CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 2389	Date: November 8, 2019
	Change Request 11306

SUBJECT: User CR: ViPS Medicare System (VMS) Increase Number of SuperOp Occurrences within a Value Set

**I. SUMMARY OF CHANGES:** Currently, the VMS SuperOp Value Set Definition screen allows for 255 lines or 19 pages of variables. This change request will increase the number of SuperOp occurrences within one Value Set record to at least 900.

## **EFFECTIVE DATE: April 1, 2020**

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

**IMPLEMENTATION DATE: April 6, 2020** 

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: 2389 Date: November 8, 2019 Change Request: 11306

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#### I. GENERAL INFORMATION

**A. Background:** SuperOp allows users to define value sets—groups of data values that users can reference with a single name. Currently, the SuperOp Value Set Definition screen in VMS houses 255 lines or 19 pages of variables. This change will increase the size of the lines to at least 900 lines or 63 pages of variables to be in comparison to the Expert Claims Processing System (ECPS) for the Fiscal Intermediary Standard (or Shared) System (FISS). When the Durable Medical Equipment Medicare Administrative Contractors (DME MACs) utilize value sets for items such as the listing of the International Classification of Diseases, Tenth Revision (ICD-10) codes for diagnosis editing, or for Claim Control Number (CCNs) for mass adjustments, many value sets are required. If the lines per value set were increased, the DME MACs could use less value sets within the SuperOp event making for cleaner code events.

**B.** Policy: N/A

# II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility												
		A/B MAC							D M		Sha Sys			Other
			E		Е	Maintainers								
		A	В	Н		F	M	V	С					
				Н		_	C	M						
				Н	A C	S S	S	S	F					
11306.1	The contractor shall increase the number of SuperOp occurrences within one Value Set record to at least 900.							X						
11306.2	The contractor shall update SuperOp batch processing to accommodate the changes defined in business requirement 11306.1							X						
11306.3	The contractor shall modify SuperOp online screens to accommodate the changes defined in business requirement 11306.1.							X						
11306.4	The contractor shall modify SuperOp reports to accommodate the changes defined in business requirement 11306.1.							X						

Number	Requirement	Responsibility								
		A/B MAC		D M					Other	
					Е	Maintainers				
		A	В	H H H	M A C	F I S S	M C S	V M S	_	
11306.5	The contractor shall modify SuperOp XCOPY processing to accommodate the changes defined in business requirement 11306.1.							X		
11306.6	The contractor shall modify SuperOp XSEND processing to accommodate the changes defined in business requirement 11306.1.							X		
11306.7	Contractors shall test the SuperOp XCOPY and XSEND processing for Events and Value Sets.				X					

# III. PROVIDER EDUCATION TABLE

Number	Requirement	Re	spoi	nsib	ility	
			A/B		D	С
		1	MAC	2	M	Ε
					E	D
		Α	В	Н		I
				Н	M	
				Н	A	
					C	
	None					

# IV. SUPPORTING INFORMATION

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

# V. CONTACTS

 $\label{lem:contact} \textbf{Pre-Implementation Contact(s):} \ Kay \ Curry, \ 410-786-1801 \ or \ Kay. Curry @cms.hhs.gov \ , \ Stacey \ Ndelle, \ 410-786-8208 \ or \ Stacey. Ndelle @cms.hhs.gov \ )$ 

**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**