

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 2396	Date: November 15, 2019
	Change Request 11552

SUBJECT: Create a New Standalone Health Insurance Master Record (HIMR) Application - Analysis Only

I. SUMMARY OF CHANGES: The purpose of this change request (CR) is to begin analysis for development of a standalone HIMR desktop application that would incorporate Medicare Part A and Part B HIMR screen connections. This will improve efficiency by consolidating data into one view and providing only the data applicable for the current beneficiary.

This change would include all screens that currently appear on the HIMR menus. Multi-Carrier System (MCS) Desk Top (MCSDT) would also have links to the new standalone HIMR application. Current MCSDT functions that exist for HIMR links on many windows will remain in MCSDT. Other windows in MCSDT, that pull in full HIMR screens, will be replaced by links in the new application.

For current HIMR data, that remains in MCSDT windows, additional fields for Medicare Secondary Payer (MSP), Hospice, Claims and Provider data will be added to assist Medicare Administrative Contractors (MACs) in quick research.

The benefit of this proposed application is improved access to Common Working File (CWF) HIMR data through a standalone desktop application that can be shared between maintainers.

EFFECTIVE DATE: April 1, 2020

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

IMPLEMENTATION DATE: April 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
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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SUBJECT: Create a New Standalone Health Insurance Master Record (HIMR) Application - Analysis Only

EFFECTIVE DATE: April 1, 2020

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IMPLEMENTATION DATE: April 6, 2020

I. GENERAL INFORMATION

A. Background: Currently, not all HIMR inquiries are available through the Multi-Carrier System (MCS) Desk Top (MCSDT) application. To access HIMR data, not accessible in MCSDT, users have to access HIMR directly to obtain information for research and are able to view only one screen at a time.

This change would allow the Medicare Administrative Contractors (MACs) and other Medicare Part A & Part B stakeholders to access all HIMR information from a desktop application which would have the capabilities of displaying multiple windows at one time. It would simplify sign on to HIMR and improve the timeliness of data retrieval. Data for all HIMR screens will be checked, at sign in, and only those screens that have information for the beneficiary will be made available for selection.

This standalone desktop tool can be shared by MCS, the Fiscal Intermediary Shared System (FISS) maintainer, and the associated MACs.

B. Policy: N/A

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
11552.1	<p>The contractors shall have up to three (3) one (1) hour weekly conference analysis calls with CMS.</p> <p>The focus of the calls will be to discuss design options allowing for human centric design considered early in the analysis. The MACs shall have the ability to discuss design and access to the application with the maintainer, allowing the maintainer to consider the MAC requests during the analysis. The calls will begin on or after November 25, 2019, or as otherwise specified by CMS.</p>		X					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	
11552.1.1	The MCS maintainer shall take the meeting minutes from the calls and post them to ECHIMP within 3 business days of the call.							X		
11552.1.2	The MCS maintainer shall invite the following CMS staff: Bonnie Hockaday - Bonnie.Hockaday@cms.hhs.gov Vinay Vuyyuru - Vinay.Vuyyuru@cms.hhs.gov							X		
11552.1.3	Contractors shall send contact names and email addresses for this project to the MCS maintainer at debra.lundy@perspecta.com and Bonnie.Hockaday@cms.hhs.gov within 5 business days of issuance of this CR.		X							
11552.2	The MCS maintainer shall perform analysis of the scope, impact and implementation approach of the new HIMR application.							X		
11552.3	The MCS maintainer shall provide an analysis paper to CMS no later than April 1, 2020.							X		
11552.3.1	The MCS maintainer shall include the following in the analysis paper: The estimate of hours to implement the new HIMR application for all MACs.							X		
11552.3.2	If the estimate exceeds 1,000 hours, the MCS maintainer shall propose a strategy to implement the requirements over two or more quarterly releases.							X		
11552.3.3	The MCS maintainer shall include the following within the analysis paper: Implementation plan Identify any software or infrastructure changes required in order to implement the new application							X		
11552.4	The MCS maintainer shall send the completed analysis paper to the following CMS email addresses:							X		

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	
	Bonnie.Hockaday@cms.hhs.gov Vinay.Vuyyuru@cms.hhs.gov								
11552.5	The MCS maintainer shall participate in a follow up meeting, for up to an hour, after the analysis paper is delivered to CMS, to respond to any questions from the author. CMS shall schedule the call, if needed.						X		CMS

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:
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Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Vinay Vuyyuru, 410-786-9111 or vinay.vuyyuru@cms.hhs.gov , Bonnie Hockaday, 410-786-1422 or bonnie.hockaday@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