CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12362	Date: November 16, 2023
	Change Request 11566

SUBJECT: User Enhancement Change Request (UECR): ViPS Medicare System (VMS) - Fix Beneficiary Update and Display System (BUDS) Queries for Remark Code and Biller Number

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to fix two queries in BUDS that are not returning the correct data.

EFFECTIVE DATE: April 1, 2024

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

IMPLEMENTATION DATE: April 1, 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	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

SUBJECT: User Enhancement Change Request (UECR): ViPS Medicare System (VMS) - Fix Beneficiary Update and Display System (BUDS) Queries for Remark Code and Biller Number

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I. GENERAL INFORMATION

A. Background: In the VMS BUDS subsystem, users can use selection criteria fields (DATA-IDs) to search for records. Two of the DATA-IDs, HB017 and HB023, are not returning the correct data. Currently, HB017 (Remark Code) returns all records for the beneficiary, not just the ones with the requested remark code(s). HB023 (Biller Number) returns an error message when trying to query the beneficiaries containing non-numeric characters in the field. This DATA-ID should allow for selection using characters. By fixing the two queries, users will be able to search BUDS using the Remark Code and Biller Number.

B. Policy: There are no policy changes associated with this instruction.

II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility										
		MAC M		MAC M			D M E	1 System				Other
		A	В	H H H	M A C	F I	M C S	V	С			
11566.1	The contractor shall correct logic behind Data ID HB017 (Remark Code) so that it brings back data with just the requested remark code. Currently, it returns all records for the beneficiary, not just the ones with the requested remark code(s).							X				
11566.2	The contractor shall correct logic behind Data ID HB023 (Biller Number) so that queries can be done for non-numeric characters. Currently, it attempts to query the beneficiaries containing non-numeric characters and returns an error message saying the value(s) must be numeric.							X				

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
			A/B		D	C
		ľ	MA(\mathbb{C}	M	Е
					Е	D
		Α	В	Н		I
				Н	M	
				Н	Α	
					С	
	None					

IV. SUPPORTING INFORMATION

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

"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