

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1518	Date: July 10, 2015
	Change Request 9181

SUBJECT: Contractor Reporting of Operational and Workload Data (CROWD) Form 5 Remittance Advice Reporting

I. SUMMARY OF CHANGES: This change request (CR) is to make changes to the way remittance advice transactions are reported on the Contractor Reporting of Operation and Workload Data (CROWD) Form 5 report.

EFFECTIVE DATE: August 11, 2015

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

IMPLEMENTATION DATE: August 11, 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: 1518	Date: July 10, 2015	Change Request: 9181
-------------	-------------------	---------------------	----------------------

SUBJECT: Contractor Reporting of Operational and Workload Data (CROWD) Form 5 Remittance Advice Reporting

EFFECTIVE DATE: August 11, 2015

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

IMPLEMENTATION DATE: August 11, 2015

I. GENERAL INFORMATION

A. Background: Medicare Administrative Contractors (MACs) are currently reporting electronic data interchange (EDI) data to the Contractor Reporting of Operational and Workload Data (CROWD) system on a monthly basis. MACs report the number of standard paper remittances (SPR), electronic remittance advice (ERA), and “Internet” remittance advices. Instruction is being provided to instruct what data is to be reported in the “Internet” field.

B. Policy: Affordable Care Act, Section 1104

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 S	Shared-System Maintainers				Other	
		A	B	H H H		F I S S	M C S	V M S	C W F		
9181.1	The Contractors shall track the number of remittance advices generated and posted to the Internet/Portal.	X	X		X						
9181.2	The Contractors shall make the remittance advices generated and posted to the Internet/Portal count available for future reporting on CROWD Form 5.	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): Lauren Vandegrift, 410-786-4882 or lauren.vandegrift@cms.hhs.gov, Angie Bartlett, 410-786-2865 or angie.bartlett@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