

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-20 One-Time Notification</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
<b>Transmittal 11227</b>	<b>Date: January 27, 2022</b>
	<b>Change Request 11903</b>

**SUBJECT: User CR: MCS - Test UAT Future Dates Beyond the Current Year**

**I. SUMMARY OF CHANGES:** The purpose of this Change Request (CR) is to update the Multi-Carrier System (MCS) to allow a claim to be manually entered into the user acceptance testing environment with a year of service beyond the current year.

**EFFECTIVE DATE: July 1, 2022**

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

**IMPLEMENTATION DATE: July 5, 2022**

**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.

<b>R/N/D</b>	<b>CHAPTER / SECTION / SUBSECTION / TITLE</b>
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:** The A/B Medicare Administrative Contractors (MACs) Part B have requested an enhancement to the Multi-Carrier System (MCS) that will allow for future date testing to span across years. There are several situations where the MAC requires the ability to test with future dates beyond the current year (edit/audit, HCPCS code adds/deletes, CWF and other special projects with date criteria). This is especially critical during the January release testing, when new files and policies are applicable to dates in the next year.

Currently, the date of service field on the claim screen has only one character for the calendar year. If the value keyed is equal to or less than the current year, MCS assumes it is the current decade. If the value is greater than the current year, then MCS assumes it is the previous decade. For example, if a claim is keyed on December 2, 2020 and the DOS entered on the claim screen is 01011, the MCS system will interpret the year of service as 2011 and not 2021. This puts limitations on the testing options for future dating.

Claims that are submitted electronically with a year greater than the current year, enter the system and process with the future years' date appropriately. However, if the claim suspends in the system, the date of service field is interpreted as the previous decade incorrectly.

This will allow MACs to be able to test claims with future dates beyond the current year. The MACs will also be able to test online edits with future dates and receive immediate results. It will eliminate time needed to perform special processing required to test for the end of year profile build. It can overall save the analysts time when completing their release testing.

**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			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	
11903.1	MCS shall update the system to allow for future date testing in UAT.						X			
11903.2	MCS shall update the Date of Service from and to fields to allow 2 digits for the year – MMDDYY.						X			

Number	Requirement	Responsibility								
		A/B MAC			D M E	Shared-System Maintainers				Other
		A	B	H H H		F I S S	M C S	V M S	C W F	
11903.2.1	The 2 digit year in the MMDDYY format shall be read for EMC claims that suspend in the system in addition to manually keyed paper claims.						X			

### III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E	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):** Cathleen Gurreri, 443-934-2913 or Cathleen.Gurreri@cms.hhs.gov , Stacey Ndelle, 410-786-8208 or Stacey.Ndelle@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**