

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 11928	Date: March 27, 2023
	Change Request 10688

Transmittal 11854 issued February 09, 2023, is being rescinded and replaced by Transmittal 11928, dated, March 27, 2023, to revise the effective and implementation dates. All other information remains the same.

SUBJECT: User Enhancement Change Request (UECR): Update the Multi-Carrier System (MCS) Procedure Code Lookup Screen and the Procedure Maintenance Screen

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to update the Procedure Code Lookup screen to include the effective and end dates displayed for a procedure code and to enhance the functionality of the Procedure Maintenance screen allowing a user to page forward or backwards through the displayed data.

EFFECTIVE DATE: April 17, 2023 - Peraton, the shared system maintainer for the MCS has proposed to use the Agile 'Release on Demand' process for this UECR. This requires the CMS to re-issue the CR due to the change of the implementation date from July 3, 2023 to the implementation date of April 17, 2023.

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

IMPLEMENTATION DATE: April 17, 2023 - Peraton, the shared system maintainer for the MCS has proposed to use the Agile 'Release on Demand' process for this UECR. This requires the CMS to re-issue the CR due to the change of the implementation date from July 3, 2023 to the implementation date of April 17, 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

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I. GENERAL INFORMATION

A. Background: The purpose of this CR is to update the Procedure Code Lookup screen to include the effective and end dates displayed for a procedure code and to enhance the functionality of the Procedure Maintenance screen allowing a user to page forward or backwards through the displayed data.

The Procedure Code Lookup screen, accessed using the mnemonic PC, enables a user to look up the narrative description of a procedure code from the Procedure Code file. The Procedure Code Lookup screen also displays the valid types of service and modifiers associated with the procedure code.

The Procedure Maintenance screen, accessed using the mnemonic PR allows for the display and update capabilities of the PA and PB segments of the procedure file records. The PA segment sets up a master record for each procedure code. It defines the procedure code, modifier and type of service combination in addition to a narrative description. The PB segment is used to establish edit criteria for every procedure of the procedure file.

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	Shared- System Maintainers				Other		
		A	B	H H H		F M V C	M C S S	V M S	C W F			
10688.1	The MCS shall update the both the full and half Procedure Code Lookup screen by adding an effective								X			

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	
	date field, to be populated from the data contained on the MAC's procedure code file.								
10688.2	The MCS shall update the both the full and half Procedure Code Lookup screen by adding an end date field, to be populated from the data contained on the MAC's procedure code file.						X		
10688.3	The MCS shall update the Procedure Maintenance screen by adding a paging functionality. The records shall be displayed in the same sequence as the records are displayed on the Procedure Code Lookup screen						X		
10688.3.1	The MCS shall add functionality to the Procedure Maintenance screen to scroll forward through the procedure code records.						X		
10688.3.2	The MCS shall add functionality to the Procedure Maintenance screen to scroll backward through the procedure code records						X		

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:
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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):

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ATTACHMENTS: 0