

# CMS Manual System

## Pub 100-20 One-Time Notification Transmittal Sheet

Transmittal 176

Department of Health &  
Human Services

Centers for Medicare &  
Medicaid Services

Date: AUGUST 26, 2005

Change Request 4043

**SUBJECT: Change of the CareFirst Part A Plan to Highmark in the State of Maryland and Washington, DC**

**I. SUMMARY OF CHANGES:** CareFirst is not renewing its Medicare contract and will no longer serve as the Part A Plan under contract with the Blue Cross Blue Shield Association for the State of Maryland and for Washington, DC. Highmark will become the Part A plan under contract with BCBSA for the State of Maryland and Washington, DC effective October 1, 2005. There will be a separate Part A plan number for reporting the Maryland/Washington, DC workload. CWF software changes and changes to FISS, CAFM, CAFMII, CERT, CMIS, CROWD, CSAMS, DCS, ECRS, HIGLAS, NGD, PIMR, PORS, PULSE, PECOS, and REMAS are needed to reflect the new contractor number. The number is: Highmark, Part A - 00366.

**NEW/REVISED MATERIAL :**

**EFFECTIVE DATE : October 01, 2005**

**IMPLEMENTATION DATE : October 03, 2005**

*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	

**III. FUNDING:**

No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2005 operating budgets.

**IV. ATTACHMENTS:**

## One-Time Notification

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

# Attachment – One-Time Notification

Pub. 100-20	Transmittal: 176	Date: August 26, 2005	Change Request 4043
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**SUBJECT: Change of the CareFirst Medicare Part A Plan to Highmark Medicare Services in the State of Maryland and Washington, DC**

## I. GENERAL INFORMATION

**A. Background:** CareFirst is not renewing its Medicare contract and will no longer serve as the Part A plan under contract with the Blue Cross Blue Shield Association for the State of Maryland and Washington, DC. Highmark will become the Part A plan under contract with BCBSA for the State of Maryland and Washington, DC effective October 1, 2005. There will be a separate Part A plan number for reporting the Maryland/Washington, DC workload. CWF software changes and changes to **FISS, CAFM, CAFMII, CERT, CMIS, CROWD, CSAMS, DCS, ECRS, HIGLAS, NGD, PIMR, PORS, PULSE, PECOS,** and **REMAS** are needed to reflect the new contractor number. The Part A plan number for CareFirst for the Maryland/Washington, DC workload is 00190.

The new Part A plan number for Highmark for the Maryland Washington, DC workload is: Highmark, Part A – 00366.

The Business Segment Identifiers for the Maryland/Washington, DC workload will remain Maryland – MDA and Washington, DC – DCA.

The address associated with the new number will remain:

1946 Greenspring Drive Timonium, MD 21093

**B. Policy: N/A**

## II. BUSINESS REQUIREMENTS

*“Shall” denotes a mandatory requirement*

*“Should” denotes an optional requirement*

Requirement Number	Requirements	Responsibility (“X” indicates the columns that apply)								
		F I	R H I	C a r r i e r	D M E R C	Shared System Maintainers				Other
						F I S S	M C S	V M S	C W F	





### III. PROVIDER EDUCATION

Requirement Number	Requirements	Responsibility (“X” indicates the columns that apply)								
		F I	R H I	C a r r i e r	D M E R C	Shared System Maintainers				Other
F I S S	M C S					V M S	C W F			
4043.18	Both CareFirst and Highmark will inform Maryland and Washington, DC providers about the change in Medicare contractor by posting transition information on their Web sites, contacting professional societies, mailing notifications, and conducting provider training workshops throughout Maryland and Washington, DC. The change in intermediary number will be communicated to all Maryland and Washington, DC providers via the aforementioned.									CareFirst & Highmark

### IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

#### A. Other Instructions: NA

X-Ref Requirement #	Instructions

#### B. Design Considerations: NA

X-Ref Requirement #	Recommendation for Medicare System Requirements

#### C. Interfaces: NA

**D. Contractor Financial Reporting /Workload Impact:** The Maryland and Washington, DC Part A workload shall be reported using the new intermediary number effective October 1, 2005.

#### E. Dependencies: NA

**F. Testing Considerations:** NA

**V. SCHEDULE, CONTACTS, AND FUNDING**

<p><b>Effective Date*:</b> October 1, 2005</p> <p><b>Implementation Date:</b> October 3, 2005</p> <p><b>Pre-Implementation Contact(s):</b> Tara Waters (410) 786-0756</p> <p><b>Post-Implementation Contact(s):</b> Tara Waters (410) 786-0756</p>	<p>No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2005 operating budgets.</p>
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