CMS Manual System	Department of Health & Human Services (DHHS)				
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)				
Transmittal 10759	Date: May 11, 2021				
	Change Request 12170				

SUBJECT: Fiscal Intermediary Shared System (FISS) - Modify Total Number of Bills Pending Reports to Exclude Clean Claims Delayed in the Processing System

I. SUMMARY OF CHANGES: FISS created reports 372 and 373 to help the Medicare Administrative Contractors (MACs) to report their pending claims by age on the Monthly Status Report (MSR). The reports should exclude claims that were delayed in the processing system. This Change Request (CR) will modify the FISS reports to exclude claims that contain condition code 15. This change will eliminate MAC manual work to back the claims out of the totals on the monthly FISS reports.

EFFECTIVE DATE: October 1, 2021

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

IMPLEMENTATION DATE: October 4, 2021

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

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I. GENERAL INFORMATION

A. Background: The MACs are required to report claims pending by age in the Monthly Status Report (MSR), grouped by the number of days pending. FISS developed the 372 and 373 reports to assist the MACs in developing their MSR. Currently, the reports include claims with condition code 15, which should be excluded from the claims processing timeliness standards because they were delayed in the claims processing system.

B. Policy: There are no policy impacts.

II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility								
		A/B		D	Shared-				Other	
		MAC		M	System					
					Е	Maintainers				
		A	В			F		V	C	
				Н		I				
				Н	A	~	S	S	F	
					С	S				
12170.1	FISS shall modify the selection criteria for the Total					X				
	Number of Bills Pending Summary (Report 373) to									
	exclude claims that contain condition code 15.									
12170.2	FISS shall modify the selection criteria for the Total					X				
	Number of Bills Pending Detail (Report 372) to									
	exclude claims that contain condition code 15.									

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
			A/B		D	C
		MAC		\mathbf{C}	M	Е
					Е	D
		Α	В	Н		Ι
				Н	M	
				Н	Α	
					С	
	None					

IV. SUPPORTING INFORMATION

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

[&]quot;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): Rita Hazlip, 410-786-5755 or rita.hazlip@cms.hhs.gov

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

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

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ATTACHMENTS: 0