CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-19 Demonstrations	Centers for Medicare & Medicaid Services (CMS)
Transmittal 10113	**Date: May 8, 2020**
	Change Request 11760

SUBJECT: Remove/Archive Demonstration Code 58 - Inactive Medicare Demonstration Projects within the Multi Carrier System (MCS) and Common Working File (CWF) System

I. SUMMARY OF CHANGES: The Centers for Medicare & Medicaid Services (CMS) have implemented Medicare fee for service (FFS) demonstration projects to support the development and implementation of payment systems associated with FFS. Change Requests CR7283, CR8167, CR8719 and CR8902 implemented demonstration code 58. Since this demo code has not been utilized since January 1, 2017, CMS is providing direction to the MCS and CWF FFS Systems to remove/archive the obsolete demo code 58.

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	

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:
Demonstrations

Attachment - Demonstrations

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I. GENERAL INFORMATION

A. Background: The Centers for Medicare & Medicaid Services (CMS) have implemented Medicare fee for service (FFS) demonstration projects to support the development and implementation of payment systems associated with FFS.

Since some Medicare demonstration projects no longer serve a business need and claims processing for the demonstration is complete, the contractor shall remove/archive Medicare demonstration project/code 58 which is not active. CMS believes archiving obsolete Medicare demonstration projects/codes will reduce system complexity and make future maintenance efforts more efficient. This CR is subsequent to CR7283, CR8167, CR8719 and CR8902.

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			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
11760.1	The contractor shall remove/archive Multi-Payer Advanced Primary Care Practice (MAPCP) demonstration code 58.		X				X		X	HIGLAS, IDR, NCH
11760.2	The contractor shall remove any SCF editing associated with Multi-Payer Advanced Primary Care Practice (MAPCP) demonstration code 58.		X							
11760.3	HIGLAS shall disable the HIGLAS PLB Code 'IP'.									HIGLAS
11760.4	HIGLAS shall disable Payment Type 'M'.									HIGLAS

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		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): Barb Pecoraro, 410.786.6188 or barbara.pecoraro@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