

<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 2120</b>	<b>Date: August 10, 2018</b>
	<b>Change Request 10813</b>

**SUBJECT: New CWF Edit for Part A Outpatient Medicare Advantage (MA), Health Maintenance Organization (HMO)**

**I. SUMMARY OF CHANGES:** The Centers for Medicare & Medicaid Services (CMS), in an effort to mitigate the potential for Part A Outpatient Medicare Advantage (MA) and Health Maintenance Organization (HMO) claims to pay in error, is requesting a Common Working File (CWF) edit to be established to prevent payment.

**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**

# Attachment - One-Time Notification

Pub. 100-20	Transmittal: 2120	Date: August 10, 2018	Change Request: 10813
-------------	-------------------	-----------------------	-----------------------

**SUBJECT: New CWF Edit for Part A Outpatient Medicare Advantage (MA), Health Maintenance Organization (HMO)**

**EFFECTIVE DATE: January 1, 2019**

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

**IMPLEMENTATION DATE: January 7, 2019**

## I. GENERAL INFORMATION

**A. Background:** Part A Outpatient Medicare Advantage (MA) and Health Maintenance Organization (HMO) claims when submitted to Medicare are set up to reject without appeal rights. It has come to the attention of the Centers for Medicare & Medicaid Services (CMS), when these claim types initially receive the Common Working File (CWF) utilization error code 5233, the Fiscal Intermediary Shared System (FISS) HMO pay code of '1' is applied to the claim. If the MAC sets up the Expert Claims Processing System (ECPS) event to recycle the claim back to CWF, by placing the claim in the FISS SB0100 location, a subsequent CWF edit will not set. This will result in the claim making payment in error.

**B. Policy:** N/A

## II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility									
		A/B MAC			D M E	Shared-System Maintainers				Other	
		A	B	H H H		F I S S	M C S	V M S	C W F		
10813.1	CWF shall create a new edit for Part A Outpatient and Home Health to ensure if the FISS HMO PAID Indicator is '1' not to allow the reimbursement to be greater than zero.									X	
10813.1.1	CWF shall ensure the edit would only be read if HMO PAID INDICATOR IS '1' and shall not be allowed to be overridden.									X	
10813.2	The A/B MAC Part A and the A/B MAC Part HHH shall set up the FISS Reason Code File to reject the new CWF claim level consistency edit with an 'X' in the tape-to-tape field, 'N' in the No Pay Code, and a '9' in the Hard Copy field of the reason code file.	X		X							
10813.3	The A/B MAC Part A and the A/B MAC Part HHH shall set up the new CWF claim level consistency edit on the FISS Reason Code File with a Claim	X		X							

Number	Requirement	Responsibility									
		A/B MAC			D M E M A C	Shared-System Maintainers				Other	
		A	B	HHH		FISS	MCSS	VMS	CWF		
	<p>Adjustment Group Code (CAGC) value of CO for Contractual Obligation, Claim Adjustment Reason Code (CARC) value of 24 and Medicare Summary Notice (MSN) message, MSN 11.3.</p> <p>CO – Contractual Obligations (patient may not be billed for these services).</p> <p>CARC 24 - Charges are covered under a capitation agreement/managed care plan.</p> <p>MSN 11.3 - Our records show that you are enrolled in a health maintenance organization. Your provider must bill this service to them.</p>										
10813.4	The A/B MAC Part A and the A/B MAC Part HHH shall test the changes made to the FISS Reason Code File to ensure the new CWF claim level consistency edit rejects the claim and the appropriate messages are applied to the remittance advice and MSN.	X		X							
10813.4.1	The A/B MAC Part A and the A/B MAC Part HHH shall set up the existing U5233 on the reason code file in their testing environment to recycle the claim back to CWF, by placing the claim in the FISS SB0100 location.	X		X							
10813.4.2	The A/B MAC Part A and the A/B MAC Part HHH shall enter a Part A Outpatient Medicare Advantage (MA), Health Maintenance Organization (HMO) claim meeting the CWF set logic for U5233.	X		X							
10813.4.3	The A/B MAC Part A and the A/B MAC Part HHH shall verify the test claim has received the existing U5233 CWF edit, and the claim is recycled back to CWF with the FISS HMO pay indicator of 1.	X		X							
10813.4.3.1	The A/B MAC Part A and the A/B MAC Part HHH shall verify the new CWF claim level consistency edit is received and the FISS Reason Code File applies the rejection to the claim.	X		X							
10813.4.3.2	The A/B MAC Part A and the A/B MAC Part HHH shall verify the appropriate messages are applied to the remittance advice and the MSN.	X		X							

Number	Requirement	Responsibility									
		A/B MAC		H H H	M A C	D M E	Shared-System Maintainers				Other
		A	B				F I S S	M C S	V M S	C W F	
10813.5	The A/B MAC Part A and the A/B MAC Part HHH shall set up the existing U5233 reason code file in their testing environment to not recycle the claim back to CWF, by restoring the reason code file back to its original state prior to the testing set up.	X		X							

**III. PROVIDER EDUCATION TABLE**

Number	Requirement	Responsibility					
		A/B MAC			D M E	C W F	I S S
		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):** Cathleen Gurreri, 443-934-2913 or Cathleen.Gurreri@cms.hhs.gov

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

**VI. FUNDING**

**Section A: 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.

**ATTACHMENTS: 0**