

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 365	Date: August 8, 2008
	Change Request 6092

Subject: CWF Automation of the Contractor Table to Support MAC Workload Renumbering

I. SUMMARY OF CHANGES: CWF is currently making workload renumbering changes within its system to support MAC transitions. The purpose of this CR is to automate parts of this process, thus reducing the amount of time needed for CWF to make these changes as well as resulting in savings for each workload renumbering. For this change request, the implementation date precedes the effective date to allow for shared-system and/or business process updates before new claims processing policies take effect.

Clarification

Effective Date: January 5, 2009

Implementation Date: October 6, 2008

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/revise 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	

III. FUNDING:

SECTION A: For Fiscal Intermediaries and Carriers:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their operating budgets.

SECTION B: For Medicare Administrative Contractors (MACs):

The contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the Statement of Work (SOW). 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

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

Attachment – One-Time Notification

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SUBJECT: CWF Automation of the Contractor Table to Support MAC Workload Renumbering.

Effective Date: January 5, 2009

Implementation Date: October 6, 2008

I. GENERAL INFORMATION

A. Background: The Centers for Medicare and Medicaid Services (CMS) needs to change Medicare contractor numbers as part of the transition to the Medicare Administrative Contractors (MAC). These changes need to be made because certain applications require separate contractor numbers for each state for both the Part A and Part B workloads. The new MAC workload nomenclature enables the easy identification of the workload by A/B MAC jurisdiction, state and type of workload (Part A or Part B).

The transition of a contractor workload has become more complex to support in the Common Working File (CWF) system with the MAC initiative. There can be multiple types of contractor transitions, the simplest being the transition of the entire workload of a single contractor to a new single contractor. A more complex situation is the transition of a national contractor workload (e.g., the former Mutual of Omaha workload now processed by Wisconsin Physicians Service) to multiple contractors along with their respective provider BSI identifiers. There are also situations where a current CICS production region will need to be split prior to a MAC transition, which will require the assigning of a new temporary workload number. All contractor transitions must occur within a scheduled period determined by CMS.

The current implementation of contractor transition changes to CWF requires modifications to the CWF Contractor file, along with modifications to a dozen modules where code needs to direct processing to the new contractor(s). There are also one-timer jobs that require execution prior to implementation to modify the beneficiary and COBC contractor datasets. Each contractor transition change request (CR) must go through the release lifecycle process and be implemented before the next contractor transition change can be applied in CWF. A full CWF lifecycle period for a contractor transition could be anywhere from less than 4 weeks (as an off-quarter priority CR) to a full quarter (as a quarterly release CR). History has shown that the majority of the contractor transitions are implemented off-quarter. All indications are showing that this trend will continue. Due to MAC transitions occurring at a more frequent and faster pace, the CWF lifecycle timeline to apply a contractor transition does not allow CMS, Contractors, STC Beta, and the CWF hosts a full 4 week UAT testing transition schedule.

CWF is currently making these renumbering changes within its system. The purpose of this CR is to automate parts of this process, thus reducing the amount of time needed for CWF to make these changes as well as resulting in savings for each workload renumbering. CWF will do analysis in October 2008 and implement the software changes in the January 2009 release for this CR.

IV. SUPPORTING INFORMATION

A. Recommendations and supporting information associated with listed requirements:

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:

B. All other recommendations and supporting information:

These changes will result in the following.

1. They will provide CWF with an enhanced ability to develop and test multiple CRs during overlapping contractor transitions.
2. They will reduce CWF maintenance time and costs for contractor transition CRs.
3. They will provide for quicker testing and implementation of contractor transition CRs.
4. They will ensure that contractor information can be applied to the contractor tables well in advance due to effective and termination dates on the file.

V. CONTACTS

Pre-Implementation Contact(s): Scott Levine (Scott.Levine@cms.hhs.gov) at (212) 616-2337, Steven Felsenberg (Steven.Felsenberg@cms.hhs.gov) at 410-786-2693, or Kathryn Woytan (Kathryn.Woytan@cms.hhs.gov) at (410) 786-4982.

Post-Implementation Contact(s): Kathryn Woytan (Kathryn.Woytan@cms.hhs.gov) at (410) 786-4982, Scott Levine (Scott.Levine@cms.hhs.gov) at (212) 616-2337, or Steven Felsenberg (Steven.Felsenberg@cms.hhs.gov) at 410-786-2693.

VI. FUNDING:

A. For Fiscal Intermediaries, Carriers, and Regional Home Health Intermediaries (RHHIs):

No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.

B. For Medicare Administrative Contractors (MAC),

The contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the Statement of Work (SOW). 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.