

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 2414	Date: January 3, 2020
	Change Request 11521

Transmittal 2386, dated November 8, 2019, is being rescinded and replaced by Transmittal 2414, dated, January 3, 2020 to add business requirement 11521.1.1 to include the IDR. All other information remains the same.

SUBJECT: ViPS Medicare System (VMS) Online and Print Reporting of Automated Claims Examination System (ACES) Statistics

I. SUMMARY OF CHANGES: This CR (Change Request) is a follow up to analysis CR10721, to develop the business requirements for new and updated Online and Print Reporting of Automated Claims Examination System (ACES) Statistics.

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.

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: 2414	Date: January 3, 2020	Change Request: 11521
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SUBJECT: ViPS Medicare System (VMS) Online and Print Reporting of Automated Claims Examination System (ACES) Statistics

EFFECTIVE DATE: April 1, 2020

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IMPLEMENTATION DATE: April 6, 2020

I. GENERAL INFORMATION

A. Background: Under Change Request (CR) 10721, CMS held calls with the VMS Shared System Maintainer (SSM) and the Durable Medical Equipment, Prosthetics, Orthotics and Supplies Medicare Administrative Contractors (DME MACs), to conduct analysis and discuss the design of new and online screens and reports to display Automated Claims Examination System (ACES) statistics. ACES is a VMS subsystem that allows the Durable Medical Equipment Medicare Administrative Contractors (DME MACs) to set up user-controlled editing based on claim criteria for pre- and post-pricing editing. Currently, the DME MACs can view daily ACES statistics, but only for the previous day. The next day the counts are no longer available.

Currently, the VMS provides limited reporting for ACES. The ACES ACTION STATS screen does not provide the same level of detail provided with SuperOp screens and reports. These new screens and reports will provide daily, monthly, and year-to-date statistics for each Entity Action Record (EAR). The prior stats were only for previous day and quarter to date.

Additionally, the new reports will list out which claims hit the specific EARs. The DME MACs can test if the EARs are working and verify the details of the claim against the criteria of the edit. The current reporting does not provide detailed claim information. The improved/enhanced screens and reports will assist DME MACs in troubleshooting claim issues and researching inquiries in a timely manner. Today, the DME MACs have to develop Ad-Hoc reporting to accomplish these same tasks.

Adding new screens and reports for operators to review ACES statistics will provide a method to monitor activity and effectiveness of user-controlled edits initiated by the DME MACs and Unified Program Integrity Contractors (UPICs) and improve research capabilities for claim inquiries when EAR or ACE is used for automation instead of SuperOp.

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 M A C	Shared- System Maintainers			Other
		A	B	H H H		F I S S	M C S	V M S	
11521.1	The contractor shall update VMS to allow the DME MACs to view defined statistical data in the VMS onlines for the Entity Action Records (EARS) in the Automated Claims Examination System (ACES) subsystem. The data will include the previous day's counts, the calendar month-to-date and calendar year-to-date statistics.							X	
11521.1.1	The Integrated Data Repository (IDR) contractor shall work with VMS SSM to accept changes related to replacing the EAR savings field with the EAR 29 Sequence in IDR phases I, II and III.							X	IDR
11521.2	The contractor shall create a new screen to display the detail information for EARS that took action on the previous day's cycle.							X	
11521.3	The contractor shall update existing ACES reports for the DME MACs, which will include all statistical data for the EARS in the AUTOMATED CLAIMS EXAMINATION subsystem. The data will include the previous day's counts, the calendar month-to-date and calendar year-to-date statistics.							X	
11521.4	The contractor shall create a new daily report that displays the statistical and detail information for EARS that took action on the previous day's cycle.							X	
11521.5	The contractor shall create a new daily report that displays the statistical information for EARS that took action for the previous day, and rolled up totals for Month-to-Date and Year-to-Date statistics by EAR.							X	

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E	C E D I
		A	B	H H H	M A C	
	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

Pre-Implementation Contact(s): Stacey Ndelle, 410-786-8208 or Stacey.Ndelle@cms.hhs.gov , Kay Curry, 410-786-1801 or Kay.Curry@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