

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-20 One-Time Notification</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
<b>Transmittal 12308</b>	<b>Date: October 20, 2023</b>
	<b>Change Request 12956</b>

**SUBJECT: User Enhancement Change Request (UECR): ViPS Medicare System (VMS) - Hold Data on the Program Integrity Management Reporting (PIMR) Audit Record History Screen (BUDS19).**

**I. SUMMARY OF CHANGES:** The purpose of this Change Request is to update Beneficiary Update and Display System (BUDS) to capture and hold information on the Program Integrity Management Reporting (PIMR) Audit Record History Screen (BUDS19).

**EFFECTIVE DATE: April 1, 2024**

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

**IMPLEMENTATION DATE: April 1, 2024**

*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.

<b>R/N/D</b>	<b>CHAPTER / SECTION / SUBSECTION / TITLE</b>
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

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## I. GENERAL INFORMATION

**A. Background:** The Medicare Administrative Contractors use PIMR information for medical review savings reporting to CMS and for quality verification. PIMR is also reported to CMS biannually per CR 10585. Within VMS, PIMR is captured on BUDS19 when the analyst keys PIMR information on a medical review claim. PIMR is also used within SuperOp and other claim edits, to identify the type of edit and for reporting. It was discovered that that PIMR information is not always captured or holds on BUDS19.

When PIMR is not captured, the MAC has to manually correct the monthly savings report that is submitted to CMS. With this change, PIMR would be captured when keyed and there would be no manual corrections at month end.

**B. Policy:** There are no policy changes associated with this instruction.

## II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility							
		A/B MAC			D M E	Shared-System Maintainers			Other
		A	B	H H H		F I S S	M C S	V M S	
12956.1	GDIT shall update VMS to consistently capture and hold PIMR data on BUDS19.						X		

## III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E	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:
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**Section B: All other recommendations and supporting information:** N/A

#### V. CONTACTS

**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**