CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-01 Medicare General Information, Eligibility, and Entitlement	Centers for Medicare & Medicaid Services (CMS)
Transmittal 54	Date: OCTOBER 1, 2008
	Change Request 5949

NOTE: Transmittal 51, dated May 16, 2008, is rescinded and replaced with Transmittal 54, dated October 1, 2008. The change is to the implementation date only. It is changed from October 6, 2008 to January 5, 2009. All other information remains the same.

SUBJECT: IDR Claims Sourcing from Shared Systems - Implementation

I. SUMMARY OF CHANGES: The Integrated Data Repository (IDR) has a business requirement to source claims data from each of the Shared Systems.

NEW / REVISED MATERIAL
EFFECTIVE DATE: *October 1, 2008
IMPLEMENTATION DATE: FISS maintainer only: Analysis completed by October 1, 2008
                                                          Implementation completed by January 5, 2009

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
R	7/90/IDR Claims Sourcing from Shared Systems

III. FUNDING:
SECTION A: For Fiscal Intermediaries and Carriers:
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.

IV. ATTACHMENTS:

Business Requirements

Manual Instruction

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

Attachment – Business Requirements

Pub. 100-01	Transmittal: 54	Date: October 1, 2008	Change Request: 5949

NOTE: Transmittal 51, dated May 16, 2008, is rescinded and replaced with Transmittal 54, dated October 1, 2008. The change is to the implementation date only. It is changed from October 6, 2008 to January 5, 2009. All other information remains the same.

SUBJECT: IDR Claims Sourcing from Shared Systems

The IDR Claims Sourcing from Shared Systems output file shall be created during the October 2008 Release timeframe. This includes coding, testing, and implementation.

EFFECTIVE DATE: October 1, 2008
IMPLEMENTATION DATE: FISS maintainer only: Analysis completed by October 1, 2008
                                                    Implementation completed by January 5, 2009

I. GENERAL INFORMATION

A.   Background: The CMS' fraud investigation landscape is significantly different today than in the past as a result of program changes, such as the implementation of the Medicare Prescription Drug benefit, competitive selection of contractors responsible for claims administration and program integrity, such as Medicare Administrative Contractors (MACs) and PSCs, expansion of   Medi-Medi and Recovery Audit Contractor (RAC) programs, and advent of the Medicaid Integrity Program (MIP). CMS recognizes the need to significantly enhance the use of technology to improve its collaborative fraud fighting efforts as well as to establish a modernized data analysis capability for all of Program Integrity.

Today, most Program Integrity contractors have built their own data warehouses and/or avenues for collecting, processing, analyzing data which serves their own individual needs. These distributed, regional approaches to data analysis do not lend themselves to national analyses, do not represent best practices, and do not take advantage of the cost savings that a centralized data repository would provide. All of these functions can be better served through a comprehensive set of common data structures and modern tools that encourage collaboration and innovation.

The IDR goal – through incremental releases – is to be the centralized data repository for all Medicare data. The Program Safeguard Contractors (PSCs) cannot currently use the IDR exclusively because the source of claims data is the National Claims History (NCH). The limited NCH data record is inadequate to support the extensive fraud, waste and abuse investigations that need to be performed by PSCs. The Shared Systems data are the required data source for Program Integrity. The CR initiates the acquisition of the Shared Systems data for the IDR. Once the IDR has the required Shared Systems data, Program Integrity and their contractors will increase their ability to detect potential fraud, waste and abuse.

B.   Policy: Program Integrity Group decision to use Shared Systems claims data for their fraud, waste and abuse efforts.

II.   BUSINESS REQUIREMENTS TABLE

Use"Shall" to denote a mandatory requirement

Number	Requirement	Responsibility (place an "X" in each applicable column)

		A / B MAC	D M E M A C	F I	C A R R I E R	R H H I	Shared-System Maintainers				OTH ER
							F I S S	M C S	V M S	C W F	
5949.1	On a one-time basis for the initial history load, FISS shall provide an electronic file of claims beginning with the Claim Thru Service Date of January 1, 2006 through October 5, 2008 of all data fields for all claims identified in the IDR Lifecycle Phase I which is as soon as the claim is enumerated.	X		X		X	X				EDC
5949.2	On a one-time basis for the initial history load, FISS shall provide an electronic file of claims beginning with the Claim Thru Service Date of January 1, 2006 through October 5, 2008 of all data fields for all claims identified in the IDR Lifecycle Phase II which is as soon as the claim is CWF adjudicated.	X		X		X	X				EDC
5949.3	On a one-time basis for the initial history load, FISS shall provide an electronic file of claims beginning with the Claim Thru Service Date of January 1, 2006 through October 5, 2008 of all data fields for all claims identified in the IDR Lifecycle Phase III which is once financial information is posted to the claim.	X		X		X	X				EDC
5949.4	On a one-time basis for the initial history load, FISS shall provide all associated claims processed in 2006 where the service date falls in 2005.	X		X		X	X				EDC
5949.5	On a one-time basis for the initial history load, FISS shall provide the total record count.	X		X		X	X				EDC
5949.6	On a one-time basis for the initial history load, FISS shall provide the total volume.	X		X		X	X				EDC
5949.7	On a daily basis, FISS shall provide an electronic file of claims beginning at October 6, 2008 of all data fields for all claims identified in the IDR Lifecycle Phase I which is as soon as the claim is enumerated.	X		X		X	X				EDC
5949.8	On a daily basis, FISS shall provide an electronic file of claims beginning at October 6, 2008 of all data fields for all claims identified in the IDR Lifecycle Phase II which is as soon as the claim is CWF adjudicated.	X		X		X	X				EDC
5949.9	On a daily basis, FISS shall provide an electronic file of claims beginning at October 6, 2008 of all data fields for all claims identified in the IDR Lifecycle Phase III which is once financial information is posted to the claim.	X		X		X	X				EDC
5949.10	FISS shall provide estimated record counts for each file.	X		X		X	X				EDC
5949.11	FISS shall provide estimated file volumes for each file.	X		X		X	X				EDC
5949.12	FISS shall provide all electronic claims files to the Baltimore Data Center mainframe via NDM using data set name that CMS shall specify in a Joint Signature Memorandum (JSM).	X		X		X	X				EDC CMS
5949.13	FISS shall provide all electronic claims files as fixed flat	X		X		X	X				EDC

Number	Requirement	A / B MAC	D M E MAC	F I	C A R R I E R	R H H I	F I S S	M C S	V M S	C W F	OTHER
	files.										
5949.14	FISS shall provide all electronic claims files with no special characters.	X		X		X	X				EDC
5949.15	FISS shall provide all electronic claims files with unpacked fields.	X		X		X	X				EDC
5949.16	Whenever changes occur on the claim record, whether it is at the individual contractor level or a CMS release level, FISS shall provide all documentation to include: File layouts for each file (File for IDR Lifecycle Phase I, File for IDR Lifecycle Phase II, File for IDR Lifecycle Phase III) to include the Field Names Record Positions Data Types Data Formats Enumerated Values Field Definitions	X		X		X	X				EDC
5949.16.1	The shared system maintainer may provide the updates as part of system update walk thoughts.						X				
5949.16.2	If the shared system maintainer decides to provide updates as part of system update walk throughs, the shared system maintainer shall invite the post implementation contact(s) for this CR to the walk through.						X				
5949.17	On a one-time basis for the initial history load, MCS shall provide an electronic file of claims beginning with the Claim Thru Service Date of January 1, 2006 through October 5, 2008 of all data fields for all claims identified in the IDR Lifecycle Phase I which is as soon as the claim is enumerated.	X			X			X			EDC
5949.18	On a one-time basis for the initial history load, MCS shall provide an electronic file of claims beginning with the Claim Thru Service Date of January 1, 2006 through October 5, 2008 of all data fields for all claims identified in the IDR Lifecycle Phase II which is as soon as the claim is CWF adjudicated.	X			X			X			EDC
5949.19	On a one-time basis for the initial history load, MCS shall provide an electronic file of claims beginning with the Claim Thru Service Date of January 1, 2006 through October 5, 2008 of all data fields for all claims identified in the IDR Lifecycle Phase III which is once financial information is posted to the claim.	X			X			X			EDC

Number	Requirement	A/B MAC	DME MAC	FI	CARRIER	RHHI	FISS	MCS	VMS	CWF	OTHER
5949.20	On a one-time basis for the initial history load, MCS shall provide all associated claims processed in 2006 where the service date falls in 2005.	X			X			X			EDC
5949.21	On a one-time basis for the initial history load, MCS shall provide the total record count.	X			X			X			EDC
5949.22	On a one-time basis for the initial history load, MCS shall provide the total volume.	X			X			X			EDC
5949.23	On a daily basis, MCS shall provide an electronic file of claims beginning at October 6, 2008 of all data fields for all claims identified in the IDR Lifecycle Phase I which is as soon as the claim is enumerated.	X			X			X			EDC
5949.24	On a daily basis, MCS shall provide an electronic file of claims beginning at October 6, 2008 of all data fields for all claims identified in the IDR Lifecycle Phase II which is as soon as the claim is CWF adjudicated.	X			X			X			EDC
5949.25	On a daily basis, MCS shall provide an electronic file of claims beginning at October 6, 2008 of all data fields for all claims identified in the IDR Lifecycle Phase III which is once financial information is posted to the claim.	X			X			X			EDC
5949.26	MCS shall provide estimated record counts for each file.	X			X			X			EDC
5949.27	MCS shall provide estimated file volumes for each file.	X			X			X			EDC
5949.28	MCS shall provide all electronic claims files to the Baltimore Data Center mainframe via NDM using data set names that CMS shall specify in a JSM.	X			X			X			EDC
5949.29	MCS shall provide all electronic claims files as fixed flat files.	X			X			X			EDC
5949.30	MCS shall provide all electronic claims files with no special characters.	X			X			X			EDC
5949.31	MCS shall provide all electronic claims files with unpacked fields.	X			X			X			EDC
5949.32	Whenever changes occur on the claim record, whether it is at the individual contractor level or a CMS release level, MCS shall provide all documentation to include: File layouts for each file (File for IDR Lifecycle Phase I, File for IDR Lifecycle Phase II, File for IDR Lifecycle Phase III) to include the Field Names Record Positions Data Types Data Formats Enumerated Values Field Definitions	X			X			X			EDC

Number	Requirement	A/B MAC	DME MAC	FI	CARRIER	RHHI	FISS	MCS	VMS	CWF	OTHER
							Shared-System Maintainers				
5949.32.1	The shared system maintainer may provide the updates as part of system update walk thoughts.							X			
5949.32.2	If the shared system maintainer decides to provide updates as part of system update walk throughs, the shared system maintainer shall invite the post implementation contact(s) for this CR to the walk through.							X			
5949.33	On a one-time basis for the initial history load, VMS shall provide an electronic file of claims beginning with the Claim Thru Service Date of January 1, 2006 through October 5, 2008 of all data fields for all claims identified in the IDR Lifecycle Phase I which is as soon as the claim is enumerated.	X							X		EDC
5949.34	On a one-time basis for the initial history load, VMS shall provide an electronic file of claims beginning with the Claim Thru Service Date of January 1, 2006 through October 5, 2008 of all data fields for all claims identified in the IDR Lifecycle Phase II which is as soon as the claim is CWF adjudicated.	X							X		EDC
5949.35	On a one-time basis for the initial history load, VMS shall provide an electronic file of claims beginning with the Claim Thru Service Date of January 1, 2006 through October 5, 2008 of all data fields for all claims identified in the IDR Lifecycle Phase III which is once financial information is posted to the claim.	X							X		EDC
5949.36	On a one-time basis for the initial history load, VMS shall provide all associated claims processed in 2006 where the service date falls in 2005.	X							X		EDC
5949.37	On a one-time basis for the initial history load, VMS shall provide the total record count.	X							X		EDC
5949.38	On a one-time basis for the initial history load, VMS shall provide the total volume.	X							X		EDC
5949.39	On a daily basis, VMS shall provide an electronic file of claims beginning at October 6, 2008 of all data fields for all claims identified in the IDR Lifecycle Phase I which is as soon as the claim is enumerated.	X							X		EDC
5949.40	On a daily basis, VMS shall provide an electronic file of claims beginning at October 6, 2008 of all data fields for all claims identified in the IDR Lifecycle Phase II which is as soon as the claim is CWF adjudicated.	X							X		EDC
5949.41	On a daily basis, VMS shall provide an electronic file of claims beginning at October 6, 2008 of all data fields for	X							X		EDC

Number	Requirement	A/B MAC	DME MAC	FI	CARRIER	RHHI	FISS	MCS	VMS	CWF	OTHER
		A / B M A C	D M E M A C	F I	C A R R I E R	R H H I	F I S S	M C S	V M S	C W F	OTH ER
	all claims identified in the IDR Lifecycle Phase III which is once financial information is posted to the claim.										
5949.42	VMS shall provide estimated record counts for each file.		X						X		EDC
5949.43	VMS shall provide estimated file volumes for each file.		X						X		EDC
5949.44	VMS shall provide all electronic claims files to the Baltimore Data Center mainframe via NDM using data set names that CMS shall specify in a JSM.		X						X		EDC
5949.45	VMS shall provide all electronic claims files as fixed flat files.		X						X		EDC
5949.46	VMS shall provide all electronic claims files with no special characters.		X						X		EDC
5949.47	VMS shall provide all electronic claims files with unpacked fields.		X						X		EDC
5949.48	Whenever changes occur on the claim record, whether it is at the individual contractor level or a CMS release level, VMS shall provide all documentation to include: File layouts for each file (File for IDR Lifecycle Phase I, File for IDR Lifecycle Phase II, File for IDR Lifecycle Phase III) to include the Field Names Record Positions Data Types Data Formats Enumerated Values Field Definitions		X						X		EDC
5949.48.1	The shared system maintainer may provide the updates as part of system update walk thoughts.								X		
5949.48.2	If the shared system maintainer decides to provide updates as part of system update walk throughs, the shared system maintainer shall invite the post implementation contact(s) for this CR to the walk through.								X		

III. PROVIDER EDUCATION TABLE

Number	Requirement	A/B	DME	FI	CAR	RHH	Shared-System Maintainers	OTHER
		A / B	D M E	F I	C A R	R H H	Shared-System Maintainers	OTH ER

					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:
Use "Should" to denote a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
5949.1-.9 5949.17-.25 5949.33-.41	FISS, MCS, VMS should use an existing file format if that format satisfies the requirements above for all data fields at each of the three IDR Lifecycle Phases as described above.
5949.1-.9 5949.17-.25 5949.33-.41	FISS, MCS, VMS should modify an existing file format to satisfy the requirements above if suitable.

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

V. CONTACTS

Pre-Implementation Contact(s): Patte Appling, Patricia.Appling@cms.hhs.gov, 410.786.1814

Post-Implementation Contact(s): Patte Appling, Patricia.Appling@cms.hhs.gov, 410.786.1814 and John Stewart, John.Stewart@ cms.hhs.gov, 410-786-1189.

VI. FUNDING

Section A: For *Fiscal Intermediaries (FIs), Carriers, and Regional Home Health Carriers (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.

General Information, Eligibility, and Entitlement Manual

Chapter 7 - Contract Administrative Requirements

Table of Contents

(Rev. 54, 10-01-08)

90 – Integrated Data Repository (IDR) Claims Sourcing from Shared Systems

(Rev. 54; Issued: 10-01-08; Effective Date: 10-01-08; Implementation Date: 01-05-09)

The CMS' fraud investigation landscape is significantly different today than in the past as a result of program changes, such as the implementation of the Medicare Prescription Drug benefit, competitive selection of contractors responsible for claims administration and program integrity, such as Medicare Administrative Contractors (MACs) and PSCs, expansion of Medi-Medi and Recovery Audit Contractor (RAC) programs, and advent of the Medicaid Integrity Program (MIP). CMS recognizes the need to significantly enhance the use of technology to improve its collaborative fraud fighting efforts as well as to establish a modernized data analysis capability for all of Program Integrity.

Today, most Program Integrity contractors have built their own data warehouses and/or avenues for collecting, processing, analyzing data which serves their own individual needs. These distributed, regional approaches to data analysis do not lend themselves to national analyses, do not represent best practices, and do not take advantage of the cost savings that a centralized data repository would provide. All of these functions can be better served through a comprehensive set of common data structures and modern tools that encourage collaboration and innovation.

The IDR goal – through incremental releases – is to be the centralized data repository for all Medicare data. The Program Safeguard Contractors (PSCs) cannot currently use the IDR exclusively because the source of claims data is the National Claims History (NCH). The limited NCH data record is inadequate to support the extensive fraud, waste and abuse investigations that need to be performed by PSCs. The Shared Systems data are the required data source for Program Integrity. The CR initiates the acquisition of the Shared Systems data for the IDR. Once the IDR has the required Shared Systems data, Program Integrity and their contractors will increase their ability to detect potential fraud, waste and abuse.

FISS shall provide, in electronic format, all claims output for all FIs and claim types on a daily basis at the claims header and detail level for each of the three identified lifecycle phases required.

MCS shall provide, in electronic format, all claims output for all Carriers and claim types on a daily basis at the claims header and detail level for each of the three identified lifecycle phases required.

VMS shall provide, in electronic format, all claims output for all DMEMACs and Certificates of Medical Necessity, as required with certain claims for payment, on a daily basis at the claims header and detail level for each of the three lifecycle phases required.

The IDR Lifecycle Phase I is defined as the claim upon enumeration. The IDR Lifecycle Phase II is defined as the claim immediately after CWF adjudication. The IDR Lifecycle Phase III is defined as the claim once financial information has been posted to it.