CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 716	Date: June 4, 2010
	Change Request 6739

Transmittal 655 dated March 19, 2010, is being rescinded and replaced by Transmittal 716, dated June 4, 2010. The email addresses in BRs 6739.3 and 6739.5 have been corrected. There are changes to dates in the Attachment associated with the STC testing schedule. All other information remains the same.

SUBJECT: HIPAA 5010 Activity – Testing of 5010 CRs

I. SUMMARY OF CHANGES: STC Beta Testing and MAC UAT Testing of 5010 implemented CRs, beginning with the October 2008 quarterly release and going through the April 2010 quarterly release, will begin in May 2010. Initiation of testing activities will be based on availability of 5010 test data (Parts A, B and DME), PC Ace software, and the Common Edits and Enhancements Module (CEM).

EFFECTIVE DATE: *July 1, 2010 - The first portion of the CRs listed on the attachment "STC Testing Schedule.xls" will be tested.

October 1, 2010 - The second portion of the CRs listed on the attachment "STC Testing Schedule.xls" will be tested.

IMPLEMENTATION DATE: July 6, 2010 - The first portion of the CRs listed on the attachment "STC Testing Schedule.xls" will be tested.

October 4, 2010 - The second portion of the CRs listed on the attachment "STC Testing Schedule.xls" will be tested.

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:

For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs) and/or Carriers: Not Applicable.

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

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

Attachment – One-Time Notification

Pub. 100-20 | Transmittal: 716 | Date: June 4, 2010 | Change Request: 6739

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I. GENERAL INFORMATION

A. Background:

STC Beta Testing and MAC UAT Testing of 5010 implemented CRs, beginning with the October 2008 quarterly release and going through the April 2010 quarterly release, will begin in May 2010. Initiation of testing activities will be based on availability of 5010 test data (Parts A, B and DME), PC Ace software, and the Common Edits and Enhancements Module (CEM).

The Single Test Contractor (STC) will coordinate the Beta testing and communicate issues encountered in a weekly call with Shared Systems Maintainers (SSMs) and Medicare Administrative Contractors (MACs). The SSMs will be responsible for making fixes as identified by STC and MACs as error corrections. Please refer to the Medicare General Information, Eligibility, and Entitlement Manual, Publication 100-01, Chapter 7, Section 40.3 for SSM and Medicare Contractor testing requirements.

The STC will test the CRs on the attached schedule (see attached Excel spreadsheet, "STC Testing Schedule.xls"). Please note: not all CRs apply to all Shared Systems nor impact MACs, so please refer to the attached STC schedule to verify whether a particular CR is applicable to you.

The projected timeline relating to this testing is as follows:

April or May – Common Edits and Enhancements Modules software (CEM) is available to STC and to Part A/B MACs

May – STC begins Beta testing 5010 CRs using the April release of FISS, MCS, and VMS

May – MACs begin installing CEM in their Local Data Centers (LDCs) - see CR 6836, Transmittal 647, dated March 5, 2010.

May/July – MACs begin UAT testing of 5010 CRs when CEM is available for use in their LDC July – STC continues Beta testing 5010 CRs, using the July release of FISS, MCS, and VMS

May to Oct – MACs will UAT test 5010 CRs, using the April shared system release in May and June, and using the July shared systems release from July to Oct., with all UAT testing of 5010 CRs listed in the attachment completed by October 2010

B. Policy:

Health Insurance Reform: Modifications to the Health Insurance Portability and Accountability Act (HIPAA): Final Rules published in the Federal Register on January 16, 2009 by the Department of Health and Human Services 45 CFR Part 162.

II. BUSINESS REQUIREMENTS TABLE

Number	Requirement		Responsibility (place an "X" in each applicable column)								
		A	D	F	С	R Shared-				ОТН	
		/	M	I	A	Н		Syst			ER
		В	Е		R	Н		aint		rs	
			3.6		R	I	F	M	V	C	
		M			I		I	C	M		
		A	A C		E R		S	S	S	F	
6720.1	GEG 1 111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	C	C		K		S	37	7.7		COD
6739.1	STC shall begin testing all 5010 CRs from previous						X	X	X		COB
	releases using the SSM code delivered for the April										C
	release. After July 6, 2010, STC will test using SSM code delivered for the then current release. See attached list of										
	identified CRs and STC testing schedule.										
6739.2	STC shall communicate testing results in a weekly call to	X	X				X	X	X		CEDI
0137.2	be scheduled with SSMs, MACs, DMACs, CEDI and	Λ	Λ				Λ	Λ	Λ		CLDI
	CMS.										
6739.3	SSMs and MACs shall designate participants for this	X	X				X	X	X		CEDI
	weekly call, including participant's name, email address,										
	and telephone number, to 5010 PMO@cms.hhs.gov by										
	March 1, 2010.										
6739.4	The MACs, including CEDI and DMACs, will conduct	X	X								CEDI
	UAT on identified CRs either concurrent with or upon										
	completion of STC beta testing, at their option. STC will										
	notify MACs of its CR testing status during the weekly										
	call described in 6739.2.										
6739.5	MACs, including CEDI and DMACs, shall provide a	X	X								CEDI
	weekly status report of their UAT progress on these CRs										
	during the weekly call described in 6739.2. This status										
	report will also be emailed to 5010 PMO@cms.hhs.gov.										

III. PROVIDER EDUCATION TABLE

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

	A	D	F	C	R		Shared-		OTH	
	/	M	I	Α	Н		System		ER	
	В	Е		R	Н	M	Maintainers			
				R	I	F	M	V	С	
	M	M		I		Ι	C	M	W	
	A	A		Е		S	S	S	F	
	C	C		R		S				
None										

IV. SUPPORTING INFORMATION

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

X-Ref	Recommendations or other supporting information:
Requireme	
nt	
Number	
	None

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

V. CONTACTS

Pre-Implementation Contact(s): Judy Kilpatrick (410) 786-6157 <u>judy.kilpatrick2@cms.hhs.gov</u>

Michael Cabral (410) 786-6168 <u>michael.cabral@cms.hhs.gov</u>

Post-Implementation Contact(s): Judy Kilpatrick (410) 786-6157 judy.kilpatrick2@cms.hhs.gov

Michael Cabral (410) 786-6168 michael.cabral@cms.hhs.gov

VI. FUNDING

Section A: For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs), and/or Carriers:

Not Applicable.

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.

ATTACHMENT: Revised STC Testing Schedule May 2010.PDF

Change Request Number	Projected Test Dates	Description	F I S	M C S	V M S	C W F
6028	06/10 through 06/25	Implementation of the Next Version of the Health Insurance Portability and Accountability Act (HIPAA) 837 Institutional Transaction. The purpose of this Change Request is to implement additional 837 Professional; Version 5010 changes for the VMS shared system only.			X	
6034	06/10 through 07/02	Implementation of the Next Version of the Health Insurance Portability and Accountability Act (HIPAA) 835 Transaction	Х	Х	Х	
6225	06/14 through 07/02	Common Working File Modifications for the Implementation of the Next Version of the Health Insurance Portability and Accountability Act (HIPAA).	X	X	X	Х
6269	06/10 through 07/02	Health Insurance Portability and Accountability Act (HIPAA) 837 Professional Transaction v5010 April 2009 Release (for VMS Only)			Х	
6274	06/14 through 07/02	Health Insurance Portability and Accountability Act (HIPAA) 837 Professional Transaction v5010 April 2009 Release (for MCS Only)		Х		
6275	Replaced by CR 6426	Instructions on utilizing 837 Institutional CAS segments for Medicare Secondary Payer (MSP) Part A Claims				
6299	06/21 through 07/09	Implementation of the Health Care Claim Status Inquiry and Response (276/277) Version 005010 - Part A Shared System Change	X			
6308	06/25 through 07/23	Health Insurance Portability and Accountability Act (HIPAA) 837 5010 Coordination of Benefits (COB) Requirements – Multi-carrier Systems (MCS)		Х		

Change Request Number	Projected Test Dates	Description	F I S	M C S	V M S	C W F
6343	06/25 through 07/23	Modifications to the National Coordination of Benefits Agreement (COBA) Crossover Process				Х
6374	06/25 through 07/23	Health Insurance Portability and Accountability Act (HIPAA) 837 5010 Coordination of Benefits (COB) Requirements	Х		X	
6376	06/18 through 07/09	Standard Paper Remittance (SPR) Update for Health Insurance Portability and Accountability Act (HIPAA) version 005010	Х	Х	Х	
6399	06/21 through 07/09	Implementation of the Health Care Claim Status Inquiry and Response (276/277) Version 005010 - Durable Medical Equipment (DME) Shared System Change			X	
6411	06/21 through 07/09	Implementation of the Health Care Claim Status Inquiry and Response (276/277) Version 005010 - Part-B Shared System Change.		Х		
6420	06/25 through 07/23	Coordination of Benefits Agreement (COBA) Repair and Claims Recovery Requirements Stemming from the Health Insurance Portability and Accountability Act (HIPAA) 5010 Claims Transactions	X	Х	X	
6426	06/25 through 07/23	Instructions on utilizing 837 Institutional CAS segments for Medicare Secondary Payer (MSP) Part-A Claims.				Х
6427	06/25 through 07/23	Instructions for Utilizing 837 Professional Claim Adjustment (CAS) Segments for Medicare Secondary Payer (MSP) Part-B Claims				Х
6450	Rescinded	Implementation of the Health Insurance Portability and Accountability Act (HIPAA) Version 005010 Safeguard Edits - Part A	N /	N /	N /	N /

Change Request Number	Projected Test Dates	Description	F I S	M C S	V M S	C W F
		Shared System Change	Α	Α	A	A
6460	06/17 through 07/02	Further Instruction for Implementation of the Next Version of the Health Insurance Portability and Accountability Act (HIPAA) 835 Transaction	Х	Х	X	
6465	06/18 through 07/09	Comprehensive Error Rate Testing (CERT) Program Modifications for the Implementation of the Next Version of the Health Insurance Portability and Accountability Act (HIPAA)	Х	Х	X	
6473	06/14 through 07/02	MREP Update for 835 version 5010			Х	
6575	05/28 through 07/02	Version 005010 Inbound 837 Institutional (837I) and Inbound 837 Professional (837P) Flat Files Implementation	Х	Х	X	
6576	06/14 through 07/02 08/11 through 10/01	Phase 2 Base System Changes for Implementation of the Next Version of the Health Insurance Portability and Accountability Act (HIPAA) - Multi-Carrier System (MCS) Only		Х		
6577	06/18 through 07/09	Expansion of the Number of Services Fields in Medicare Summary Notices (MSNs)		Х	Х	
6589	06/17 through 07/02	Implementation of Health Insurance Portability and Accountability Act of 1996 (HIPAA) version 5010 for Transaction 835 – Health Care Claim	Х	Х	Х	
6602	06/14 through 07/02	Phase 2 Base System Changes for Implementation of the Next Version of the Health Insurance Portability and Accountability Act (HIPAA) - Viable Medicare System (VMS)			Х	

Change Request Number	Projected Test Dates	Description	F I S S	M C S	V M S	C W F
		Only				
6658	06/25 through 07/23	Additional Health Insurance Portability and Accountability Act (HIPAA) 837 5010 Transitional Changes and Further Modifications to the Coordination of Benefits Agreement (COBA) National Crossover Process	Х	X	X	
6059 (also see 6576 and 6602)	06/14 through 07/02	Base System Changes for Implementation of the New version of the Health Insurance Portability and Accountability Act (HIPAA)	Х	X	X	
HCR092508	05/17 through 06/11	HIGLAS 837				
HCR092608	05/17 through 06/11	HIGLAS 810				
HCR121508	05/17 through 06/11	This change request implements the changes needed to make the HIGLAS 274 interface X12 5010 compatible				
HCR121608	05/17 through 06/11	This change request implements the changes needed to make the HIGLAS 271 interface X12 5010 compatible				
HCR121708	05/17 through 06/11	This change request implements the changes needed to make the HIGLAS 824 interface X12 5010 compatible				
HCR121808	05/17 through 06/11	HIGLAS FISS and MCS 835 5010 Changes				
HCR121908	05/17 through 06/11	HIGLAS FISS and MCS 810 5010 Changes				
HCR30109	05/17 through 06/11	810S 5010 Changes				
6849	06/14 through 07/02	HIPAA 5010 837I Edits and 837P Edits - July Version	Х	Х	X	

Change Request Number	Projected Test Dates	Description		M C S	V M S	C W F
6843	06/14 through 07/02	HIPAA 5010/D.0 Project Receipt, Control and Balancing Second Phase	X	Х	X	
6845	06/14 through 07/02	NCPDP D.0 Implementation			Χ	
6858	06/14 through 07/02	Implementation of the HIPAA Version 5010 276/277 Claim Status Multi-Carrier System (MCS) Only Transaction Pairing		Х		
6816	06/25 through 07/03 08/25 through 10/01	Modifications to Gap-Filling requirements for HIPAA 5010 837 COB and NCPDP D.0 Claims Files	X	X	X	