

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 3970	Date: February 2, 2018
	Change Request 10406

SUBJECT: Removal of Contractor Reporting Requirements for the Physician Scarcity Area (PSA), the Health Professional Shortage Area Surgical Incentive Payment Program (HSIP) and the Primary Care Payment Incentive Program (PCIP) Quarterly Reports

I. SUMMARY OF CHANGES: The PSA program ended on June 30, 2008, HSIP ended on December 31, 2016 and PCIP ended on December 31, 2015. We have removed the requirement for contractors to complete quarterly reports via the Contractor Reporting of Operational Workload Data (CROWD) in Publication 100-06, Chapter 6. We have also updated Publication 100-04, Chapter 12 Sections 90.4.8 to remove contractor reporting requirements.

EFFECTIVE DATE: July 1, 2018

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

IMPLEMENTATION DATE: July 2, 2018

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
R	12/90/90.4.8/Reporting

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:

**Business Requirements
Manual Instruction**

Attachment - Business Requirements

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I. GENERAL INFORMATION

A. Background: The Physician Scarcity Area (PSA) (CROWD Form 6) Quarterly Report Form, the Health Professional Shortage Area Surgical Incentive Payment Program (HSIP) (CROWD Form 9) Quarterly Report and the Primary Care Payment Incentive Program (PCIP) (CROWD Form 9) Quarterly Report programs have ended. Contractors are no longer required to submit quarterly reports for these programs and should not receive any PSA information from the Multi-Carrier System (MCS).

NOTE: Publication 100-04, Chapter 12, Sections 90.4.8 has been updated.

B. Policy: None.

II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility							
		A/B MAC		D M E M A C	Shared- System Maintainers				Other
		A	B		H H H	F I S	M C S	V M S	
10406 - 04.1	Beginning with the CROWD report due for July 1, 2018, contractors shall no longer report the PSA (CROWD Form 6), the HSIP and PCIP (CROWD Form 9) as programs as they have ended.	X	X						

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E M A C	C E D I
A	B	H H H				

Number	Requirement	Responsibility				
		A/B MAC			D M E M A C	C E D I
		A	B	H H H		
	None					

IV. 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

V. CONTACTS

Pre-Implementation Contact(s): Yvette Cousar, 410-786-2160 or yvette.cousar@cms.hhs.gov

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

VI. FUNDING

Section A: 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.

ATTACHMENTS: 0

90.4.8 - Reporting

(Rev.3970, Issued: 02-02-18, Effective: 07-01-18, Implementation: 7-02-18)

CROWD Reporting for the Physician Scarcity Area (PSA) (CROWD Form 6), HPSA Surgical Incentive Program (HSIP) (CROWD Form 9) and the Primary Care Payment Incentive Program (PCIP)(CROWD Form 9) is no longer required.