

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12178	Date: August 3, 2023
	Change Request 11906

SUBJECT: User Enhancement Change Request (UECR): ViPS Medicare System (VMS) - Include Additional Documentation Request (ADR) number on Adjustments

I. SUMMARY OF CHANGES: The purpose of this UECR is to update VMS to include the ADR number in the process of building Adjustment Claims.

EFFECTIVE DATE: January 1, 2024

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

IMPLEMENTATION DATE: January 2, 2024

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: Currently, the ADR information from an original claim is not carried over to an adjustment. This makes it time consuming to identify if an ADR was previously sent on the original claim. Staff are required to verify each appeal request to determine if there was previously an ADR requested so that the appeal can be completed accurately. This can equate to many hours spent researching which could be reduced if there was a field that would indicate this.

With this update, staff will no longer have to manually review original claims to determine if an ADR was sent. The information will carry over to adjustment claims and be readily available to the staff in the VMS Beneficiary Update and Display System (BUDS).

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

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		
11906.1	GDIT shall create a new field in BUDS to carry over the Claim-level ADR number, identified as the Automated Development System Claim Message Code (ADS) in VMS, from the original claim to the adjustment.								X		IDR
11906.2	GDIT shall ensure the new claim-level field captures the ADS number on subsequent adjustments.								X		IDR

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

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