CMS Manual System	Department of Health & Human Services (DHHS)			
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)			
Transmittal 11100	Date: November 10, 2021			
	Change Request 10716			

SUBJECT: User CR: Multi-Carrier System (MCS) - Beneficiary Age Data Element

I. SUMMARY OF CHANGES: This change request will create a new data element for use in the MCS System Control Facility (SCF) to read the beneficiary age in editing and auditing. Currently, MCS procedure to age edit is handled via the procedure code file and MCS hard coded edit 142D. Making the beneficiary age available for use in SCF would provide greater flexibility to the MACs.

This was formerly MCS User CR 58341.

EFFECTIVE DATE: April 1, 2022

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

IMPLEMENTATION DATE: April 4, 2022

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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EFFECTIVE DATE: April 1, 2022

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IMPLEMENTATION DATE: April 4, 2022

I. GENERAL INFORMATION

A. Background: The purpose of this change request (CR) is to create a new data element for use in the MCS System Control Facility (SCF) to read the beneficiary age in editing and auditing. Currently, MCS procedure to age edit is handled via the procedure code file and MCS hard coded edit 142D. Making the beneficiary age available for use in SCF would provide greater flexibility to the MACs.

B. Policy: N/A

II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Re	espo	nsi	bilit	y				
			A/B MA(D M E		Sha Sys aint	tem		Other
		A	В	H H H	M A C	F		V	С	
10716.1	MCS shall create a new active claim detail SCF data element for the beneficiary's age.						X			
10716.1.1	MCS shall calculate the beneficiary's age for the service date on the claim detail.						X			
10716.1.2	MCS shall make the data element available for both editing and auditing.						X			

III. PROVIDER EDUCATION TABLE

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

IV. SUPPORTING INFORMATION

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

"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): Stacey Ndelle, 410-786-8208 or Stacey.Ndelle@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