

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1807	Date: March 17, 2017
	Change Request 9984

SUBJECT: Intern and Resident Information System (IRIS) Data Upload into STAR

I. SUMMARY OF CHANGES: Medicare reimbursed teaching providers for Indirect Medical Education (IME) and Graduate Medical Education (GME). Medicare reimbursements for IME and GME reimbursements are based on the number of interns and residents FTEs that worked at the providers. The 42 CFR 413.24 (f) requires teaching providers to submit Intern and Residents System (IRIS) data along with their Medicare cost reports. The old IRIS is a DOS based program, and the data submitted by the providers was housed at each Medicare Administrative Contractor (MAC). The CMS has created a new national IRIS database housed in the System for Tracking Audit and Reimbursement (STAR). This change request is for the MACs to upload historical data currently housed at each individual MAC into the STAR system.

EFFECTIVE DATE: April 17, 2017

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

IMPLEMENTATION DATE: April 17, 2017

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. 100-20	Transmittal: 1807	Date: April 17, 2017	Change Request: 9984
-------------	-------------------	----------------------	----------------------

SUBJECT: Intern and Resident Information System (IRIS) Data Upload into STAR

EFFECTIVE DATE: April 17, 2017

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

IMPLEMENTATION DATE: April 17, 2017

I. GENERAL INFORMATION

A. Background: Medicare reimburses teaching hospitals for Indirect Medical Education (IME) and Graduate Medical Education (GME). GME payments are Medicare's share of the direct cost of training interns and residents (residents) such as salaries and fringe benefits of faculty and residents. IME payments cover the additional operating costs that teaching hospitals incur in treating patients such as the costs associated with using more intensive treatments and ordering more tests. Medicare reimbursement for a hospital's IME and GME, in part, is based on the number of full-time equivalent (FTE) residents that the hospital trains and the portion of training time spent working at the hospital. Pursuant to 42 CFR §§ 412.105(f)(1)(iii)(A) and 413.78(b), no resident may be counted as more than one FTE.

The Centers for Medicare & Medicaid Services (CMS) makes available the Intern and Resident Information System (IRIS) software application that teaching hospitals use to collect and report information on residents working in approved residency programs. 42 CFR 413.24(f)(5)(i) requires teaching hospitals to submit the IRIS data along with their annual Medicare cost report. The previous IRIS software was a Disk Operating System (DOS) and the data submitted by providers was housed at the respective Medicare Administrative Contractor (MAC). Complying with 42 CFR §§ 412.105(f)(1)(iii)(A) and 413.78(b) was labor intensive since many residents rotate to hospitals outside of a MAC jurisdiction and thus, the MAC would not have access to the rotating hospital's IRIS data.

The CMS created a new national IRIS database that is stored in the CMS System for Tracking Audit and Reimbursement (STAR). IRIS maintained at the national level will more easily allow identification of residents counted in excess of one FTE. This change request provides instructions for the MACs to upload historical data currently housed at each individual MAC to the STAR system and ongoing upload of all IRIS data received for fiscal year ending on or after 9/30/2016.

B. Policy: Source/Justification (include Legislation Source or other legislative provision, if applicable): The CMS developed an IRIS enhancement to STAR; the IRIS enhancement was included in the September 24, 2016 STAR release. The IRIS enhancement will allow the MACs to identify residents counted as more than one FTE during the normal cost report desk review or audit. We are requesting that the MACs upload a minimum of 4 years of historical IRIS data base files in DBF format into the new STAR IRIS database for all teaching providers. Loading the historical data will enable the new IRIS database to accumulate historical information for each resident that would be used in determining the initial residency and the number of years the residents have completed.

II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility									
		A/B MAC		H H H	M A C	D M E	Shared-System Maintainers				Other
		A	B				F I S S	M C S	V M S	C W F	
	IRIS data it is unable to locate.										
9984.9	The MACs do not have to ensure that the IRIS data load successfully. CGI will provide a report to CMS of data that loaded successfully and those that failed.	X									STAR

III. PROVIDER EDUCATION TABLE

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

IV. SUPPORTING INFORMATION

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

"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): Owen Osaghae, 410-786-7550 or Owen.Osaghae@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: 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.

ATTACHMENTS: 0