

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 10106	Date: May 8, 2020
	Change Request 11669

SUBJECT: User Change Request (UCR): Implementation Requirements for Analysis UCR 10766 - Reduce Unmailable Medicare Summary Notices (uMSNs) Created in the Fiscal Intermediary Shared System

I. SUMMARY OF CHANGES: This Change Request (CR) will implement the changes identified with User CR 10766 which was an analysis CR on the January 2020 Release. The Centers for Medicare & Medicaid Services (CMS) met with the Medicare Administrative Contractors (MACs) to review examples of undeliverable MSNs to look for ways to reduce the volume. The MACs and CMS analyzed undeliverable MSNs to identify the root cause of the address problem. The examples reviewed were attributed to either bad information from the Common Working File Trailer 12 (CWF TR12) or claims that created a beneficiary shell record in FISS that were rejected by CWF due to incorrect beneficiary information submitted by the provider.

CMS cannot make changes to the CWF address information because they do not have ownership of the database that feeds address information to CWF. Issues with the CWF address information will be addressed when the MACs fully implement the United States Postal Service Secure Destruction Services.

This Change Request will address how FISS creates the shell beneficiary record for the first claim received for a beneficiary to ensure an MSN is not generated for mailing if a valid address has not been received.

EFFECTIVE DATE: October 1, 2020

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

IMPLEMENTATION DATE: October 5, 2020

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

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I. GENERAL INFORMATION

A. Background: Medicare Administrative Contractors (MACs) incur significant costs associated with mailing undeliverable Medicare Summary Notices (uMSNs). Root cause analysis found that many of the invalid addresses originate from the Medicare Eligibility Database and are outside the control of the Centers for Medicare & Medicaid Services (CMS). A CMS requirement for all MACs to implement usage of the United States Postal Service Secure Destruction Services will help reduce the number of MSNs generated with an address that is incomplete, inaccurate or incorrect.

Research into the undeliverable MSNs did identify an opportunity to suppress creation of the MSN when the Fiscal Intermediary Shared System (FISS) has never received a trailer 12 from CWF with the beneficiary's confirmed address. This Change Request will address how FISS creates the beneficiary shell record when the first claim is received for a Medicare Identification number.

B. Policy: This Change Request does not implement new or modify existing policy.

II. BUSINESS REQUIREMENTS TABLE

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

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	
11669.1	FISS shall modify the beneficiary shell creation process to suppress mail for all new beneficiary records created by the first claim received for the Medicare Identification number.					X				
11669.1.1	FISS shall remove the suppress mail indicator from the beneficiary shell record when CWF returns trailer 12 with the confirmed communications address.					X				

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility
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		A/B MAC			D M E M A C	C E D I
		A	B	H H H		
	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): Rita Hazlip, 410-786-5755 or Rita.Hazlip@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