

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12920	Date: October 24, 2024
	Change Request 13756

SUBJECT: Fiscal Intermediary Shared System (FISS) - User Enhancement Change Request (UECR) - Expand Provider Name Field on Provider Address Screen

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to expand the provider address screen on MAP1601 to match the size of the field in the Medicare Appeals System (MAS).

EFFECTIVE DATE: April 1, 2025

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

IMPLEMENTATION DATE: April 7, 2025

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/revise 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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IMPLEMENTATION DATE: April 7, 2025

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to expand the provider address screen on MAP1601 to match the size of the field in the Medicare Appeals System (MAS).

II. GENERAL INFORMATION

A. Background: The purpose of this Change Request (CR) is to expand the provider name field on the FISS provider address screen to match the field size in MAS.

B. Policy: There is no policy impact, this is a technical change to better align system logic with existing policy.

III. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
13756.1	FISS shall modify the provider remit name field on the Provider Address screen (MAP1601) to accommodate up to 100 characters.					X				
13756.2	FISS shall identify any dependencies that utilize the provider remit name from MAP1601.					X				
13756.2.1	FISS shall provide a list of any known dependencies for the provider remit name and where known a recommendation as to the need for modification of the dependent system.					X				

IV. PROVIDER EDUCATION

None

Impacted Contractors: None

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

VI. CONTACTS

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VII. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

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ATTACHMENTS: 0