

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1503	Date: May 15, 2015
	Change Request 9064

Change Request 9064, Transmittal 1503, issued May 21, 2015 via RO-10652 is being re-communicated to correct the format on pages 39-83 in attachment #5. All other information remains the same.

SUBJECT: Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for July 2015

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to provide the July 2015 Common Edits and Enhancements Module (CEM) edits for the Part A and Part B Medicare Administrative Contractors (A/B MACs) and the Common Electronic Data Interchange (CEDI) contractor. Additionally, this CR directs Shared Systems to appropriately update the CEM.

EFFECTIVE DATE: July 1, 2015

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

IMPLEMENTATION DATE: July 6, 2015

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	

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 obliged 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

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	
9064.3	Using the attached edits spreadsheets, contractors shall generate the “Accepted” 999 at both the functional group and transaction levels back to the submitter when the front end translator is able to create a syntactically compliant flat file.	X	X							
9064.3.1	Contractors shall pass the syntactically compliant flat file to the CEM.	X	X							
9064.4	Using the attached edits spreadsheets, contractors shall generate the “Fully Rejected” 999 at the functional group and transaction levels based on the attached edits spreadsheets.	X	X							CEDI
9064.5	Using the attached edits spreadsheets, contractors shall generate the “Accepted with Errors” 999 at the functional group and transaction levels based on the attached edits spreadsheets.	X	X							CEDI
9064.5.1	Using the attached edits spreadsheets, contractors shall insert 277CA STC error records into the corresponding flat file that will be passed onto the CEM where the CEM will be able to add additional error STC records to be returned to the provider.	X	X							
9064.5.2	Contractors shall pass the resulting flat file from business requirement 5.1 to the CEM.	X	X							
9064.6	Shared systems shall use the attached updated edits spreadsheets for the implementation of their CEM.					X	X			CEM
9064.6.1	Contractors shall use the attached edits spreadsheets for the implementation of their edits software.	X	X							CEDI
9064.7	Contractors shall use the attached institutional flat file layout for the output file from the translator and for the input file for CEM-A.	X								CEM-A

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility		
		A/B MAC	D M E	C E D

		A	B	H H H	M A C	I
	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): Claudette Sikora, 410-786-5618 or claudette.sikora@cms.hhs.gov , Matthew Klischer, 410-786-7488 or Matthew.Klischer@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: 5