CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12775	Date: August 8, 2024
	<b>Change Request 13657</b>

SUBJECT: User Enhancement Change Request (UECR): ViPS Medicare System (VMS) – Current Dating on User Acceptance Testing (UAT) Report Jobs

**I. SUMMARY OF CHANGES:** The purpose of this Change Request (CR) is to update the process for determining the reporting dates on specified reports in the test environment.

## **EFFECTIVE DATE: January 1, 2025**

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

**IMPLEMENTATION DATE: January 6, 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/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: 12775
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#### II. GENERAL INFORMATION

**A.** Background: The purpose of this Change Request (CR) is to update the process for determining the reporting dates on specified reports in the test environment. On July 31, 2019, the date parameters in the Durable Medical Equipment Medicare Administrative Contractors' (DME MACs') UAT environment changed from using future dated Dates of Service (DOS) and Dates of Receipt (DOR) on claims, to using dates that are currently in production. When this change occurred, the date-cards for the reports within the UAT environment remained future dated. As a result, reports were not capturing the correct data during quarterly release testing because the date-card was not within the period of the DOS and DOR claim dates.

In today's environment, to test changes to a specific report during UAT, the DME MAC must request that the VMS maintainer create an override to change the date-card for the report being tested. This CR will correct reporting dates for reports in the UAT regions to be in-sync with production. With this enhancement, the DME MACs will be able to test reports without creating additional tasks for the DME MACs, the VMS maintainer, and the Virtual Data Center (VDC). When testing with the current date-card, the DME MACs will be able to ensure report changes made within a release are capturing information correctly prior to implementation into production.

**B. Policy:** This CR does not update policy.

### III. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility																		
		A/B MAC		A/B			A/B			A/B			A/B			D M E	D Shared- M System			Other
		A	В	H H H	M A C	F I S S	M C S	V M S												
13657.1	The Contractor shall update the process for determining the reporting dates for the VMS Workload Reports, Monthly Claims Pending Status Reports, and the Monthly MSP Savings Reports in the UAT region.							X												
13657.2	The Contractor shall update the process for determining the reporting dates for the following Prior Authorization Reports in the UAT region:  PA2001 -Weekly Prior Authorization Detail Report (Submitted)  PA2002- Weekly Prior Authorization Detail Report (Finalized)  PA2003 -Weekly Prior Authorization Detail Report (Pending)  PA2004 - Weekly Prior Authorization Summary Report							X												

## IV. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
			A/B MA(	H H	D M E	C E D I
	None			Н	A C	

## V. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements:  $\ensuremath{\mathrm{N/A}}$ 

<sup>&</sup>quot;Should" denotes a recommendation.

X-Ref	Recommendations or other supporting information:
Requirement	
Number	

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**