CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 11585	Date: September 1, 2022
	Change Request 10715

Transmittal 11525, dated July 28, 2022, is being rescinded and replaced by Transmittal 11585, dated, September 1, 2022 to add business requirement 10715.2 instructing a MAC controlled option to the MCSDT configuration file. All other information remains the same.

SUBJECT: User Enhancement Change Request (CR) - Update the Multi-Carrier System (MCS) Desk Top Tool (MCSDT) Editing for Same Day Adjustments

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to update the MCSDT processing for adjustments, to ensure the claim has not been previously adjusted.

EFFECTIVE DATE: January 1, 2023

*Unless otherwise specified, the effective date is the date of service. IMPLEMENTATION DATE: January 3, 2023

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: 11585	Date: September 1, 2022	Change Dequest: 10715
Pub. 100-20	1 ransmutai: 11565	Date: September 1, 2022	Change Request: 10/15

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SUBJECT: User Enhancement Change Request (CR) - Update the Multi-Carrier System (MCS) Desk Top Tool (MCSDT) Editing for Same Day Adjustments

EFFECTIVE DATE: January 1, 2023

*Unless otherwise specified, the effective date is the date of service. IMPLEMENTATION DATE: January 3, 2023

I. GENERAL INFORMATION

A. Background: The MCSDT application requires the Medicare Administrative Contractor (MAC) to perform actions on a claim adjustment, only to find out at the end of those processes that an adjustment was already performed on the claim that day. This CR will update the logic so that the MCSDT application does a search to ensure an adjustment has not already been performed at the point the MAC selects the adjust claim button. The MAC then will not be required to perform unnecessary steps in the process.

B. Policy: N/A

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	t Responsibility											
		A/B MAC		MAC]						Sys	red- tem aine		Other
		A	В	H H H	M A C	F I S S	M C S	V M S	C W F				
10715.1	The MCS shall update the MCSDT logic to ensure a claim can be adjusted prior to any MCSDT processing of the claim.						X						
10715.1.1	The MCS shall verify the claim has not already been previously adjusted on the same day when the adjustment action is selected in MCSDT.						X						
10715.1.2	The MCS shall update the MCSDT priority of the MAC being required to select the adjustment type, reason code and location after it has been determined a prior adjustment did not already occur the same day.						X						
10715.2	The MCS shall add a MAC controlled option to the MCSDT configuration file. If the option is "on", the same day adjustment check will be the first action when the adjustment is initiated; before the user						Х						

Number	nber Requirement Responsibility											
		A/B		D	Shared-				Other			
		Ν	MAC		Μ	System						
					I		E		Maintainers			
		Α	В	Η		F	Μ		С			
				Η		Ι						
				Η	A	S	S	S	F			
					С	S						
	chooses an adjustment category, type and a reason											
	code, which derives the location. If the option is set to											
	"off" (default), the same day adjustment check will be											
	performed at the end of the adjustment category, type											
	and reason code selection process, as it does with											
	current MCS processing.											

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
			A/B MA(D M E	C E D I
				H H	M A C	
	None					

IV. SUPPORTING INFORMATION

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

"Should" denotes a recommendation.

X-Ref	Recommendations or other supporting information:
Requirement	
Number	

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

V. CONTACTS

Pre-Implementation Contact(s): Cathleen Gurreri, 443-934-2913 or cathleen.gurreri@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

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ATTACHMENTS: 0