CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 2364	Date: September 25, 2019
	Change Request 11382

Transmittal 2350, dated August 16, 2019, is being rescinded and replaced by Transmittal 2364, dated, September 25, 2019 to revise business requirement 11382.3. All other information remains the same.

SUBJECT: User Change Request: Fiscal Intermediary Standard System (FISS) - Autopopulate the Line Item User Action Code for Hard Coded 59XXX Reason Codes

I. SUMMARY OF CHANGES: When hard coded Fiscal Intermediary Shared System (FISS) National Coverage Determination (NCD) line level reason codes are set to automatically deny, the claims suspend for reason code 31995 because a line level user action code (LUAC) and med-tech indicator are required for line item denials. The purpose of this Change Request (CR) is to modify FISS to assign the LUAC and med-tech indicator when the line level FISS NCD reason codes are auto-denied.

EFFECTIVE DATE: January 1, 2020
Unless otherwise specified, the effective date is the date of service.
IMPLEMENTATION DATE: January 6, 2020

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
D	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: 2364	Date: September 25, 2019	Change Request: 11382

Transmittal 2350, dated August 16, 2019, is being rescinded and replaced by Transmittal 2364, dated, September 25, 2019 to revise business requirement 11382.3. All other information remains the same.

SUBJECT: User Change Request: Fiscal Intermediary Standard System (FISS) - Autopopulate the Line Item User Action Code for Hard Coded 59XXX Reason Codes

EFFECTIVE DATE: January 1, 2020
Unless otherwise specified, the effective date is the date of service.
IMPLEMENTATION DATE: January 6, 2020

I.   GENERAL INFORMATION

A.   Background: When hard coded FISS National Coverage Determination (NCD) line level reason codes are set to automatically deny, the claims suspend for reason code 31995 because a line level user action code (LUAC) and med-tech indicator are required for line item denials. The purpose of this CR is to modify FISS to assign the LUAC and med-tech indicator when the line level FISS NCD reason codes are auto-denied so that claims can deny automatically without manual intervention to set the line level denial information.

B.   Policy: This CR does is not related to a policy or regulation.

II.   BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
11382.1	FISS shall assign the line level user action code (LUAC) for hardcoded NCD reason codes that assign at the line level when the reason code file is set to auto deny the reason code. FISS hard coded NCD reason codes are in the 59XXX range.					X				
11382.1.1	FISS shall move an "N" to the LUAC for revenue lines auto denied for line level NCD reason codes that assign the liability to the provider.					X				
11382.1.2	FISS shall move a letter "O" to the LUAC for revenue lines auto denied for line level NCD reason codes that assign the liability to the beneficiary.					X				
11382.2	FISS shall move an "M" to the line level med-tech indicator for revenue lines auto denied for provider					X				

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		
	liable line level NCD reason codes.										

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E	C E D I
		A	B	H H H	M A C	
	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): Rita Hazlip, rita.hazlip@cms.hhs.gov , Stacey Ndelle, 410-786-8208 or Stacey.Ndelle@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