CMS Manual System	Department of Health & Human Services
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services
Transmittal 630	Date: January 29, 2010
	Change Request 6737

SUBJECT: FISS Integrated Outpatient Code Editor (IOCE) Control Block Changes Related to ICD-10

I. SUMMARY OF CHANGES: The purpose of this Change Request is to direct shared systems to make the necessary base system changes related to the IOCE to accommodate the changes in data content for the next version of HIPAA. The OPPS PRICER will not be affected.

New / Revised Material
Effective Date: July 1, 2010
Implementation Date: July 6, 2010

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:
SECTION A: For Fiscal Intermediaries and Carriers: N/A

SECTION B: 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

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

Attachment – One-Time Notification

Pub. 100-20	Transmittal: 630	Date: January 29, 2010	Change Request: 6737

SUBJECT: FISS Integrated Outpatient Code Editor (IOCE) Control Block Changes Related to ICD-10

Effective Date: July 1, 2010

Implementation Date: July 6, 2010

I.   GENERAL INFORMATION

A.   Background: In preparation for the next implementation of HIPAA, the purpose of this CR is to notify FISS that the IOCE control block (that will be contained in the July 2010 IOCE specifications in Table 1) will be modified as follows:

OCE Control block

Pointer Name		UB-04 Form Locator	Current Number	NEW Number	Current Size (bytes)	NEW Size (bytes)
Dxptr	ICD-9-CM diagnosis codes	70 a-c (Pt's rvdx) 67 (pdx) 67A-Q (sdx)	Up to 16 [1 rvdx 1 pdx & 14 sdx]	**Up to 28 [3 rvdx 1 pdx & 24 sdx]**	6	**8 [7 + 1 for POA flag]**
Ndxptr	Count of the number of diagnoses pointed to by *Dxptr*		1		4	
Sgptr	Line item entries	42, 44-47	Up to 450		Table 2	**No changes**
Nsgptr	Count of the number of Line item entries pointed to by Sgptr		1		4	
Flagptr	Line item action flag Flag set by FI/MAC and passed by OCE to Pricer		Up to 450		1	
Ageptr	Numeric age in years		1		3	
Sexptr	Numeric sex code	11	1		1	
Dateptr	From and Through dates (yyyymmdd)	6	2		8	
CCptr	Condition codes	18-28	Up to 7	**Up to 11**	2	
NCCptr	Count of the number of condition codes entered		1		4	
Billptr	Type of bill	4 (Pos 2-4)	1		3	
NPIProvptr	National provider identifier (NPI)	56	1		13	
OSCARProvptr	OSCAR Medicare provider number	57	1		6	
PstatPtr	Patient status	17	1		2	
OppsPtr	Opps/Non-OPPS flag		1		1	
OccPtr	Occurrence codes	31-34	Up to 10		2	
NOccptr	Count of number of occurrence codes		1		4	

Pointer Name		UB-04 Form Locator	Current Number	NEW Number	Current Size (bytes)	NEW Size (bytes)
CodeTypePtr	Code Type indicator (0=ICD10 Dx; 9=ICD9 Dx; blank or any other value uses from date to determine Dx code type)			1		1
Dxeditptr	Diagnosis edit return buffer		Up to 16		Table 3	
Proceditptr	Procedure edit return buffer		Up to 450		Table 3	
Mdeditptr	Modifier edit return buffer		Up to 450		Table 3	
Dteditptr	Date edit return buffer		Up to 450		Table 3	
Rceditptr	Revenue code edit return buffer		Up to 450		Table 3	
APCptr	APC/ASC return buffer		Up to 450		Table 7	
Claimptr	Claim return buffer		1		Table 5	
Wkptr	Work area pointer		1		768K	
Wklenptr	Actual length of the work area pointed to by Wkptr		1		4	

Table 1: OCE Control block

NOTES: There are no related changes to any of the information in table 2 line item input of the IOCE specifications.

B.   Policy: The Administrative Simplification provisions of HIPAA require the Secretary of HHS to adopt standard electronic transactions and code sets for administrative health care transactions. The Secretary may also modify these standards periodically. The purpose of this change request is to direct shared systems to make the necessary base system changes related to the IOCE to accommodate the changes in data content for the next version of HIPAA. The OPPS PRICER will not be affected.

II.   BUSINESS REQUIREMENTS TABLE

Use"Shall" to denote a mandatory requirement

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A / B MAC	DME MAC	FI	CARRIER	RHHI	FISS	MCS	VMS	CWF	OTHER
6737.1	FISS shall expand the IOCE control block to accommodate 5010 changes related to ICD-10.						X				IOCE

III.   PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A / B MAC	D M E MAC	F I	C A R R I E R	R H H I	Shared-System Maintainers				OTHER
							F I S S	M C S	V M S	C W F	
	None.										

IV.   SUPPORTING INFORMATION

Section A: For any recommendations and supporting information associated with listed requirements,:
Use "Should" to denote a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
6059.1	Shared Systems shall perform claim expansions to their base system file structures, as identified in the transaction decision matrices, to support new elements and/or increased elements sizes which are part of the 5010 implementation guides.
6059.2	Shared Systems shall expand their base system file structures for any known or proposed projects/initiatives including, but not limited to, ICD-10, MREP, etc.

Section B: For all other recommendations and supporting information, use this space:

V. CONTACTS

Pre-Implementation Contact(s): Maria Durham, maria.durham@cms.hhs.gov

Post-Implementation Contact(s): Maria Durham, maria.durham@cms.hhs.gov

VI. FUNDING

Section A: For *Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs),* **and/or** *Carriers***: N/A**

Section B: *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.