

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 2399	Date: November 22, 2019
	Change Request 11235

SUBJECT: User CR: ViPS Medicare System (VMS) Update to the Automated Paperless Exception System (APEX) Selection Process

I. SUMMARY OF CHANGES: This Change Request (CR) will modify the Automated Paperless Exception System (APEX) selection process to return claims with the specified Common Working File (CWF) error code.

EFFECTIVE DATE: April 1, 2020

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

IMPLEMENTATION DATE: April 6, 2020

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	

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 Durable Medical Equipment Medicare Administrative Contractors (DME MAC) claim processors use the Automated Paperless Exception System (APEX) subsystem in the ViPS Medicare System (VMS) to work suspended claims that require manual intervention. The APEX allows the DME MACs to select claims based on requested criteria and continue processing the claim.

One situation for this use of APEX is to review and process claims with a Common Working File (CWF) response containing reject errors. The claims processor expects the system to return only claims with the requested error code. Currently, APEX is returning claims outside of the selection criteria. The VMS system maintainer determined that the selection process does not check the third byte of the CWF Error Code. Previously, the third byte identified the line where the CWF error occurred and did not indicate a different error. For this reason, when the operator enters 5470 as the CWF error code to select, the system also selects claims with CWF error code 5460. CMS is directing the VMS maintainer to modify the APEX selection process to return claims based on the complete value of the search criteria.

B. Policy: N/A

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	M A C	F I S S	M C S	
11235.1	The contractor shall update VMS to return suspense claims that meet the criteria entered for the CWF error code on the APEX request screen.							X	

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E	C E D I
		A	B	H H H	M A C	
	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 , Stacey Ndelle, 410-786-8208 or Stacey.Ndelle@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