

# CMS Manual System

## Pub 100-04 Medicare Claims Processing

Transmittal 995

Department of Health & Human Services (DHHS)

Centers for Medicare & Medicaid Services (CMS)

Date: JUNE 30, 2006

Change Request 5118

**SUBJECT: Common Working File (CWF) Part C Data Exchange and Data Display Changes**

**I. SUMMARY OF CHANGES:** CWF contains data indicating when a beneficiary is enrolled under a Medicare Part C contract. Part C contracts are Medicare Advantage Managed Care Plans that provide Part A and B benefits for beneficiaries enrolled under the contract. CWF receives this Part C data on a data feed from the Enrollment Database (EDB). Currently, CWF is only receiving the numeric part of the plan contract number on the EDB feed. CWF is hard coding an `H? in front of the plan contract number. Effective in January 2006, contract numbers can begin with a character other than an `H?. Due to the change in how plan contract numbers are assigned, the EDB to CWF record format shall be changed to pass the entire five position alpha/numeric plan contract number. Once this change is implemented, the EDB will identify those plan contract numbers associated with a beneficiary that contain something other than an `H? as the first character and pass the correct plan contract number to CWF on the EDB to CWF data.

**NEW/REVISED MATERIAL :**

**EFFECTIVE DATE : October 01, 2006**

**IMPLEMENTATION DATE : October 02, 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
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**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:**

Business Requirements

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

# Attachment – Business Requirements

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**SUBJECT: Common Working File (CWF) Part C Data Exchange and Data Display Changes**

## I. GENERAL INFORMATION

**A. Background:** CWF contains data indicating when a beneficiary is enrolled under a Medicare Part C contract. Part C contracts are Medicare Advantage Managed Care Plans that provide Part A and B benefits for beneficiaries enrolled under the contract. CWF receives this Part C data on a data feed from the Enrollment Database (EDB).

Currently, CWF is only receiving the numeric part of the plan contract number on the EDB feed. CWF is hard coding an 'H' in front of the plan contract number. Effective in January 2006, contract numbers can begin with a character other than an 'H'. Due to the change in how plan contract numbers are assigned, the EDB to CWF record format shall be changed to pass the entire five position alpha/numeric plan contract number. Once this change is implemented, the EDB will identify those plan contract numbers associated with a beneficiary that contain something other than an 'H' as the first character and pass the correct plan contract number to CWF on the EDB to CWF data exchange.

**B. Policy:** No policy change.

## II. BUSINESS REQUIREMENTS

*"Shall" denotes a mandatory requirement*

*"Should" denotes an optional requirement*

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)								
		F I	R H I	C a r r i e r	D M E R C	Shared System Maintainers				Other
						F I S S	M C S	V M S	C W F	
5118.1	CWF shall change the copybook to accommodate the EDB to CWF record format change to receive the entire Part C plan contract number.								X	
5118.1.1	CWF shall discontinue hard coding an 'H' in front of the Part C plan contract number.								X	



Requirement Number	Requirements	Responsibility (“X” indicates the columns that apply)							
		F I	R H I	C a r r i e r	D M E R C	Shared System Maintainers			
F I S S	M C S					V M S	C W F		
	education article shall be included in your next regularly scheduled bulletin and incorporated into any educational events on this topic. Contractors are free to supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.								

**IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS**

**A. Other Instructions: N/A**

X-Ref Requirement #	Instructions

**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> Lori Robinson, 410-786-1826, <a href="mailto:lori.robinson@cms.hhs.gov">lori.robinson@cms.hhs.gov</a></p> <p><b>Post-Implementation Contact(s):</b> Lori Robinson, 410-786-1826, <a href="mailto:lori.robinson@cms.hhs.gov">lori.robinson@cms.hhs.gov</a></p>	<p><b>No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2006 operating budgets.</b></p>
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