

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-20 One-Time Notification</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
<b>Transmittal 2116</b>	<b>Date: August 10, 2018</b>
	<b>Change Request 10815</b>

**SUBJECT: Modifications to the National Coordination of Benefits Agreement (COBA) Medicare Crossover Process**

**I. SUMMARY OF CHANGES:** Through this instruction the Centers for Medicare & Medicaid Services (CMS) is implementing a change to the Common Working File (CWF) system. This change will ensure that CWF will not return Beneficiary Other Insurance (BOI) trailer 29 responses to our Medicare Administrative Contractors that contain the same COBA identifier and the same COBA trading partner.

**EFFECTIVE DATE: January 1, 2019**

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

**IMPLEMENTATION DATE: January 7, 2019**

*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.*

<b>R/N/D</b>	<b>CHAPTER / SECTION / SUBSECTION / TITLE</b>
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:**

**One Time Notification**



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	
	the same COBA ID (including "active" records with future termination dates), it shall only return one (1) occurrence of the COBA ID, COBA Trading Partner Name, and all other required elements to the MAC via its BOI 29 reply trailer.									
10815.1.1	In deciding which COBA trading partner effective date to return via the BOI 29 reply trailer when there are duplicate BOI auxiliary records, CWF shall always return the oldest "active" coverage period associated with the COBA ID and the claim's dates of service.							X		
10815.1.1.1	Thus, for example, if the CWF BOI auxiliary file contained two occurrences of COBA ID 30000 with associated opened-ended records with effective dates of January 1, 2005, and April 1, 2006, respectively, CWF shall return the effective date of January 1, 2005 to the MACs via the BOI 29 reply trailer.							X		

### 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		
	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):** Brian Pabst, 410-786-2487 or brian.pabst@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**