

<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 1782</b>	<b>Date: February 2, 2017</b>
	<b>Change Request 9882</b>

**NOTE: This Transmittal is no longer sensitive and is being re-communicated April 21, 2017. The Transmittal Number, date of Transmittal and all other information remain the same. This instruction may now be posted to the Internet.**

**SUBJECT: OPSS Pricer Interface Update**

**I. SUMMARY OF CHANGES:** The OPSS Pricer interface needs to add new fields "Outlier total" and "Payment total" to be sent from the Shared System as part of the Pricer input buffer.

**EFFECTIVE DATE: January 1, 2017**

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

**IMPLEMENTATION DATE: July 3, 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.

<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

Pub. 100-20	Transmittal: 1782	Date: February 2, 2017	Change Request: 9882
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**I. GENERAL INFORMATION**

**A. Background:** In preparation for the OPSS 2017 annual update, the FISS Interface with the OPSS PRICER will be modified to transmit Outlier total and Payment total (refer to Attachment A).

**B. Policy:** Section 1833 (t) of the Social Security Act as added to the Act by §4523 of the Balanced Budget Act (BBA) of 1997, authorizes CMS to implement a Medicare PPS for Hospital outpatient services, including partial hospitalization services and to update the system annually.

**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	C W F	
9882.1	Medicare Shared System shall send the "Outlier Total" and "Payment Total" created with the implementation of "Outlier Limitation on Outpatient Prospective Payment System (OPSS) Community Mental Health Centers (CMHC) Services" in the input buffer that is sent to the OPSS Pricer on CMHC claims (TOB 76x) with dates of service on or after 1/1/17 received on after 7/1/17. The 'Payment Total' field represents a running total of CMHC provider's OPSS payments for each CMHC provider for each calendar year and the 'Outlier Total' field represents a running total of CMHC provider's Outlier payments for each CMHC provider for each calendar year as created with the implementation of "Outlier Limitation on Outpatient Prospective Payment System (OPSS) Community Mental Health Centers (CMHC) Services".					X				OPSS Pricer

Number	Requirement	Responsibility								
		A/B MAC			D M E M A C	Shared-System Maintainers				Other
		A	B	H H H		F I S S	M C S	V M S	C W F	
9882.2	Medicare Shared System shall ensure that a Condition Code "66" is present on any OPPS claim that has a Return Code 02.					X				

**III. PROVIDER EDUCATION TABLE**

Number	Requirement	Responsibility				
		A/B MAC			D M E M A C	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:

**Section B: All other recommendations and supporting information: N/A**

**V. CONTACTS**

**Pre-Implementation Contact(s):** Yvonne Young, YVONNE.YOUNG@cms.hhs.gov , Fred Rooke, fred.rooke@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: 1**

## Attachment A – Updated Input Buffer Layout for OPPS Pricer

01 OPPS-LINE-CNT	PIC 9(08) COMP.
01 OCE-DATA.	
05 OPPS-OCE-LINE OCCURS 450 TIMES DEPENDING ON OPPS-LINE-CNT.	
10 OPPS-HCPCS.	
15 OPPS-ALPHA	PIC X(01).
15 FILLER	PIC X(04).
10 OPPS-GRP.	
15 FILLER	PIC X(01).
15 OPPS-APC	PIC X(04).
10 OPPS-HCPCS-APC	PIC X(05).
10 OPPS-SRVC-IND	PIC X(02).
10 OPPS-PYMT-IND	PIC X(02).
10 OPPS-DISC-FACT	PIC 9(01).
10 OPPS-LITEM-DR-FLAG	PIC X(01).
10 OPPS-PKG-FLAG	PIC X(01).
10 OPPS-PYMT-ADJ-FLAG	PIC X(02).
10 OPPS-SITE-SRVC-FLAG	PIC X(01).
10 OPPS-SRVC-UNITS	PIC 9(09).
10 OPPS-SUB-CHRG	PIC 9(08)V99.
10 OPPS-LITEM-ACT-FLAG	PIC X(01).
10 OPPS-COMP-ADJ-FLAG	PIC X(02).
01 L-SERVICE-FROM-DATE	PIC 9(08).
01 BENE-DEDUCT	PIC 9(03)V9(02).
01 BENE-BLOOD-PINTS	PIC 9(01).
01 OCE-IN-DATE.	
05 OCE-IN-LINES OCCURS 450 TIMES.	
10 FILLER	PIC X(15).
10 OPPS-LITEM-DOS	PIC 9(08).
10 OPPS-LITEM-RVCD	PIC X(04).
10 FILLER	PIC X(23).
01 L-TYPE-OF-BILL	PIC 9(03).
01 L-DEVICE-CREDIT	PIC 9(7)V9(02).
01 L-PAYER-ONLY-VALUE-CODES.	
05 L-PAYER-ONLY-VC-QN	PIC 9(7)V9(02).
05 L-PAYER-ONLY-VC-QO	PIC 9(7)V9(02).
05 L-PAYER-ONLY-VC-QP	PIC 9(7)V9(02).
05 L-PAYER-ONLY-VC-QQ	PIC 9(7)V9(02).
05 L-PAYER-ONLY-VC-QR	PIC 9(7)V9(02).
05 L-PAYER-ONLY-VC-QS	PIC 9(7)V9(02).
05 L-PAYER-ONLY-VC-QT	PIC 9(7)V9(02).
05 L-PAYER-ONLY-VC-QU	PIC 9(7)V9(02).
05 L-PAYER-ONLY-VC-QV	PIC 9(7)V9(02).
05 L-PAYER-ONLY-VC-QW	PIC 9(7)V9(02).
01 L-PRIOR-OUTL-TOTAL	PIC 9(10)V9(02).
01 L-PRIOR-PYMT-TOTAL	PIC 9(10)V9(02).