

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 2090	Date: May 24, 2018
	Change Request 10524

Transmittal 2073, dated April 27, 2018, is being rescinded and replaced by Transmittal 2090, dated, May 24, 2018, to add a note to the background section. All other information remains the same.

SUBJECT: Use the VMAP/4D States Table in all VMS Address Processing

I. SUMMARY OF CHANGES: The Viable Information Processing System (ViPS) Medicare System (VMS) currently stores all valid U.S. address state codes in a user controlled VMAP/4D parameter table that is used by some programs to validate the beneficiary state code. However, because there is also hard coded state verification logic that would have needed to be changed for foreign addresses, the system will be updated to remove this hard coded logic and only use the VMAP/4D parameter table for all state validation and to trigger the foreign address processing. This CR will be split over 2 releases with a single implementation.

Note: The CR effective date is the date of implementaton, not the date of service.

EFFECTIVE DATE: October 1, 2018 - Design and Coding; January 7, 2019 - Coding, Testing and Implementation

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

IMPLEMENTATION DATE: October 1, 2018 - Design and Coding; January 7, 2019 - Coding, Testing and Implementation

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: 2090	Date: May 24, 2018	Change Request: 10524
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I. GENERAL INFORMATION

A. Background: The Centers for Medicare & Medicaid Services (CMS) is requesting that the Viable Information Processing System (ViPS) Medicare System (VMS) incorporate the use of the VMAP/4D States parameter table in all address validation routines. The VMAP/4D States table is user-controlled and already supports the inclusion of all valid U.S. state and territory values. VMS will be modified to standardize the state validation processes throughout the system.

NOTE: The effective date of this change is the implementation date, not the date of service.

B. Policy: None

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	V M S		C W F
10524.1	The contractor shall modify the VMAP/4D STATES table so that the only valid values are the 50 U.S States, the 6 U.S. territories (listed below) and 'FC' for foreign country. <ul style="list-style-type: none"> • American Samoa (AS) • Guam (GU) • Northern Mariana Islands (MP) • Puerto Rico (PR) • United States Virgin Islands (VI) • District of Columbia (DC) 							X			
10524.1.1	The contractor shall remove the following from the							X			

Number	Requirement	Responsibility								Other
		A/B MAC			D M E M A C	Shared- System Maintainers				
		A	B	H H H		F I S S	M C S	V M S	C W F	
	screen within the CMN subsystem (VDME).									
10524.7	The contractor shall modify the process that creates CMN extract records for IDR to eliminate the use of the beneficiary pricing state and beneficiary phone number fields.							X		
10524.8	The contractor shall modify the SuperOp subsystem to remove the obsolete CMN fields from the tables of valid field values for use within SuperOp events.							X		
10524.9	The contractor shall modify the process that uses hard-coded logic to determine a state for territories that don't have their own fees in order to price a claim line via the DMEPOS and PEN fee schedules (i.e. APPL/D). The process will use the new field being added to the VMAP/4D STATES table, which associates a territory to a state instead of the hard-coded logic.							X		
10524.10	The contractor shall incorporate the use of the VMAP/4D STATES table into the batch adjudication process for the purpose of determining the CWF host site value on the HUDC transaction query. This will replace existing hard-coded logic used for this purpose.							X		
10524.11	The contractor shall modify the process that builds the Beneficiary Alpha file that feeds the Beneficiary Alpha Inquiry screen (i.e. BUDS11) within the Beneficiary Update and Display Subsystem (BUDS) to eliminate the existing state validation logic that is no longer needed.							X		
10524.12	The contractor shall modify the Beneficiary Information screen (i.e. BUDS01) so that it uses the VMAP/4D STATES table to determine which values are valid for the beneficiary state and beneficiary pricing state.							X		
10524.13	The contractor shall modify the Beneficiary Medicare Secondary Payer (MSP) Detail Information screen (i.e. BUDS10) so that it uses the VMAP/4D STATES table to determine which values are valid for the employer state.							X		
10524.14	The contractor shall eliminate the existing state							X		

Number	Requirement	Responsibility								Other
		A/B MAC			DME MAC	Shared-System Maintainers				
		A	B	H H H		F I S S	M C S	V M S	C W F	
	validation logic from the batch process that updates the VMAP/4C Locality - Zip Code/Area Table based on data from the Competitive Bid Implementation Contractor (CBIC).									
10524.15	The contractor shall eliminate the existing state validation logic from the batch process that updates the rural zip code based on data from CBIC.							X		
10524.16	The contractor shall modify the process that parses the address information provided by the Common Working File (CWF) in Trailer 12 of claim responses and HUAD transactions so that it uses the VMAP/4D STATES table to determine which values are valid for the beneficiary state.							X		
10524.17	The contractor shall modify the Check Reconciliation Payee History Screen in the Money Notification and Inquiry (MONI) subsystem to eliminate the functionality for generating mailing labels. The DME MACs confirmed that they do not use this functionality and eliminating it will include elimination of the existing hard-coded logic that validates the payee state values.							X		
10524.18	The contractor shall modify the Check Reconciliation Other Payee History Screen in the MONI subsystem so that it uses the VMAP/4D STATES table to determine which values are valid for the payee state.							X		
10524.19	The contractor shall modify the Case Header Screen in the Interactive Correspondence (ICOR) subsystem so that it uses the VMAP/4D STATES table to determine which values are valid for the payee state.							X		
10524.20	The contractor shall modify the Provider Header1 Inquiry/Update Screen and Provider Header2 Inquiry/Update Screen within the Provider (APPL/1) subsystem so that they use the VMAP/4D STATES table to determine which values are valid for each of the provider addresses.							X		
10524.21	The contractor shall modify the SuperOp subsystem to eliminate hard-coded logic for validating the state associated with the region.							X		
10524.22	The contractor shall modify the process that generates							X		

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	
	837 Coordination of Benefits (COB) claims so that it uses the VMAP/4D STATES table to determine which state values are valid for N403 in all N4 segments and CLM11-4 in the 2300.CLM segment.									
10524.23	The contractor shall eliminate the following 3 reports that will no longer be needed as a result of the modifications: a. Check Mailing Label Report (290) b. DMEPOS State Report (DM100-01) c. DMERC Team Processing Summary Report (TMPRC1)							X		
10524.24	The contractor shall eliminate one weekly job and one request job that will no longer be needed based on the modifications. Modifications will be made in the same functional areas to remove logic no longer necessary. There will be no impact to the functional area as this logic is currently not used.							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: N/A
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Section B: All other recommendations and supporting information: N/A

V. CONTACTS

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