CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1070	Date: April 26, 2012
	Change Request 7756

SUBJECT: Request to Require Hours for Research and Conference Calls with Maintainers, MACs, and EDCs and Additional Requirements for IDR Shared Systems

I. SUMMARY OF CHANGES: The IDR Shared Systems (IDRSS) will receive feeds from the three shared systems - the FISS, MCS and VMS. In addition to the daily feeds, the IDR will also receive history extracts containing historical data starting with October 2005.

This CR requires ongoing research hours and bi-weekly conference calls with the maintainers, Medicare Administrative Contractors (MACs), and EDCs. These conference calls are necessary to the coordination and successful completion of the project. We recommend 20 hours for each MAC, EDC, and Shared Systems Maintainer (SSM).

Additionally, this CR requires the shared system maintainers to deliver extract reference files. These code sets are required to adjudicate Medicare claims correctly and to support historical claims history.

EFFECTIVE DATE: October 1, 2012
IMPLEMENTATION DATE: October 1, 2012

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-

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
N/A	

III. FUNDING:
For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs):
No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.

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. ATTACHMENT:
One-Time Notification
Unless otherwise specified, the effective date is the date of service.

Attachment – One-Time Notification

Pub. 100-20	Transmittal: 1070	Date: April 26, 2012	Change Request: 7756

SUBJECT: Request to Require Hours for Research and Conference Calls with Maintainers, MACs, and EDCs and Additional Requirements for IDR Shared Systems

Effective Date: October 1, 2012
Implementation Date: October 1, 2012

I.   GENERAL INFORMATION

A.   Background: The IDR Shared Systems (IDRSS) will receive feeds from the three shared systems – the FISS, MCS and VMS. In addition to the daily feeds, the IDR will also receive history extracts containing historical data starting with October 2005.

This CR requires ongoing research hours and bi-weekly conference calls with the maintainers, Medicare Administrative Contractors (MACs), and EDCs. These conference calls are necessary to the coordination and successful completion of the project. We recommend 20 hours for each MAC, EDC, and Shared Systems Maintainer (SSM).

Additionally, this CR requires the shared system maintainers to deliver extract reference files. The purpose of the extracts is to develop 1 authoritative source in the IDR. The extracts may be leveraged across all shared systems in which they apply. Extracts from the shared systems include both new and obsolete codes. These code sets are required to adjudicate Medicare claims correctly and to support historical claims history. Due to the fact that these code sets are required to be maintained in order to adjudicate claims correctly within the shared systems, the shared systems will be used as the authoritative source.

B.   Policy: The Medicare Program Integrity Group has determined that it will use the Shared Systems claims data for fraud, waste and abuse detection.

II.   BUSINESS REQUIREMENTS TABLE

Number	Requirement	A/B MAC	DME MAC	FI	CARRIER	RHHI	Shared-System Maintainers				OTHER
							FISS	MCS	VMS	CWF	
7756.1	All parties shall continue ongoing research and	X	X	X	X	X	X	X	X		CMS

Number	Requirement	A/B MAC	DME MAC	FI	CARRIER	RHHI	FISS	MCS	VMS	CWF	OTHER
											Shared-System Maintainers
	participation in scheduled conference calls.										EDC PDAC
7756.1.1	The conference calls shall be one hour in length.	X	X	X	X	X	X	X	X		CMS EDC PDAC
7756.1.2	The conference calls shall occur at least every other week.	X	X	X	X	X	X	X	X		CMS EDC PDAC
7756.1.3	The conference calls shall continue at least until the shared IDR systems modules for the shared systems are implemented at the EDC.	X	X	X	X	X	X	X	X		CMS EDC PDAC
7756.2	The Shared Systems Maintainers shall create base jobs to generate the extract reference files for each code set, including Shared System-controlled and MAC-controlled code sets, on a monthly basis as follows:						X	X	X		EDC
7756.2.1	For each code set, the Shared System Maintainer shall generate reference extract files containing MAC Number, Code Name, Code, Code Description, Effective Date, and Obsolete Date.						X	X	X		EDC
7756.2.2	Each Shared System Maintainer shall submit a reference file for the HCPCS/CPT codes.						X	X			EDC
7756.2.3	The MCS Maintainer shall submit a reference file for the ICD-9/10 Diagnosis codes.							X			EDC
7756.2.4	The FISS Maintainer shall submit a reference file for the ICD-9/10 Procedure codes.						X				EDC
7756.2.5	The MCS and VMS Maintainers shall submit a reference file for the Part B/DME Provider Specialty codes.							X	X		EDC
7756.2.6	The MCS Maintainer shall submit a reference file for the Part B/DME Modifier codes.							X			EDC
7756.2.7	The VMS Maintainer shall submit a reference file for the Part B/DME Type of Service codes.								X		EDC
7756.2.8	The Shared System Maintainers shall submit the above requested information via the EFT process as output from the month-end processing cycles. The IDRSS Team is to assist in establishing the EFT protocols with the maintainers and the EDCs.						X	X	X		EDC
7756.3	The FISS maintainers shall change the data type on their Override Code in their copybooks (FSSCIDRR-						X				

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A / B MAC	D M E MAC	F I	C A R R I E R	R H H I	Shared-System Maintainers				OTHER
							FISS	MCS	VMS	CWF	
	OVERIDE-CD) from numeric to alphanumeric (PIC 9 to PIC X).										

III.   PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A / B MAC	D M E MAC	F I	C A R R I E R	R H H I	Shared-System Maintainers				OTHER
							F I S S	M C S	V M S	C W F	
	None.										

IV.   SUPPORTING INFORMATION

Section A: For any recommendations and supporting information associated with listed requirements, use the box below: N/A

Use "Should" to denote a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:

Section B: For all other recommendations and supporting information, use this space: N/A

V. CONTACTS

Pre-Implementation Contact(s):
Anthony Hodge at 410-786-6645 or Anthony.Hodge3@cms.hhs.gov
Craig Mooney at 410-786-1956 or William.Mooney@cms.hhs.gov

Patte Appling at 410-786-1814 or Patricia.Appling@cms.hhs.gov

Post-Implementation Contact(s):

Contact your Contracting Officer's Representative (COR) or Contractor Manager, as applicable.

VI. FUNDING

Section A: For *Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs)*:

No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.

Section B: *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.