CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12617	Date: May 2, 2024
	Change Request 13538

SUBJECT: User Enhancement Change Request (UECR) - Enhance the MCS Desktop Tool (MCSDT) Table Manager and Customer Service Representative (CSR) Security Table

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to update MCSDT Table Manager window to display the processing state and to provide users the capability of editing the CSR Security Table from the Table Manager main window.

EFFECTIVE DATE: October 1, 2024

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

IMPLEMENTATION DATE: October 7, 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.*

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

SUBJECT: User Enhancement Change Request (UECR) - Enhance the MCS Desktop Tool (MCSDT) Table Manager and Customer Service Representative (CSR) Security Table

EFFECTIVE DATE: October 1, 2024

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IMPLEMENTATION DATE: October 7, 2024

I. GENERAL INFORMATION

- **A. Background:** The purpose of this Change Request (CR) is to update MCSDT Table Manager window to display the processing state and to provide users the capability of editing the CSR Security Table from the Table Manager main window.
- **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						S	narec yster ntair	n	Other
		A	В	H H H	M A C	I	M V C M S S	ı W			
13538.1	The contractor shall update the Table Manager window to display all valid state code values in a two-digit alpha format. An example of a state code is FL, which is the abbreviation for Florida.						X				
13538.2	The contractor shall update the CSR Security Table window permitting a user to edit from the main window of the Table Manager application.					-	X				
13538.3	The contractor shall display additional fields on the CSR Security Table window for editing purposes.						X				
13538.3.1	The contractor shall add the following field descriptions: Service Unit Security Level of User Sign-on Mode - Indicates test or production mode. MSP update - Indicates update capability on Other Insurance window.						X				

Number	Requirement	Responsibility								
		A/B		D	Shared-				Other	
		MAC		M	System					
					Е	Maintainers			ers	
		A	В	Н		F	M	V	C	
				Н	M	I	C	M	W	
				Н	A	S	S	S	F	
					C	S				
	 Table Access - Used for allowing access to 									
	update Table Manager.									
										1

III. PROVIDER EDUCATION TABLE

Number	Requirement	Re	Responsibility			
			A/B		D	C
		I	MAC	7	M	E
					Ε	D
		A	В	Н		I
				Н	M	
				Н	A	
					C	
	None					

IV. SUPPORTING INFORMATION

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

[&]quot;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

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