

CMS MANUAL SYSTEM

INTRODUCTION

(Rev. 1, 10-01-03)

Effective October 1, 2003, CMS will transition from a paper-based manual system for its manual instructions to a Web-based system. The process includes the streamlining, updating, and consolidating of CMS' various program instructions into an electronic Web-based manual system for all users. The new system is called the online CMS Manual System and is located at <http://www.cms.hhs.gov/manuals>.

The Online CMS Manual System is a replica of the official record copy. The official record copy is an electronic copy that is maintained by the Office of Strategic Operations and Regulatory Affairs, Division of Issuances, and is the official source document for the Agency. This document takes precedence over the Web-based Internet-only manuals, if there are discrepancies noted. As we update the program manual instructions, we will move that material into the new CMS Manual System and eliminate the corresponding material from the outgoing paper-based manuals. We will continue this phase-out/phase-in process until all manual instructions are included in the CMS Manual System. In the meantime, you should check both sets of manuals for current policy and procedures.

The current practice of issuing program memoranda (PMs) will be discontinued after September 30, 2003, and be replaced with one of four new vehicles/templates created to communicate program instructions and update the Web-based manual. The new vehicles to communicate program instructions and update the new Internet-only manuals are (1) manual revisions, (2) one-time notification, (3) business requirement, or (4) confidential requirement templates. The Office of Strategic Operations and Regulatory Affairs (OSORA), Division of Issuances, will continue its current policy of communicating advanced program instructions to the regions and contractor community every Friday. A transmittal sheet will accompany all program instructions communicated by OSORA. In addition, the transmittal sheet will identify changes pertaining to a specific manual, requirement, or notification.

The new online CMS Manual System is organized by functional area, (e.g., eligibility, entitlement, claims processing, benefit policy, program integrity). The functional orientation of the new manual eliminates significant redundancy within the manuals and streamlines the updating process, thus making CMS program instructions available in a more timely and accessible fashion.

Specifically, the CMS Manual System will include the following functional areas:

- Pub. 100 Introduction
- Pub. 100-01--Medicare General Information, Eligibility, and Entitlement
- Pub. 100-02--Medicare Benefit Policy

- Pub. 100-03--Medicare National Coverage Determinations
- Pub. 100-04--Medicare Claims Processing
- Pub. 100-05--Medicare Secondary Payer
- Pub. 100-06--Medicare Financial Management
- Pub. 100-07--Medicare State Operations
- Pub. 100-08--Medicare Program Integrity
- Pub. 100-09--Medicare Contractor Beneficiary and Provider Communications
- Pub. 100-10--Medicare Quality Improvement Organization
- Pub. 100-11--Reserved
- Pub. 100-12--State Medicaid
- Pub. 100-13--Medicaid State Children's Health Insurance Program
- Pub. 100-14--Medicare End Stage Renal Disease Network Organization
- Pub. 100-15--Medicare State Buy-In
- Pub. 100-16--Medicare Managed Care
- Pub. 100-17--Medicare Business Partners Systems Security
- Pub. 100-18--Medicare Business Partners Security Oversight
- Pub. 100-19--Demonstrations
- Pub. 100-20--One-Time Notification

However, the initial release will include Pub. 100, Pub 100-02, Pub 100-03, Pub. 100-04, Pub. 100-05, Pub 100-09, Pub 100.15 and Pub 100-20.

The table below identifies what current paper-based manuals were used to construct the new Internet-only manuals. It is just a cursory overview. A detailed crosswalk is being developed to guide you from a specific section of the old manual to where the information now appears in the new manuals. In addition, the Internet-only manual will have a crosswalk to show how the information in each section was derived.

Paper-Based Manuals	Internet-Only Manuals
<ul style="list-style-type: none"> Pub. 06--Medicare Coverage Issues Pub. 09--Medicare Outpatient Physical Therapy Pub. 10--Medicare Hospital Pub. 11--Medicare Home Health Agency Pub. 12--Medicare Skilled Nursing Facility Pub. 13--Medicare Intermediary Manual, Parts 1, 2, 3, and 4 Pub. 14--Medicare Carriers Manual, Parts 1, 2, 3, and 4 Pub. 21--Medicare Hospice Pub. 27--Medicare Rural Health Clinic and Federally Qualified Health Center Pub. 29--Medicare Renal Dialysis Facility 	<ul style="list-style-type: none"> Pub. 100-01--Medicare General Information, Eligibility, and Entitlement Pub. 100-02--Medicare Benefit Policy Pub. 100-03--Medicare National Coverage Determinations Pub. 100-04--Medicare Claims Processing Pub. 100-05--Medicare Secondary Payer Pub. 100-06--Medicare Financial Management Pub. 100-08--Medicare Program Integrity Pub. 100-09--Medicare Contractor Beneficiary and Provider Communications

Program Memoranda	
Pub. 60A--Intermediaries Pub. 60B--Carriers Pub. 60AB--Intermediaries/Carriers NOTE: Information derived from Pub. 06 to Pub. 60AB was used to develop Pub. 100-01 to Pub. 100-09 for the Internet-only manual.	
Pub. 19--Medicare Peer Review Organization	Pub. 100-10--Medicare Quality Improvement Organization
Pub. 07--Medicare State Operations	Pub. 100-07--Medicare State Operations
Pub. 45--State Medicaid	Pub. 100-12--State Medicaid Pub. 100-13--Medicaid State Children's Health Insurance Program
Pub. 81--Medicare End Stage Renal Disease Network Organizations	Pub. 100-14--Medicare End Stage Renal Disease Network Organizations
Pub. 24--Medicare State Buy-In	Pub. 100-15--Medicare State Buy-In
Pub. 75--Health Maintenance Organization/ Competitive Medical Plan Pub. 76--Health Maintenance Organization/ Competitive Medical Plan (PM) Pub. 77--Manual for Federally Qualified Health Maintenance Organizations	Pub. 100-16--Medicare Managed Care
Pub. 13--Medicare Intermediaries Manual, Part 2 Pub. 14--Medicare Carriers Manual, Part 2	Pub. 100-17--Business Partners Systems Security
Pub. 13--Medicare Intermediaries Manual, Part 2 Pub. 14--Medicare Carriers Manual, Part 2	Pub. 100-18--Business Partners Security Oversight
Demonstrations (PMs)	Pub 100-19 -- Demonstrations
Program instructions that impact multiple manuals or have no manual impact.	Pub 100-20 --One-Time Notification

Effective October 1, 2003, if a business requirement impacts a CMS program instruction contained in one of the manuals, the corresponding manual will also be updated and communicated along with the business requirement. This information will be reflected on the transmittal sheet, which accompanies all changes to the manual.