

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-08 Medicare Program Integrity	Centers for Medicare & Medicaid Services (CMS)
Transmittal 778	Date: March 16, 2018
	Change Request 10475

SUBJECT: Updates to Payment Suspension Notice

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to update the timeframe for claim examples, as referenced in chapter 8, section 8.3.2.2.2 of Pub. 100-08.

EFFECTIVE DATE: May 16, 2018

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

IMPLEMENTATION DATE: May 16, 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/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
R	8/8.3/8.3.2/8.3.2.2./8.3.2.2.2/Content of Payment Suspension Notice

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

Pub. 100-08	Transmittal: 778	Date: March 16, 2018	Change Request: 10475
-------------	------------------	----------------------	-----------------------

SUBJECT: Updates to Payment Suspension Notice

EFFECTIVE DATE: May 16, 2018

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

IMPLEMENTATION DATE: May 16, 2018

I. GENERAL INFORMATION

A. Background: The Centers for Medicare & Medicaid Services (CMS) is making a change to chapter 8, section 8.3.2.2.2 of Pub. 100-08 in terms of the timeframe associated claim examples. The current language indicates the example claims are to be current claims not more than 1 year old from the paid date. However, the updated language indicates the claim examples are to be the most current claims available unless otherwise directed by CMS.

B. Policy: This CR does not involve any legislative or regulatory policies.

II. 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	
10475.1	The contractor (Zone Program Integrity Contractor (ZPIC) and Unified Program Integrity Contractor (UPIC)) shall ensure the claim examples are the most current claims available unless otherwise directed by CMS. This CR does not impact the MACs.	X	X	X	X					UPICs, ZPICs

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		A	B	HHH		
	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): Jesse Havens, 410-786-6566 or jesse.havens@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

8.3.2.2.2 – Content of Payment Suspension Notice

(Rev.778; Issued: 03-16-18; Effective: 05-16-18; Implementation: 05-16-18)

The ZPIC shall prepare a “draft notice” (in accordance with section 8.3.2.2 of this chapter) and send it, along with the recommendation and any other supportive information, to CPI for approval. The draft notice shall include, at a minimum:

- The date the payment suspension action will be or has been imposed;
- How long the suspension is expected to be in effect (**NOTE:** All payment suspensions shall be established in 180 calendar day increments.);
- The reason for suspending payment. (For fraud suspensions, the ZPIC shall include the rationale to justify the action being taken.);
- In most notices, the ZPIC shall identify and describe at least five example claims that are associated with the reason for the payment suspension, if available. *The claim examples are to be the most current claims available unless otherwise directed by CMS.* The notice shall only reference the example claim control number, the amount of payment, and the date of service;
- The extent of the payment suspension (i.e., 100 percent payment suspension or partial payment suspension, where less than 100 percent of payments are withheld);
- The payment suspension action is not appealable;
- CMS/CPI has approved implementation of the payment suspension;
- Documentation that the provider has been given the opportunity to submit a rebuttal statement within 15 calendar days of notification; and
- An address for the provider to mail the rebuttal.