

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1510	Date: June 12, 2015
	Change Request 9171

SUBJECT: Award of Medicare Administrative Contractor (MAC) Contract for Jurisdiction M

I. SUMMARY OF CHANGES: The purpose of this change request is to announce the award of the A/B MAC Jurisdiction M contract to Palmetto GBA for the administration of Medicare Part A and Part B Fee-for-Service (FFS) claims as well as the Home Health & Hospice (HH&H) Region C service area.

EFFECTIVE DATE: April 1, 2015

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

IMPLEMENTATION DATE: July 13, 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.

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

Pub. 100-20	Transmittal: 1510	Date: June 12, 2015	Change Request: 9171
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SUBJECT: Award of Medicare Administrative Contractor (MAC) Contract for Jurisdiction M

EFFECTIVE DATE: April 1, 2015

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

IMPLEMENTATION DATE: July 13, 2015

I. GENERAL INFORMATION

A. Background: On April 1, 2015, the Centers for Medicare & Medicaid Services (CMS) awarded the A/B MAC Jurisdiction M contract to Palmetto GBA for the administration of Medicare Part A and Part B Fee-for-Service (FFS) claims in the States of Virginia, West Virginia, North Carolina, and South Carolina as well as the Home Health & Hospice (HH&H) Region C service area of Alabama, Arkansas, Florida, Georgia, Illinois, Indiana, Kentucky, Louisiana, Mississippi, New Mexico, North Carolina, Ohio, Oklahoma, South Carolina, Tennessee, and Texas. As Palmetto GBA is the incumbent contractor for this MAC Jurisdiction, previously Jurisdiction 11, the current MAC workload numbers shall remain the same.

Palmetto GBA shall perform this contract work at their current address of 17 Technology Circle, Columbia, South Carolina 29202.

The following applications or business owners shall continue to accept Palmetto GBA's existing MAC workload numbers.

- Administrative Qualified Independent Contractor (AdQIC),
- CMS Analysis, Reporting and Tracking System (CMS ARTS),
- Contractor Administrative Budget and Financial Management (CAFM) System,
- Comprehensive Error Rate Testing (CERT) Program,
- Contractor Management Information System (CMIS),
- CMS Baltimore Data Center (BDC),
- Coordination of Benefits Agreement (COBA) Program,
- Coordination of Benefits Contractor (COBC),
- Contractor Reporting of Operational Workload Data (CROWD) System,
- Common Working File (CWF),
- Customer Service Assessment and Management System (CSAMS),
- Debt Collection System (DCS),
- Electronic Correspondence Referral System (ECRS),
- Electronic Health Records (EHRs) Program,

- Expert Claims Processing System (ECPS),
- Fiscal Intermediary Shared System (FISS),
- Fraud Prevention System (FPS),
- Health Care Information System (HCIS),
- Health Care Integrated General Ledger Accounting System (HIGLAS),
- Health Insurance Master Record (HIMR),
- Health Insurance Portability & Accountability Act (HIPAA) Eligibility Transaction System (HETS),
- Integrated Data Repository (IDR),
- Intern and Resident Information System (IRIS),
- Local Coverage Determination (LCD) Database,
- Medicare Appeals System (MAS),
- Medicare Coverage Data Base (MCD),
- Medicare Secondary Payer Recovery Contractor (MSPRC),
- Multi-Carrier System (MCS),
- National Data Warehouse (NDW),
- National Level Repository (NLR),
- National Part B Pricing Files,
- National Provider Identifier (NPI) Crosswalk,
- Next Generation Desktop (NGD),
- Part B Analytics Reporting (PBAR) System,
- Production Performance Monitoring System (PULSE),
- Provider Enrollment Chain and Ownership System (PECOS),
- Provider Customer Service Program Contractor Information Database (PCID),
- Provider Inquiry Evaluation System (PIES),
- Program Integrity Management Reporting (PIMR) System,
- Program Safeguard Contractor (PSC),
- Provider Statistical and Reimbursement (PS&R) System,

- Qualified Independent Contractor (QIC),
- Quality Information Evaluation System (QIES),
- Recovery Auditors (RAs), Recover Management and Accounting System (REMAS),
- Renal Management Information System (REMIS),
- System Tracking for Audit and Reimbursement (STAR),
- Virtual Data Centers (VDCs),
- ZIP Code File, and
- Zone Program Integrity Contractors (ZPICs).

B. Policy: Medicare Prescription Drug Improvement and Modernization Act of 2003, Section 911.

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	
9171.1	The J-M A/B MAC, formerly J-11, shall continue to utilize the current MAC workload numbers as follows: 11201 for the State of South Carolina; 11301 for the State of Virginia; 11401 for the State of West Virginia; 11501 for the State of North Carolina.	X								
9171.2	The J-M MAC, formerly J-11, shall continue to utilize the current MAC workload number of 11004 for HH&H Region C service area.			X						
9171.3	The J-M MAC, formerly J-11, shall continue to utilize the current roll-up number/payer ID 11001 for the State of South Carolina and HH&H claims.	X								
9171.4	The J-M MAC, formerly J-11, shall continue to utilize the current roll-up number/payer ID 11003 for the States of Virginia and West Virginia claims.	X								
9171.5	The J-M MAC, formerly J-11, shall continue to utilize the current MAC workload numbers as follows:		X							

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	
	11202 for the State of South Carolina; 11302 for the State of Virginia; 11402 for the State of West Virginia; 11502 for the State of North Carolina.									
9171.6	All CMS applications and business owners that currently utilize the workload numbers listed in the previous requirements shall continue to accept and utilize those workload numbers following the effective date of the J-M A/B MAC contract.								All applications and business owners listed in the background section of this CR.	
9171.7	As of the effective date of the new J-M A/B MAC contract, the J-M A/B MAC shall track and charge all costs related to that contract to the appropriate Contract Line Item Number (CLIN) as instructed by CMS.	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): Cathleen Gurreri, 410-786-4374 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):

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ATTACHMENTS: 0