

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 2303	Date: May 9, 2019
	Change Request 11010

Transmittal 2255, dated February 7, 2019, is being rescinded and replaced by Transmittal 2303, dated, May 9, 2019 to extend the effective and implementation dates to the January and April 2020 releases. All other information remains the same.

SUBJECT: Shared System Enhancement 2018: Rewrite Fiscal Intermediary Shared System (FISS) module FSSB6001, Common Working File (CWF) Unsolicited Response Function

I. SUMMARY OF CHANGES: The Centers for Medicare & Medicaid Services (CMS) directs FISS to refactor a portion of the FISS claim adjustments and reporting related to trailers 16, 20, and 24. By splitting the current process into separate, well-designed functions, CMS anticipates streamlining future maintenance and consolidating the current reporting, where possible, to all related Unsolicited Response processing.

EFFECTIVE DATE: April 1, 2019 - Rules mining, requirements, design, and development of a complete Regression Test Bed; July 1, 2019 - Complete coding; October 1, 2019 - Rules mining, requirements, design and development; January 1, 2020 - Complete rules mining, requirements, design, and coding; April 1, 2020 - Testing, documentation and implementation

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

IMPLEMENTATION DATE: April 1, 2019 - Rules mining, requirements, design, and development of a complete Regression Test Bed; July 1, 2019 - Complete coding; October 7, 2019 - Rules mining, requirements, design and development; January 6, 2020 - Complete rules mining, requirements, design, and coding; April 6, 2020 - Testing, documentation 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/revise 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) directs FISS to refactor a portion of the FISS claim adjustments and reporting related to trailers 16, 20, and 24. By splitting the current process into separate, well-designed functions, CMS anticipates streamlining future maintenance and consolidating the current reporting, where possible, to all related Unsolicited Response processing.

B. Policy: This change request does not involve any legislative, statutory, or regulatory policies.

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
11010.1	The contractor shall rewrite the module, FSSB6001 under the sustainability initiative.					X				
11010.1.1	The contractor shall use the current coding standards as part of the re-write.					X				
11010.1.2	The contractor shall incorporate the mining rules as part of the re-write.					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): Lee Ann Paxton, 410-786-2491 or Leeann.Paxton@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