CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 11860	Date: February 16, 2023
	Change Request 10697

SUBJECT: User Enhancement Change Request (UECR): Update the Multi-Carrier System (MCS) Procedure Maintenance Screen PG Segment

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to update the PG segment of the Procedure Maintenance screen accessed using the mnemonic P2. The Procedure Maintenance screen, accessed using the mnemonic P2 allows for the inquiry and update capabilities of the PB2 and PG segments of the procedure code file records. The PG segment shall be updated to include a new indicator to bypass coinsurance and deductible for a procedure code, when the effective date of the bypass is not the same effective date as the procedure code itself.

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: 11860	Date: February 16, 2023	Change Request: 10697

SUBJECT: User Enhancement Change Request (UECR): Update the Multi-Carrier System (MCS) Procedure Maintenance Screen PG Segment

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

I.   GENERAL INFORMATION

A.   Background: The purpose of this CR is to update the PG segment of the Procedure Maintenance screen accessed using the mnemonic P2. The Procedure Maintenance screen, accessed using the mnemonic P2 allows for the inquiry and update capabilities of the PB2 and PG segments of the procedure code file records. The PG segment shall be updated to include a new indicator to bypass coinsurance and deductible for a procedure code, when the effective date of the bypass is not the same effective date as the procedure code itself. This enhancement will eliminate the need for the user to perform this type of file maintenance through the use of the System Control Facility (SCF). The effective date the coinsurance and deductible are waived for a particular procedure code shall be available to a user through an inquiry on the Procedure Maintenance screen. Currently, not all users are granted access to SCF and are unable to view this information.

The MCS shall update the PG segment's existing fields referenced as the RELATED DATES, to include a new indicator to bypass coinsurance and deductible for a procedure code.

The following elements of the PG segment currently exist:

The effective date and end date fields are currently formated,

The System Security/System Maintenance (SAFE) currently captures the user performing the maintenance,

The Related Date fields error message that sets if an effective date or end date is entered without an indicator,

The Related Dates fields error message that sets if the end date is prior to the effective date,

The Related Date fields error message that sets if an effective date is blank.

The Medicare Administrative Contractor (MAC), A/B MAC Part B shall be responsible for identifying the existing procedure codes set up to bypass coinsurance and deductible through the use of the SCF, should they choose to move those existing procedure codes to the PG segment. There shall not be a conversion job created to move this data.

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			D M E MAC	Shared-System Maintainers			Other	
		A	B	H H H		F I S S	M C S	V M S	C W F	
10697.1	The MCS shall update the PG segment to include a new Related Dates indicator to bypass coinsurance and deductible for a procedure code.						X			
10697.1.1	The MCS shall apply the new indicator bypass logic to data element REL-IND(1) through REL-IND(4) allowing the use of all four iterations of the Related Dates fields.						X			
10697.1.2	The MCS shall apply the new indicator bypass logic to data element REL-EFF-DATE-YYYYDDD(1) through REL-EFF-DATE-YYYYDDD(4) allowing the use of all four iterations of the Related Dates field effective dates to be entered in the exist format of MMDDYY.						X			
10697.1.3	The MCS shall apply the new indicator bypass logic to data element REL-END-DATE-YYYYDDD(1) through REL-END-DATE-YYYYDDD(4) allowing the use of all four iterations of the Related Dates field end dates to be entered in the exist format of MMDDYY.						X			
10697.2	The MCS shall bypass the application of coinsurance and deductible for a procedure code billed on a claim detail line of service, when that date of service is equal to the effective date, between the effective date and the end date or on the end date entered for the new Related Dates indicator.						X			
10697.3	The A/B MAC Part B shall be responsible for identifying the existing procedure codes set up to bypass coinsurance and deductible through the use of the SCF, should they choose to move those existing procedure codes to the PG segment. There shall not be a conversion job created to move this data.		X							

III.   PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility

		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): Cathleen 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