CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-19 Demonstrations	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12496	Date: February 2, 2024
	Change Request 13392

Transmittal 12496 issued February 02, 2024, is being rescinded and replaced by Transmittal 12538, dated March 8, 2024, to instruct FISS to match providers based only on CCN, and not NPI, for Business Requirements (BRs) 13392.42 through 13392.44. Additional information is provided for CWF regarding billing of the ACM G9038 code so that the 12-month time frame aligns with the calendar or performance year, instructed in BRs 13392.12.1.1 through 13392.12.2.1. New BRs 13392.13.6 and 13392.13.7 are provided to instruct contractors to deny ACM claims for beneficiaries not in Track 3. Additional instruction to CWF is provided regarding editing of the Beneficiary Alignment File in BR 13392.3.4.1 and IURs in BRs 13392.14, 13392.14.1, and 13392.14.1.1. This correction also adds BR 13392.1.2.1 and revises BR 13392.78. All other information remains the same.

SUBJECT: Making Care Primary (MCP) Model Implementation