

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 819	Date: December 3, 2010
	Change Request 6926

SUBJECT: Currently Not Collectable (CNC) Type Development for 935 Appealed Claims

I. SUMMARY OF CHANGES: To develop two new CNC types for claims in 935 appeals statues that will not offset.

EFFECTIVE DATE: April 1, 2011

IMPLEMENTATION DATE: April 4, 2011

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	

III. FUNDING:

For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs) and/or Carriers:

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

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

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

Attachment – One-Time Notification

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SUBJECT: Currently Not Collectable (CNC) Type Development for 935 Appealed Claims

Effective Date: April 1, 2011

Implementation Date: April 4, 2011

I. GENERAL INFORMATION

A. Background:

When a 935 debt is in an appeal status it is excluded from offset. If the debt is moved to a CNC appeal status it will offset because the CNC rule applies that the debt is set to offset.

B. Policy:

When a debt is flagged as 935 eligible and is currently in an appeal status, the debt should be excluded from offset. Currently when a 935 receivable is appealed and becomes eligible for CNC, the receivable is moved to a CNC appeal status that auto offsets. CNC types automatically offset for one (1) batch cycle; then the contractor can change the offset indicator to an “N” to stop offset. If the claims were incorrectly offset while in 935 appeal status the contractor may need to issue a check back to the provider for the monies that were offset.

The purpose of this change request is to create two new CNC types that will allow for accounts receivables that are in a 935 appeal status and CNC status at the same time to not offset. Once the debt comes out of appeal status and is placed back into offset status, if it does not offset it should then be considered for CNC referral.

II. BUSINESS REQUIREMENTS TABLE

Number	Requirement	Responsibility								
		A / B M A C	D M M A C	F I I E R	C A R I E R	R H H I S	Shared-System Maintainers			
					F I S	M C S	V M S	C W F		
6926.1	The shared systems shall allow for accounts receivables that are in a 935 appeal status and CNC status at the same time to not offset.						X		X	
6926.2	The maintainers shall create two new CNC types that do not offset, similar to the CNC bankruptcy type “E”. <u>Example:</u> CNC 935 Appeal and CNC 935 Hold						X		X	
6926.3	The maintainer shall allow for the two new CNC types to continue reporting to the CNC reports.						X		X	

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility									
		A / B M A C	D M E M A C	F I	C A R I E R	R H H I	Shared-System Maintainers				Other
						F I S S	M C S	V M S	C W F		
	N/A										

IV. SUPPORTING INFORMATION

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

X-Ref Requirement Number	Recommendations or other supporting information:
N/A	

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s):

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VI. FUNDING

Section A: For *Fiscal Intermediaries (FIs)*, *Regional Home Health Intermediaries (RHHIs)*, and/or *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 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.