CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-01 Medicare General Information, Eligibility, and Entitlement	Centers for Medicare & Medicaid Services (CMS)
Transmittal 88	<b>Date: August 25, 2014</b>
	<b>Change Request 8598</b>

Transmittal 86, dated May 16, 2014, is being rescinded and replaced by Transmittal 88, dated August 25, 2014 to restore Item 13 in the TDL Compliance Report (TCR) Template and to revise the Implementation Dates to extend the deadline for Quarter 3 in 2014. All other information remains the same.

SUBJECT: Rescinds/Replaces CR 7468 - Updated Instructions for the Change Request Implementation Report (CRIR) and Technical Direction Letter (TDL) Compliance Report (TCR)

**I. SUMMARY OF CHANGES:** This instruction revises the instructions in Change Request (CR) 7468, Transmittal 75, to provide clarification on how to report compliance with CRs and Technical Direction Letters (TDLs) in the quarterly Change Request Implementation Report (CRIR) and TDL Compliance Report (TCR). It also updates the CRIR and TCR templates. This CR rescinds and replaces CR 7468.

#### EFFECTIVE DATE: August 28, 2014 - Begin with Quarter 3 in 2014.

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

IMPLEMENTATION DATE: September 11, 2014 - Begin with Quarter 3 in 2014

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
R	7/50/Contractor Implementation of Change Requests and Compliance with Technical Direction Letters
R	7/50/50.1/CR Implementation Report (CRIR) Template
R	7/50/50.2/TDL Compliance Report (TCR) Template
R	7/50/50.3/Sample Cover Letter/Attestation Statement

#### 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 obliged 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:

**Business Requirements Manual Instruction** 

# **Attachment - Business Requirements**

Pub. 100-01 Transmittal: 88 Date: August 25, 2014 Change Request: 8598

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SUBJECT: Rescinds/Replaces CR 7468 - Updated Instructions for the Change Request Implementation Report (CRIR) and Technical Direction Letter (TDL) Compliance Report (TCR)

EFFECTIVE DATE: August 28, 2014 - Begin with Quarter 3 in 2014.

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

IMPLEMENTATION DATE: September 11, 2014 - Begin with Quarter 3 in 2014

#### I. GENERAL INFORMATION

- **A. Background:** This instruction revises the instructions previously issued under Change Request (CR) 7468 to clarify how contractors shall report compliance with CRs and Technical Direction Letters (TDLs) in the quarterly Change Request Implementation Report (CRIR) and the TDL Compliance Report (TCR). This instruction also updates the CRIR and TCR report templates. This CR rescinds and replaces CR7468.
- **B. Policy:** The following revisions have been made to the instructions included in Publication 100-01 Medicare General Information, Eligibility, and Entitlement, Chapter 7 Section 50:
  - Location of the Sample Cover Letter / Attestation Statement contractors may use the Attestation Statement included on the first tab of the CRIR and TCR templates, or continue to use the Sample in Section 50.3.
  - The TDL with instructions to download the updated templates will be sent within 2 weeks of the end of the fiscal quarter
  - Location of the CRIR report template and TDL report template these documents are now available for download under the Help link in ECHIMP
  - Clarification has been provided to assist in determining the appropriate response for each item in the CRIR and TCR reports.
  - References to Electronic Change Information Management Portal (eChimp) have been replaced throughout with Enterprise Electronic Change Information Management Portal (ECHIMP).
  - References to Fiscal Intermediaries and Carriers have been removed.
  - References to Contractors have been replaced with MACs, when appropriate
  - Section 50 / Implementation Date / II. Supporting Information IOM has been updated to clarify how MACs should handle re-issued finals which revise MAC requirements but a revised implementation date is not specified

The following revisions have been made to the CRIR report template:

- CRs Added by Contractor section has been removed. Contractors shall add additional items to the report by adding a row and indicate an added row in red font.
- Item 12 (Reason for Delay) has been updated and expanded to be more specific.
- CRIR Totals are all calculated now by Excel formula. Manual calculation is no longer required.
- Item numbers have been renumbered and retitled for clarity.
- Attestation Statement added to Tab 1

The following revisions have been made to the TCR report template:

- TDLs Added by Contractor section has been removed. Contractors shall add additional items to the report by adding a row and indicate an added row in red font.
- Item 12 (Reason for Delay) has been updated and expanded to be more specific.
- TCR Totals are now all calculated by excel formula. Manual calculation is no longer required.
- Item numbers have been renumbered and retitled for clarity.
- Attestation Statement added to Tab 1

## II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility								
			MAC		AC M			red- tem aine		Other
		A	В	H H H	M A	F	M C S		C	
				11	C	S	ט	ט	1	
8598.1	Contractors shall complete and submit the following quarterly deliverables to the CMS CO mailbox at CR_IMPL_REPORTS@cms.hhs.gov and upload to the CMS ART System:  One CR Implementation Report per MAC jurisdiction  One TDL Compliance Report per MAC jurisdiction  Cover Letter/Attestation Statement (Located on tab 1 of CRIR and TCR Report Templates or the Sample in Section 50.3)  If necessary, a separate explanation document	X	X	X	X					
8598.2	Contractors shall login to the Enterprise Electronic Change Information Management Portal (ECHIMP),	X	X	X	X					

Number	Requirement	Re	Responsibility								
2 (022200 02		A/B MAC								Other	
		A	В	H H H		F I S S	M C S	V M S	_		
	click on the Help tab, and download the CRIR Template (file name: CRIR Template - Quarter [x]) and TCR Template (file name: TCR Template - Quarter [x]) quarterly. Contractors will be notified via a Technical Direction Letter (TDL) that the updated templates are available for download on ECHIMP two weeks after the end of each quarterly reporting period.  Note: new templates for completing the Quarter 3 reporting will be available on 07/11/2014										
8598.3	Contractors shall refer to Publication 100-01 Medicare General Information, Eligibility, and Entitlement, Chapter 7, Section 50 for instructions on completing the CRIR and TCR Reports.	X	X	X	X						

## III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibilit		ility		
			A/B		D	С
		MAC			M	Е
				Е	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

X-Ref	Recommendations or other supporting information:
Requirement	
Number	

# Section B: All other recommendations and supporting information: N/A

## V. CONTACTS

**Pre-Implementation Contact(s):** Christina Kasdan, 410-786-2808 or Christina.Kasdan@cms.hhs.gov, Tracey Smith, 410-786-0462 or Tracey.Smith@cms.hhs.gov

<sup>&</sup>quot;Should" denotes a recommendation.

st-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).	

#### VI. FUNDING

#### **Section A: 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.

**ATTACHMENTS: 2** 

# **50** – Contractor Implementation of Change Requests and Compliance with Technical Direction Letters

(*Rev.88*, *Issued: 08-25-14*, Effective: 08-28-14- Begin with Quarter 3 in 2014.Implementation: 08-28-14- Begin with Quarter 3 in 2014)

#### **POLICY**

Contractors shall implement all issued Change Requests (CRs) and comply with all issued Technical Direction Letters (TDLs). Medicare Administrative Contractors (MACs) shall prepare and transmit the quarterly Contractor Implementation of Change Request (CRIR) and Technical Direction Letter Compliance Reports (TCR) reports as directed below.

The CRIR shall contain all CRs to be implemented within that fiscal quarter. If CMS omitted a CR that should have been included in the report, the contractor shall add the CR to the bottom of the report in red font. MACs are not required to report on or add Shared System Only CRs (i.e., no MAC Responsibility checked).

The *TCR* shall contain all TDLs issued that fiscal quarter, with the exception of contractor-specific TDLs. TDLs issued to specific contractor(s) shall be added by that contractor at the bottom of the report in red font. If CMS omitted a TDL that should have been included in the report, the contractor shall add the TDL to the bottom of the report in red font.

A CMS Central Office (CO) representative will notify the MACs via a TDL (within 2 weeks of the end of each fiscal quarter) that the CRIR and TCR reports are available to download on Electronic Change Information Management Portal (ECHIMP). MACs shall enter all applicable information into the reports. MACs shall upload the completed reports into the CMS ART system. MACs shall also then send the completed reports to the CMS CO mailbox at CR\_IMPL\_REPORTS@cms.hhs.gov. NOTE: There are no spaces in this email address. Underscore "\_" separates the words CR\_IMPL\_REPORTS.

The *CRIR and TCR* reports are due no later than the 28<sup>th</sup> of the month in which the reports are due, *as indicated below*. If the report due date of the 28<sup>th</sup> falls on a weekend or a holiday; each *MAC* shall submit the report on the next business day following the due date.

- Quarter 1 includes October, November, and December. The report for Quarter 1 is due no later than February 28th.
- Quarter 2 includes January, February, and March. The report for Quarter 2 is due no later than May 28th.
- Quarter 3 includes April, May, and June. The report for Quarter 3 is due no later than August 28th.
- Quarter 4 includes July, August, and September. The report for Quarter 4 is due no later than November 28th.

Each MAC shall complete and submit one *CRIR* by jurisdiction, one *TCR* by jurisdiction, cover Letter/Attestation Statements, and if necessary, a separate explanation document. *MACs with multiple jurisdictions may complete a separate sheet within a single Excel workbook for each jurisdiction.* 

In addition, each *contractor* shall write and maintain written procedures on its change management process (i.e., Standard Operating Procedures – SOP). Elements should include, but are not limited to, written procedures for the timely *processing* of CMS instructions (issued CRs *and TDLs*) from the CMS DRI MAILBOX *and CMS TDL MAILBOX*, written procedures of the contractor's CR and TDL distribution process (including, but not limited to, the dissemination of provider education information), written

procedures for CR implementation and TDL compliance (including written documentation to verify implementation/compliance).

Contractors shall retain the written documentation to verify CR and TDL implementation/compliance using CMS's records retention guidelines.

Upon request from CMS, contractors shall supply the written procedures of their change management process, as well as written documentation to verify CR and TDL implementation/compliance to CMS.

# **Implementation Date**

#### I. Definition

Refer to section 50.4.2 of this chapter for the definition of the implementation date.

#### II. Supporting Information

For any instruction affecting providers, regardless if there are *S*ystems or *N*on-systems changes, CMS gives at least 90 days' advance notice to the providers. That is, CMS must issue the instruction at least 90 days prior to the implementation date to give providers enough time to implement the instruction. The vehicle used to alert providers 90 days prior to an instruction's implementation date is the CMS Quarterly Provider Update, which can be accessed at: <a href="http://www.cms.hhs.gov/QuarterlyProviderUpdates/01">http://www.cms.hhs.gov/QuarterlyProviderUpdates/01</a> Overview.asp

There are four exceptions to the 90 days' advance notice policy: (1) the instruction is contractor specific and therefore does not affect providers; (2) the instruction is a correction/clarification where the previously issued instruction contained typos or errors of fact or omissions; (3) the instruction is a routine or recurring item (which qualifies it to be included on the Mid-Quarter List in the Provider Update); and (4) the instruction is approved by the CMS Administrator to be published immediately or by a certain date.

If a previously issued instruction is re-issued with revised MAC requirements and a revised implementation date is not specified, MACs shall comply with the revised instruction as soon as possible but no later than 10 business days from the CR's date of issuance.

For a system change, the *I*nitiator of the CR will specify an implementation date that corresponds to one of the quarterly release dates. Usually, the quarterly release date will be the first Monday of the quarter. Non-recurring system changes are usually issued five months in advance of the implementation date. On occasion, an off-cycle release date can be approved by OSORA and/or the Administrator. This exception tends to occur most frequently with the implementation of National Coverage Determinations (NCDs) and corrections to finals.

For a Non-system change that has no impact on providers, the Initiator of the CR may specify the implementation date as 30 days from issuance. For a Non-system change that has provider impact, the Initiator of the CR may specify the implementation date as 90 days from issuance.

After the comment period ends and the *I*nitiator of the CR has addressed all comments, he/she prepares a final CR package for CMS clearance. The last part of the CMS clearance process involves obtaining approval from the Medicare Change Control Board (MCCB). The MCCB, in consultation with the *I*nitiator of the CR, will determine the time period needed for implementing each change request. After the clearance process is completed, the Office of Strategic Operations and Regulatory Affairs/Issuances & Records Management Group (OSORA/IRMG) will insert the actual implementation date before issuing the CR as a final instruction.

# COMPLETING AND SUBMITTING THE QUARTERLY CR IMPLEMENTATION REPORT (CRIR)

Medicare Administrative Contractors (MACs) shall complete the CR Implementation Report, as follows, for each jurisdiction. MACs with multiple jurisdictions may complete a separate sheet within a single Excel workbook for each jurisdiction.

If CMS omitted a CR that should have been included in the report, the contractor shall add the CR to the bottom of the report in red font. MACs shall update the report in the same manner as a CMS CO entered CR, unless specifically instructed below to exclude specific items.

#### **Header Rows**

The report contains *three* header rows.

- 1. Header Row 1, Contains the title, "CR Implementation Report (CRIR) Quarter X (MMM-MMM) YYYY," where X is the number of the quarter, MMM-MMM are the months included in that quarter, and YYYY is the Calendar Year. This data will be completed by CMS CO.
- 2. Item 1: Header Row 2, *MACs* shall enter the*ir* Contractor Name *and Jurisdiction identifier* in Item 1 of the report.
- 3. Item 2: Header Row 2, *MACs* shall enter the "Date Report Submitted" to CMS in Item 2 of the report in MM/DD/YYYY. [This is the date the report is e-mailed to CMS CO.]
- 4. Item 3: Header Row 2, Report Due. This is the date the report is due to CMS CO. This date will be completed by CMS CO.
- 5. Item 4: Header Row 3, CRIR Contractor Contact (*First Name, Last Name, Phone*). *MACs* shall enter the first *name*, last name, *and phone number* of the individual CMS CO should contact to ask questions regarding information in this report. *Contact must be knowledgeable on the contents of the report.*

#### **Details Rows**

Below the header Rows, Detail Rows shall be completed as follows:

- 1. Item 5 (No.) This field contains a consecutive number to track the number of CRs on the report. CMS CO will complete this field for all CRs included on the report. If the contractor adds additional CRs, they should continue numbering from the previous CMS entered row *in red font*. For example, if CMS included 15 CRs on the report, the contractor shall begin numbering in this field with 16 *in red font*.
- 2. Item 6 (CMS CR #) CMS CO will complete this field with the CMS CR numbers *implemented* during the quarter.
- 3. Item 7 (CMS Transmittal #) CMS CO will complete this field with the CMS CR transmittal numbers *implemented* during the quarter. If a CR was issued with multiple transmittals, the word "multiple" will be entered in this field.
- 4. Item 8 (Subject) CMS CO will complete this field with the subject for all CMS CRs *implemented* during the quarter.
- 5. Item 9 (CMS Published Impl. Date MM/DD/YYYY) CMS CO will complete this field with the CMS Published Implementation date in MM/DD/YYYY format for all CRs *implemented* during the quarter.

- 6. Item 10 (Applicable Workload? ("X" or blank)) MACs shall complete this field with an "X" for all CRs applicable to their workload or leave the field blank if the CR is not applicable to their workload. The CR is considered applicable to the contractor if any of the business requirements in the CR were required to be implemented by the contractor in the reporting period. Note: Shared System Only CRs (with no MAC responsibility checked) are considered not applicable.
- 7. Item 11 (Completed by Implementation Date? ("Y", "N", or blank)) MACs shall complete this field with a 'Y" for all CRs implemented on or before the CMS Published Implementation Date indicated in Item 9. MACs shall complete this field with an "N" for all CRs that have not been implemented by the implementation date and MACs must select a Reason for Delay from Item 12. This field shall remain blank if the CR is not applicable to the contractor (i.e. Item 10 is blank).
- 8. Item 12 (Reasons for Delay (leave blank if implemented by due date)) This field shall remain blank if the CR has been implemented on or before the CMS Published Implementation date (Item 11 is "Y") or is not applicable to the contractor workload (i.e. Item 10 is blank). MACs shall select one of the following Reasons for Delay from the drop down list for all applicable CRs not completed by the CMS Published Implementation date indicated in Item 9 (i.e. Item 10 has an 'x' and Item 11 has a "N"):
  - 01. Due date changed due to TDL
  - 02. Due date changed due to CR
  - 03. MLN delay
  - 04. CMS delay of file transmission
  - 05. System related delay
  - 06. CR extension approved or pending
  - 07. Deadline past quarter end date
  - 08. Other

<u>Reason 01 (Due date changed due to TDL)</u> - Applies only in situations where CMS has issued a TDL which directs contractors to hold claims and/or otherwise delay the work related to that specific CR.

#### *Reason 02 (Due date changed due to CR) – Applies only in the following situations:*

- a. Correction final changed the CMS Published Implementation date to be different than the date indicated in Item 9;
- b. CR was rescinded/replaced with a different CR number that changed the CMS Published Implementation date to be different than the date indicated in Item 9;
- c. Correction or Rescinded/Replaced CR changed the due date of specific Business Requirements.

Reason 03 (MLN Delay) - Applies only in situations where CMS issued an MLN Matters® article beyond the CR implementation date. MACs shall post the MLN Matters Article, or a direct link to that article, on their Web sites and include information about it in a listserv message within 1 week of the availability of the provider education article. In addition, the provider education article shall be included in the contractor's next regularly scheduled bulletin. MACs are free to supplement MLN Matters articles with localized information that will benefit their provider community in billing and administering the Medicare program correctly. For the quarter in which an activity did not occur, i.e., quarterly bulletin has already been published and another is not due until another quarter, MACs should select a delay option of MLN delay. The contractor should include a comment in Item 13 that explains the activity that was not completed and the quarter in which the activity will be completed. If a contractor's quarterly bulletin is due to go out in another quarter, the CR should be added as an add-on in the quarter in which the activity occurred, including a comment that all activity for that CR has been completed.

<u>Reason 04 (CMS delay of file transmission)</u> - Applies only in situations when the file needed to complete work indicated in the CR was not available timely (i.e., payment files related to annual recurring CRs such as the HCPCS, Pricer, and OPPS).

<u>Reason 05 (System related delay)</u> – Applies only in the following situations:

- a. Shared System Maintainer (SSM) production problem prevents a MAC from completing a specific task in the CR;
- b. Non-MAC maintained system (e.g., PECOS, HIGLAS, CWF, etc) production problem prevents a MAC from completing a specific task in the CR.

<u>Reason 06 (CR extension approved or pending)</u> - Applies only in situations where CMS Contracting Officer Representative (COR) has approved an extension of the implementation date specifically referencing this CR.

<u>Reason 07 (Deadline past quarter end date)</u> - Applies only in the following situations:

- a. CRs with multiple implementation dates;
- b. CRs that contain instruction for work to be done after the implementation date listed in the CR

<u>Reason 08 (Other)</u> - Applies in all other situations where the implementation of the CR was delayed, and Reasons for Delay 01 through 07 do not apply.

9. Item 13 (Additional Explanation) - MACs shall enter additional comments regarding the implementation of this CR in this field if a Reason for Delay is selected. Do not update this field for CRs implemented timely.

For the following Reasons for Delay, MACs shall include the following data:

<u>Reason 01 (Due date changed due to TDL)</u> - TDL reference number (TDL-#####) of the specific TDL which grants an extension and the date to which the extension was granted. Note the actual implementation date of the CR requirements.

<u>Reason 02 (Due date changed due to CR)</u> - Issued date of the Correction final, CR number and issued date of replacement CR (if applicable), and the revised implementation date. Note the actual implementation date of the CR requirements.

<u>Reason 03 (MLN delay)</u> - Provide explanation for delay along with the MLN reference number of the specific MLN ® and published date.

<u>Reason 04 (CMS delay of file transmission)</u> - Name of the delayed file, date that the file was expected, and the date the file was actually received. Note the actual implementation date of the CR requirements.

<u>Reason 05 (System related delay)</u> – Name of the system, specific production problem identification number, description of the issue, and resolution date (if applicable). Note the actual implementation date of the CR requirements.

<u>Reason 06 (CR extension approved or pending)</u> - Name of COR, date approval received, and the revised due date. Note the actual implementation date of the CR requirements.

<u>Reason 07 (Deadline past quarter end date)</u> - Note impacted business requirement numbers and the delayed implementation date(s). MACs shall add this CR to the bottom of the CRIR report in red font for the CRIR report of the quarter where MACs completed their work.

<u>Reason 08 (Other)</u> – Explanation of the delay for situations not applicable to Reasons for Delay 01 through 07. Use the space allowed in Item 13. If additional space is needed, MACs may submit with the completed CR Implementation Report a separate explanation document. Provide the following information in a clear and concise manner:

- a. Cause of the delay;
- b. If not the entire CR, reference the specific delayed Business Requirements;
- c. Description of specific tasks that were delayed;
- d. Impact and resolution of the issue that delayed the CR implementation;
- e. Note the actual implementation date of the CR requirements.
- 10. CRIR Totals. This section summarizes the totals for the detail rows.
  - a. Item 14 (Total number of CRs in this report) This field is calculated. The contractor shall not update this field. NOTE: This formula sums both CRs added by CMS and any additional rows of CRs added by the contractor on the spreadsheet.
  - b. Item 15 (Number of CRs applicable to the contractor) This field is calculated. The contractor shall not update this field. **NOTE:** This formula counts CRs that the contractor has indicated are applicable by marking an "X" in Column F.
  - c. Item 16 (Number of applicable CRs completed by the Implementation Date) This field is calculated. The contractor shall not update this field. NOTE: This formula counts CRs that the contractor has indicated were implemented timely by marking a "Y" in Column G.
  - d. Item 17 (% of applicable CRs completed by Implementation Date) This field is calculated. The contractor shall not update this field. This field reflects the percentage of applicable CRs completed by the Implementation date, regardless of CMS or contractor controlled reasons for delay. NOTE: This formula calculates a percentage from Item 15 and Item 16.
  - e. Item 18 (% of 08 Reason for Delay) This field is calculated. The contractor shall not update this field. This field reflects the percentage of applicable CRs not implemented timely due to contractor controlled reasons for delay, as indicated by a selection of Reason for Delay 8 (Other). NOTE: This formula calculates a percentage from the total number of Reason for Delay 08 indicated in Item 19 and the total number of CRs applicable to the contractor in Item 15.
  - f. Item 19 (Reason for Delay / Occurrences) These fields are calculated. The contractor shall not update these fields. **NOTE:** This formula counts how many times each of the Reasons for Delay were selected by the contractor on the report.
- 11. Each MAC shall complete and submit one CRIR report by jurisdiction, a cover Letter/Attestation Statement (located on tab 1 of the CRIR Report Template or the Sample in Section 50.3), and if necessary, a separate explanation document. MACs with multiple jurisdictions may complete a separate sheet within a single Excel workbook for each jurisdiction. By the quarterly due date, each MAC shall submit the CRIR report, via e-mail to the CMS CO mailbox. [The CMS CO mailbox is: <a href="mailto:CR\_IMPL\_REPORTS@cms.hhs.gov">CR\_IMPL\_REPORTS@cms.hhs.gov</a>. NOTE: There are no spaces in this Web address. Underscore "\_" separates the words CR\_IMPL\_REPORTS.] If the report due date of the 28<sup>th</sup> falls on a weekend or a holiday, each contractor, including MACs, shall submit the report on the next business day following the due date.

12. Each MAC shall *upload* the report to the CMS ART system.

## COMPLETING AND SUBMITTING THE QUARTERLY TDL COMPLIANCE REPORT

Medicare Administrative Contractors (MACs) shall complete the TDL Compliance Report (TCR) for each jurisdiction as follows. MACs with multiple jurisdictions may complete a separate sheet within a single Excel workbook for each jurisdiction (name each tab accordingly).

There are some TDLs not issued to all Contractors. If a MAC received a TDL in the reporting period, the TDL should be included on the report. If CMS omitted a TDL that should have been included in the report, the contractor shall add the TDL to the bottom of the report in red font. MACs shall update the report in the same manner as a CMS CO entered TDL, with the exception of Item 7 (CMS Component). For Contractor added rows, Item 7 may remain blank.

#### **Header Rows**

The report contains four header rows.

- 1. Header Row 1, Contains the title, "TDL Compliance Report (TCR) Quarter X (MMM-MMM) YYYY," where X is the number of the quarter, MMM-MMM are the months included in that quarter, and YYYY is the Calendar Year. This data will be completed by CMS CO.
- 2. Item 1: Header Row 2, *MACs* shall enter the*ir* Contractor Name *and Jurisdiction identifier* in Item 1 of the report.
- 3. Item 2: Header Row 2, *MACs* shall enter the "Date Report Submitted" to CMS in Item 2 of the report in MM/DD/YYYY format. [This is the date the report is e-mailed to CMS CO.]
- 4. Item 3: Header Row 2, Report Due. This is the date the report is due to CMS CO. This date will be completed by CMS CO.
- 5. Item 4: Header Row 3, TCR Contractor Contact (*First Name, Last Name, Phone*). *MACs* shall enter the first and last name of the individual CMS CO should contact to ask questions regarding information in this report. *The contact must be knowledgeable on the contents of the report.*

#### **Detail Rows**

Below the Header Rows, Detail Rows shall be completed as follows:

- 1. Item 5: No. This field contains a consecutive number to track the number of TDLs on the report. CMS CO will complete this field for all TDLs included on the report by CO. If the contractor adds additional TDLs, they should continue numbering from the previous CMS entered row in red font. For example, if CMS included 15 TDLs on the report, the contractor shall begin numbering in this field with 16 in red font.
- 2. Item 6: TDL #. CMS CO will complete this field with the TDL number for each public TDL issued during the quarter.
- 3. Item 7: CMS Component. CMS CO will complete this field with the CMS Component responsible for issuing the TDL. [If *MACs* added *the* TDL to the *report*, they do not need to complete item 7 for those TDLs.]
- 4. Item 8: Subject. CMS CO will complete this field with the subject for all TDLs issued during the quarter.

- 5. Item 9: CMS Issued Date MM/DD/YYYY. CMS CO will complete this field with the Issued date in MM/DD/YYYY format for all TDLs issued during the quarter.
- 6. Item 10: Applicable Workload? ("x" or blank). MACs shall complete this field with an "x" for all TDLs applicable to their workload or leave blank if the TDL is not applicable to their workload. The TDL is considered applicable to the contractor if any action in the TDL were required to be completed by the contractor in the reporting period.
- 7. Item 11: Contractor Compliance? ("y" or "n"). MACs shall complete this field with a "y" for all applicable TDLs that the contractor has received, reviewed and complied with the instructions in the TDL. MACs shall complete this field with a "n" for all applicable TDLs that the contractor has received and reviewed, but has not complied with the instructions in the TDL. This field shall remain blank if the TDL is not applicable to the contractor (i.e. Item 10 is blank).
- 8. Item 12: Reason for Delay (Leave blank if in compliance). This field shall remain blank if the TDL has been complied with on or before the due date (i.e. Item 11 is a "y") or is not applicable to contractor workload (i.e. Item 11 is blank). If the contractor did not comply with the instructions in the TDL (i.e. Item 11 is a "n"), the contractor shall select one of the following reasons from the drop-down list in this field:
  - 01. Due date changed due to TDL
  - 02. Due date changed due to CR
  - 03. System Changes Required to Comply
  - 04. TDL extension approved or pending
  - 05. Deadline past quarter end date
  - 06. Other
- <u>01 (Due date changed due to TDL)</u> Applies only in situations where CMS has issued a subsequent TDL which corrects and/or replaces previous direction provided under the original TDL.
- <u>02 (Due date changed due to CR)</u> Applies only in situations where CMS has issued a CR that supersedes direction provided previously in this specific TDL.
- <u>03 (System Changes Required to Comply)</u> Applies only in the following situations:
  - a. Shared System Maintainer (SSM) production problem prevents a MAC from completing a specific task in the TDL;
  - b. Non-MAC maintained system (e.g., PECOS, HIGLAS, CWF, etc) production problem prevents a MAC from completing a specific task in the TDL;
  - c. MAC is unable to accomplish a specific task in the TDL without SSM system changes.
- <u>04 (TDL extension approved or pending)</u> Applies only in situations where the CMS Contracting Officer Representative (COR) has approved an extension of the due date specified in the TDL.
- <u>05 (Deadline past quarter end date)</u> Applies only in the situations where some or all of the tasks in the TDL are due to be completed beyond the reporting period of the TCR report.
- <u>06 (Other)</u> Applies in all other situations where compliance with the TDL was delayed, but Reasons for Delay 01 through 05 do not apply.
  - 9. Item 13: Additional Explanation. MACs shall enter additional comments regarding the compliance of the TDL in this field if a Reason for Delay is selected in Item 12. Do not update this field for TDLs complied with timely.

For the following Reasons for Delay (Item 12), MACs shall include the following data in Item 13:

<u>01 (Due date changed due to TDL)</u> – TDL reference number (TDL-#####) of the specific TDL which corrects and replaces the previous TDL. Note the actual date of compliance with the TDL.

 $\underline{02}$  (Due date changed due to  $\underline{CR}$ ) –  $\underline{CR}$  number and issued date of the  $\underline{CR}$  which supersedes the  $\underline{TDL}$ . Note the implementation date of the  $\underline{CR}$ .

<u>03 (System Changes Required to Comply)</u> – If a production problem prevents compliance, provide: name of the system, specific production problem identification number, and resolution date (if applicable). Note the actual date of compliance with the TDL. If shared system changes are needed to comply, describe necessary change and any steps taken to notify CMS of the discrepancy.

<u>04 (TDL extension approved or pending)</u> – Name of the COR, date approval received, and the revised due date. Note the actual date of compliance with the TDL.

<u>05 (Deadline past quarter end date)</u> – Note specific tasks and the due dates beyond the TCR reporting period. MACs shall add this TDL to the bottom of the TCR report in red font for the TCR report of the quarter where MACs completed their work.

<u>06 (Other)</u> – Explanation of the delay for situations not applicable to Reasons for Delay 01 through 05. Use the space allowed in Item 13. If additional space is needed, MACs may submit with the completed TCR report a separate explanation document. Provide the following information in a clear and precise manner:

- a. Cause of the delay;
- b. If not the entire TDL, reference the specific delayed task;
- c. Description of specific tasks that were delayed;
- d. Impact and resolution of the issue with the TDL implementation;
- e. Note the actual date of compliance with the TDL.

#### 10. TCR Totals. This section summarizes the totals for the detail rows.

- a. Item 14 (Total number of TDLs in this report) This field is calculated. The contractor shall not update this field. **NOTE:** this formula sums both TDLs added by CMS and any additional rows of TDLs added by the contractor on the spreadsheet.
- b. Item 15 (Number of TDLs applicable to the contractor) This field is calculated. The contractor shall not update this field. **NOTE:** this formula counts TDLs that the contractor has indicated are applicable by marking an "x" in Column F.
- c. Item 16 (Number of applicable TDLs by compliance date) This field is calculated. The contractor shall not update this field. **NOTE:** This formula counts TDLs that the contractor has indicated were completed timely by marking a "y" in Column G.
- d. Item 17 (% of applicable TDLs by compliance date) This field is calculated. The contractor shall not update this field. This field reflects the percentage of applicable TDLs complied with by the due date, regardless of CMS or contractor controlled reasons for delay. **NOTE:** This formula calculates a percentage from Item 15 and Item 16.
- e. Item 18 (% of 06 Reason for Delay) This field is calculated. The contractor shall not update this field. This field reflects the percentage of applicable TDLs not complied with timely due to contractor controlled reasons for delay, as indicated by a selection of Reason for Delay 6 (Other). **NOTE:** This formula calculates a percentage from the total number of

Reason for Delay 06 indicated in Item 19 and the total number of TDLs applicable to the contractor in Item 15.

- f. Item 19 (Reason for Delay) These fields are calculated. The contractor shall not update these fields. **NOTE:** These formulas count how many times each of the Reasons for Delay (Item 12) was selected by the contractor.
- 11. Each MAC shall complete and submit one TCR report by jurisdiction, a cover Letter/Attestation Statement (located on tab 1 of the TCR Report Template or in Section 50.3), and if necessary, a separate explanation document. MACs with multiple jurisdictions may complete a separate sheet within a single Excel workbook for each jurisdiction. By the quarterly due date, each MAC shall submit the TCR report, via e-mail to the CMS CO mailbox. [The CMS CO mailbox is: CR\_IMPL\_REPORTS@cms.hhs.gov. NOTE: There are no spaces in this Web address. Underscore "\_" separates the words CR\_IMPL\_REPORTS.] If the report due date of the 28th falls on a weekend or a holiday, each contractor, including MACs, shall submit the report on the next business day following the due date.
- 12. Each MAC shall *upload the report* to the CMS ART system.

# **50.1 – CR Implementation Report (CRIR) Template**

(*Rev.88*, *Issued: 08-25-14*, Effective: 08-28-14- Begin with Quarter 3 in 2014.Implementation: 08-28-14- Begin with Quarter 3 in 2014)

Upon direction from CMS via a Technical Direction Letter, *MACs* shall download the *updated* CR Implementation Report Template from Electronic Change Information Management Portal (*ECHIMP*), *Help page*. From there, *MACs* shall *click the link from the List of Documents* for the CRIR Template.

# **50.2 – TDL Compliance Report (TCR) Template**

(*Rev.88*, *Issued: 08-25-14*, Effective: 08-28-14- Begin with Quarter 3 in 2014.Implementation: 08-28-14- Begin with Quarter 3 in 2014)

Upon direction from CMS via a Technical Direction Letter, *MACs* shall download the *updated* TCR Template from *ECHIMP*, *Help page*. From there, *MACs* shall *click the link from the List of Documents for the* TCR Template.

# 50.3 – Sample Cover Letter/Attestation Statement

(*Rev.88*, *Issued: 08-25-14*, Effective: 08-28-14- Begin with Quarter 3 in 2014.Implementation: 08-28-14- Begin with Quarter 3 in 2014)

# **CR Implementation Report**

Contractor Name:

Contractor/Jurisdiction Number:

Date Report Submitted to CMS: [MM/DD/CCYY]

Subject: Attestation Statement: Implementation of Change Requests, Qtr.\_\_, FY\_\_ [Include the appropriate quarter and fiscal year in the Subject line.]

Attention: CMS Central Office (CO) Medicare Contractor Management Group (MCMG)

In accordance with the Centers for Medicare & Medicaid Services (CMS) Change Requests 2884, 6102, <i>and</i> 8598, I attest that all instructions required to be implemented within Quarter [1, 2, 3 or 4 – select appropriate quarter] of FY [Enter appropriate fiscal year.] have been implemented. Exceptions are explained in Item <i>13</i> of the CR Implementation Report or attached <i>in a separate document</i> .
Sincerely,
[Name of Contractor Certifying Official.]
[Title of Contractor Certifying Official.]
Technical Direction Letter Compliance Report
Contractor Name:
Contractor/Jurisdiction Number:
Date Report Submitted to CMS: [MM/DD/CCYY]
Subject: Attestation Statement: Compliance with Technical Direction Letters, Qtr, FY [Include the appropriate quarter and fiscal year in the Subject line.]
Attention: CMS Central Office (CO) Medicare Contractor Management Group (MCMG)
In accordance with the Centers for Medicare & Medicaid Services (CMS) Change Request 8598, I attest that all instructions required to be complied with within Quarter [1, 2, 3 or 4 – select appropriate quarter] of FY [Enter appropriate fiscal year.] have been complied with. Exceptions are explained in Item 13 of the TDL Compliance Report or attached in a separate document.
Sincerely,
[Name of Contractor Certifying Official.]

[Title of Contractor Certifying Official.]

CR Implementation Report Attestation								
	Please enter your responses in the boxes below:							
Contractor Name:								
Contractor/Jurisdiction Number:								
Date Report Submitted to CMS: [MM/DD/CCYY]								
Subject: Attestation Statement: Implementation of Change Requests, Qtr, FY [Include the appropriate quarter and fiscal year in the Subject line.]								
Attention: CMS Central Office (CO) Medicare Contractor Management Group (MCMG)								
In accordance with the Centers for Medicare & Medicaid Services (CMS) Change Requests 2884, 6102, and 8598, I attest that all instructions required to be implemented within Quarter [1, 2, 3 or 4 – select appropriate quarter] of FY [Enter appropriate fiscal year.] have been implemented. Exceptions are explained in Item 13 of the CR Implementation Report or attached in a separate document.								
Sincerely,								
[Name of Contractor Certifying Official.]								
[Title of Contractor Certifying Official]								

#### CR Implementation Report

CR Implementation Report (CRIR) - Quarter X (MMM-MMM) YYYY  1. Contractor Name/Jurisdiction: 2. Date Report Submitted (MM/DD/YYYY) 3. Report Due 4. CRIR Contractor Contact (First Name, Last Name, Phone)	
1 2 Date Report Submitted (MM/DD/VVVV) 1 3 Report Due 1	
Detail Rows	
5. No. 6. CMS CR # 7. CMS Transmittal # 8. Subject 9. CMS Published Impl. Date MM/DD/YYYY (X or blank) 11. Completed by implementation date? (Y, N, or blank) 12. Reason for Delay (Leave blank if implemented by due date)	13. Additional Explanation:
5	
6 7	
8	
9 10	
11 12	
13 14	
15	
10	
20	
21 22	
23 24 2	
25 26 27 27 27 27 27 27 27 27 27 27 27 27 27	
28	
30	
32 32 33	
34 35	
36 37	
38 99 99 99 99 99 99 99 99 99 99 99 99 99	
40 41	
42 43	
44 45	
46 47 47	
CRIR Totals	
14. Total number of CRs in this report: 0 19. Reason for Delay Occurences	
52 15. Number of CRs applicable to the contractor: 0 01 - Due date changed due to TDL 0	
16. Number of applicable CRs completed by Implementation Date:  0 02- Due date changed due to CR 0	
17. % of Applicable CRs completed by Implementation Date: 0% 03- MLN delay 0	
18. % of 08 Reason for Delay 0% 04- CMS delay of file transmission 0	
56 05- System related delay 0	
06- CR extension approved or pending 0	
07- Deadline past quarter end date 0	
59 08- Other 0	

Technical Direction Letter Comp	liance Report
	Please enter your responses in the boxes below:
Contractor Name:	
Contractor/Jurisdiction Number:	
Date Report Submitted to CMS: [MM/DD/CCYY]	
Subject: Attestation Statement: Compliance with Technical Direction Letters, Qtr, FY [Include the appropriate quarter and fiscal year in the Subject line.]	
Attention: CMS Central Office (CO) Medicare Contractor Management Group (MCMG)	
In accordance with the Centers for Medicare & Medicaid Services (CMS) Change Request 8598, I attest that all instructions required to be complied with within Quarter [1, 2, 3 or 4 – select appropriate quarter] of FY [Enter appropriate fiscal year.] have been complied with. Exceptions are explained in Item 13 of the TDL Compliance Report or attached in a separate document.	
Sincerely,	
[Name of Contractor Certifying Official.]	
[Title of Contractor Certifying Official.]	

#### TDL Compliance Report (TCR)- Quarter X (MMM-MMM) YYYY

1. Contractor Name/Jurisdiction			2. Date Report Submitted (MM/DD/YYYY)		3. Report Due		4. TCR Contractor Contact (First Name, Last Name, Phone)	
				Detail Rows				
5. No.	6. TDL #	7. CMS Component	8. Subject	9. CMS Issued Date (MM/DD/YYYY)	10. Applicable Workload? (X or blank)	11. Contractor Compliance? (Y or N)	12. Reason for Delay	13. Additional Explanation:
					CR Totals			
	umber of TDLs in this re			0		19. Reason for Delay 01 - Due date changed	Occurences	
15. Number	er of TDLs applicable to	the contractor:		0		due to TDL		
16. Numbe	er of applicable TDLs by	compliance date:	:	0		02- Due date changed due to CR	0	
17. % of A	pplicable TDLs by comp	liance date:		0%		03- System changes	0	
						required to comply 04- TDL extension		
18. % of 06	Reason for Delay			0%		approved or pending	U	
						05- Deadline past	0	
						quarter end date 06- Other	0	
<b>——</b>				+	<del>!</del>	ouici		