

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal: 899	Date: May 13, 2011
	Change Request 7433

SUBJECT: Addendum to CR 7362 to Require Hours for Research and Conference Calls With Maintainers, MACs, and EDCs

I. SUMMARY OF CHANGES: The IDR Shared Systems (IDRSS) will receive feeds from the three shared systems - the FISS, MCS and VMS. Specifically, the Enterprise Data Centers (EDCs) will send files for each shared system that are based on the copybooks the shared systems maintainers currently provide to the IDR Shared Systems Team. Once files are received, the Centers for Medicare and Medicaid Services (CMS) requires the IDRSS to perform a file consistency validation on each file sent by the shared systems prior to accepting the file and to retain the files at the Baltimore Data Center (BDC). In addition to the daily feeds, the IDR will also receive history extracts containing historical data starting with October 2005.

To facilitate transmitting the history extract through NDM, CR 7362 requires the Shared Systems Maintainers to break the history extracts into smaller segments to allow the file transmission via NDM for loading into the IDR. The NDM can support transmission of files up to 120GB. Additionally, CR 7362 requires the Shared Systems Maintainers to update their Master data dictionaries to be consistent with the approved IDR definitions.

This CR is an addendum to CR 7362 to require ongoing research hours and bi-weekly conference calls with the maintainers, MACs, and EDCs. These conference calls are necessary to the successful completion of the project. We recommend 80 hours for each MAC, EDC, and SSM.

EFFECTIVE DATE: October 1, 2011

IMPLEMENTATION DATE: October 3, 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/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:

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: Addendum to CR 7362 to Require Hours for Research and Conference Calls With Maintainers, MACs, and EDCs

Effective Date: October 1, 2011.

Implementation Date: October 3, 2011.

I. GENERAL INFORMATION

A. Background: The IDR Shared Systems (IDRSS) will receive feeds from the three shared systems – the FISS, MCS and VMS. Specifically, the Enterprise Data Centers (EDCs) will send files for each shared system that are based on the copybooks the shared systems maintainers currently provide to the IDR Shared Systems Team. Once files are received, the Centers for Medicare & Medicaid Services (CMS) requires the IDRSS to perform a file consistency validation on each file sent by the shared systems prior to accepting the file and to retain the files at the Baltimore Data Center (BDC). In addition to the daily feeds, the IDR will also receive history extracts containing historical data starting with October 2005.

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B. Policy: The Medicare Program Integrity Group has determined that it will use the Shared Systems claims data for fraud, waste and abuse detection.

This emergency CR must be included on the October release in order to require the maintainers, EDCs, and MACs to continue participating in biweekly conference calls. The previous requirement in CR 7215 expires in April. Since CR 7362 is already in clearance, we could not modify it to include this requirement; therefore this emergency addendum is required. This will allow the calls to continue uninterrupted starting in May through to implementation in October. Further, because the hours required are minimal, it should not be a major imposition on the release.

II. BUSINESS REQUIREMENTS TABLE

Number	Requirement	Responsibility									
		A / B	D M E	F I	C A R R I E R	R H I	Shared-System Maintainers				Other
							F I S S	M C S	V M S	C W F	
7433.1	All parties shall continue ongoing research and participation in scheduled conference calls.	X	X	X	X	X	X	X	X		CMS EDC
7433.2	The conference calls shall occur at least every other week.	X	X	X	X	X	X	X	X		CMS EDC
7433.3	The conference calls shall continue at least until the shared IDR systems modules for the shared systems are implemented at the EDC.	X	X	X	X	X	X	X	X		CMS EDC

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility									
		A / B	D M E	F I	C A R R I E R	R 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: N/A

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):

Anthony Hodge at 410-786-6645 or Anthony.Hodge3@cms.hhs.gov

John Stewart at 410-786-1189 or John.Stewart@cms.hhs.gov

Patte Appling at 410-786-1814 or Patricia.Appling@cms.hhs.gov

Post-Implementation Contact(s):

Contact your Contracting Officer's Technical Representative (COTR) or Contractor Manager, as applicable.

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.