CMS Manual System	Department of Health & Human Services (DHHS)				
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)				
Transmittal 944	Date: August 5, 2011				
	Change Request 7469				

SUBJECT: Conference Calls and Research Hours to Identify an Automated Solution for Tracking and Reporting Recovery Auditor Reopening and Appeals throughout the Medicare Appeals Process

I. SUMMARY OF CHANGES: The CMS currently track reopening and appeals of adjustments initiated by Recovery Auditors via monthly contractor spreadsheets; this CR directs claims processing contractors, shared system maintainers, Enterprise Data Centers, Recovery Auditors and the RAC Data Warehouse operations/maintenance contractor to participate in conference calls with CMS to evaluate existing business requirements/system capabilities and to design, at a conceptual level, an automated alternative. A subsequent CR will direct appropriate system maintainers to implement the identified solution and will update the Financial Management Manual accordingly.

EFFECTIVE DATE: January 1, 2012

IMPLEMENTATION DATE: January 3, 2012

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-

R/N/D	/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

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regarding	continued	nertormance	requirements.
regarding	Commuca	periormanice	requirements.

IV. ATTACHMENT:

One-Time Notification

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

Attachment – One-Time Notification

Pub.100-20 Transmittal: 944 Date: August 5, 2011 Change Request: 7469	
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SUBJECT: Conference Calls and Research Hours to Identify an Automated Solution for Tracking and Reporting Recovery Auditor Reopenings and Appeals throughout the Medicare Appeals Process

Effective Date: January 1, 2012

Implementation Date: January 3, 2012

I. GENERAL INFORMATION

- A. Background: The CMS currently track reopenings and appeals of adjustments initiated by Recovery Auditors via monthly contractor spreadsheets; this CR directs claims processing contractors, shared system maintainers, Enterprise Data Centers, Recovery Auditors and the RAC Data Warehouse operations/maintenance contractor to participate in conference calls with CMS to evaluate existing business requirements/system capabilities and to design, at a conceptual level, an automated alternative. A subsequent CR will direct appropriate system maintainers to implement the identified solution and will update the Financial Management Manual accordingly.
- **B. Policy:** Division B, Title III, Section 302 of the Tax Relief and Healthcare Act of 2006.

II. BUSINESS REQUIREMENTS TABLE

Number	Requirement	Responsibility									
		("X" indicates the columns that apply)									
		A	D	F	C	R		Sha	red-		OTHER
		/	M	I	A	Н		Sys	tem		
		В	Е		R	Н	Maintainers		ers		
					R	I	F	M	V	О	
		M	M		I		I	C	M	W	
		A	A		Е		S	S	S	F	
		C	C		R		S				
7469.1	Recovery Audit Program stakeholders shall	X	X	X	X	X	X	X	X		HIGLAS,
	participate in five CMS-facilitated										EDCs,
	conference calls (one 60-minute call in										Recovery
	each week of August 2011) to evaluate										Auditors, RAC
	existing reopening/appeal tracking										Data
	functionality and identify automated										Warehouse,
	alternatives for tracking Recovery Auditor										CMS Appeals
	reopenings and appeals.										Staff

III. PROVIDER EDUCATION TABLE

	Α	D	F	C	R	Shared-		OTHER
	/	M	I	A	Н	Syst	tem	
	В	Е		R	Н	Maint	ainers	
				R	I	F M	V C	
	M	M		I		I C	M W	7
	A	A		Е		$S \mid S$	S F	
	C	C		R		S		
None								

IV. SUPPORTING INFORMATION

Section A: For any recommendations and supporting information associated with listed requirements: N/A

X-Ref	Recommendations or other supporting information:
Requirement	
Number	

Section B: For all other recommendations and supporting information: Change Requests 6871, 7160 and 7458 describe the existing spreadsheet-based reporting process.

V. CONTACTS

Pre-Implementation Contact(s): LCDR Terrence Lew, USPHS (<u>terrence.lew@cms.hhs.gov</u> or 410-786-9213).

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

VI. FUNDING

Section A: 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.

Section B: For Medicare Administrative Contractors (MACs):

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