

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 11390	Date: April 28, 2022
	Change Request 12695

SUBJECT: Implementation of the Award for the Jurisdiction K (J-K) Part A and Part B Medicare Administrative Contractor (JK A/B MAC)

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to announce the Jurisdiction JK A/B MAC recompetition procurement that was recently awarded to National Government Services, Inc. (NGS), the incumbent contractor for this workload.

The current JK workload identifier numbers, the Fiscal Intermediary Shared System (FISS) roll-up identifier and the Business Segment Identifiers (BSI) will not change.

EFFECTIVE DATE: May 1, 2022 - Part A and Part B

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

IMPLEMENTATION DATE: May 1, 2022 - Part A and Part B

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

Pub. 100-20	Transmittal: 11390	Date: April 28, 2022	Change Request: 12695
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SUBJECT: Implementation of the Award for the Jurisdiction K (J-K) Part A and Part B Medicare Administrative Contractor (JK A/B MAC)

EFFECTIVE DATE: May 1, 2022 - Part A and Part B

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

IMPLEMENTATION DATE: May 1, 2022 - Part A and Part B

I. GENERAL INFORMATION

A. Background: The Centers for Medicare & Medicaid Services (CMS) recently competed the JK A/B MAC workload. CMS awarded this workload to National Government Services, Inc. (NGS), the incumbent contractor for this workload.

NGS' address is: 8115 Knue Road, Indianapolis, IN 46250.

The CMS has determined that it will not need to change the current JK workload identifier numbers, the Fiscal Intermediary Shared System (FISS) roll-up identifier or the Business Segment Identifiers (BSI) when this new contract is implemented on May 1, 2022, for Part A and for Part B.

The following applications or business owners shall continue to accept the existing JK A/B workload identifier numbers once the above cited workloads are transitioned to the JK A/B MAC.

- Administrative Qualified Independent Contractor (AdQIC),
- Benefits Coordination and Recovery Center (BCRC),
- CMS Analysis, Reporting and Tracking System (CMSARTS),
- Commercial Repayment Center (CRC),
- Contractor Administrative, Budget and Cost Reporting System (CAFM),
- Comprehensive Error Rate Testing System (CERT),
- Contractor Management Information System (CMIS),
- CMS Baltimore Data Center (BDC),
- Coordination of Benefits Agreement program (COBA),
- Contractor Reporting of Operational Workload Data System (CROWD),
- Common Working File (CWF),
- CWF Host,
- CWF Part B Eligibility and Security Maintenance (CWFELGE),
- Customer Service Assessment and Management System (CSAMS),

- Debt Collection System (DCS),
- Electronic Correspondence Referral System (ECRS),
- Electronic Health Records Incentive Program (EHR),
- Expert Claims Processing System (ECPS),
- Electronic Submission of Medical Documentation System (esMD),
- Fiscal Intermediary Shared System (FISS),
- Fraud Prevention System (FPS),
- Health Care Information System (HCIS),
- Health Care Integrated General Ledger Accounting System (HIGLAS),
- Health Insurance Master Record (HIMR),
- HIPAA Eligibility Transaction System (HETS),
- Integrated Data Repository (IDR),
- Intern and Resident Information System (IRIS),
- Internet Quality Improvement and Evaluation System (iQIES),
- Local Coverage Determination Database (LCD),
- Medicare Appeals System (MAS),
- Medicare Coverage Data Base (MCD),
- Multi-Carrier System (MCS),
- National Claims History (NCH),
- National Data Warehouse (NDW),
- National Part B Pricing Files,
- National Part A Pricing Files,
- Next Generation Desktop (NGD),
- Part B Analytics Reporting System (PBAR),
- Production Performance Monitoring System (PULSE),
- Provider Enrollment Chain and Ownership System (PECOS),
- Provider Customer Service Program Contractor Information Database (PCID),

- Provider Inquiry Evaluation System (PIES),
- Provider Statistical and Reimbursement System (PS&R),
- Qualified Independent Contractor (QIC),
- Recovery Audit Contractor (RAC),
- Recovery Management and Accounting System (REMAS),
- Renal Management Information System (REMIS),
- Strategic Work Information Folder Transfer System (SWIFT),
- Supplemental Medical Review Contractor (SMRC),
- System Tracking for Audit and Reimbursement (STAR),
- Virtual Data Centers (VDCs),
- ZIP Code File, and
- Unified Program Integrity Contractors (UPICs).

B. Policy: There are no policy changes associated with this change request.

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	
12695.1	The Jurisdiction K A/B MACs shall process the Jurisdiction K A/B MAC workload under their current MAC workload identifiers.									JK A/B MAC
12695.2	The Jurisdiction K A/B MACs shall process the Jurisdiction K A/B MAC workload under the current BSIs.									JK A/B MAC
12695.3	All systems applications and business owners listed in the background section of this CR shall continue to accept the JK A/B MAC	X	X							BCRC, CERT, CMS, CROWD, CWF

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
	workload numbers, as per the first business requirement listed.									Host, ECRS, FPS, HETS, HIGLAS, IDR, NCH, NGD, PECOS, PS&R, PULSE, QIC, QIES, QIO, RAC, SMRC, UPICs, VDC, esMD
12695.4	Following the expiration of the current contract, the JK A/B MAC shall track and charge all costs related to that contract to the appropriate Contract Line Item (CLIN), as instructed by CMS.									JK A/B MAC
12695.5	Once the new contract becomes effective, the JK A/B MAC shall track and charge all costs related to that contract to the appropriate CLIN, as instructed by CMS.									JK A/B MAC

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		A	B	HHH		
	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:
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Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Jamie McLeod, 415-999-1274 or jamie.mcleod@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: 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.

ATTACHMENTS: 0