One-Time Notification

Pub. 100-20Transmittal: 2Date: SEPTEMBER 12, 2003Change Request 2886

SUBJECT: The New Online CMS Manual System Announcement

I. GENERAL INFORMATION

A. Background:

Beginning October 1, 2003, CMS will transition from a paper-based manual system for its manual instructions to a Web-based system. The process includes the streamlining, updating, and consolidating of CMS' various program instructions into an electronic Web-based manual system for all users. The new system is called the online CMS Manual System and is located at http://www.cms.hhs.gov/manuals.

The current practice of issuing program memoranda (PMs) will be discontinued after September 30, 2003, and be replaced with one of four new vehicles/templates created to communicate program instructions and update the Web-based manual. The new vehicles to communicate program instructions and update the new Internet-only manuals are (1) manual revisions, (2) one-time notification, (3) business requirement, or (4) confidential requirement templates. The Office of Strategic Operations and Regulatory Affairs (OSORA), Division of Issuances, will continue its current policy of communicating advanced program instructions to the regions and contractor communicated by OSORA. In addition, the transmittal sheet will identify changes pertaining to a specific manual, requirement, or notification.

To announce the new CMS Manual System, place the following language in your next scheduled bulletin: (Also, if you have a listserv that targets affected providers, you shall use it to notify subscribers that information about the new online CMS Manual system is available on your Web site.)

"Beginning October 1, 2003, CMS will transition from a paper-based manual system to a Web-based system. The process includes the streamlining, updating, and consolidating of CMS' various program instructions into an electronic Web-based manual system for all users. The new system is called the online CMS Manual System and is located at http://www.cms.hhs.gov/manuals.

The new online CMS Manual System will be organized by functional area, (e.g., eligibility, entitlement, claims processing, benefit policy, program integrity). The functional orientation of the new manual will eliminate significant redundancy within the manuals and will streamline the updating process, thus making CMS program instructions available in a more timely and accessible fashion.

Specifically, the CMS Manual System will include the following functional areas:

- Pub. 100-01--Medicare General Information, Eligibility, and Entitlement
- Pub. 100-02--Medicare Benefit Policy
- Pub. 100-03--Medicare National Coverage Determinations
- Pub. 100-04--Medicare Claims Processing
- Pub. 100-05--Medicare Secondary Payer
- Pub. 100-06--Medicare Financial Management
- Pub. 100-07--Medicare State Operations
- Pub. 100-08--Medicare Program Integrity
- Pub. 100-09--Medicare Contractor Beneficiary and Provider Communications
- Pub. 100-10--Medicare Quality Improvement Organization
- Pub. 100-11--Reserved
- Pub. 100-12--State Medicaid
- Pub. 100-13--Medicaid State Children's Health Insurance Program
- Pub. 100-14--Medicare End Stage Renal Disease Network Organization
- Pub. 100-15--Medicare State Buy-In
- Pub. 100-16--Medicare Managed Care
- Pub. 100-17--Medicare Business Partners Systems Security
- Pub. 100-18--Medicare Business Partners Security Oversight
- Pub. 100-19--Demonstrations
- Pub. 100-20--One-Time Notification

The table below identifies what current paper-based manuals were used to construct the new Internet-only manuals. It is just a cursory overview. A detailed crosswalk is being developed to guide you from a specific section of the old manual to where the information now appears in the new manuals. In addition, the Internet-only manual will have a crosswalk to show how the information in each section was derived.

Paper-Based Manuals	Internet-Only Manuals
 Pub. 06Medicare Coverage Issues Pub. 09Medicare Outpatient Physical Therapy Pub. 10Medicare Hospital Pub. 11Medicare Home Health Agency Pub. 12Medicare Skilled Nursing Facility Pub. 13Medicare Intermediary Manual, Parts 1, 2, 3, and 4 Pub. 14Medicare Carriers Manual, Parts 1, 2, 3, and 4 Pub. 21Medicare Hospice Pub. 27Medicare Rural Health Clinic and Federally Qualified Health Center Pub. 29Medicare Renal Dialysis Facility 	 Pub. 100-01Medicare General Information, Eligibility, and Entitlement Pub. 100-02Medicare Benefit Policy Pub. 100-03Medicare National Coverage Determinations Pub. 100-04Medicare Claims Processing Pub. 100-05Medicare Secondary Payer Pub. 100-06Medicare Financial Management Pub. 100-08Medicare Program Integrity Pub. 100-09Medicare Contractor Beneficiary and Provider Communications

Program Memoranda	
Pub. 60AIntermediaries	
Pub. 60BCarriers	
Pub. 60ABIntermediaries/Carriers	
NOTE: Information derived from Pub. 06 to	
Pub. 60AB was used to develop Pub. 100-01 to	
Pub. 100-09 for the Internet-only manual.	
Paper-Based Manuals	Internet-Only Manuals
Pub. 19Medicare Peer Review Organization	Pub. 100-10Medicare Quality Improvement Organization
Pub. 07Medicare State Operations	Pub. 100-07Medicare State Operations
Pub. 45State Medicaid	Pub. 100-12State Medicaid
	Pub. 100-13Medicaid State Children's Health
	Insurance Program
Pub. 81Medicare End Stage Renal Disease	Pub. 100-14Medicare End Stage Renal
Network Organizations	Disease Network Organizations
Pub. 24Medicare State Buy-In	Pub. 100-15Medicare State Buy-In
Pub. 75Health Maintenance Organization/ Competitive Medical Plan	Pub. 100-16Medicare Managed Care
Pub. 76Health Maintenance Organization/	
Competitive Medical Plan (PM)	
Pub. 77Manual for Federally Qualified Health	
Maintenance Organizations	
Pub. 13Medicare Intermediaries Manual, Part 2	Pub. 100-17Business Partners Systems
Pub. 14Medicare Carriers Manual, Part 2	Security
Pub. 13Medicare Intermediaries Manual,	Pub. 100-18Business Partners Security
Part 2	Oversight
Pub. 14Medicare Carriers Manual, Part 2	č
Demonstrations (PMs)	Pub 100-19 Demonstrations
Program instructions that impact multiple	Pub 100-20 One-Time Notification
manuals or have no manual impact. B. Policy: Effective October 1 2003 if a busines	

B. Policy: Effective October 1, 2003, if a business requirement impacts a CMS program instruction contained in one of the manuals, the corresponding manual will also be updated and communicated along with the business requirement. This information will be reflected on the transmittal sheet, which accompanies all changes to the manual.

C. Provider Education: Intermediaries and/or carriers shall inform affected providers by posting either a summary provided in Section I-A or relevant portions of this document on their Web site within 2 weeks. Also, intermediaries and/or carriers shall publish this same information in their next regularly scheduled bulletin. If they have a listserv that targets affected providers, they shall use it to notify subscribers that information about the new online CMS Manual System is available on their Web site.

II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement. "Should" denotes an optional requirement.

Requirement #	Requirements	Responsibility
1	Contractors shall post either a summary or relevant portions of this document on their Web sites within 2 weeks of receipt of this transmittal.	All Contractors

III. SUPPORTING INFORMATION & 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	·

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D. Contractor Financial Reporting /Workload Impact: N/A

- E. Dependencies: N/A
- F. Testing Considerations: N/A

IV. SCHEDULE, CONTACTS, AND FUNDING

Effective Date: September 26, 2003 Implementation Date: October 1, 2003	These instructions should be implemented within your current operating budget
Pre-Implementation Contact(s): Olen Clybourn (410) 786-9327 & Marlene Kidd (410) 786-5243	current operating budget
Post-Implementation Contact(s): Olen Clybourn (410) 786-9327 & Marlene Kidd (410) 786-5243	