CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12180	Date: August 3, 2023
	Change Request 13268

SUBJECT: Create Additional Location/Statuses in ViPS Medicare System (VMS) that are Excluded from Claims Processing Timeliness (CPT)

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to give the Durable Medical Equipment (DME) Medicare Administrative Contractors (MACs) additional location/statuses to suspend claims for CMS designated reasons without these claims counting against Claims Processing Timeliness (CPT).

EFFECTIVE DATE: January 1, 2024

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

IMPLEMENTATION DATE: January 2, 2024

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	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: 12180 Date: August 3, 2023 Change Request: 13268

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I. GENERAL INFORMATION

- **A.** Background: The purpose of this Change Request (CR) is to give the DME MACs an additional location/status that can be used for CMS-initiated suspensions that will exclude the claims in that location/status from Claims Processing Timeliness (CPT) calculations and reporting.
- **B. Policy:** This CR does not implement policy or regluation.

II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility								
		A/B MAC					Syst	red- tem aine		Other
		A	В	H H H	M A C	F I S	M C S	V M S	C W F	
13268.1	VMS shall provide MACs a way to designate that a location/status is excluded from Claims Processing Timeliness (CPT).							X		
13268.1.1	VMS shall exclude claims in these statuses from CPT calculations, and from the following reports: 158 - HCFA-1565 Carrier Workload Report Pages 2– 11 Part D Claims Processing Timeliness 10-101 WL4001 - Monthly Claims Pending Status Summary Report WL4002 - Monthly Claims Pending Status Report							X		
13268.1.2	VMS shall continue to accrue interest on claims in these statuses when claims age past 30 days.							X		
13268.2	VMS shall correct the following reports to remove development days from all development periods and not just the most recent development period:							X		

Number	Requirement	Responsibility									
		A/B		D	Shared-				Other		
		N	MAC		M	System					
					Е	Maintainers			rs		
		Α	В	Н		\mathbf{F}	M	V	C		
				Н	M	I	$C \mid 1$	M	W		
				Н	A	S	S	S	F		
					C	S					
	WL4001 - Monthly Claims Pending Status Summary										
	Report										
	WL4002 - Monthly Claims Pending Status Report										

III. PROVIDER EDUCATION TABLE

Number	Requirement	Re	spoi	ility		
			A/B MAC		D M E M A C	C E D I
	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

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