

# CMS Manual System

## Pub 100-20 One-Time Notification

Transmittal 220

Department of Health &  
Human Services (DHHS)

Centers for Medicare &  
Medicaid Services (CMS)

Date: APRIL 21, 2006

Change Request 5014

**SUBJECT: Addition of Data Elements to Common Working File (CWF) Database  
Extract into Next Generation Desktop (NGD) Datamart**

**I. SUMMARY OF CHANGES:** CWF to add additional data elements to the current daily Eligibility/Utilization Extract file into the Next Generation Desktop (NGD) Datamart. This CR also requires CWF to create a new copybook for the NGD extract and remove it from the NGD/NHIC/WPS record copybook.

### NEW/REVISED MATERIAL

**EFFECTIVE DATE: October 1, 2006**

**IMPLEMENTATION DATE: October 2, 2006**

*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 |
|-------|--|
|-------|--|

### III. FUNDING:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2006 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: 220 | Date: April 21, 2006 | Change Request 5014 |
|-------------|------------------|----------------------|---------------------|

**SUBJECT: Addition of Data Elements to Common Working File (CWF) Extract into the Next Generation Desktop (NGD) Datamart**

## **I. GENERAL INFORMATION**

### **A. Background:**

The Next Generation Desktop (NGD) datamart currently receives beneficiary demographic extracts from the 9 CWF Host Regions. This daily Eligibility/Utilization Extract file enables the 1-800-Medicare and Fee-for-service CSRs to quickly respond to beneficiary inquiries without directly accessing the CWF shared system. The datamart is more efficient than directly accessing the CWF shared systems; it results in a shorter talk time and a larger return on investment. Additionally, using the datamart will lessen the number of CSRs/users stressing the CWF system. Recently, CWF claims information has also been made available via the NGD Datamart and in Spring 2006 the claims data will also be available online through My.Medicare.gov - The Medicare Beneficiary Portal.

The purpose of this CR is to add additional data elements to the daily Eligibility/Utilization Extract including:

- 1) The Other Insurer Delete Indicator field,
- 2) The Action Type field which appears in Health Insurance Master Record (HIMR) on the BOIA screen, and
- 3) The COBA ID Number.

The CWF will feed this data to the beneficiary data extract for the Next Generation Desktop.

Additionally with the implementation of this CR, CWF shall calculate the coverage period remaining sessions and next eligible date, if no sessions remain, to determine when a beneficiary is eligible for the next smoking and tobacco-use cessation counseling session. The CWF shall pass the data for the current smoking and tobacco-use cessation counseling session period to the NGD Datamart.

Furthermore, with the implementation of this CR, CWF shall pass the remaining limitation dollar amount for the combined physical therapy and speech-language pathology services as well as a separate remaining limitation dollar amount for occupational therapy services to the NGD Datamart. In addition, CWF shall calculate and pass the remaining blood deductible to the NGD datamart as well as the United Mine Worker coverage information to include effective and termination dates.

Per the Health Insurance Portability and Accountability Act of 1996 (HIPAA), covered entities must use the National Provider Identifier (NPI) to identify covered healthcare providers in standard electronic transactions. Where a legacy provider identifier is passed from CWF to NGD, copybook changes shall be made to also pass the NPI.

To avoid unnecessary and multiple changes to the extract for the NHIC/WPS provider internet pilots, CWF shall create a new copybook only for the NGD Datamart extract and remove it from the NGD/NHIC/WPS record copybook.

The addition of these new data elements to the daily NGD Datamart extract will help provide sufficient and correct information to both our Medicare beneficiaries, as well as the Medicare beneficiary Customer Service Representatives responding to beneficiary claims inquiries.

**B. Policy: N/A**

## II. BUSINESS REQUIREMENTS

*"Shall" denotes a mandatory requirement*

*"Should" denotes an optional requirement*

[illegible]

| Requirement Number | Requirements   | Responsibility (“X” indicates the columns that apply) |             |                                 |                       |                           |             |             |             |       |
|--------------------|--|---|-------------|---------------------------------|-----------------------|---------------------------|-------------|-------------|-------------|-------|
|                    |  | F<br>I  | R<br>H<br>I | C<br>a<br>r<br>r<br>i<br>e<br>r | D<br>M<br>E<br>R<br>C | Shared System Maintainers |             |             |             | Other |
|                    |  |   |             |                                 |                       | F<br>I<br>S<br>S          | M<br>C<br>S | V<br>M<br>S | C<br>W<br>F |       |
|                    | remaining sessions would equal 6. If the 12-month period has elapsed, the coverage period starts over and the sessions begin with 8.   |   |             |                                 |                       |                           |             |             |             |       |
| 5014.3.1           | CWF shall calculate the smoking and tobacco-use cessation counseling session next eligible date when no sessions remain for the current period.  |   |             |                                 |                       |                           |             |             | X           |       |
| 5014.4             | CWF shall calculate the remaining blood deductible.  |   |             |                                 |                       |                           |             |             | X           |       |
| 5014.5             | CWF shall pass the smoking and tobacco-use cessation counseling visits remaining session/next eligible date and the blood deductible calculations to the datamart extract for the NGD.   |   |             |                                 |                       |                           |             |             | X           |       |
| 5014.6             | CWF calculations, to parallel claims processing, shall include all applicable factors including: <ul style="list-style-type: none"><li>• Beneficiary entitlement status</li><li>• Beneficiary claims history</li><li>• Utilization rules</li></ul> |   |             |                                 |                       |                           |             |             | X           |       |
| 5014.6.1           | CWF shall base the calculations on beneficiary data at the time the beneficiary data is extracted.   |   |             |                                 |                       |                           |             |             | X           |       |
| 5014.6.2           | CWF shall send an updated record on the next beneficiary extract when any changes occur to the beneficiary master data or claims data that would result in a change to calculations.   |   |             |                                 |                       |                           |             |             | X           |       |
| 5014.7             | CWF shall pass the combined remaining limitation dollar amount for physical therapy and speech-language pathology services to the NGD Datamart.  |   |             |                                 |                       |                           |             |             | X           |       |

| Requirement Number | Requirements   | Responsibility (“X” indicates the columns that apply) |             |                                 |                       |                           |             |             |             |       |
|--------------------|--|---|-------------|---------------------------------|-----------------------|---------------------------|-------------|-------------|-------------|-------|
|                    |  | F<br>I  | R<br>H<br>I | C<br>a<br>r<br>r<br>i<br>e<br>r | D<br>M<br>E<br>R<br>C | Shared System Maintainers |             |             |             | Other |
|                    |  |   |             |                                 |                       | F<br>I<br>S<br>S          | M<br>C<br>S | V<br>M<br>S | C<br>W<br>F |       |
| 5014.7.1           | CWF shall pass the remaining limitation dollar amount for occupational therapy services to the NGD Datamart.   |   |             |                                 |                       |                           |             |             | X           |       |
| 5014.7.2           | CWF shall send the NGD Datamart an updated record on the next beneficiary extract when any changes occur to the beneficiary master data or claims data that would result in a change to the remaining limitation dollar amounts. |   |             |                                 |                       |                           |             |             | X           |       |
| 5014.8             | When Medicare may not be primary because of beneficiary United Mine Worker coverage, CWF shall send the NGD Datamart this coverage information including the effective and termination dates of coverage.                        |   |             |                                 |                       |                           |             |             | X           |       |
| 5014.9             | Where a legacy provider identifier is passed from CWF to NGD Datamart, CWF shall make copybook changes to also pass the National Provider Identifier (NPI).  |   |             |                                 |                       |                           |             |             | X           |       |
| 5014.10            | CWF shall create a refresh for the entire beneficiary population for the NGD Datamart data extract.  |   |             |                                 |                       |                           |             |             | X           |       |

### III. PROVIDER EDUCATION

| Requirement Number | Requirements | Responsibility (“X” indicates the columns that apply) |             |                                 |                       |                           |             |             |             |       |
|--------------------|--------------|---|-------------|---------------------------------|-----------------------|---------------------------|-------------|-------------|-------------|-------|
|                    |              | F<br>I  | R<br>H<br>I | C<br>a<br>r<br>r<br>i<br>e<br>r | D<br>M<br>E<br>R<br>C | Shared System Maintainers |             |             |             | Other |
|                    |              |   |             |                                 |                       | F<br>I<br>S<br>S          | M<br>C<br>S | V<br>M<br>S | C<br>W<br>F |       |
|                    | None.        |   |             |                                 |                       |                           |             |             |             |       |

### IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

#### A. Other Instructions:

| X-Ref Requirement # | Instructions   |
|---------------------|--|
| 5014.3              | CR 3929, issued July 15, 2005, business requirement 3929.1 explains and provides an example of how to calculate the coverage period. |

#### B. Design Considerations: N/A

| X-Ref Requirement # | Recommendation for Medicare System Requirements |
|---------------------|---|
|                     |   |

#### C. Interfaces: N/A

#### D. Contractor Financial Reporting /Workload Impact: N/A

#### E. Dependencies: N/A

#### F. Testing Considerations: N/A

## V. SCHEDULE, CONTACTS, AND FUNDING

|  |   |
|--|---|
| <p><b>Effective Date*:</b> October 1, 2006</p> <p><b>Implementation Date:</b> October 2, 2006</p> <p><b>Pre-Implementation Contact(s):</b> Susan Tudor<br/>CBC/BISG/DCCO (410-786-0296)<br/><a href="mailto:susan.tudor@cms.hhs.gov">susan.tudor@cms.hhs.gov</a> &amp; Carol Davis (back-up)<br/>CBC/BISG/DCCO (410-786-4391)</p> <p><b>Post-Implementation Contact(s):</b> Susan Tudor<br/>CBC/BISG/DCCO (410-786-0296)<br/><a href="mailto:susan.tudor@cms.hhs.gov">susan.tudor@cms.hhs.gov</a> &amp; Carol Davis (back-up)<br/>CBC/BISG/DCCO (410-786-4391)</p> | <p>No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2006 operating budgets.</p> |
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