

<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 1651</b>	<b>Date: April 28, 2016</b>
	<b>Change Request 9604</b>

**SUBJECT: National Provider Identifier Crosswalk System (NPICS) Retirement Analysis Only - Engage Shared Systems Maintainers and Medicare Administrative Contractors (MACs) in Meetings and Correspondence Related to the NPICS Retirement with the Stakeholders**

**I. SUMMARY OF CHANGES:** Currently, the shared systems use the NPICS for claims processing. With the retirement of the NPICS, the stakeholders of the NPICS need to understand the usage of the NPICS by the shared systems and the MACs. Stakeholders also need to determine how they will be impacted by the retirement of NPICS and what changes in their system and/or processes need to be made as a result of the NPICS retirement. The purpose of this analysis-only CR is to enable the shared systems maintainers (Fiscal Intermediary Standard System (FISS), Multi-Carrier System (MCS) and Viable Medicare Systems (VMS) and MACs to participate in 10 hours of meetings, conversations and correspondence with the NPICS stakeholders.

**EFFECTIVE DATE: October 1, 2016**

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

**IMPLEMENTATION DATE: October 3, 2016**

*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: 1651</b>	<b>Date: April 28, 2016</b>	<b>Change Request: 9604</b>
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**SUBJECT: NPICS Retirement Analysis Only - Engage Shared Systems Maintainers and MACs in Meetings and Correspondence Related to the NPICS Retirement with the Stakeholders**

**EFFECTIVE DATE: October 1, 2016**

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## I. GENERAL INFORMATION

**A. Background:** The NPICS was created to create continuity of claims processing with the discontinuation of legacy Medicare IDs and implementation of National Provider Identifiers (NPIs). Now that all provider enrollment data is in Provider Enrollment, Chain, and Ownership System (PECOS), the shared systems will begin the effort of discontinuing the use of NPICS for claims processing and use PECOS only. Meetings will also be held with various Centers for Medicare & Medicaid Services (CMS) Stakeholders regarding how they are impacted by the NPICS retirement and what their solutions need to be. It is necessary to engage the shared systems and the MACs in some of these meetings and conversations in order for all stakeholders to fully understand how the shared systems are using NPICS.

**B. Policy:** N/A

## 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		
9604.1	The shared systems and MACs shall be available to participate in up to 10 hours of meetings and conversations regarding the NPICS Retirement with various CMS Stakeholders of the NPICS Retirement. Each meeting will be 1-2 hours in length.	X	X	X	X	X	X	X			VDCs
9604.1.1	FISS and the A/B MACs shall be available to participate in up to 10 hours of meetings and conversations regarding the NPICS Retirement with various CMS Stakeholders of the NPICS Retirement. Each meeting will be 1-2 hours in length.	X		X		X					VDCs
9604.1.2	MCS and A/B MACs shall be available to participate in up to 10 hours of meetings and conversations regarding the NPICS Retirement with various CMS Stakeholders of the NPICS Retirement. Each meeting		X				X				VDCs

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	H H H		F I S S	M C S	V M S	C W F	
	will be 1-2 hours in length.									
9604.1.3	VMS and Durable Medical Equipment (DME) MAC shall be available to participate in up to 10 hours of meetings and conversations regarding the NPICS Retirement with various CMS Stakeholders of the NPICS Retirement. Each meeting will be 1-2 hours in length.				X			X	VDCs	
9604.1.4	Each meeting or conversation shall be a combined meeting or a separate meeting per system.	X	X	X	X	X	X	X	VDCs	
9604.1.5	CMS and the downstream system requesting the meeting or conversation with the shared systems and/or MACs shall be responsible for taking meeting minutes and posting in eChimp.								CMS	
9604.1.6	CMS shall distribute agenda items at least 2 days prior to a meeting or conversation to allow participants time to research/prepare for the meeting.								CMS	
9604.1.7	Contractors shall send contact name(s) for attendance of the analysis calls to Shauntari Cheely at Shauntari.Cheely@cms.hhs.gov and CDS.EIC.CALLS@cdivdc.com within 5 days of issuance of this CR.								CMS	
9604.1.8	The shared systems or MACs shall not prepare any deliverables as a result of the meetings and conversations related to the NPICS Retirement.	X	X	X	X	X	X	X	VDCs	
9604.1.9	CMS shall submit a CR if research or analysis is needed as a result of these meetings or conversations.								CMS	

### III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		A	B	H H H		
	None					

#### IV. SUPPORTING INFORMATION

**Section A: Recommendations and supporting information associated with listed requirements:**

*"Should" denotes a recommendation.*

<b>X-Ref Requirement Number</b>	<b>Recommendations or other supporting information:</b>
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**Section B: All other recommendations and supporting information:** N/A

#### V. CONTACTS

**Pre-Implementation Contact(s):** Christi Lewis, 410-786-6900 or christi.lewis@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**