

<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 2413</b>	<b>Date: January 3, 2020</b>
	<b>Change Request 11600</b>

**SUBJECT: New State Codes for California, Kentucky and West Virginia**

**I. SUMMARY OF CHANGES:** New State Codes are assigned to California, Kentucky and West Virginia. The new State Codes are in addition to the State Code the state already possesses. This change request is subsequent to CR 11065 (April, 2019 Release).

**EFFECTIVE DATE: April 1, 2020**

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

**IMPLEMENTATION DATE: April 6, 2020**

*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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**SUBJECT:** New State Codes for California, Kentucky and West Virginia

**EFFECTIVE DATE:** April 1, 2020

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**IMPLEMENTATION DATE:** April 6, 2020

## I. GENERAL INFORMATION

**A. Background:** The following States have exhausted its supply of CMS Certification Numbers (CCNs) for multiple provider types. Consequently, we are assigning a new State Code for California, Kentucky and West Virginia.

The new State Codes are as follows:

California B2

Kentucky B0

West Virginia B1

The new State Codes are in addition to the State Code the state already possesses.

This change request is subsequent to CR 11065 (April, 2019 Release).

**B. Policy:** Not applicable.

## 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	
11600.1	<p>The Medicare Systems (e.g., Medicare claims processing systems, state systems, financial systems, etc.) shall make the necessary changes to accept the following new state code as part of the CCN. The State Code is listed below:</p> <p>California - B2</p> <p>Kentucky - B0</p> <p>West Virginia - B1</p>	X		X		X			X	BCRC, CERT, CWF Host, FPS, MAS, PECOS, PS&R, QIES, RAC

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	
	The new State Codes are in addition to the State Code the state already possesses.									

### 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:** Refer to SOM Section 2779A1 - CMS Certification Numbers for Medicare Providers.

### V. CONTACTS

**Pre-Implementation Contact(s):** Kimberlie Jasmin, 410-786-2748 or Kimberlie.Jasmin@cms.hhs.gov , Edward Mortimore, 410-786-3509 or Edward.Mortimore@cms.hhs.gov , Ian Kramer, 410-786-5777 or ian.kramer@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**