

<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 1499</b>	<b>Date: May 8, 2015</b>
	<b>Change Request 9153</b>

**SUBJECT: Section 504: Implement National Medicare Summary Notices (MSNs) in Alternate Formats**

**I. SUMMARY OF CHANGES:** The Centers for Medicare & Medicaid Services (CMS) has an obligation to provide the MSN in alternate formats for beneficiaries who elect one of the formats as a preference. The purpose of this Change Request (CR) is to have the MACs be responsible for printing requests for large print MSNs, and to have a third party contractor responsible for requests for Braille, CD-ROM, and Audio alternate formats.

CMS has been working on the alternate format project for several years. Most recently, CMS has directed MACs to provide MSNs to a subset of beneficiaries through a manual process. This CR will implement MAC requirements to produce large print MSNs for beneficiaries with that preference in their respective jurisdictions, and the shared system maintainers (SSMs) to provide all requisite technical support for all alternate format MSNs.

**EFFECTIVE DATE: October 1, 2015**

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

**IMPLEMENTATION DATE: October 5, 2015**

*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

<b>Pub. 100-20</b>	<b>Transmittal: 1499</b>	<b>Date: May 8, 2015</b>	<b>Change Request: 9153</b>
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**SUBJECT: Section 504: Implement National Medicare Summary Notices (MSNs) in Alternate Formats**

**EFFECTIVE DATE: October 1, 2015**

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**IMPLEMENTATION DATE: October 5, 2015**

## I. GENERAL INFORMATION

**A. Background:** The Centers for Medicare & Medicaid Services (CMS) has an obligation to provide the MSN in alternate formats for beneficiaries who elect one of the formats as a preference. The purpose of this Change Request (CR) is to have the MACs be responsible for printing requests for large print MSNs, and to have a third party contractor responsible for requests for Braille, CD-ROM, and Audio alternate formats.

CMS has been working on the alternate format project for several years. Most recently, CMS has directed MACs to provide MSNs to a subset of beneficiaries through a manual process. This CR will implement MAC requirements to produce large print MSNs for beneficiaries with that preference in their respective jurisdictions, and the shared system maintainers (SSMs) to provide all requisite technical support for all alternate format MSNs.

**B. Policy:** Section 504 of the Rehabilitation Act of 1973 (Section 504), 29 U.S.C. 794 forbids Executive Agencies and recipients of Federal financial assistance from excluding individuals with disabilities or denying them an equal opportunity to receive program benefits and services.

## 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	
9153.1	All contractors shall attend up to 5 one hour conference calls to give contractors an overview of CMS' vision for this project, and to address questions that originate from any of the contractors.	X	X	X	X	X	X	X	X	NGD, RRB-SMAC, VDCs
9153.1.1	Each SSM shall take minutes from their own systems perspective and each shall submit minutes into ECHIMP POC forum within three days of each conference call.					X	X	X		
9153.2	Contractors shall produce and mail large print Medicare Summary Notices (MSNs) using the current MSN design and format. A CMS approved sample will be mailed to each MAC point of contact that was	X	X	X	X					RRB-SMAC

Number	Requirement	Responsibility								Other
		A/B MAC			D M E M A C	Shared- System Maintainers				
		A	B	H H H		F I S S	M C S	V M S	C W F	
	used for the previous mailing of large print MSN samples.									
9153.2.1	The contractors shall create large print MSNs using a combination of 18 point font for the main text, and 16 point font (or larger) for headers, footers, and table headers.	X	X	X	X					RRB-SMAC
9153.2.2	The contractors shall produce the large print MSNs on 11x17 or A3 (11.7x16.5) paper.	X	X	X	X					RRB-SMAC
9153.2.3	The contractors shall print and mail large print MSNs in the same amount of time it currently takes to print and mail standard MSNs.	X	X	X	X					RRB-SMAC
9153.3	Contractors shall identify beneficiary alternate format preferences for Braille, Audio, and CD-ROM, and transmit these MSN files to NGD.					X	X	X		VDCs
9153.3.1	Contractor shall continue to create English and Spanish MSN files for the following MSN types (Braille, Audio, and CD ROM) based on the beneficiary's alternate format preference.					X	X	X		VDCs
9153.3.2	A metadata file for Braille, Audio, and CD ROM shall be included with all files being sent to the Next Generation Desktop.					X	X	X		VDCs
9153.3.3	The contractors shall not include in the file transmission MSNs that are internal use copies. Examples include duplicates, office copies, HMO MSNs, QA copies, etc.					X	X	X		VDCs
9153.4	Contractors shall develop the ability to suppress printing of the standard "no pay" MSN for large print, English and Spanish.					X	X	X		
9153.5	The contractors shall mail alternate format MSNs free of postage as "free matter for the blind".	X	X	X	X					RRB-SMAC
9153.5.1	CMS shall provide each contractor the USPS waiver for mailing documents as 'free matter', a sample of a large print MSN to give to the local post office, and a USPS POC (name and number).	X	X	X	X					RRB-SMAC

### 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		
9153.6	MLN Article: A provider education article related to this instruction will be available at <a href="http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/">http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/</a> shortly after the CR is released. You will receive notification of the article release via the established "MLN Matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web sites and include information about it in a listserv message within 5 business days after receipt of the notification from CMS announcing the availability of the article. In addition, the provider education article shall be included in the contractor's next regularly scheduled bulletin. Contractors are free to supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.	X	X	X	X	

### 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):** James Wilkerson, 410-786-5586 or [james.wilkerson@cms.hhs.gov](mailto:james.wilkerson@cms.hhs.gov) , Scott Schiller, 410-786-4514 or [scott.schiller@cms.hhs.gov](mailto:scott.schiller@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: 1**

Free Matter for the  
Blind or Handicapped