

<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 1401</b>	<b>Date: August 1, 2014</b>
	<b>Change Request 8681</b>

**SUBJECT: Fee for Service Beneficiary Data Streamlining (FFS BDS) - Phase II - Auxiliary Data**

**I. SUMMARY OF CHANGES:** In June, 2011, the three shared system maintainers, HPES (MCS and FISS), GDIT (VMS) and Acentia (CWF) conducted a summit with CMS management representing a number of CMS components. The maintainers collaborated to present improvement ideas, with the end goal of finding efficiencies that would enable the CMS to get the greatest benefit from the programming hours contracted each quarter. The maintainers proposed to consolidate the FFS eligibility functionality (currently residing in 4 different systems) into one shared service, accessible at the beginning of the claims adjudication process. This new service would be used by all 4 systems to eliminate duplicate or unnecessary processing. Subsequent discussions have taken place between the group of maintainers and CMS.

This change request is for the FFS contractors to perform data analysis to explore auxiliary data such as MSP, HMO etc., received and used by the MACs. This analysis will eventually lead to a fee-for-service enterprise solution that will eliminate redundancy in data along with consolidating functionality.

Cross reference CRs 7548, 7611, 7712, 7895, 8091, 8285 and 8603.

**EFFECTIVE DATE: January 1, 2015**

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

**IMPLEMENTATION DATE: January 5, 2015 - Analysis**

*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 obliged 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
	<p>various sub-systems and identify usage of auxiliary data provided by Shared Systems and CWF. Auxiliary files include supporting data required to process a FFS beneficiary claim such as MSP, HMO, ESRD, etc.</p> <p>Contractors shall provide information as described below to the CWF Maintainer detailing the functional inventory for each online function or non-base job. Data can be provided in Excel or Word format and is due October 16, 2014.</p> <ol style="list-style-type: none"> <li>1. Contractor Name and Jurisdiction</li> <li>2. Online function or Non-base Job ID, Name and Description</li> <li>3. System (FISS, MCS, VMS)</li> <li>4. Environment (EDC or Local Data Center)</li> <li>5. Usage (on-line or batch)</li> <li>6. Frequency (daily, weekly, monthly, quarterly, annual, adhoc)</li> <li>7. Files used in the online/non-base job <ul style="list-style-type: none"> <li>• Provide File Name</li> <li>• Provide File Description</li> <li>• Provide source of data on file (from shared systems, CWF, CMS or other)</li> <li>• Is file updated by the MAC</li> </ul> </li> <li>8. Volume of data processed by the job</li> <li>9. Any other information that can be provided on the file/non-base job</li> </ol>								EDCs	
8681.2	<p>Shared system maintainers and CWF shall continue analysis of the four BDS alternatives.</p> <ol style="list-style-type: none"> <li>1. Provide a single CWF beneficiary data store at each EDC – CMS would like to see analysis done for both file distribution options. (1) 10</li> </ol>					X	X	X	X	CWF Host, EDCs

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	
	<p>physical beneficiary files, and for (2) 90 physical beneficiary files split by Beneficiary 9th digit for each host. Continue analysis started with CR 8603.</p> <p>2. Other technology that can be made available – this solution could be hosting a single file at the Baltimore Data Center, or utilize the CME data, or other enterprise solutions.</p> <p>3. Stay in place “As Is”. Analyze impacts &amp; risks to the program if systems remained “as is” with no changes. Options to reduce/eliminate updates to the local beneficiary data stores.</p> <p>4. Using Cache to access BDS at CWF. Detail analysis was done as part of CR 8285.</p>									
8681.3	Contractors shall attend 4 conference calls every other week beginning October 16, 2014 through January 8, 2015 to discuss the BDS Phase II auxiliary data detailed analysis.					X	X	X	X	CWF Host, EDCs
8681.4	Contractors shall attend 2 conference calls once a month beginning November 13, 2014 through December 11, 2014 to discuss the BDS Phase II auxiliary data detailed analysis.	X	X	X	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):** Richard Kociszewski, 410-786-7615 or Richard.Kociszewski@cms.hhs.gov

**Post-Implementation Contact(s):** Contact your Regional Coordinator.

#### VI. FUNDING

**Section A: For Medicare Administrative Contractors (MACs):**

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