

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12917	Date: October 24, 2024
	Change Request 13733

SUBJECT: User Enhancement Change Request (UECR): Update the Summary Report - Healthcare Integrated General Ledger Accounting System (HIGLAS) 824 Status Notification Error Report (H99RJSUM)

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to add an additional column to the H99RJSUM report, capturing the total number of rejected records.

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/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

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I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to add an additional column to the H99RJSUM report, capturing the total number of rejected records.

II. GENERAL INFORMATION

A. Background: The purpose of this CR is to add an additional column to the H99RJSUM report, capturing the total number of rejected records.

The Centers for Medicare & Medicaid Services (CMS) CR 13324, Multi-Carrier System (MCS) CR 71534 developed the H99RJSUM report to summarize errors received from HIGLAS on the 824 Status Notification (824S) interface file. The users are requesting with this change, an additional column be added to the report, capturing the total number of rejected records counts derived from the 824 Status Notification Error report (H99RJ824), specifically the data definitions RP7OUT and RP8OUT (835 and 811VMP interface files) however, the counts shall be applied to all interface files (RP1OUT - RP8OUT).

B. Policy: N/A

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	
13733.1	The contractor shall add a new column to the H99RJSUM report, titled as TOTAL REJECTED RECORDS. This shall display the rejected records counts derived from the H99RJ824 for all interface files, data definitions RP1OUT through RP8OUT.						X			
13733.1.1	The contractor shall populate the value of zero as the total rejected records count when a						X			

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
	rejection has not occurred.									
13733.2	The Medicare Administrative Contractors (MACs) A/B MAC Part B shall fully test this change.		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:

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