CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1885	Date: July 27, 2017
	Change Request 10129

SUBJECT: Shared System Maintainers (SSMs) Standardized Release Identification (ID) Format Analysis and Design

**I. SUMMARY OF CHANGES:** The purpose of this analysis and design change request (CR) is to standardize the release ID format. Currently, each of the four SSMs uses a separate format for their release ID's. The Centers for Medicare & Medicaid Services (CMS) will provide the standard release ID format and the SSMs shall provide CMS their level of effort and timeline to implement the new standardized release ID format.

**EFFECTIVE DATE: January 1, 2018** 

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

**IMPLEMENTATION DATE: January 2, 2018** 

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**

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### I. GENERAL INFORMATION

**A. Background:** The Centers for Medicare & Medicaid Services (CMS) will provide the standard release ID format that the SSMs shall use when assigning an ID for releases. The SSMs shall determine the level of effort (LOE) and timeline needed to implement the standardized release ID.

Currently, the Fee-For-Service (FFS) SSMs each have their own naming conventions for identifying releases.

The FFS SSMs will set up calls to determine the LOE and necessary timeline for each to implement the standardized identification of releases and present to CMS in a White Paper.

**B. Policy:** This CR contains no new policy or changes to existing policy.

### II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility										
		A/B		A/B D			D	Shared-				Other
		N	MAC M		M	System						
					Е	M	aint	aine	ers			
		A	В	Н		F	M	V	C			
				Н	M	I	C	M	W			
				Н	A	S	S	S	F			
					C	S						
10129.1	The Lead SSM of the collaborative effort shall						X					
	schedule the calls and provide all participants with the											
	appointment and call-in information, in advance of the											
	scheduled calls. The calls can be reduced if the SSMs											
	complete their analysis in less than 6 calls.											
10129.2	Contractors shall attend and participate in up to 6					X	X	X	X	VDC		
	hourly conference calls to discuss implementing the											
	standardized release identification format selected by											
	CMS.											
10129.3	The Lead SSM shall provide all interim due dates to						X					
	the other SSMs for their specific sections of the white											
	paper, when applicable.											
10129.3.1	The SSMs shall provide written narrative of work					X	X	X	X			
	involved, necessary timeline needed to implement											
	standardized ID and business requirements for the											
	implementation change request (CR) to the Lead SSM.											

Number	Requirement	Responsibility																
			A/B		D		Sha	red-		Other								
		N	MA(	( )	M		Sys	tem										
													Е	M	aint	aine	ers	
		A	В	Н		F	M	V	C									
				Н	M	I	C	M	W									
				Н	A	S	S	S	F									
					C	S												
10129.3.2	The SSMs shall provide the LOE to implement the					X	X	X	X									
	standardized ID by posting the estimated number of																	
	hours in ECHIMP.																	
10129.4	The Lead SSM shall take meeting minutes and post in						X											
	ECHIMP no later than 3 business days after each call.																	
10129.5	The Lead SSM shall submit the combined final						X											
	"White Paper" containing the suggested																	
	implementation timeframe/schedule to CMS no later																	
	than 30 days after the last scheduled conference call.																	
	This document should be placed in the POC forum in																	
	ECHIMP.																	

# III. PROVIDER EDUCATION TABLE

Number	Requirement	Re	spoi	nsib	ility	
			A/B MA(		D M E	C E D
		A	В	H H H	M A C	Ι
	None					

# IV. SUPPORTING INFORMATION

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

**Pre-Implementation Contact(s):** Katie Bentz, 410-786-5084 or katie.bentz@cms.hhs.gov, Emma Battista, 443-319-5003 or emma.battista@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**