

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-20 One-Time Notification</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
<b>Transmittal 13052</b>	<b>Date: January 16, 2025</b>
	<b>Change Request 13787</b>

**SUBJECT: User Enhancement Change Request (UECR): ViPS Medicare System (VMS) - Create Error Message in the Beneficiary Information Tracking System (BITS) to Limit the Prior Authorization (PA) Healthcare Common Procedure Coding System (HCPCS) within a Unique Tracking Number (UTN)**

**I. SUMMARY OF CHANGES:** The purpose of this Change Request (CR) is to create an Error Message in BITS that will limit the PA HCPCS within a Unique Tracking Number (UTN) to meet the current Common Working File (CWF) allowable amount of forty (40) HCPCS.

**EFFECTIVE DATE: July 1, 2025**

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

**IMPLEMENTATION DATE: July 7, 2025**

*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.

<b>R/N/D</b>	<b>CHAPTER / SECTION / SUBSECTION / TITLE</b>
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

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## II. GENERAL INFORMATION

**A. Background:** The purpose of this CR is to create an Error Message in BITS that will limit the PA HCPCS within a UTN to meet the current CWF allowable amount of forty (40) HCPCS. Currently in VMS, there is no limit on the amount of PA HCPCS that can be created under one UTN in the BITS subsystem. However, the CWF accepts no more than forty. When more than forty records are set up with one UTN in BITS, the PA HCPCS records do not post in CWF, causing claims to reject. The records remain on file in BITS but are not found in CWF. The records have to be manually reviewed and deleted if set up in error, which is what happens the majority of the time. Adding a new error message will keep VMS BITS HCPCS values within the limitations of CWF and reduce the manual updates needed to synchronize the systems and prevent claims from rejecting.

**B. Policy:** There are no policy changes associated with this instruction.

### III. BUSINESS REQUIREMENTS TABLE

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

[illegible]

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
13787.2	<p>The contractor shall prompt a verification message when the operator enters the 40th HCPCS for the UTN. A positive response shall allow the operator to add the HCPCS to the UTN and a negative response shall re-display the screen.</p> <p><b>Note:</b> The records where the effective dates are equal (deleted) should not be counted as one of the 40 HCPCS attached to the UTN.</p>							X		
13787.3	<p>The contractor shall add a field that will display the total number of HCPCS attached to the UTN on the BITS – ADMC LIST Screen when the operator enters the UTN as a selection criteria from the BENEFICIARY INFORMATION TRACKING SYSTEM MENU.</p> <p><b>Note:</b> The records where the effective dates are equal (deleted) should not be counted as one of the 40 HCPCS attached to the UTN.</p>							X		
13787.4	<p>The contractor shall create a report prior to the beginning of the User Acceptance Testing (UAT) period of the beneficiaries who have 39 or more HCPCS attached to the same UTN. This report should be provided to the DME MACs at the start of UAT.</p>							X		

#### IV. PROVIDER EDUCATION

None

**Impacted Contractors:** None

## **V. SUPPORTING INFORMATION**

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

*"Should" denotes a recommendation.*

<b>X-Ref Requirement Number</b>	<b>Recommendations or other supporting information:</b>
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**Section B: All other recommendations and supporting information:** N/A

## **VI. CONTACTS**

**Post-Implementation Contact(s):** Contact your Contracting Officer's Representative (COR).

## **VII. FUNDING**

### **Section A: For Medicare Administrative Contractors (MACs):**

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**ATTACHMENTS: 0**