# **CMS Manual System**

# Pub 100-20 One-Time Notification Transmittal Sheet

**Transmittal 164** 

Department of Health & Human Services Center for Medicare and & Medicaid Services Date: JULY 15,2005 Change Request 3926

#### **SUBJECT: Medicare HIPAA Electronic Claims Report - Third Reporting Timeframe Extension**

**I. SUMMARY OF CHANGES:** This CR extends the timeframe for reporting HIPAA electronic claims compliance data previously set forth in CR 3306, published on June 14, 2004, CR 3611, published on December 23, 2004, and CR 3780, published on April 8, 2005. All business requirements for CR 3306 remain the same. The data shall continue to be produced monthly through September 2005 (data due October 7, 2005).

# NEW/REVISED MATERIAL : EFFECTIVE DATE : August 1, 2005 IMPLEMENTATION DATE : August 5, 2005

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

### III. FUNDING:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2005 operating budgets.

#### **IV. ATTACHMENTS:**

One-Time Notification \*Unless otherwise specified, the effective date is the date of service.

# **Attachment – One-Time Notification**

| Pub. 100-20 Transm | ittal: 164 Date: Ju | uly 15, 2005 Cha | ange Request 3926 |
|--------------------|---------------------|------------------|-------------------|
|                    |                     |                  |                   |

#### SUBJECT: Medicare HIPAA Electronic Claims Report - Third Reporting Timeframe Extension

#### I. GENERAL INFORMATION

**A. Background:** This CR extends the timeframe for reporting HIPAA electronic claims compliance data previously set forth in CR 3306, published on June 14, 2004, CR 3611, published on December 23, 2004, and CR 3780, published on April 8, 2005. All business requirements for CR 3306 remain the same. The data shall continue to be produced monthly through September 2005 (data due October 7, 2005).

**B. Policy:** Public Law 104-191

#### **II. BUSINESS REQUIREMENTS**

"Shall" denotes a mandatory requirement "Should" denotes an optional requirement

| Requirement<br>Number | Requirements   | Responsibility ("X" indicates the columns that apply) |                  |                                 | es the                |                                |      |   |       |
|-----------------------|--|---|------------------|---------------------------------|-----------------------|--------------------------------|------|---|-------|
|                       |  | FI  | R<br>H<br>H<br>I | C<br>a<br>r<br>r<br>i<br>e<br>r | D<br>M<br>E<br>R<br>C | red S<br>intain<br>M<br>C<br>S | ners | С | Other |
| 3926.1                | <ul> <li>Contractors shall input their data for these reports no later than the fifth business day following the last day of the month by midnight Eastern Standard Time (EST). Refer to the following data reporting schedule:</li> <li>July 2005 data due August 5, 2005</li> <li>August 2005 data due September 7, 2005</li> <li>September 2005 data due October 7, 2005</li> </ul> | X   | X                | X                               | X                     |                                |      |   |       |
| 3926.1.1              | Contractors shall contact Rich Cuchna at<br>410-786-7239 or<br><u>Richard.Cuchna@cms.hhs.gov</u> if these<br>timeframes cannot be met.   | X   | X                | X                               | X                     |                                |      |   |       |

| Requirement<br>Number | Requirements |        | Responsibility ("X" indicates the columns that apply) |        |                  |             |                                    |             |             |  |  |
|-----------------------|--------------|--------|---|--------|------------------|-------------|------------------------------------|-------------|-------------|--|--|
| Number                |              | F<br>I | ן ז<br>ן ז  | R<br>H | С                | D<br>M<br>E | Shared System<br>Maintainers Other |             |             |  |  |
|                       |              |        | ]   |        | r<br>i<br>e<br>r | R<br>C      | F<br>I<br>S<br>S                   | M<br>C<br>S | V<br>M<br>S |  |  |
|                       |              |        |   |        | -                |             |                                    |             |             |  |  |
|                       |              |        |   |        |                  |             |                                    |             |             |  |  |
|                       |              |        |   |        |                  |             |                                    |             |             |  |  |

#### **III. PROVIDER EDUCATION**

| Requirement<br>Number | Requirements | Responsibility ("X" indicates the columns that apply) |                  |                                 |                       |                                |  |  |                   |       |
|-----------------------|--------------|---|------------------|---------------------------------|-----------------------|--------------------------------|--|--|-------------------|-------|
|                       |              | FI  | R<br>H<br>H<br>I | C<br>a<br>r<br>r<br>i<br>e<br>r | D<br>M<br>E<br>R<br>C | Sha<br>Mai<br>F<br>I<br>S<br>S |  |  | em<br>C<br>W<br>F | Other |
|                       | None.        |   |                  |                                 |                       |                                |  |  |                   |       |

#### IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

#### A. Other Instructions: N/A

| X-Ref Requirement # | Instructions |
|---------------------|--------------|
|                     |              |

### B. Design Considerations: N/A

| X-Ref Requirement # | <b>Recommendation for Medicare System Requirements</b> |
|---------------------|--|
|                     |  |

C. Interfaces: N/A

D. Contractor Financial Reporting /Workload Impact: N/A

# E. Dependencies: N/A

# F. Testing Considerations: N/A

# V. SCHEDULE, CONTACTS, AND FUNDING

| Effective Date*: August 1, 2005<br>Implementation Date: August 5, 2005                        | No additional funding will be<br>provided by CMS; contractor<br>activities are to be carried out<br>within their FY 2005 operating |
|---|--|
| <b>Pre-Implementation Contact(s):</b> Rich Cuchna @ (410)786-7239 Richard.Cuchna@cms.hhs.gov  | budgets.   |
| <b>Post-Implementation Contact(s):</b> Rich Cuchna @ (410)786-7239 Richard.Cuchna@cms.hhs.gov |  |

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