CMS Manual System	Department of Health & Human Services (DHHS)				
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)				
Transmittal 11416	Date: May 19, 2022				
	Change Request 12706				

SUBJECT: User Change Request (UCR): Fiscal Intermediary Shared System (FISS) - Off-line History Retrieval of Canceled Claims

I. SUMMARY OF CHANGES: The purpose of this Change Request is this UCR will modify FISS to not assign reason code 38000 when the only potentially overlapping offline claim was previously canceled. This change will improve system efficiency and reduce system resource utilization by recognizing that the canceled claim should not be considered for duplicate editing.

EFFECTIVE DATE: October 1, 2022

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

IMPLEMENTATION DATE: October 3, 2022

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: 11416
 Date: May 19, 2022
 Change Request: 12706

SUBJECT: User Change Request (UCR): Fiscal Intermediary Shared System (FISS) - Off-line History Retrieval of Canceled Claims

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I. GENERAL INFORMATION

A. Background: FISS assigns reason code 38000 to new claims/adjustments when any potential duplicate claims are in an offline location. FISS issues a request to retrieve the offline claim(s) and the new claim/adjustment is suspended until the weekly retrieval is completed.

Currently, FISS includes claims/adjustments with a cancel date as potential duplicate claims. The inclusion of canceled claims can cause adjustments to suspend unnecessarily as well as expend system resources to retrieve the offline claim. This UCR will modify FISS to exclude canceled claims/adjustments when reason code 38000 is assigned.

B. Policy: No policy impact. This is a technical change to improve system efficiency.

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Responsibility								
		A/B		D	Shared-			•	Other	
		MAC		M	System					
			E			Maintainers				
		A	В	Н		F	M	V	C	
				Н	M	I	C	M	W	
				Н	A	S	S	S	F	
					C	S				
12706.1	FISS shall modify reason code 38000 to exclude canceled claims/adjustments. Reason code 38000 shall only assign if one or more offline claims/adjustments are present that do not have a valid date in the Cancel Date.					X				
12706.2	FISS shall ensure that previously canceled offline claims/adjustments are not retrieved for duplicate reason code 38000.					X				

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
			A/B		D	C
		1	MAC	\mathbf{C}	M	Е
					Е	D
		Α	В	Н		I
				Н	M	
				Н	A	
					C	
	None					

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

[&]quot;Should" denotes a recommendation.

X-Ref	Recommendations or other supporting information:
Requirement	
Number	

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

V. CONTACTS

Pre-Implementation Contact(s): Rita Hazlip, 410-786-5755 or Rita.Hazlip@cms.hhs.gov , Kay Curry, 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