CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 2226	**Date: January 25, 2019**
	Change Request 11052

SUBJECT: Synchronize the Common Working File (CWF) and Enrollment Data Base (EDB) Entitlement Data

I. SUMMARY OF CHANGES: The purpose of this change request is to expand the number of entitlement period occurrences in CWF to match with EDB.

EFFECTIVE DATE: July 1, 2019 - Analysis and Design; October 1, 2019 - Development and Implementation
Unless otherwise specified, the effective date is the date of service.
IMPLEMENTATION DATE: July 1, 2019 - Analysis and Design; October 7, 2019 - Development and Implementation

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:

One Time Notification

Attachment - One-Time Notification

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I.   GENERAL INFORMATION

A.   Background: The EDB receives entitlement data from the Social Security Administration (SSA) and stores up to six (6) Part A and ten (10) Part B entitlement periods. The EDB is the source of entitlement data for CWF and uses Health Insurance Identification (HIID) transactions to transmit and overlay beneficiary records at CWF. Currently, the CWF receives and stores only two (2) Part A and Part B entitlement periods each and unable to process the adjustments/old claims correctly, when the dates of service fall outside of the two (2) entitlement periods. To allow the adjustments/old claims to process within CWF, the CWF Host has to manually check the previous entitlement period information at EDB and temporarily overlay the entitlement period(s).

The CMS is instructing CWF to expand, receive, and store the entitlement period occurrences to match with EDB and avoid manual updates to entitlement dates for processing Medicare fee-for-service adjustments/old claims.

B.   Policy: Not applicable

II.   BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
11052.1	The contractor shall modify the HIID layout to increase the number of entitlement period occurrences for Part A from two (2) to six (6) and for Part B from two (2) to ten (10) to match with EDB.								X	EDB
11052.2	The contractor shall create new fields using existing FILLER, if any, or expand the beneficiary master record to store and keep 1. first/initial entitlement dates for both Part A and Part B, and								X	

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
	2. six (6) Part A and ten (10) Part B entitlement periods.									
11052.3	The contractor shall send the maximum number of Part A and Part B entitlement periods on the daily feeds to CWF.									EDB
11052.4	The contractor shall update the EDB HIID transaction add/overlay process to 1. populate the first/initial entitlement dates using dates when the beneficiary becomes entitled to Medicare, if available, otherwise use oldest entitlement dates on file, and 2. update all the six (6) Part A and ten (10) Part B entitlement periods when dates are available.								X	
11052.5	The contractor shall send a one-time full refresh (in a separate file) of all Medicare beneficiary entitlement periods to CWF when more than two (2) Part A and/or Part B entitlement periods are on file.									EDB
11052.5.1	The contractor shall either provide instructions or create separate job(s) for the CWF Host to load the one-time full refresh file of entitlement periods from EDB.								X	
11052.5.2	The contractor shall process the one-time full refresh file from EDB during the release installation weekend.									CWF Host
11052.6	The contractor shall modify CWF claims processing to work based on the appropriate entitlement dates. NOTE: CWF shall continue to display most current two (2) entitlement periods in the Beneficiary Data Streamlining (BDS), Health Insurance Master Record (HIMR), CWF Provider Queries, and extracts to Medicare Beneficiary Database (MBD) and Next Generation Desktop (NGD).								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): Vinay Vuyyuru, 410-786-9111 or Vinay.Vuyyuru@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