CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 11953	**Date: April 12, 2023**
	Change Request 12954

Transmittal 11894 issued March 10, 2023, is being rescinded and replaced by Transmittal 11953, dated, April 12, 2023, to revise business requirement 12954.1. All other information remains the same.

SUBJECT: User Enhancement Change Request (UECR): ViPS Medicare System (VMS) - Update Beneficiary Information Tracking System (BITS) Edit BT06 to allow the Response Date to be equal to the Receipt Date

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to update an edit within the BITS that requires that the date of the response or closure of the BITs record to be at least one day after the date of receipt of the Prior Authorization or Advance Determination Medical Claim (ADMC) case. The edit will be updated to allow the Response Date to be equal to the Receipt Date.

EFFECTIVE DATE: July 1, 2023
*Unless otherwise specified, the effective date is the date of service.
IMPLEMENTATION DATE: July 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:

Attachment - One-Time Notification

Pub. 100-20	Transmittal: 11953	Date: April 12, 2023	Change Request: 12954

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SUBJECT: User Enhancement Change Request (UECR): ViPS Medicare System (VMS) - Update Beneficiary Information Tracking System (BITS) Edit BT06 to allow the Response Date to be equal to the Receipt Date

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IMPLEMENTATION DATE: July 3, 2023

I.   GENERAL INFORMATION

A.   Background: The purpose of this UECR is to update an edit within the BITS that currently requires that the date of the response or closure of the BITs record to be at least one day after the date of receipt of the Prior Authorization Request (PAR) or Advance Determination Medical Claim (ADMC) case. The edit will be updated to allow the Response Date to be equal to the Receipt Date. In a previous User Change Request, VP1002, logic was implemented to invoke an edit BT06-RESPONSE DATE MUST BE > RECEIPT DATE on the BITS- ADMC Tracking Screen. This requires that the date of the response or closure of the BITs record must be at least one day after the date of receipt of the Prior Authorization or ADMC case. With the expansion of Prior Authorization with short turnarounds, this edit is preventing the Durable Medical Equipment (DME) MACs from completing a Prior Authorization the day it is received. The DME MACs would like this edit updated to allow immediate processing of Prior Authorization and/or ADMC requests.

B.   Policy: This CR does not update policy.

II.   BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
12954.1	GDIT shall update BITS to allow the Response Date to be equal to the Receipt Date of the ADMC or PAR.							X		

III.   PROVIDER EDUCATION TABLE

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

IV.   SUPPORTING INFORMATION

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

"Should" denotes a recommendation.

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): Kay Curry, 410-786-1801 or Kay.Curry@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