CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 11689	Date: November 9, 2022
	Change Request 12530

SUBJECT: User Enhancement Change Request (UECR): Add the Common Working File (CWF) Disposition Code to the Multi-Carrier System (MCS) Medicare Secondary Payer (MSP) 'I' Records Detail Screens, the MCS Desk Top Tool (MCSDT) and the MSP CWF Transaction Reject Report H99RB552

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to display the CWF disposition code, in addition to the error code currently displayed and received on the CWF MSP maintenance transaction response record, otherwise known as the HUSP transaction file. The disposition code shall be displayed on the MCS I Records Detail screen, accessed within the MCS using the mnemonic IM. The MCSDT MSP I Record Detail window and the MSP CWF Transaction Reject report H99RB552, shall also be updated to display the disposition code. This will assist the MAC in the claim adjudication process by further defining what action needs to be taken to resolve an error received from the CWF.

EFFECTIVE DATE: April 1, 2023

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

IMPLEMENTATION DATE: April 3, 2023

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

SUBJECT: User Enhancement Change Request (UECR): Add the Common Working File (CWF) Disposition Code to the Multi-Carrier System (MCS) Medicare Secondary Payer (MSP) 'I' Records Detail Screens, the MCS Desk Top Tool (MCSDT) and the MSP CWF Transaction Reject Report H99RB552

EFFECTIVE DATE: April 1, 2023

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

IMPLEMENTATION DATE: April 3, 2023

I. GENERAL INFORMATION

A. Background: The purpose of this Change Request (CR) is to display the CWF disposition code, in addition to the error code currently displayed and received on the CWF MSP maintenance transaction response record, otherwise known as the HUSP transaction file. The disposition code shall be displayed on the MCS I Records Detail screen, accessed within the MCS using the mnemonic IM. The MCSDT MSP I Record Detail window and the MSP CWF Transaction Reject report H99RB552, shall also be updated to display the disposition code. This will assist the MAC in the claim adjudication process by further defining what action needs to be taken to resolve an error received from the CWF.

Examples of this would be, when the HUSP transaction file is received with a 50/5052, 52/5052 or 55/5052.

The 50/5052, 50 is the disposition, indicating the CWF host cannot find the beneficiary on their files. The MAC must resubmit the claim to the host after a specified time frame.

The 52/5052, 52 is the disposition, indicating the beneficiary record is located at a different CWF host site. The MAC must hold the claim and retransmit after a specified time frame.

The 55/5052, 55 is the disposition, indicating the beneficiary name and Health Insurance Claim Number (HICN) does not match. The MAC must reject the claim back to the provider.

B. Policy: N/A

II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility											
		A/B		D	Shared-				Other				
		MAC		$C \mid M$		M System			System				
						F				E Maintainers		ers	
		A	В	Н		F	M	V	C				
				Н	M	I	C	M	W				
				Н	A	S	S	S	F				
					C	S							
12530.1	The MCS shall display the CWF disposition code on						X						
	the MSP I Records Detail screen. The HUSP												
	transaction file received from CWF currently contains												

Number	Requirement	Re	espo	nsil	oilit	. y									
		A/B MAC								D M E		Sha Systaint	tem		Other
		A	В	H H H	M A C	_	M C S	V M S	_						
	both the disposition code and the error code.														
12530.1.1	The MCS shall create a new field on the MSP I Records Detail screen for the display of the CWF disposition code.						X								
12530.1.2	The MCS shall continue to display the CWF error code on the MSP I Records Detail screen in the field identified as Error Codes.						X								
12530.1.3	The MCS shall display both the new disposition code field and the existing error code field on the MSP I Records Detail screen when a HUSP transaction file is received with a CWF error.						X								
12530.2	The MCS shall display the CWF disposition code on the window identified as the MSP I Records Detail within the MCSDT. The HUSP transaction file recieved from CWF currently contains both the dispostion code and the error code.						X								
12530.2.1	The MCS shall create a new field on the MSP I Records Detail window within the MCSDT for the display of the CWF disposition code.						X								
12530.2.2	The MCS shall continue to display the CWF error code on the MSP I Records Detail window within the MCSDT. This field is identified as Error Codes.						X								
12530.2.3	The MCS shall display both the new disposition code field and the existing error code field on the MSP I Records Detail window within the MCSDT when a HUSP transaction file is received with a CWF error.						X								
12530.3	The MCS shall display the CWF disposition code on the MCS CWF Transaction Reject report, H99RB552. The HUSP transaction file received from CWF currently contains both the disposition code and the error code.						X								
12530.3.1	The MCS shall create a new field on the MCS CWF Transaction Reject report, H99RB552 for the display of the CWF disposition code.						X								
12530.3.2	The MCS shall continue to display the CWF error code on the MSP CWF Transaction Reject report, H99RB552. This field is identified as Error.						X								

Number	Requirement	Responsibility								
			A/B		D	Shared-				Other
		N	MAC		M	System				
					Е	Maintainers			ers	
		A	В	Н		F	M	V	C	
				Н	M	-	C	M		
				Н	A	S	S	S	F	
					С	S				
12530.3.3	The MCS shall display both the new disposition code						X			
	field and the existing error code field on the MCS									
	CWF Transaction Reject report, H99RB552 when a									
	HUSP transaction file is received with a CWF error.									

III. PROVIDER EDUCATION TABLE

Number	Requirement	Re	spoi	ility		
			A/B		D	С
		MAC			M	Е
					Е	D
		A	В	Н		I
				Н	M	
				Н	A	
					С	
	None					

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

[&]quot;Should" denotes a recommendation.

X-Ref	Recommendations or other supporting information:
Requirement	
Number	

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

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