

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 10687	Date: March 31, 2021
	Change Request 12150

SUBJECT: Medicare Administrative Contractor (MAC) Enhanced Release Testing

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to direct the MACs to perform expanded User Acceptance Testing (UAT) for select CRs.

EFFECTIVE DATE: June 7, 2021

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

IMPLEMENTATION DATE: July 6, 2021

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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SUBJECT: Medicare Administrative Contractor (MAC) Enhanced Release Testing

EFFECTIVE DATE: June 7, 2021

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IMPLEMENTATION DATE: July 6, 2021

I. GENERAL INFORMATION

A. Background: Due to the complexities of the July 2021 Quarterly Release, CMS will require Medicare Administrative Contractors (MACs) to perform expanded User Acceptance Testing (UAT) for select Change Requests (CRs). This testing will occur during the normal UAT window.

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	C W F	
12150.1	MACs shall test, to the best of their ability, all CRs on the attached list during the normal UAT timeframe.	X	X		X					
12150.2	The MACs shall report all problems to the Shared System Maintainers (SSMs), as they are found, using the established Question Control Number (QCN) process.	X	X		X					
12150.3	MACs shall use the SSM test scripts as a base for testing; with an option to revise, the provided test scripts or add their own test scripts as needed.	X	X		X					
12150.4	The MACs shall include the selected CRs on the weekly UAT testing report.	X	X		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:

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Katrina Mills, Katrina.Mills@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: 1

July 2021 CRs for Enhanced MAC Testing

CM CRs

1. CR 12130 Update to the Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program (CBP): Implementation Change Request (CR) for Restarting the CBP (CR has an existing BR for MAC testing) Sponsoring MAC: JC (CGS)
2. CR 11953 Update to the Fiscal Intermediary Shared System (FISS) Integrated Outpatient Code Editor (IOCE) Claim and Return Buffer Interface Changes
Sponsoring MAC: Novitas (FISS)

CPI CRs

3. CR 11761 Implementation for System Enhancements for Prior Authorization (PA) System Processing
Sponsoring MAC: WPS (FISS) and Novitas (MCS)

CMMI CRs

4. CR 11914 Kidney Care Choices (KCC) Kidney Care First (KCF) - Payment Mechanism (PM) and Benefit Enhancements (BEs) – Implementation (CR has an existing BR for MAC testing)
Sponsoring MAC: Palmetto (MCS)
5. CR 11915 Kidney Care Choices (KCC) Comprehensive Kidney Care Contracting (CKCC) Payment and Benefit Enhancements – Implementation (CR has an existing BR for MAC testing)
Sponsoring MAC: NGS (FISS) and NGS (MCS)
6. CR 12074 Implementing of the Value in Opioid Use Disorder (OUD) Treatment Demonstration Program Payment Reporting
Sponsoring MAC: FCSO (FISS) and Noridian (MCS)

CCSQ CRs

7. CR 12104 Claims Processing Instructions for National Coverage Determination (NCD) 20.4 Implantable Cardiac Defibrillators (ICDs)
Sponsoring MAC: Palmetto (FISS) and Palmetto (MCS)