CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12003	Date: April 27, 2023
	Change Request 13111

SUBJECT: User Enhancement Change Request (UECR): ViPS Medicare System (VMS) - Create a Search Screen to Return Editing Associated to a Procedure Code

I. SUMMARY OF CHANGES: The purpose of this UECR is to implement the changes determined during the analysis and design calls for previously issued instruction. This UECR provides requirements for updating VMS with a new Procedure Code Inquiry Screen, that will display edit data for requested Healthcare Common procedure Coding System (HCPCS) or range of HCPCS.

EFFECTIVE DATE: October 1, 2023; January 1, 2024
Unless otherwise specified, the effective date is the date of service.
IMPLEMENTATION DATE: October 2, 2023 - Coding and Testing; January 2, 2024 - Coding, Testing, and Implementation

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. 100-04	Transmittal: 12003	Date: April 27, 2023	Change Request: 13111

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I.   GENERAL INFORMATION

A.   Background: Currently, the Durable Medical Equipment Medicare Administrative Contractors (DME MACs) have the ability to view or search a multitude of screens/subsystems to determine editing associated to a Healthcare Common Procedure Coding System (HCPCS) code. It is currently a manually intensive process and some tables have to be searched individually. This enhancement will allow for immediate response when the DME MACs receive internal and external requests regarding editing on a particular HCPCS code. As an additional benefit, it is expected to reduce the amount of time it takes to review potential system changes that are MAC controlled.

The DME MACs also requested an enhancement to create an indicator that would be attached to a HCPCS code, when it has a correlating Fraud Prevention System (FPS) edit. During analysis calls, it was determined that FPS cannot send or provide a response with the HCPCS involved in an FPS query. Consequently, the DME MACs will use other internal procedures, to capture HCPCS codes that may be associated with an FPS.

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	
13111.1	GDIT shall create a HCPCs Search and Results screen that allows the user to enter a single HCPCs or a HCPCs range and displays the search results screen. Note: The HCPCS contained in the range must start with the same alphabetic character.							X		
13111.1.1	The new VMS transaction should be able to identify if the queried HCPCs is used							X		

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
	within a HCPCs range and be included in any of the results									
13111.1.2	The search results should return the EAR OL, OLDS, A/C, AFN and RUL fields from APPL/4/M1 for the HCPCS in the range if data is found on the\n\nAPPL/4/M1 screen.							X		
13111.1.3	The search results should return the KEY, EAR #, and GROUP EARS fields if the HCPCS is found on any of the active ACE ENTITY ACTION RECORDS.							X		
13111.1.4	The search results should return the KEY and SEQ, if the HCPCS is found in any active production SUPEROP records.							X		
13111.1.5	The search results should return the Value Set Name, if the HCPCS is found in an active Value set on a SUPEROP Value Set record.							X		
13111.1.6	The search results screen should contain a field detailing if Rebundling is present for the HCPCS. The search results should return a Y if the HCPCS is found on any of the VMAP 5 Rebundling tables and blank if not found.							X		
13111.1.7	The search results should return the MNEMONIC name field if the HCPCS is found on the VMAP/4C/LIKE Procedure Code Groups Table.							X		
13111.1.8	The search results should return the MNEMONIC name field if the HCPCS							X		

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
	code is found on any of the VMAP/4G/Group CMN table detail screen.									
13111.1.9	The search results should return the accreditation code and its effective and termination dates if the HCPCS is found on the VMAP/4D/HCPCS ACCREDITATION TABLE.							X		
13111.1.10	The search results should return the Prior Authorization Program Id if the HCPCS is found on a BITS – PRIOR AUTH PROGRAM DETAIL SCREEN.							X		
13111.2	GDIT shall utilize the PF key transportation logic (PF7/PF8), if information cannot be contained on one page for the selected HCPCS.							X		
13111.2.1	GDIT shall utilize the PF key transportation logic (F10/F11) to move forward and back from the HCPCS in a range in the selection.							X		
13111.3	GDIT shall create a process to provide a new HCPCS Search Results Delimited File which includes the searched criteria and results requested.							X		
13111.4	GDIT shall create the ability to transport to the applicable VMS subsystem and toggle back to the results screen.							X		

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		A	B	HHH		
	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