">R1224OTN</a>	05/03/13	Phase III ERA Enrollment Operating Rules	10/07/13	8223
<a href="#">R1220OTN</a>	05/03/13	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for October 2013	10/07/13	8234
<a href="#">R1219OTN</a>	05/03/13	National Competitive Bidding Program (CBP): Instructions for Processing CBP Oxygen and Capped Rental Item Claims with the Start of the Round One Re-compete	10/07/13	8270

<a href="#">R1218OTN</a>	05/03/13	American Recovery and Reinvestment Act of 2009 Electronic Health Record (EHR) Incentive : New Critical Access Hospital Banking Information File Transfer for Eligible Professional Payment	10/07/13	8209
<a href="#">R1217OTN</a>	05/03/13	CWF Editing for Vaccines Furnished at Hospice	10/07/13	8098
<a href="#">R1216OTN</a>	05/03/13	Applying Multiple Procedure Payment Reductions to Therapy Cap Amounts for Critical Access Hospital Claims	10/07/13	8278
<a href="#">R1215OTN</a>	05/03/13	VMS Prepayment Review Report	10/07/13	8225
<a href="#">R1214OTN</a>	05/03/13	Medicare System Update to Include Line Level National Provider Identifier (NPI) Sanction Editing on Critical Access Hospital (CAH) Method II Outpatient Claims	10/07/13	8170
<a href="#">R1213OTN</a>	05/03/13	Updating the Shared Systems and Common Working File (CWF) to no Longer Create Veteran Affairs (VA) "I" records in the Medicare Secondary Payer (MSP) Auxiliary File	10/07/13	8198



<a href="#">R1212OTN</a>	05/03/13	MCS Prepayment Review Report	10/07/13	8224
<a href="#">R1211OTN</a>	05/03/13	Modification to Change Request (CR)7254	10/07/13	8280
<a href="#">R1210OTN</a>	04/19/13	Implementing the Re-competition Award for the Jurisdiction C Durable Medical Equipment (DME) Medicare Administrative Contractor (MAC) Workload	05/01/13	8235
<a href="#">R1209OTN</a>	04/11/13	Recovery of Annual Wellness Visit (AWV) Overpayments	07/01/13	8153
<a href="#">R1208OTN</a>	04/11/13	Use of Q6 Modifier for Locum Tenens by Providing Performing Provider NPT "FOR ANALYSIS ONLY"	04/01/13	8124
<a href="#">R1207OTN</a>	04/12/13	Direct Mailing to Referral Agents about the DMEPOS Competitive Bidding Program Round 2 and National Mail-Order for Diabetic Testing Supplies	05/13/13	8262

<a href="#">R1205OTN</a>	04/04/13	Incentive Payment Related to Prior Authorization for Power Mobility Devices (PMD)	07/01/13	8056
<a href="#">R1203OTN</a>	03/22/13	CMS Administrator's Ruling: Part A to Part B Rebilling of Denied Hospital Inpatient Claims	07/01/13	8185
<a href="#">R1202OTN</a>	03/22/13	Transition to New Centers for Medicare and Medicaid Services (CMS) Identity Mark	04/22/13	8113
<a href="#">R1201OTN</a>	03/22/13	Implementation of the Award for Jurisdiction E Part A/Part B Medicare Administrative Contractor (JE A/B MAC)	07/01/13	8226
<a href="#">R1200OTN</a>	03/21/13	The Supplemental Security Income (SSI)/Medicare Beneficiary Data for Fiscal Year 2010 for Inpatient Prospective Payment System (IPPS) Hospitals, Inpatient Rehabilitation Facilities (IRFs), and Long Term Care Hospitals (LTCHs)	12/03/12	8078
<a href="#">R1199OTN</a>	03/15/13	International Classification of Diseases (ICD)-10 Conversion from ICD-9 and Related Code Infrastructure of the Medicare Shared Systems as They Relate to CMS National Coverage Determinations (NCDs)	07/01/13	8197

<a href="#">R1197OTN</a>	03/15/13	Implementation of the Award for Jurisdiction 6 Part A/Part B Medicare Administrative Contractor (J6 A/B MAC)	07/01/13	8227
<a href="#">R1196OTN</a>	03/08/13	Outpatient Therapy Functional Reporting Non-Compliance Alerts	04/01/13	8166
<a href="#">R1195OTN</a>	03/01/13	Inpatient Prospective Payment System (IPPS) Hospital Extensions per the American Taxpayer Relief Act of 2012	04/01/13	8214
<a href="#">R1194OTN</a>	02/22/13	Multiple Procedure Payment Reduction (MPPR) for Selected Therapy Services	04/01/13	8206
<a href="#">R1193OTN</a>	02/15/13	Standardizing the Standard - Phase I	10/07/13	7910
<a href="#">R1192OTN</a>	02/15/13	The Inclusion of Veterans Administration (VA) Skilled Nursing Facility (SNF) claims to the VA Medicare Remittance Advice (eMRA) Process- Implementation	07/01/13	8089

<a href="#">R1191OTN</a>	02/15/13	ICD-10 CR--Updates to National Coverage Determination/Local Coverage Determination (NCD/LCD) Processing in the VMS Shared System	10/07/13	8207
<a href="#">R1190OTN</a>	02/15/13	Recovery of Annual Wellness Visit (AWV) Overpayments	07/01/13	8153
<a href="#">R1189OTN</a>	02/15/13	Bundled Payments for Care Improvement Model 4 - HI and SMI Payment Attribution and Outlier Payments	07/01/13	8196
<a href="#">R1187OTN</a>	02/08/13	Standardizing the standard - Operating Rules for code usage in Remittance Advice	07/01/13	8182
<a href="#">R1186OTN</a>	02/08/13	FISS Prepayment Review Report	07/01/13	8175
<a href="#">R1184OTN</a>	02/08/13	Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) National Competitive Bidding (NCB): Using the "KY" Modifier to Bill for Accessories for Non-NCB Wheelchair Base Units	07/01/13	8181

<a href="#">R1183OTN</a>	02/08/13	Revision to CWF and VMS: Reject or Informational Unsolicited Response (IUR) Edit for Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Provided During an Inpatient Stay	07/01/13	8172
<a href="#">R1182OTN</a>	02/08/13	Incentive Payment Related to Prior Authorization for Power Mobility Devices (PMD)	07/01/13	8056
<a href="#">R1176OTN</a>	02/01/13	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for July 2013	07/01/13	8177
<a href="#">R1174OTN</a>	02/01/13	Changes to the Laboratory National Coverage Determination (NCD) Software for ICD-10	07/01/13	8202
<a href="#">R1173OTN</a>	02/01/13	Durable Medical Equipment, Prosthetics, Orthotics, and Supplies Competitive Bidding Program: Correction to the Medicare Summary Notice Message for PEN Items Furnished to Traveling Beneficiaries	07/01/13	8189
<a href="#">R1171OTN</a>	01/31/13	Instructions to Contractors for Implementing Section 5506 of the Affordable Care Act (ACA)- Preservation of Resident Cap Positions from Closed Teaching Hospitals - Round 1 and Round 2 Only	03/04/13	7746

<a href="#">R1170OTN</a>	01/31/13	Common Working File (CWF) Informational Unsolicited Response (IUR) or Reject for place of service billed by physician office and either ambulatory surgical center or inpatient hospital, for the same beneficiary, same date of service, and same procedure, based on sequence received of the Part B claim	07/01/13	7892
<a href="#">R1169OTN</a>	01/31/13	Modification of Payment Window Edit in the Common Working File (CWF) to Modify Diagnostic Service List	07/01/13	8046
<a href="#">R1167OTN</a>	01/31/13	Correction to Common Working File (CWF) A/B Crossover Edit 7272 for Transfer to Home for Home Health Services	07/01/13	8139
<a href="#">R1165OTN</a>	01/18/13	International Classification of Diseases (ICD)-10 Conversion from ICD-9 and Related Code Infrastructure of the Medicare Shared Systems as They Relate to CMS National Coverage Determinations (NCDs)	04/01/13	8109
<a href="#">R1164OTN</a>	01/18/13	Implementation of New and Revised Medicare Summary Notice (MSN) Messages and Discontinuation of Obsolete MSN Messages	02/18/13	8106
<a href="#">R1163OTN</a>	01/18/13	Medicare Remit Easy Print (MREP) Enhancement	04/01/13	8149

<a href="#">R1162OTN</a>	01/04/13	International Classification of Diseases (ICD)-10 Conversion from ICD-9 and Related Code Infrastructure of the Medicare Shared Systems as They Relate to CMS National Coverage Determinations (NCDs)	04/01/13	8109
<a href="#">R1161OTN</a>	12/28/12	Implementation of New and Revised Medicare Summary Notice (MSN) Messages and Discontinuation of Obsolete MSN Messages	02/18/13	8106
<a href="#">R1160OTN</a>	12/21/12	Quarterly Update for the Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Competitive Bidding Program (CBP) - April 2013	04/01/13	8144
<a href="#">R1159OTN</a>	12/21/12	New Healthcare Common Procedure Coding System (HCPCS) Codes for Replacement Accessories and Supplies for External Ventricular Assist Devices or Any Ventricular Assist Device (VAD) for Which Payment Was Not Made Under Medicare Part A	04/01/13	7888
<a href="#">R1158OTN</a>	12/18/12	Use of Q6 Modifier for Locum Tenens by Providing the Substitute Physician's Unique Identifier	04/01/13	8124
<a href="#">R1157OTN</a>	12/14/12	Standardizing the Standard - Phase I	01/07/13	7910

<a href="#">R1156OTN</a>	12/13/12	Addition of New Common Working File (CWF) Medicare Secondary Payer (MSP) Utilization Edit Codes for CWF to Send the Shared Systems When the Diagnosis Code on the Claim is Considered a Match with the Family of DX Codes in CWF for Non-Group Health Plan (NGHP) MSP Claims	10/01/12	7605
<a href="#">R1155OTN</a>	07/19/13	Affordable Care Act (ACA) Model 4 Bundled Payments for Care Improvement - Episode of Care - Implementation Phase 3	07/01/13	8070
<a href="#">R1152OTN</a>	11/16/12	New Screens and Processes for ICD-9/ICD-10, ICD-10/ICD-9 Diagnosis and Procedure Codes Conversions for Medicare Secondary (MSP) Claims Using the General Equivalence Mappings (GEMS) 2013 Table in CWF	04/01/13	8034
<a href="#">R1151OTN</a>	11/16/12	Use of Q6 Modifier for Locum Tenens by Providing Performing Provider NPI - Analysis only CR	04/01/13	8124
<a href="#">R1149OTN</a>	11/06/12	Multiple Procedure Payment Reduction (MPPR) on the Technical Component (TC) of Diagnostic Cardiovascular and Ophthalmology Procedures	01/07/13	7848
<a href="#">R1148OTN</a>	11/02/12	Fee for Service Beneficiary Data Streamlining (FFS BDS)	04/01/13	8091



<a href="#">R1147OTN</a>	11/02/12	Implementation of the Revised Health Insurance Claim Form CMS-1500 (02/12) (Analysis Only)	04/01/13	8015
<a href="#">R1145OTN</a>	11/02/12	Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for April 2013	04/01/13	8073
<a href="#">R1144OTN</a>	11/02/12	MCS/TACs System Edits	04/01/13	8053
<a href="#">R1142OTN</a>	11/02/12	Editing for Duplicate Payment of Nonphysician Outpatient Services Provided During an Inpatient Hospital Admission	04/01/13	7849
<a href="#">R1141OTN</a>	11/02/12	The Supplemental Security Income (SSI)/Medicare Beneficiary Data for Fiscal Year 2010 for Inpatient Prospective Payment System (IPPS) Hospitals, Inpatient Rehabilitation Facilities (IRFs), and Long Term Care Hospitals (LTCHs)	12/03/12	8078
<a href="#">R1140OTN</a>	11/02/12	Termination of the Common Working File ELGB Provider Query	04/01/13	8086

<a href="#">R1139OTN</a>	11/01/12	Durable Medical Equipment (DME) National Competitive Bidding (NCB): National Mail Order (NMO) Program Implementation for Diabetic Supplies	04/01/13	8080
<a href="#">R1138OTN</a>	11/01/12	Adding Bankruptcy Status Field to the Recovery Audit Contractor Daily and Weekly Reports	04/01/13	8083
<a href="#">R1137OTN</a>	11/01/12	PWK System Modifications for Processing Days	04/01/13	8014
<a href="#">R1136OTN</a>	11/01/12	National Correct Coding Initiative (NCCI) Associated Modifier Changes (Additions)	01/07/13	8111
<a href="#">R1134OTN</a>	11/01/12	New Informational Unsolicited Response (IUR) Process to Identify Previously Paid Claims for Services Furnished to Incarcerated Medicare Beneficiaries	04/01/13	8007
<a href="#">R1133OTN</a>	11/01/12	New Informational Unsolicited Response (IUR) Process to Identify Previously Paid Claims for Services Furnished to Medicare Beneficiaries Classified as "Unlawfully Present" in the United States	04/01/13	8009

<a href="#">R1130OTN</a>	10/26/12	Implementation of the Redesigned MSN	04/01/13	8081
<a href="#">R1129OTN</a>	10/12/12	Elimination of the Fiscal Intermediary Shared System (FISS) Off Quarter User Releases	01/07/13	8022
<a href="#">R1128OTN</a>	10/05/12	Recompiling of Application Data Structure Descriptors	10/26/12	8099
<a href="#">R1124OTN</a>	09/25/12	Manual Medical Review of Therapy Services	10/01/12	8036
<a href="#">R1122OTN</a>	09/14/12	International Classification of Diseases (ICD)-10 Conversion from ICD-9 and Related Code Infrastructure of the Medicare Shared Systems as They Relate to CMS National Coverage Determinations (NCDs) (CR 1 of 3) (ICD-10)	01/07/13	7818
<a href="#">R1119OTN</a>	09/14/12	Implementation of the Award for the Jurisdiction 5 Part A and Part B Medicare Administrative Contractor (J5 A/B MAC) Recurment Including a New Workload Number for the Remaining WPS Legacy Workload	10/22/12	8059

<a href="#">R1117OTN</a>	08/31/12	Manual Medical Review of Therapy Services	10/01/12	8036
<a href="#">R1116OTN</a>	08/24/12	Standardizing the Standard - Phase I	01/07/13	7910
<a href="#">R1115OTN</a>	08/24/12	Implement Fraud Prevention Predictive Modeling Prepayment Edits for Shared Systems (xref CR7787)	01/07/13	7861
<a href="#">R1114OTN</a>	08/17/12	New Field Established within FISS and MCS	01/17/13	8012
<a href="#">R1112OTN</a>	08/10/12	Health Insurance Portability and Accountability Act (HIPAA) 5010 837 Institutional (837I) Edits and 5010 837 Professional (837P) Edits January 2013	01/07/13	7880
<a href="#">R1111OTN</a>	08/06/12	Expand Place of Service Address to Include Full Address	04/01/13	7786

<a href="#">R1110OTN</a>	08/03/12	Revision of Medicare Summary Notice (MSN) for Non-Competitive Bid Claims	07/02/12	7729
<a href="#">R1108OTN</a>	08/03/12	Fee For Service Common Eligibility Services (FFS CES) - Common Working File (CWF) Detail Analysis, Design and Requirements	01/07/13	7895
<a href="#">R1107OTN</a>	08/03/12	The Medicare Secondary Payer Payment Module (MSPPAY) to be Maintained by the Shared System Maintainers for all Future Enhancements	01/07/13	7826
<a href="#">R1104OTN</a>	08/02/12	Application of the Multiple Procedure Payment Reduction (MPPR) on the Professional Component (PC) and Technical Component (TC) of Certain Diagnostic Imaging Procedures to Physicians in the Same Group Practice	01/07/13	7747
<a href="#">R1103OTN</a>	08/01/12	Health Insurance Portability and Accountability Act (HIPAA) 5010 and D.0 Execution of the Annual Recertification Program	09/04/12	7904
<a href="#">R1102OTN</a>	08/01/12	Direction to Modify Institutional Reason Code 39012	01/07/13	7832

<a href="#">R1101OTN</a>	07/19/12	Reporting of Recoupment for Overpayment on the Remittance Advice (RA) with Patient Control Number	01/03/12	7499
<a href="#">R1100OTN</a>	06/28/12	Fiscal Intermediary Shared System (FISS) System Enhancement for Including Line Level Rendering Physicians/Practitioners National Provider Identifier (NPI) and Name Information in the Comprehensive Error Rate Testing (CERT) Resolution Record	10/01/12	7807
<a href="#">R1099OTN</a>	06/28/12	Reporting of Recoupment for Overpayment on the Remittance Advice (RA) with Patient Control Number	01/03/12	7499
<a href="#">R1098OTN</a>	06/22/12	Addition of New Common Working File (CWF) Medicare Secondary Payer (MSP) Utilization Edit Codes for CWF to Send the Shared Systems When the Diagnosis Code on the Claim is Considered a Match with the Family of DX Codes in CWF for Non-Group Health Plan (NGHP) MSP Claims	10/01/12	7605
<a href="#">R1097OTN</a>	06/15/12	Change in Creation Date for CMS Standard Edit/Audit/Reason Code Reports	10/15/12	7846

<a href="#">R1095OTN</a>	06/07/12	Enhancements to the Recovery Audit Mass Adjustment/Reporting Process in the ViPS Medicare System (VMS)	07/02/12	7603
<a href="#">R1093OTN</a>	05/23/12	Automated Tracking and Reporting of Recovery Audit-Associated Re-openings and Appeals	04/02/12	7604
<a href="#">R1091OTN</a>	05/16/12	Enhancements to the Recovery Audit Mass Adjustment/Reporting Process in the Fiscal Intermediary Shared System (FISS)	04/02/12	7601
<a href="#">R1089OTN</a>	05/11/12	Implement Fraud Prevention Predictive Modeling Prepayment Edits	10/01/12	7787
<a href="#">R1088OTN</a>	05/10/12	Reporting of Recoupment for Overpayment on the Remittance Advice (RA) with Patient Control Number	01/03/12	7499
<a href="#">R1087OTN</a>	05/04/12	Expand Place of Service Address to Include Full Address	10/1/12	7786

<a href="#">R1085OTN</a>	05/02/12	Establish an Automated Process between ViPS Medicare System (VMS) and the Provider Enrollment Chain and Ownership System (PECOS) to Post Payment Suspension Alert Codes and Related Data to All Four Durable Medical Equipment Medicare Administrator Contractors ( <b>DME MAC</b> ) <b>Jurisdictions</b>	10/01/12	7424
<a href="#">R1084OTN</a>	04/26/12	Common Edits and Enhancements Module (CEM) and Receipt, Control, and Balancing Updates – October 2012	10/01/12	7811
<a href="#">R1083OTN</a>	04/27/12	Temporary Direction to Accommodate Organ Donor Complications Billing on 837I Claims	10/01/12	7816
<a href="#">R1082OTN</a>	04/27/12	FISS update for Clinical Laboratory Fee Schedule upload to include Kansas Payment Locality Structure	10/01/12	7815
<a href="#">R1079OTN</a>	04/27/12	New Occurrence Code to Report Date of Death	10/01/12	7792



<a href="#">R1077OTN</a>	04/26/12	Update to the Fiscal Intermediary Shared Systems (FISS) Outpatient Provider Specific File (OPSF) for Children's Hospitals	10/01/12	7798
<a href="#">R1076OTN</a>	04/26/12	Health Insurance Portability and Accountability (HIPAA) 5010/D.0 Fixes - October 2012	10/01/12	7769
<a href="#">R1075OTN</a>	05/18/12	Medicare Fee-for-Service (FFS) Editing and Flat File Utility	10/1/12	7823
<a href="#">R1073OTN</a>	04/26/12	American Recovery and Reinvestment Act of 2009 Electronic Health Record (EHR) Incentive Program: Financial Information File Transfer Modifications for Eligible Hospitals	10/01/12	7776
<a href="#">R1072OTN</a>	04/26/12	Fiscal Intermediary Shared System (FISS) System Enhancement for Including Line Level Rendering Physicians/Practitioners National Provider Identifier (NPI) and Name Information in the Comprehensive Error Rate Testing (CERT) Resolution Record	10/01/12	7807
<a href="#">R1071OTN</a>	04/26/12	Expansion of the Laboratory National Coverage Determination (NCD) Edit Software	10/01/12	7808

<a href="#">R1070OTN</a>	04/26/12	Request to Require Hours for Research and Conference Calls with Maintainers, MACs, and EDCs and Additional Requirements for IDR Shared Systems	10/01/12	7756
<a href="#">R1067OTN</a>	04/26/12	Fee for Service Common Eligibility Services Conference Calls and Research	10/01/12	7800
<a href="#">R1066OTN</a>	04/27/12	Implementation of the HIPAA Version 5010 276/277 Claim Status Edits October 2012 Release	10/01/12	7804
<a href="#">R1065OTN</a>	04/26/12	Addition of New Common Working File (CWF) Medicare Secondary Payer (MSP) Utilization Edit Codes for CWF to Send the Shared Systems When the Diagnosis Code on the Claim Is Considered a Match with the Family of DX Codes in CWF for Non-Group Health Plan (NGHP) MSP Claims	10/01/12	7605
<a href="#">R1064OTN</a>	04/26/12	Health Insurance Portability and Accountability Act (HIPAA) 5010 837 Institutional (837I) Edits and 5010 837 Professional (837P) Edits - October 2012	10/01/12	7817
<a href="#">R1062OTN</a>	04/06/12	Health Insurance Portability and Accountability Act (HIPAA) 5010 and D.0 Annual Re-Certification Program	05/07/12	7758

<a href="#">R1061OTN</a>	03/30/12	Implementation of the Award for the Jurisdiction 8 Part A and Part B Medicare Administrative Contractor (J8 A/B MAC) including New Workload Numbers for Indiana and Michigan	07/02/12	7752
<a href="#">R1060OTN</a>	04/13/12	Implementation of the Award for the Jurisdiction H Part A and Part B Medicare Administrative Contractor (JH A/B MAC) Including New Workload Numbers for Arkansas, Colorado, Louisiana, Mississippi, New Mexico, Oklahoma, and Texas as well as for the J4 WPS Legacy Part A Workload	07/02/12	7812
<a href="#">R1058OTN</a>	03/14/12	Emergency March 2012 Update (MCTRJCA) to the CY 2012 Medicare Physician Fee Schedule (MPFS) Database	03/15/12	7767
<a href="#">R1057OTN</a>	03/09/12	Implementation of a Correction of Initial Default Values for Medically Unlikely Edits (MUEs)	01/03/12	7418
<a href="#">R1056OTN</a>	03/09/12	Revision of Medicare Summary Notice (MSN) for Non-Competitive Bid Claims	07/02/12	7729
<a href="#">R1055OTN</a>	03/09/12	Medicare Fiscal Intermediaries Shared System (FISS), HealthCare Integrated General Ledger Accounting System (HIGLAS), and Change of Ownership Process Revisions for IRS Form 1099 Reporting	07/02/12	7732

<a href="#">R1054OTN</a>	03/07/12	Use of Revised Remittance Advice Remark Code (RARC) N103 When Denying Services Furnished to Federally Incarcerated Beneficiaries	07/02/12	7678
<a href="#">R1052OTN</a>	03/01/12	Analysis and Design of Edits to Correct Recovery Auditor Identified Improper Payments in MCS	07/02/12	7673
<a href="#">R1051OTN</a>	02/29/12	Analysis of Improper Overpayments to Design Edits to Correct these Overpayments in CWF, MCS, and FISS	07/02/12	7661
<a href="#">R1050OTN</a>	02/29/12	Automated Tracking and Reporting of Recovery Audit-Associated Reopenings and Appeals	04/02/12	7604
<a href="#">R1049OTN</a>	02/24/12	Implement Fraud Prevention Predictive Modeling Prepayment Edits - Analysis and Design Only	07/02/12	7669

<a href="#">R1047OTN</a>	02/17/12	Enhancements to the Recovery Audit Mass Adjustment/Reporting Process in the ViPS Medicare System (VMS)	07/02/12	7603
<a href="#">R1046OTN</a>	02/17/12	Fiscal Intermediary Shared System (FISS) and Common Working File (CWF) System Enhancement for Storing Line Level Rendering Physicians/Practitioners National Provider Identifier (NPI) and Physician Specialty Code Information	07/02/12	7578
<a href="#">R1043OTN</a>	03/01/12	Delayed Work from CR 7589: Request to Require Hours for Research and Conference Calls with Maintainers, MACs, and EDCs and Additional Requirements for IDR Shared Systems	07/02/12	7662
<a href="#">R1042OTN</a>	02/03/12	Creation of New Indicator for Use on the Ambulatory Surgical Centers (ASCs) Payment Indicator File for Reporting Quality Measures	04/02/12	7472
<a href="#">R1040OTN</a>	02/03/12	Interaction of Multiple Procedure Payment Reduction (MPPR) on Imaging Procedures and the Outpatient Prospective Payment System (OPPS) Cap on the Technical Component of Imaging Procedures	07/02/12	7703
<a href="#">R1039OTN</a>	02/3/12	International Classification of Diseases-10 <sup>th</sup> Edition (ICD-10), Inclusion of Type of Bill (TOB) 33X, Home Health, Outpatient (includes HHA visits under a Part A Plan of treatment)	07/02/12	7704

<a href="#">R1038OTN</a>	01/27/12	Updates to Editing of Patient Discharge Status Codes on Hospice Claims	07/02/12	7690
<a href="#">R1037OTN</a>	01/27/12	Health Insurance Portability and Accountability (HIPAA) 5010/D.0 Fixes - July 2012	07/02/12	7664
<a href="#">R1033OTN</a>	01/27/12	Analysis of Improper Overpayments to Design Edits to Correct these Overpayments in CWF, MCS, and FISS	07/2/12	7661
<a href="#">R1032OTN</a>	01/26/12	Revisions to the Hospice Medicare Summary Notice (MSN)	07/02/12	7675
<a href="#">R1031OTN</a>	01/26/12	Analysis and Design of Edits to Correct Recovery Auditor Identified Improper Payments in MCS	07/02/12	7673
<a href="#">R1030OTN</a>	01/26/12	Health Insurance Portability and Accountability Act (HIPAA) 5010 837 Institutional (837I) Edits and 5010 837 Professional (837P) Edits – July 2012 Version	07/02/12	7719

<a href="#">R1029OTN</a>	01/26/12	Delayed Work from CR 7589: Request to Require Hours for Research and Conference Calls with Maintainers, MACs, and EDCs and Additional Requirements for IDR Shared Systems	07/02/12	7662
<a href="#">R1028OTN</a>	01/27/12	Contractor Instructions to Implement International Classification of Diseases-10th Revision (ICD-10) Plans	04/01/13	7592
<a href="#">R1027OTN</a>	01/26/12	New Occurrence Span Code to Report Antepartum Days	07/02/12	7716
<a href="#">R1026OTN</a>	01/26/12	Implementation of the HIPAA Version 5010 276/277 Claim Status Edits July 2012 Release	07/02/12	7582
<a href="#">R1025OTN</a>	01/26/12	Enterprise Electronic Change Information Management Portal (ECHIMP)	07/02/12	7643
<a href="#">R1024OTN</a>	01/26/12	Common Edits and Enhancements Modules (CEM) Code Set Update	07/02/12	7665

<a href="#">R1023OTN</a>	01/26/12	Common Edits and Enhancements Module (CEM) and Receipt, Control, and Balancing Updates - July 2012	07/02/12	7713
<a href="#">R1022OTN</a>	01/26/12	Fee for Service Common Eligibility Services Conference Calls and Research	07/02/12	7712
<a href="#">R1021OTN</a>	01/26/12	Automated Tracking and Reporting of Recovery Audit-Associated Reopenings and Appeals	04/02/12	7604
<a href="#">R1019OTN</a>	01/25/12	Update to the Fiscal Year (FY) 2012 List of Codes Exempt from Reporting Present on Admission (POA)	07/02/12	7680
<a href="#">R1016OTN</a>	01/25/12	Direct Mailing to Medicare Providers About the 2012 Electronic Prescribing Payment	02/27/12	7730
<a href="#">R1015OTN</a>	01/20/12	Emergency Update to the CY 2012 Medicare Physician Fee Schedule Database (MPFSDB)	01/26/12	7737



<a href="#">R1014OTN</a>	01/06/12	Instructions to Teaching Hospitals for Reporting the Internal Revenue Service (IRS) Refund of Medical Resident FICA Taxes	02/06/12	7685
<a href="#">R1013OTN</a>	01/06/12	Contractor Instructions to Implement International Classification of Diseases-10th Revision (ICD-10) Plans	04/01/13	7592
<a href="#">R1012OTN</a>	01/06/12	Use of Revised Remittance Advice Remark Code (RARC) N103 When Denying Services Furnished to Federally Incarcerated Beneficiaries	07/02/12	7678