

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 11539	Date: August 5, 2022
	Change Request 12811

SUBJECT: Implementation of the Award for the Jurisdiction N (J-N) Part A and Part B Medicare Administrative Contractor (JN A/B MAC)

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to announce the Jurisdiction JN A/B MAC recompetition procurement that was recently awarded to First Coast Service Options, Inc. (FCSO), the incumbent contractor for this workload.

The current JN workload identifier numbers, the Fiscal Intermediary Shared System (FISS) roll-up identifier and the Business Segment Identifiers (BSI) will not change.

EFFECTIVE DATE: September 1, 2022 - Part A and B

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

IMPLEMENTATION DATE: September 1, 2022 - Part A and B

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

Pub. 100-20	Transmittal: 11539	Date: August 5, 2022	Change Request: 12811
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SUBJECT: Implementation of the Award for the Jurisdiction N (J-N) Part A and Part B Medicare Administrative Contractor (JN A/B MAC)

EFFECTIVE DATE: September 1, 2022 - Part A and B

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

IMPLEMENTATION DATE: September 1, 2022 - Part A and B

I. GENERAL INFORMATION

A. Background: The Centers for Medicare & Medicaid Services (CMS) recently competed the JN A/B MAC workload. CMS awarded this workload to First Coast Service Options, Inc. (FCSO), the incumbent contractor for this workload.

FCSO's address is 532 Riverside Drive, Jacksonville, Florida 32202.

The CMS has determined that it will not need to change the current JN workload identifier numbers, the Fiscal Intermediary Shared System (FISS) roll-up identifier or the Business Segment Identifiers (BSI) when this new contract is implemented on May 1, 2022, for Part A and for Part B.

The following applications or business owners shall continue to accept the existing JN A/B workload identifier numbers once the above cited workloads are transitioned to the JN A/B MAC.

- Administrative Qualified Independent Contractor (AdQIC),
- Benefits Coordination and Recovery Center (BCRC),
- CMS Analysis, Reporting and Tracking System (CMSARTS),
- Commercial Repayment Center (CRC),
- Contractor Administrative, Budget and Cost Reporting System (CAFM),
- Comprehensive Error Rate Testing System (CERT),
- Contractor Management Information System (CMIS),
- CMS Baltimore Data Center (BDC),
- Coordination of Benefits Agreement program (COBA),
- Contractor Reporting of Operational Workload Data System (CROWD),
- Common Working File (CWF),
- CWF Host,
- CWF Part B Eligibility and Security Maintenance (CWFELGE),
- Customer Service Assessment and Management System (CSAMS),

- Debt Collection System (DCS),
- Electronic Correspondence Referral System (E CRS),
- Electronic Health Records Incentive Program (EHR),
- Expert Claims Processing System (ECPS),
- Electronic Submission of Medical Documentation System (esMD),
- Fiscal Intermediary Shared System (FISS),
- Fraud Prevention System (FPS),
- Health Care Information System (HCIS),
- Health Care Integrated General Ledger Accounting System (HIGLAS),
- Health Insurance Master Record (HIMR),
- HIPAA Eligibility Transaction System (HETS),
- Integrated Data Repository (IDR),
- Intern and Resident Information System (IRIS),
- Internet Quality Improvement and Evaluation System (iQIES),
- Local Coverage Determination Database (LCD),
- Medicare Appeals System (MAS),
- Medicare Coverage Data Base (MCD),
- Multi-Carrier System (MCS),
- National Claims History (NCH),
- National Data Warehouse (NDW),
- National Part B Pricing Files,
- National Part A Pricing Files,
- Next Generation Desktop (NGD),
- Part B Analytics Reporting System (PBAR),
- Production Performance Monitoring System (PULSE),
- Provider Enrollment Chain and Ownership System (PECOS),
- Provider Customer Service Program Contractor Information Database (PCID),

- Provider Inquiry Evaluation System (PIES),
- Provider Statistical and Reimbursement System (PS&R),
- Qualified Independent Contractor (QIC),
- Recovery Audit Contractor (RAC),
- Recovery Management and Accounting System (REMAS),
- Renal Management Information System (REMIS),
- Strategic Work Information Folder Transfer System (SWIFT),
- Supplemental Medical Review Contractor (SMRC),
- System Tracking for Audit and Reimbursement (STAR),
- Virtual Data Centers (VDCs),
- ZIP Code File, and
- Unified Program Integrity Contractors (UPICs).

B. Policy: There are no policy changes associated with this change request.

II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility									
		A/B MAC			D M E M A C	Shared-System Maintainers				Other	
		A	B	H H H		F I S S	M C S	V M S	C W F		
12811.1	The Jurisdiction J-N A/B MAC shall process the J-N A/B MAC workload under their current MAC workload identifiers.									JN A/B MAC	
12811.2	The Jurisdiction J-N A/B MAC shall process the J-N A/B MAC workload under the current BSIs.									JN A/B MAC	
12811.3	All systems applications and business owners listed in the background section of this CR shall continue to accept the J-N A/B MAC workload numbers, as per the first business requirement listed.	X	X							BCRC, CERT, CMS, CROWD, CWF Host, ECRS, FPS, HETS, HIGLAS, IDR,	

Number	Requirement	Responsibility									
		A/B MAC			D M E M A C	Shared-System Maintainers				Other	
		A	B	H H H		F I S S	M C S	V M S	C W F		
12811.4	Following the expiration of the current contract, the J-N A/B MAC shall track and charge all costs related to that contract to the appropriate Contract Line Item (CLIN), as instructed by CMS.										JN A/B MAC
12811.5	Once the new contract becomes effective, the J-N A/B MAC shall track and charge all costs related to that contract to the appropriate CLIN, as instructed by CMS.										JN A/B MAC

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): Jamie McLeod, 415-999-1274 or jamie.mcleod@cms.hhs.gov

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

VI. FUNDING

Section A: 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.

ATTACHMENTS: 0