

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 2247	Date: February 1, 2019
	Change Request 11149

SUBJECT: Analysis Call to Discuss Multi-Carrier System (MCS) Limitation When Quantity Allowed is Greater Than Quantity Billed

I. SUMMARY OF CHANGES: Historically, when Recovery Audit Contractors (RAC) have attempted to send the Medicare Administrative Contractors (MACs) identified underpayments for Part B, the RACs/MACs are encountering a Multi Carrier System (MCS) limitation when billed units are increased. Currently, MCS sets edits and does not support automated pricing when the quantity allowed is greater than the quantity billed. CMS would like to investigate if there are possible workarounds to allow the automated processing of RAC identified underpayments in the MCS system when the quantity allowed is greater than the quantity billed.

EFFECTIVE DATE: July 1, 2019

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

IMPLEMENTATION DATE: July 1, 2019

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: Historically, when Recovery Audit Contractors (RAC) have attempted to send the Medicare Administrative Contractors (MACs) identified underpayments for Part B, the RACs/MACs are encountering a Multi Carrier System (MCS) limitation when billed units are increased. Currently, MCS sets edits and does not support automated pricing when the quantity allowed is greater than the quantity billed. CMS would like to investigate if there are possible workarounds to allow the automated processing of RAC identified underpayments in the MCS system when the quantity allowed is greater than the quantity billed.

B. Policy: Section 302 of the Tax Relief and Healthcare Act of 2006.

II. BUSINESS REQUIREMENTS TABLE

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

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		
11149.1	Contractors shall attend a series of 8 weekly one-hour calls (to occur between February and April 2019) to conduct analysis and explore possible workarounds to allow the processing of RAC identified underpayments in the MCS system when the quantity allowed is greater than the quantity billed.		X				X				RAC
11149.1.1	Contractors shall take the meeting minutes from their perspective for all conference calls and post them in ECHIMP within two business days after each call. NOTE: CMS will record and distribute call recordings immediately following each call.						X				
11149.1.2	Contractors shall send contact names and email addresses for this project to CMS at Ashley.Badami@cms.hhs.gov within 5 business days		X				X				RAC

Number	Requirement	Responsibility								
		A/B MAC		H H H	D M E M A C	Shared- System Maintainers				Other
		A	B			F I S S	M C S	V M S	C W F	
	of issuance of this CR.									
11149.2	Contractors shall provide a final analysis paper to CMS 30 business days following the final conference call.						X		RAC	
11149.2.1	Contractors shall estimate the hours required to implement the requirements outlined in the analysis paper.						X		RAC	
11149.2.2	If the estimate exceeds 1,000 hours, contractors shall propose a strategy to implement the requirements over two or more quarterly releases.						X		RAC	
11149.3	Contractors shall attend a conference call after all analysis papers are delivered to discuss questions and concerns that CMS may have with the submitted papers.		X				X		RAC	

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): Ashley Badami, 410-786-0828 or Ashley.badami@cms.hhs.gov , Eric Miller, 410-786-0060 or eric.miller@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