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# CMS Manual System

## Pub. 100-20 One-Time Notification

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Department of Health &  
Human Services (DHHS)  
Centers for Medicare &  
Medicaid Services (CMS)

Transmittal 224

Date: APRIL 28, 2006

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CHANGE REQUEST 5033

**SUBJECT: Part A and Part B Medicare Administrative Contractor Jurisdiction Implementation**

**I. SUMMARY OF CHANGES:** This CR is for FISS and CWF shared systems changes for the October 2006 release. This CR is to implement the necessary systems changes for the analysis performed in CR 4124 for A/BMAC implementation

**NEW/REVISED MATERIAL - EFFECTIVE DATE\*: October 1, 2006**

**IMPLEMENTATION DATE: October 2, 2006**

*Disclaimer for manual changes only: The revision date and transmittal number apply to the red italicized material only. 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 not updated.)**

**(R = REVISED, N = NEW, D = DELETED) – (Only One Per Row.)**

R/N/D	CHAPTER/SECTION/SUBSECTION/TITLE
N/A	

**III. FUNDING:** No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2006 operating budgets.

**IV. ATTACHMENTS:**

	Business Requirements
	Manual Instruction
	Confidential Requirements
X	One-Time Notification
	Recurring Update Notification

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

# Attachment – One-Time Notification

Pub. 100-20	Transmittal: 224	Date: April 28, 2006	Change Request 5033
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**SUBJECT: Part A and Part B Medicare Administrative Contractor Jurisdiction Implementation**

*This CR is for the FISS shared system changes for the October 2006 release. This CR is to implement the necessary systems changes for the analysis performed in CR 4124 for A/BMAC implementation.*

## I. GENERAL INFORMATION

**A. Background:** Under section 911 of the Medicare Prescription Drug, Improvement and Modernization Act (MMA), Congress mandated that the Secretary of Health and Human Services replace the current contracting authority under Title XVIII of the Social Security Act with the new authority. Contracting reform requires that the Centers for Medicare and Medicaid Services use competitive procedures to replace its current fiscal intermediaries (FIs) and carriers with a uniform type of administrative entity, referred to as Medicare Administrative Contractors (MACs). FIs handle claims processing and benefit payment functions for institutional providers under Part A and Part B of the Medicare Program; while carriers perform the same functions for professional providers under Part B of the program.

**B. Policy:** The MACs shall process claims for institutional providers and professional providers under Part A and Part B of the Medicare Fee-For-Service Program within the states assigned to its jurisdiction.

Jurisdiction One: America Samoa, California, Guam, Hawaii, Nevada, Northern Mariana Islands  
Jurisdiction Two: Alaska, Idaho, Oregon, Washington,  
Jurisdiction Three: Arizona, Montana, North Dakota, South Dakota, Utah, Wyoming  
Jurisdiction Four: Colorado, New Mexico, Oklahoma, Texas  
Jurisdiction Five: Iowa, Kansas, Missouri, Nebraska  
Jurisdiction Six: Illinois, Minnesota, Wisconsin  
Jurisdiction Seven: Arkansas, Louisiana, Mississippi  
Jurisdiction Eight: Indiana, Michigan  
Jurisdiction Nine: Florida, Puerto Rico, U.S. Virgin Islands  
Jurisdiction Ten: Alabama, Georgia, Tennessee  
Jurisdiction Eleven: North Carolina, South Carolina, Virginia, West Virginia  
Jurisdiction Twelve: Delaware, District of Columbia, Maryland, New Jersey, Pennsylvania  
Jurisdiction Thirteen: Connecticut, New York  
Jurisdiction Fourteen: Maine, Massachusetts, New Hampshire, Rhode Island, Vermont  
Jurisdiction Fifteen: Kentucky, Ohio

## II. BUSINESS REQUIREMENTS

*"Shall" denotes a mandatory requirement*  
*"Should" denotes an optional requirement*

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)								
		F I	R H I	C a r r i e r	D M E R C	Shared System Maintainers				Other
F I S S	M C S					V M S	C W F			
5033.1	FISS shall be modified to reflect a new contractor number(s) for the A/B MAC jurisdiction replacing existing contractor workloads.					X				
5033.2	FISS shall make required system changes to maintain the existing FIs contractor numbers following cutover to the A/B MAC jurisdictions to facilitate processing of fee-for-service claims filed within established claims filing time limits.					X				
5033.3	FISS shall make the necessary system changes to facilitate the movement of claims data (online claims and claims in history) from current FIs to an A/B MAC jurisdiction.					X				
5033.3.1	FISS shall make the necessary systems changes for segregating state-specific workloads during transition.					X				
5033.3.2	FISS shall develop the necessary conversion utilities and interfaces to allow existing workloads to move to another data center.					X				
5033.4	FISS shall make the necessary system changes to facilitate the communication of claims data between the data centers supporting the existing FIs and the data center(s) supporting the A/B jurisdictions.					X				
5033.5	FISS shall make required systems changes to allow workloads to process in separate CICS regions, with combined batch cycles (core and financial).					X				

Requirement Number	Requirements	Responsibility (“X” indicates the columns that apply)								
		F I	R H I	C a r r i e r	D M E R C	Shared System Maintainers				Other
F I S S	M C S					V M S	C W F			
5033.5.1	FISS shall perform analysis to allow state-specific reporting.					X				

**III. PROVIDER EDUCATION**

Requirement Number	Requirements	Responsibility (“X” indicates the columns that apply)								
		F I	R H I	C a r r i e r	D M E R C	Shared System Maintainers				Other
F I S S	M C S					V M S	C W F			
	None.									

**IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS**

**A. Other Instructions: N/A**

X-Ref Requirement #	Instructions

**B. Design Considerations: N/A**

X-Ref Requirement #	Recommendation for Medicare System Requirements

**C. Interfaces: N/A**

**D. Contractor Financial Reporting /Workload Impact: N/A**

**E. Dependencies: N/A**

**F. Testing Considerations: N/A**

**V. SCHEDULE, CONTACTS, AND FUNDING**

<p><b>Effective Date*:</b> October 1, 2006</p> <p><b>Implementation Date:</b> October 2, 2006 <i>This CR is for the FISS shared system to make systems changes for the implementation of the A/B MACs. Fiscal intermediaries, carriers, RHHIs, and DMERCs are not required to implement this CR until further notification</i></p> <p><b>Pre-Implementation Contact(s):</b> Brent Bowden <a href="mailto:Brent.Bowden@cms.hhs.gov">Brent.Bowden@cms.hhs.gov</a>, or 410-786-8124</p> <p><b>Post-Implementation Contact(s):</b> Brent Bowden</p>	<p><b>No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2006 operating budgets.</b></p>
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