CMS Manual System	Department of Health & Human Services (DHHS)				
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)				
Transmittal 1446	Date: December 5, 2014				
	Change Request 8823				

Transmittal 1424, dated August 22<sup>nd</sup>, 2014 is being rescinded and replaced by Transmittal 1446, dated December 5, 2014, to remove FISS from all requirements. In addition, BR8823.4 is being removed in its entirety. All other information remains the same.

# SUBJECT: IDR Shared Systems Daily Claims Feeds Expansion to Accommodate Medical Review Data Elements

**I. SUMMARY OF CHANGES:** The purpose of this change request (CR) is to obtain Medical Review actions as part of the IDR Shared Systems daily feeds from the three shared systems.

**EFFECTIVE DATE: January 1, 2015 - for VMS and MCS** *\*Unless otherwise specified, the effective date is the date of service.* **IMPLEMENTATION DATE: January 5, 2015 - for VMS and MCS** 

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 obliged 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: 1446	Date: December 5, 2014	Change Request: 8823
1 401 100 20		Dute: Detember 5, 2014	Change Request: 0020

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#### SUBJECT: IDR Shared Systems Daily Claims Feeds Expansion to Accommodate Medical Review Data Elements

EFFECTIVE DATE: January 1, 2015 - for VMS and MCS

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**IMPLEMENTATION DATE: January 5, 2015 - for VMS and MCS** 

I. GENERAL INFORMATION

A. Background: The IDR Shared Systems (IDRSS) receives daily feeds from the three shared systems – the FISS, MCS and VMS. Specifically, the Virtual Data Centers (VDCs) send files for each shared system that are based on the copybooks the shared systems maintainers currently provide to the IDR Shared Systems Team. Once files are received, the Centers for Medicare & Medicaid Services (CMS) requires the IDRSS to perform a file consistency validation on each file sent by the shared systems prior to accepting the file and to retain the files at the Baltimore Data Center (BDC).

As a result of CR8093, CMS retired the Program Integrity Management Reports (PIMR) system in 2012. Although base jobs continue to be run for purposes of tracking Medical Review (MR) actions, program integrity contractors do not have access to this data through the IDR. This CR is intended to rectify this situation.

**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

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

Number	Requirement	Re	espo	onsi	bilit	у				
			A/B	5	D		Sha	red-		Other
		N	MA	2	Μ		Sys	tem		
					E	Μ	aint	aine	ers	
		Α	В	Η		F	Μ	V	С	
				Η	Μ	-	С			
				Η	A	S	S	S	F	
					C	S				
8823.1	Shared Systems Maintainers (VMS and MCS) shall						Х	Х		
	send specific data elements, of which most are									
	Medical Review (MR), to be included with the daily									
	claims files currently transmitted to IDRSS.									
	This new data shall be sent as a separate file from the									
	claims files.									

Number	Requirement	Re	espo	nsil	bilit	ty				
			A/B		D	<u>۲</u>	Sha	red-		Other
		Ν	MA(	2	Μ		Sys	tem		
					Е	Μ	aint	aine	ers	
		Α	В	Η		F	M	V	C	
				Н	Μ	Ι	C	Μ	W	
				Н	А	S	S	S	F	
					С	S				
	No history is required. Data submission starts with the									
	implementation date of this CR.									
8823.1.1	VMS and MCS Shared Systems Maintainers shall						Х	Х		
	create a new "M" record to hold all MRUR data in the									
	format of the business requirements attached.									
8823.1.2	Each "M" record shall accompany all Phase II and/or						Х	Х		
	Phase III claims where appropriate. If more than one									
	Phase III claim comes in, send the "M" record for each									
	claim.									
8823.1.3	The Shared Systems Maintainers shall create file						Х	Х		
	header and file trailer records with RECORD TYPE =									
	M.									
	There will be 2 separate 'M' files – one for Phase II									
	records (M2) and one for Phase III records (M3).									
	You all are currently using the standard file header									
	and file trailer for each Phase file. Use the same									
	standard for the 'M' file but use M2 or M3 for the									
	RECORD TYPE. See the file header and file trailer									
	format in the IDRSS Communication Plan v4.3 dated									
	20140325.									
8823.1.4	The Shared Systems Maintainers shall create a						X	X		
0023.1.4	TOTAL COUNT of M RECORDS field in the file						Λ	Λ		
	trailer. See the file header and file trailer format in the									
	IDRSS Communication Plan v4.3 dated 20140325.									
	IDRSS Communication Flan V4.5 dated 20140325.									
8823.2	MCS shall add the data elements as listed under BR 2						X			
0023.2	in the attachment to the current MCS daily claims file						Δ			
	submission to IDRSS.									
	See BR 2 in the attachment.									
8823.3	VMS shall add the data elements as listed under BR 3	1					1	Х		
	in the attachment to the current VMS daily claims file									
	submission to IDRSS.									
	See BR 3 in the attachment.									
8823.4	This requirement deleted.									
8823.5	MRUR codes values are determined separately by the						Х	Х		VDC
	MACs for their jurisdictions and are unique to each									

Number	Requirement	Responsibility								
			A/B MA(		D M E		Sys	red- tem aine		Other
		A	В	H H H	M A C	F I S S	M C S		C W F	
	jurisdiction. In order for IDR users to have the Edit Code values definitions available during reviews, referenced files shall be created for each MAC and sent to the IDR monthly. The monthly file shall be created and transmitted to the BDC after each month- end processing cycle. These reference files will have the Edit Code values with their definitions that are required with most MRUR (PIMR) Activity Types.									
8823.6	The Shared System Maintainers shall update their Master IDR quarterly spreadsheet to be consistent with the approved IDR data element definitions, code values and definitions for each new data element added per the above requirements.						X	X		
8823.6.1	The Shared Systems Maintainers shall include a new "M" record tab in the quarterly spreadsheet describing the record.						X	X		
8823.7	The IDRSS Team is interested in testing the new "M" record file as soon as each maintainer is prepared to provide their first sample files, as early as possible. The maintainers shall send a test file of the new 'M' record file to the STC during their alpha testing phase. The IDR Team will work with the STC data center to transmit the file to the BDC. <b>NOTE</b> : This is a one- time request of a pre-beta file due to this being a completely new file process. This allows the IDR Team more time to complete its testing, as development and testing time for a new file is longer than a typical shared system quarterly release update for the IDR. The IDR Team understands the risk this poses. The IDR Team needs the best you've got during alpha testing. The IDR Team will see any changes later in the process and those should be easier to accommodate as the main process will already be						X	X		
8823.8	established from the alpha testing. The IDR Shared Systems Team and the business owner (CPI) shall have two (2) conference calls with each of the maintainers separately to work through these requirements. Each conference call should be no longer than one (1) hour in duration.						X	X		

## III. PROVIDER EDUCATION TABLE

Number	Requirement	Re	espo	nsib	oility	
			A/E		D	CEDI
			MA	C	M E	
		Α	В	Η		
				Н	M	
				Η	A C	
	None					

#### IV. SUPPORTING INFORMATION

#### Section A: Recommendations and supporting information associated with listed requirements: N/A

"Should" denotes a recommendation.

X-Ref	Recommendations or other supporting information:
Requirement	
Number	

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

#### **V. CONTACTS**

**Pre-Implementation Contact(s):** Patte Appling, 410-786-1814 or Patricia.Appling@cms.hhs.gov, John Winkelman, 949-351-1091 or John.Winkelman@cms.hhs.gov, Rose Salloum, 410-786-0190 or Rose.Salloum@cms.hhs.gov

**Post-Implementation Contact(s):** Contact your Contracting Officer's Representative (COR) or Contractor Manager, as applicable.

#### **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: 1**

# <u>BR 2</u>

<u>MCS</u> shall add the following MRUR data elements to the current MCS daily claims file submission to IDRSS. The Bill Type Code listed below is different from the Bill Type Code received on the daily files. The Contractor ID below is to denote the contractor who applied the actual edits, which may differ from the submitting contractor.

Business Name MRUR Fields	Needed
Record Type Code	Value will be 'M' for all records
ICN from Claim	10 :P:IDR-CLM-DT- <u>ICN</u> .
Claim Line number to which this MR UR record applies	10 :P:IDR- <u>DTL-NUMBER</u>
Activity Type Code	ACTY TYP CD
Bill Type Code	BT** see below for further information
PIMR Suspense Audit	PIMRS
PIMR Pay Audit	PIMRP
Non PIMR Deny Audit	NONP
Denial Reason Cd	DENIAL REASON
Denied Units Service	UNITS DEN
Adjusted Audit/Edit	ADJ AUDT
Dup Audit Fail Flag	DP
Rejected Claim Flag	RJ
CAFM 2 Workload Ind	С
Provider Type Cd	PT
PIMR Other Fail Type	PIMRO
PIMR Denial Audit	PIMRD
Referral Reason	REFERR REASON
Allowed After MR	ALLOWED AFTER MR
Denial Amount	REVERS ALLOWED
Contractor ID	Contractor triggering the edit

\*\*

ΒT	URBILTCD	Bill type code assigned to the detail procedure code in HxxTBLTP. Refer to spec <u>S1045000</u> for SPITAB information.	H99MAK05	AN 02
		Item IMBPTYPE in HxxTBLTP		

# <u>BR 3</u>

<u>VMS</u> shall add the following data elements to the current VMS daily claims file submission to IDRSS. The Contractor ID below is to denote the contractor who applied the actual edits, which may differ from the submitting contractor.

VMS	MRUR Fields Needed
Record Type Code	Value will be 'M' for all records
ICN from Claim	10 (*)-IDR-REC-FULL-CCN.
Claim Line number to which this MR UR record applies	10 (*)-IDR-REC-LINE
Contractor ID	PIMR_CONTRACTOR_ID
Date MR	PIMR_DATE
Operator ID	PIMR_OPID
Action Code	PIMR_ACTION_CODE
Activity Type Code	PIMR_ACTIVITY_TYPE
Edit Code	PIMR_EDIT_CODE
Source Type	PIMR_SOURCE_TYPE
Source Number	PIMR_SOURCE_NUMBER
Activity Type Hierarchy	PIMR_ACT_TYPE_HIERARC
Provider Type	PRVDR_TYPE_CD
Subtype	BILL_TYPE_CD
Denied Dollars	DENY_DOL_AMT
Eligible Dollars	ELGB_DOL_AMT
Reversed Dollars	RVRS_DOL_AMT
PIMR Reason Code	PIMR_REASON_CD