CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 11856	Date: February 9, 2023
	Change Request 10673

SUBJECT: User Enhancement Change Request (UECR): Update the Multi-Carrier System (MCS) to Allow a User the Ability to Control Development Letter Creation for Adjustment Claims

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to update the MCS so a user can control when a development letter is created for an adjustment claim.

EFFECTIVE DATE: July 1, 2023
*Unless otherwise specified, the effective date is the date of service.
IMPLEMENTATION DATE: July 3, 2023

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: 11856	Date: February 9, 2023	Change Request: 10673

SUBJECT: User Enhancement Change Request (UECR): Update the Multi-Carrier System (MCS) to Allow a User the Ability to Control Development Letter Creation for Adjustment Claims

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I.   GENERAL INFORMATION

A.   Background: The purpose of this CR is to update the MCS so a user can control when a development letter is created for an adjustment claim. The Automated Development System (ADS), Question Maintenance screen accessed through the mnemonic AQ shall be updated to include a new field for the user to restrict what messages are used in the creation of a development letter for an adjustment claim. If a user attempts to create a development letter on an adjustment claim using the message number restricted on the Question Maintenance screen, a new online edit will be displayed indicating that message is invalid for an adjustment. This shall prevent the development letter from being created.

Reopening claim types shall be excluded from this logic.

The Medicare Administrative Contractor (MAC) A/B MAC Part B shall be responsible for updating this new field that is applicable to the message number(s) they choose to restrict.

B.   Policy: N/A

II.   BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
10673.1	The MCS shall create a new field on the ADS Question Maintenance screen.						X			
10673.1.1	The MCS shall create a new indicator to be used in this field, restricting the use of the associated message number.						X			
10673.1.2	The MCS shall insure that a claim reopening is excluded from this logic.						X			
10673.2	The MCS shall create a new edit that shall display a message indicating the action is invalid on an adjustment, when a message number is used on an						X			

Number	Requirement	A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH	FISS	MCS	VMS	CWF		
	adjustment claim that is set up with a restriction indicator. This shall prevent the user from completing the transaction, and a development letter shall not be created.									
10673.3	MCS shall update the ADS functions in the System Auditing Function Expert (SAFE) to include the new field added to the ADS Question Maintenance screen.						X			
10673.4	MCS shall update the Medical Policy and Procedure (MPAP) – System Control Codes Master, System Control Code (SCC) -Type (HBBRC06) report to include the new field added to the ADS Question Maintenance screen.						X			
10673.5	The A/B MAC Part B shall be responsible for updating the new field on the ADS Question Maintenance screen that is applicable to the message number(s) they choose to restrict.		X							

III.   PROVIDER EDUCATION TABLE

Number	Requirement	A/B MAC			DME MAC	CEDI
		A	B	HHH		
	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): Catheen Gurreri, 443-934-2913 or cathleen.gurreri@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