CMS Manual System	Department of Health & Human Services (DHHS)				
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)				
Transmittal 1650	Date: April 28, 2016				
	Change Request 9473				

SUBJECT: Shared System Enhancement 2015: Archive/Remove Inactive Medicare Demonstration **Projects**

I. SUMMARY OF CHANGES: The Centers for Medicare & Medicaid Services and its predecessor organization, the Health Care Financing Administration, have implemented Medicare fee for service (FFS) demonstration projects to support the development and implementation of payment systems associated with FFS and hybrid delivery systems, alternative payment structures and health care delivery systems to achieve value based purchasing, health promotion and disease prevention activities for Medicare beneficiaries, the examination of payment and delivery systems of FFS in acute and long term care, and expanded access and develop infrastructure in underserved areas (rural/inner city areas) or populations with special needs or chronic conditions.

Since some Medicare demonstration projects no longer serve a business need and claims processing for the demonstration is complete, CMS has provided a spreadsheet of all inactive demonstrations: "Contractors shall identify Medicare demonstration projects/code that are not active. CMS believes archiving obsolete Medicare demonstration projects/code will reduce system complexity and make future maintenance efforts more efficient.

EFFECTIVE DATE: October 1, 2016

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

IMPLEMENTATION DATE: October 3, 2016

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

Pub. 100-20 | Transmittal: 1650 | Date: April 28, 2016 | Change Request: 9473

SUBJECT: Shared System Enhancement 2015: Archive/Remove Inactive Medicare Demonstration Projects

EFFECTIVE DATE: October 1, 2016

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

IMPLEMENTATION DATE: October 3, 2016

I. GENERAL INFORMATION

- **A. Background:** The Centers for Medicare & Medicaid Services (CMS) and its predecessor organization, the Health Care Financing Administration, implemented Medicare fee for service (FFS) demonstration projects to support the development and implementation of new payment systems associated with FFS. On November 13, 2015, CMS issued Transmittal 1575, Change Request (CR) 9325 (Shared System Enhancement 2015: Identify Inactive Medicare Demonstration Projects (Analysis Only).
- **B.** Policy: The removal of the obsolete demonstration code reduces system complexity, makes future maintenance easier and more efficient and reduces processing and storage costs

II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility								
		A/B MAC			D M E					Other
		A	В	H H H		I	M C S		C W F	
9473.1	Based on the analysis completed by MCS, MCS shall remove/archive obsolete/inactive demonstration project codes 05, 06, 07 and 08. CMS will issue subsequent change requests to archive/remove additional demonstration codes in future releases. CMS will issue subsequent change requests to archive/remove additional demonstration codes in future releases.						X			HIGLAS
9473.2	HIGLAS shall remove any hard coded logic for interest associated with Demo 05.									HIGLAS
9473.3	Part B MACs shall remove SCF rules for CWF Trailer 30 for demonstration codes 05, 06, 07, and 08.		X							

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility

		A/B MA(C	D M E	C E D
	A	В	H H H	M A C	Ι
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): Barb Pecoraro, 410.786.6188 or barbara.pecoraro@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: 1

Medicare Demonstration Special Processing Numbers (SPN)

Description Special Processing Numbers (SPN)		
Project		
Nursing Home Case Mixand Quality Demo		
National Home Health Agency Prospective Payment Demo		
Telemedicine Waiver Demo		
United Mine Workers of America		
Medicare Choices Demo		
Medicare Participating Heart Bypass Center Demo		
Participating Centers of Excellence		
Provider Partnership Demo		
Colorado Integrated Care and Financing Project		
Community Nursing Organization Demo		
Consumer Directed DME Demo		
Competitive Bidding for Clinical Labs (non MMA demo)		
Competitive Bidding for DMEDemo		
Competitive Pricing Demo (non MMA)		
Competitive Pricing Demo (non-MMA)		
Competitive Pricing – Open Enrollment Demo (non-MMA)		
ESRD Managed Care Demo		
Graduate Medical Education Demo – Phase I		
Graduate Medical Education Demo – Phase II		
Utah All Payer Graduate medical Education Demonstration		
Group Specific Volume Performance Standards		
Medicaid Working Group Dual Eligibles		
Minnes ota Senior Health Options		
Municipal Health Services Program		
New England Dual Eligible Waiver Project		
PACE		
Seattle Outlier Pool		
SHMOII		
VA Medicare Subvention Demo		
Wisconsin Partnership Demo		
On Lok		
Lung Volume Reduction (NIH Clinical Trial) non-demo		
VA Pricing (not a demo)		
DoD Medicare Subvention Demo		
Medical Savings Account (BBA)		
New York Continuing Care Networks (aka Rochester and Monroe County)		
Evercare Managed Care for Nursing Home Residents		
SHMOI		
Coordinated Care Demo (BBA)		
Encounter Data (not a demo)		
Flu/Pneumonia Vaccinations Encounter Data		
Payment of Physician and Non-physician services in Certain Indian Providers		
(Rhem Gray)		
Clinical Trials (never as signed)		
ESRD DM – Basic ESRD demo bundle		
ESRD DM – Expanded ESRD demo bundle including venous access procedures		
Homebound demo (MMA)		
Chiropractic (MMA)		
Chiropractic (MMA) Vision Rehab (2004 appropriation project)		
Chiropractic (MMA) Vision Rehab (2004 appropriation project) Flu Medication Demo		
Chiropractic (MMA) Vision Rehab (2004 appropriation project) Flu Medication Demo Home Health Adult Day Care (s. 703 of MMA)		
Chiropractic (MMA) Vision Rehab (2004 appropriation project) Flu Medication Demo Home Health Adult Day Care (s. 703 of MMA) Frequent Hemodialysis Network Clinical Trial		
Chiropractic (MMA) Vision Rehab (2004 appropriation project) Flu Medication Demo Home Health Adult Day Care (s. 703 of MMA) Frequent Hemodialysis Network Clinical Trial Anti-Cancer Colorectal Drugs during Clinical Trials		
Chiropractic (MMA) Vision Rehab (2004 appropriation project) Flu Medication Demo Home Health Adult Day Care (s. 703 of MMA) Frequent Hemodialysis Network Clinical Trial		