

<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 10789</b>	<b>Date: May 12, 2021</b>
	<b>Change Request 12251</b>

**SUBJECT: The Fiscal Intermediary Shared System (FISS) Business Requirement for Rejected Claims Throwing Off the Provider and Statistical Reimbursement (PS&R) System Managed Care Days**

**I. SUMMARY OF CHANGES:** This change request is to instruct FISS to stop including rejected claims in the nightly paid claim file to the PS&R System, as this is ultimately throwing off Managed Care Days.

**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.

<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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## I. GENERAL INFORMATION

**A. Background:** Claims/claim data within the Paid Claim File (PCF) are loaded into the PS&R system. CMS, Medicare Administrative Contractors, and Providers request reports in the PS&R system to view this claims information. Currently, FISS is including rejected claims (PDCP-CURR-STATUS = 'R') in the PCF as of the implementation of MA4155 and MA4155S2 per CR 2476 (released July 5, 2014) which is undesirable.

Therefore, CMS is instructing FISS to discontinue including rejected claims in the PCF that PS&R uses for claims loading/reporting, even if those claims qualified based on the logic implemented by MA4155 and MA4155S2.

**B. Policy:** There is no policy update.

## II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility									
		A/B MAC			D M E	Shared- System Maintainers				Other	
		A	B	H H H		F M V C	M I C M W	S S S F			
12251.1	FISS shall update the criteria for populating the PCF used by the PS&R system to no longer include claims with a PDCP-CURR-STATUS = 'R' (Rejected), with the exception of Recovery Audit Contractor (RAC) Periodic Interim Payments (PIP) non-paid claims, even if the claim would have otherwise qualified to be included based on the requirements surrounding the implementation of MA4155 and MA4155S2.					X					

## III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E M A C	C E D I
		A	B	H H H		
	None					

**IV. SUPPORTING INFORMATION**

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

*"Should" denotes a recommendation.*

X-Ref Requirement Number	Recommendations or other supporting information:

**Section B: All other recommendations and supporting information: N/A**

**V. CONTACTS**

**Pre-Implementation Contact(s):** Alpha Bah, alpha.bah@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**