
CMS Manual System

Pub. 100-20 One-Time Notification

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

Transmittal 97

Date: JULY 23, 2004

CHANGE REQUEST 3362

I. SUMMARY OF CHANGES: Change Request 3256, Transmittal 43, Pub.100-06, dated April 30, 2004, (October release) added a business segment identifier to the contractor identification number to create a new contractor workload identifier and incorporated the new identifier in the shared systems, Common Working File and the CROWD reporting system. The new identifier will distinguish contractor workloads at a state level and will be used for contractor transitions. This change request incorporates the BSI into the HIGLAS system.

Contractor transitions, mandated by MMA or for other reasons, require the transfer of claims related data from the outgoing contractor to a new contractor. HIGLAS will replace accounting subsystems in the shared systems and will be the official store of accounting transactions for claims administration. Thus, these financial transactions will be subject to transfer in contractor transitions.

NEW/REVISED MATERIAL - EFFECTIVE DATE: January 1, 2005

***IMPLEMENTATION DATE: January 3, 2005**

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual not updated.)
(R = REVISED, N = NEW, D = DELETED)

R/N/D	CHAPTER/SECTION/SUBSECTION/TITLE
N/A	

***III. FUNDING:**

These instructions shall be implemented within your current operating budget.

IV. ATTACHMENTS:

	Business Requirements
	Manual Instruction
	Confidential Requirements
X	One-Time Notification
	Recurring Update Notification

***Medicare contractors only**

Attachment - One-Time Notification

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SUBJECT: Implementation of the Business Segment Identifier (BSI) in the Healthcare Integrated General Ledger Accounting System (HIGLAS)

I. GENERAL INFORMATION

A. Background:

This change request is necessary for the implementation of Medicare Contracting Reform as required by Section 911 of the Medicare Modernization Act of 2003.

CMS has modified the contractor/workload identification system to incorporate a contractor/workload identifier that combines the contractor identification number with a business segment identifier (BSI) that is intended to distinguish specific claims administration workloads on a geographic basis. The BSI is incorporated in the shared systems, Contractor Report of Workload Data (CROWD) system and CWF. CMS is initiating the current CR to add the BSI to HIGLAS and establish the capability within HIGLAS to distinguish contractor workloads by the BSI to facilitate transfers of contractor fee-for-service workloads.

The HIGLAS system is implemented at two pilot contractor sites and will be implemented at all other contractors on a phased schedule. HIGLAS will replace accounting subsystems in the shared systems and will be the official store of accounting transactions for claims administration. Thus these financial transactions will be subject to transfer in the event that fee-for-service workloads are transitioned to a new contractor.

To summarize the implementation plan for the new contractor workload identifier, intermediaries will have October through December, 2004 to determine the BSI for all providers and to enter the code on the FISS provider file. FISS will pick up the BSI and add it to the claims records within FISS. All shared systems will add the BSI to submissions to CWF and CWF will store the BSI. Beginning in January, 2005 all contractors will submit CROWD reports at the BSI level.

The following summarizes the structure of the contractor workload identifier. Medicare fee-for-service (FFS) workloads will be identified at the state level within contract type workload, i.e. Intermediary, Regional Home Health Intermediary (RHHI), Carrier, and Durable Medical Equipment Regional Carrier (DMERC). The Contractor Workload Identifier is a nine-digit alphanumeric identifier composed of the following:

- The first five characters equal the five-digit CROWD reporting number.
- The last four characters represent the Business Segment Identifier consisting of the following:

- + A two-character contract jurisdiction code, which is represented by the official United States Postal Service (USPS) state/territory abbreviation, where applicable (for example, New York = NY). These are the sixth and seventh characters of the contractor ID number.
- + A two-character modifier to identify the type of Medicare FFS contract: A_ = intermediary, R_ = RHHI, B_ = carrier, D_ = DMERC. These are the eighth and ninth characters of the contractor workload identifier. For now, the ninth character is filled with a space.

The contractor workload identifier must be utilized to assist in distinguishing records to be transitioned to another contractor.

B. Policy:

The purpose of this change request is to incorporate the contractor workload identifier in HIGLAS to allow the identification of state specific workloads within a contractor. Because HIGLAS will store claims and financial data for the FFS contractors, that data will be part of the Medicare data that is transferred during a contractor transition and must be identifiable at the level at which contractor transitions take place.

Summary of Changes

The 274 interface with HIGLAS will be modified to include the business segment identifier. The initial load of provider information as well as any updates will include the business segment identifier.

HIGLAS will modify the HIGLAS vendor and supplier files to store the BSI. At the time of a contractor transition, HIGLAS will identify the financial records to be transitioned from one contractor to another by selecting from the vendor and supplier files the provider numbers that have the workload identifier to be “transferred” and matching those provider numbers on the HIGLAS history files.

The incorporation of the BSI into HIGLAS will not alter claims or financial processing, either for daily processing or periodic reporting. The functions fulfilled by the current 5-character contractor ID will continue. The number of batch and check runs per contractor shall not increase as a result of the new contractor workload identifier.

There will not be any impact on providers as the BSI is entirely internal to contractor operations.

C. Provider Education: *Medicare contractors do not need to educate providers.*

II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement

"Should" denotes an optional requirement

Requirement #	Requirements	Responsibility
3362.1	HIGLAS shall receive and store the business segment identifier on the vendor and supplier files (provider file).	HIGLAS
3362.1.1	Shared Systems shall add the business segment identifier on the HIGLAS 274 provider interface for original submissions and all updates.	FISS MCS HIGLAS
3362.2	The HIGLAS pilot contractors shall submit a one-time 274 update of all 274 transactions since the implementation of HIGLAS. The submission shall be in January 2005.	FISS Palmetto MCS Empire

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

D. Contractor Financial Reporting /Workload Impact:

Contractor financial reporting will not be affected by the inclusion of the contractor workload identifier in HIGLAS. HIGLAS will produce all financial reports based on the contractor number assigned to the contractor home office for administrative budget and cost reporting, rather than the business segment identifier.

E. Dependencies:

The intermediary must have completed the determination of the business segment identifier for all providers serviced by the FI and encoded the BSI on the FISS provider file.

F. Testing Considerations: N/A

IV. SCHEDULE, CONTACTS, AND FUNDING

<p>Effective Date: January 1, 2005</p> <p>Implementation Date: January 3, 2005</p> <p>Pre-Implementation Contact(s): Jane Herlocker jherlocker@cms.hhs.gov 410-786-7412</p> <p>Post-Implementation Contact(s): Jane Herlocker jherlocker@cms.hhs.gov 410-786-7412</p>	<p>These instructions shall be implemented within your current operating budget.</p>
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