# **Program Memorandum Carriers**

Department of Health & Human Services (DHHS) Centers for Medicare & Medicaid Services (CMS)

Transmittal B-02-080

Date: NOVEMBER 1, 2002

# CHANGE REQUEST 2317

# SUBJECT: MCS Standard System Financial Data Report Requirements for the Production Performance Monitoring System, Pulse System

# **Background**

The production performance monitoring system Pulse, provides real-time analysis of claims processed, providing CMS immediate feedback to critical performance issues for all Medicare contractors. Pulse currently collects workload data from the HCFA 1565/1566, HCFA 1565E/1566E reports, from all contractors. Pulse collects HCFA 1522 financial data from all VMS and FISS standard system contractors. APASS standard system contractors submit a one line financial report identifying daily "Total Benefit Dollars Paid" and "Number of Claims Paid." Pulse does not receive HCFA 1522 financial data from MCS standard system contractors. (The reports still have the HCFA acronym instead of CMS.)

# **Purpose**

In order to better monitor contractor performance, CMS needs to obtain a flat file containing MCS Financial Information from each MCS Standard System Financial cycle for the PULSE Medicare Contractor Process Counts monitor systems.

This document outlines the Part B/DMERC Standard Systems changes required to provide CMS with contractor 1522 claims data via a flat file for loading into the Pulse database. This change will be implemented first by MCS standard system contractors in order to collect the Benefit Dollars Paid information that Pulse is currently receiving from all other Medicare contractors.

# Impact on Standard System

The MCS Standard System will be required to create and transmit one flat files to the CMS data center with each financial cycle. The values should represent daily totals.

# Assumptions and Constraints

• Files must be included in the current transmission to the CMS data center via CONNECT:Direct® with the current Pulse files

CMS-Pub 60B

# File Formats

Field Name   Picture   From   Thru   Initialization     Contractor Information   GROUP   1   15      Contractor ID   X(5)   1   5   Spaces     Record Type   X   6   6   '2'     Contractor Type   X   7   7   Spaces     Cycle Date - CCYYMMDD   X(8)   8   15   Spaces     Filler - Redefines Cycle date   Group   8   15      Cycle Year   9(4)   8   11       Cycle Month   99   12   13       Cycle Day   99   14   15       Data Center ID   X(2)   16   17      FILLER   X(11   18   28       Ortal Benefit Dollars Paid   S9(11)v99 Comp-3   36   40      Mise Check Total   S9(11)v99 Comp-3   48   54      HPSA Dollars Paid   S9(11)v99 Comp-3<						
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Contractor Information   GROUP   1   15     Contractor ID   X(5)   1   5   Spaces     Record Type   X   6   6   '2'     Contractor Type   X   7   7   Spaces     Cycle Date - CCYYMMDD   X(8)   8   15   Spaces     Filler - Redefines Cycle date   Group   8   15   Spaces     Cycle Date - CCYYMMDD   X(8)   8   11    Cycle Year   9(4)   8   11     Cycle Month   99   12   13     Cycle Day   99   14   15    Data Center ID   X(2)   16   17    FILLER   X(11   18   28     Description   35   Total Benefit Dollars Paid   S9(1)v99 Comp-3   36   40     Manual Check Total   S9(1)v99 Comp-3   48   54     EST   HPSA Dollars Paid   S9(1)v99 Comp-3   62   68    Checks Deposited amount	Field Name	Diatura	From	Thru	Initialization	
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Interest Received from:   GROUP   139   148   0     Offsets   S9(7)v99 Comp-3   139   143      Refunds   S9(7)v99 Comp-3   144   148      FILLER   X(21)   149   169      Interest Paid due to:   GROUP   170   179   0     CPT   S9(7)v99 Comp-3   170   174      Hearings   S9(7)v99 Comp-3   175   179		· · · · · · · · · · · · · · · · · · ·	118	138		
Offsets   S9(7)v99 Comp-3   139   143     Refunds   S9(7)v99 Comp-3   144   148     FILLER   X(21)   149   169     Interest Paid due to:   GROUP   170   179   0     CPT   S9(7)v99 Comp-3   170   174     Hearings   S9(7)v99 Comp-3   175   179	Interest Received from:		139	148	0	
Refunds   S9(7)v99 Comp-3   144   148     FILLER   X(21)   149   169     Interest Paid due to:   GROUP   170   179   0     CPT   S9(7)v99 Comp-3   170   174     Hearings   S9(7)v99 Comp-3   175   179			139			
FILLER   X(21)   149   169     Interest Paid due to:   GROUP   170   179   0     CPT   S9(7)v99 Comp-3   170   174     Hearings   S9(7)v99 Comp-3   175   179		S9(7)v99 Comp-3				
Interest Paid due to:   GROUP   170   179   0     CPT   S9(7)v99 Comp-3   170   174     Hearings   S9(7)v99 Comp-3   175   179						
CPT   S9(7)v99 Comp-3   170   174     Hearings   S9(7)v99 Comp-3   175   179					0	
Hearings   S9(7)v99 Comp-3   175   179						
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FILLEK   X(21)   180   200	FILLER	X(21)	180	200		

# DATA ELEMENT DETAIL

Data Element: Contractor IDDefinition:Contractor's MCS assigned number.Validation:Must be a valid MCS Contractor IDRemarks: N/ARequirement:Requirement:Required.CopyBook:PUL-CONTRACTOR-ID

#### Data Element: **Record Type**

Definition: Code indicating type of record.

Validation: N/A

Remarks: 1 = Claims Workload record

- 2 = 1522 Part B Daily Record
- 3= 1522 Part B Wrap Record (MCS Only, end of month 'clean-up')
- Requirement: Required.

CopyBook: PUL-RECORD-TYPE

#### Data Element: **Contractor Type**

Definition: Type of Medicare Contractor

- Validation: Must be 'B' or 'D'
- Remarks: B = Part B
  - D = DMERC

Requirement: Required.

CopyBook: PUL-CONTRACTOR-TYPE

#### Data Element: Cvcle Date

- Definition: The date under which the data reported is stored in the database. The date of the cycle from which the data was produced (Standard System Batch Processing Date). Validation: Must be a valid date CCYYMMDD.

Remarks:

Requirement: Required.

PUL-CYCLE-DATE CopyBook:

#### Data Element: Cycle Date Year

Definition: Year Must be a valid Year CCYY Validation: Remarks: Requirement: Required. CopyBook: PUL-CYCLE-YEAR

## Data Element: Cycle Date Month

Definition<sup>.</sup> Month Validation: Must be a valid month MM. Remarks: Requirement: Required. PUL-CYCLE-MONTH CopyBook:

#### Data Element: Cycle Date Day

Definition: Day Validation: Must be a valid day for the day DD. Remarks: Requirement: Required. PUL-CYCLE-DAY CopyBook:

Data Element: Data Center ID Definition: Unique 2 digit ID Validation: Equivalent to the DC ID submitted in the Pulse Header Record for the 1565 Remarks: Requirement: Required CopyBook: PUL-PTB-DCID

#### Data Element: Benefit Dollars Paid

Definition: Total dollars or the sum of all checks for the processing date Validation: Remarks: Daily Requirement: Not Required. CopyBook: PUL-PTB-TOT-BENE-PD

# Data Element: Total Claims Paid

Definition:Number of claims that impacted the Benefit Dollars paid value.Validation:Must be NE to Zero if Benefit Dollars Paid is NE to ZeroRemarks: DailyRequirement:Requirement:Not Required.CopyBook:PUL-PTB-TOT-CLMS-PD

## Data Element: Misc Check Total

Definition: Total dollars issued on Misc. Checks, or checks that were created by the standard system not associated with a specific claim Validation: Remarks: Daily Requirement: Not Required CopyBook: PUL-PTB-TOT-MICS-CK

#### Data Element: Manual Check Total

Definition: Total dollars issued on Manual Checks, or checks that were created outside of the standard system, that are tracked in the standard system. Validation: Remarks: Daily Requirement: Not Required CopyBook: PUL-PTB-TOT-MAN-CK

#### Data Element: HPSA Dollars Issued

Definition: Total dollars paid for HPSA benefit Validation: Remarks: Daily Requirement: Not Required CopyBook: PUL-PTB-HPSA-AMT-PD

#### Data Element: EFT transactions initiated

Definition: Total dollars issued on EFT transactions Validation: Remarks: N/A Requirement: Not Required CopyBook: PUL-PTB-EFT-TRANS-AMT

#### Data Element: Checks deposited

Definition: Total dollars received from checks deposited Validation: Remarks: Daily Requirement: Not Required CopyBook: PUL-PTB-CHECKS-DEP-AMT

# Data Element: Benefits paid per Entitlement Reason – Disabled

Definition: Total dollars paid on claims with Medicare Entitlement Reason of Disabled Validation: Remarks: Daily Requirement: Not Required CopyBook: PUL-PTB-BENE-DISABLED

## Data Element: Benefits paid per Entitlement Reason – ERSD

Definition: Total dollars paid on claims with Medicare Entitlement Reason of ESRD Validation: Remarks: Daily Requirement: Not Required CopyBook: PUL-PTB-BENE-ESRD

## Data Element: Benefits paid per Entitlement Reason – AGED

Definition: Total dollars paid on claims with Medicare Entitlement Reason of Aged Validation: Remarks: Daily Requirement: Not Required CopyBook: PUL-PTB-BENE-AGED

# Data Element: Interest received from offsets

Definition: Total dollar amount received as a result of offset interest. Validation: Remarks: Daily Requirement: Not Required CopyBook: PUL-PTB-INT-OFFSETS

# Data Element: Interest received from Refunds

Definition: Total dollar amount received as a result of refund interest. Validation: Remarks: Daily Requirement: Not Required CopyBook: PUL-PTB-INT-REFUNDS

Data Element: Interest paid due to CPT Definition: Total dollar amount paid to satisfy CPT interest. Validation: Remarks: Daily Requirement: Not Required CopyBook: PUL-PTB-INT-CPT Data Element: Interest paid due to Hearings Definition: Total dollar amount paid in interest as a result of hearings. Validation: Remarks: Daily Requirement: Not Required CopyBook: PUL-PTB-INT-HEARINGS

The effective date for this PM is for claims with dates of service on and after April 1, 2003.

The implementation date for this PM is April 1, 2003.

These instructions should be implemented within your current operating budget.

This PM may be discarded after December 31, 2003.

If you have any questions, contact Gloria Stedding at 410-786-8520 or <u>gstedding@cms.hhs.gov</u>

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