

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-19 Demonstrations	Centers for Medicare & Medicaid Services (CMS)
Transmittal 181	Date: October 27, 2017
	Change Request 10339

SUBJECT: Next Generation ACO Model - Weekly AIPBP Reduction File Change

I. SUMMARY OF CHANGES: The Centers for Medicare & Medicaid Services has identified through our discussions with Common Working File (CWF) contractor that the weekly Next Generation Accountable Care Organization (ACO) Model's All-Inclusive Performance Based Payment (AIPBP) Reduction file (which is a pass-through file to the ACO-Operating System (OS)) will require changes to include the New Medicare Card Project, Medicare Beneficiary Identifier (MBI), wherever a Medicare Health Insurance Claim Number (HICN) is present in the file.

EFFECTIVE DATE: April 1, 2018

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

IMPLEMENTATION DATE: April 2, 2018

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-*Only One Per Row.*

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

III. FUNDING:

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

Demonstrations

Attachment - Demonstrations

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SUBJECT: Next Generation ACO Model - Weekly AIPBP Reduction File Change

EFFECTIVE DATE: April 1, 2018

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IMPLEMENTATION DATE: April 2, 2018

I. GENERAL INFORMATION

A. Background: CMS has identified through our discussions with CWF that the weekly Next Generation ACO Model's AIPBP Reduction file (which is a pass-through file to the ACO-OS) will require changes to include the New Medicare Card Project, Medicare Beneficiary Identifier (MBI), wherever a Medicare HICN is present in the file.

B. Policy: Section 115A of the Social Security Act (the Act) (added by Section 3021 of the Affordable Care Act)(42.U.S.C. 1315a) authorizes the Center for Medicare & Medicaid Innovation (CMMI) to test innovation health care payment and service delivery models that have the potential to lower Medicare, Medicaid, and CHIP spending while maintaining or improving the quality of beneficiaries' care.

II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility									
		A/B MAC			D M E M A C	Shared-System Maintainers				Other	
		A	B	H H H		F I S S	M C S	V M S	C W F		
10339.1	CWF shall add the MBI to the weekly AIPBP Reduction file next to Medicare HICN present in the file.									X	
10339.2	CWF shall attend two one hour calls to discuss the file layout with the ACO contractor.									X	CMS

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E M A C	C E D I
		A	B	H H H		

Number	Requirement	Responsibility				
		A/B MAC			D M E M A C	C E D I
		A	B	H H H		
	None					

IV. SUPPORTING INFORMATION

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

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:

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

V. CONTACTS

Pre-Implementation Contact(s): Phoebe Ramsey, 410-786-4015 or phoebe.ramsey@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

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ATTACHMENTS: 0