

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-01 Medicare General Information, Eligibility, and Entitlement	Centers for Medicare & Medicaid Services (CMS)
Transmitta 67	Date: February 4, 2011
	Change Request 7304

SUBJECT: April 2011 Update to the CMS Standard File for Reason Codes from the Fiscal Intermediary Shared System (FISS)

I. SUMMARY OF CHANGES: This instruction provides the updated CMS standard file for reason codes. This Recurring Update Notification applies to Chapter 7, Section 60.1.

EFFECTIVE DATE: *April 1, 2011

IMPLEMENTATION DATE: April 4, 2011

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/revise 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:

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

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

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:
Recurring Update Notification

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

Attachment – Recurring Update Notification

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SUBJECT: April 2011 Update to the CMS Standard File for Reason Codes for the Fiscal Intermediary Shared System (FISS)

Effective Date: April 1, 2011

Implementation Date: April 4, 2011

I. GENERAL INFORMATION

A. Background: The Fiscal Intermediary (FI)/Medicare Administrative Contractor (MAC) Edits Evaluation Workgroup is tasked with identifying the inventory of contractor inactivated edits, documenting the reasons why the edits are turned off, and making a decision as to whether they should remain inactive or not. The FISS maintainer is tasked with developing audit reports to track maintainer programmed active/inactive edits/reason codes.

Change Request (CR) 6529, Transmittal 59, dated October 30, 2009, automated the process of loading the CMS Standard for each reason code reviewed by the FI/MAC Evaluation Workgroup within the FISS.

Each quarter, as needed, CMS issues an updated CMS Standard file for Reason Codes that indicates the appropriate status for each code.

B. Policy: This instruction provides the updated CMS standard file for reason codes.

II. BUSINESS REQUIREMENTS TABLE

Use "Shall" to denote a mandatory requirement

Number	Requirement	Responsibility (place an "X" in each applicable column)										
		A / B M A C	D M M A C	F I M A C	C A R E R	R H I	Shared-System Maintainers				OTH ER	
						F I S S	M C S	V M S	C W F			
7304.1	The FISS Maintainer shall submit reason code updates associated with each Quarterly & User Release 6 weeks prior to implementation of that release to the CMS/Office of Information Services/Business Management Application Group/Division of System Operations/FISS Maintenance Lead.						X					
7304.2	The FISS Maintainer shall load the updated CMS-supplied CMS Standard file for Reason Codes.						X					
7304.3	Contractors shall use the most recent version of the CMS Standard File for Reason Codes to determine the correct status each reason code therein.	X		X		X	X					

Number	Requirement	Responsibility (place an "X" in each applicable column)										
		A / B	D M E	F I	C A R R I E R	R H I	Shared-System Maintainers				OTH ER	
		M A C	M A C				F I S S	M C S	V M S	C W F		
7304.4	Contractors shall download and incorporate the CMS Reason Code Standard File into their testing regime for the upcoming model release.	X		X		X	X					HP, CDS

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)										
		A / B	D M E	F I	C A R R I E R	R H I	Shared-System Maintainers				OTH ER	
		M A C	M A C				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 the box below:

Use "Should" to denote a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
6529	The CMS Standard File for Reason Codes for the Fiscal Intermediary Shared System

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

V. CONTACTS

Pre-Implementation Contact(s): Richard Kociszewski; Richard.kociszewski@cms.hhs.gov

Post-Implementation Contact(s):

Contact your Contracting Officer's Technical Representative (COTR) or Contractor Manager, as applicable.

Richard Kociszewski; Richard.kociszewski@cms.hhs.gov

VI. FUNDING

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

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Section B: *For Medicare Administrative Contractors (MACs):*

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