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# CMS Manual System

## Pub. 100-20 One-Time Notification

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

Transmittal 76

Date: APRIL 30, 2004

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CHANGE REQUEST 3178

**I. SUMMARY OF CHANGES:** This transmittal provides updated information regarding the hours reserved to correct problems in the October 2004 release. Hours were previously reserved for the July 2004 release. Hours will also be reserved in the October 2004 release of each shared system maintainer and Common Working File (CWF) for HIPAA transaction programming to rectify identified problems, allow submitter testing to be expanded, if necessary, and enable successful use of the affected transactions in production. The CMS Maintenance Lead for each shared system will coordinate prioritization of current and future problems for correction by that shared system.

**NEW/REVISED MATERIAL - EFFECTIVE DATE: October 1, 2004**

**\*IMPLEMENTATION DATE: October 4, 2004**

*Or*

**CLARIFICATION – EFFECTIVE/IMPLEMENTATION DATE: Not Applicable.**

*Disclaimer for manual changes only: The revision date and transmittal number apply to the red italicized material only. 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 (N/A if manual not updated.)**  
**(R = REVISED, N = NEW, D = DELETED) – (Only One Per Row.)**

| R/N/D | CHAPTER/SECTION/SUBSECTION/TITLE |
|-------|----------------------------------|
|       |                                  |
|       |                                  |
|       |                                  |
|       |                                  |

**\*III. FUNDING:**

**These instructions shall be implemented within your current operating budget.**

**IV. ATTACHMENTS:**

|          |                                      |
|----------|--------------------------------------|
|          | <b>Business Requirements</b>         |
|          | <b>Manual Instruction</b>            |
|          | <b>Confidential Requirements</b>     |
| <b>X</b> | <b>One-Time Notification</b>         |
|          | <b>Recurring Update Notification</b> |

**\*Medicare contractors only**

# Attachment - One-Time Notification

|             |                 |                      |                     |
|-------------|-----------------|----------------------|---------------------|
| Pub. 100-20 | Transmittal: 76 | Date: APRIL 30, 2004 | Change Request 3178 |
|-------------|-----------------|----------------------|---------------------|

**SUBJECT:** Shared System Maintainer Hours for Resolution of Problems Detected During Health Insurance Portability and Accountability Act (HIPAA) Transaction Release Testing

## I. GENERAL INFORMATION

### A. Background:

Hours need to be reserved in the October 2004 release of each shared system maintainer and the Common Working File (CWF) for HIPAA transaction programming to rectify problems.

### B. Policy:

HIPAA transactions must comply with the implementation guides. If errors are detected, error resolution must occur in a timely manner.

### C. Provider Education: None

## II. BUSINESS REQUIREMENTS

*"Shall" denotes a mandatory requirement*

*"Should" denotes an optional requirement*

| Requirement # | Requirements  | Responsibility                                   |
|---------------|---|--|
| 3178.1        | Reserve hours in the October 2004 release for HIPAA transaction programming to rectify identified problems. | Shared System Maintainer and Common Working File |

## III. SUPPORTING INFORMATION & POSSIBLE DESIGN CONSIDERATIONS

### A. Other Instructions: None

| X-Ref Requirement # | Instructions |
|---------------------|--------------|
|                     |              |

### B. Design Considerations: None

| X-Ref Requirement # | Recommendation for Medicare System Requirements |
|---------------------|---|
|                     |   |

C. **Interfaces:** None

D. **Contractor Financial Reporting /Workload Impact:** *None*

E. **Dependencies:** None

F. **Testing Considerations:** None

#### IV. SCHEDULE, CONTACTS, AND FUNDING

|   |   |
|---|---|
| <p><b>Effective Date: October 1, 2004</b></p> <p><b>Implementation Date: October 4, 2004</b></p> <p><b>Pre-Implementation Contact(s): Joy Glass</b><br/><a href="mailto:jglass@cms.hhs.gov">jglass@cms.hhs.gov</a></p> <p><b>Post-Implementation Contact(s): Joy Glass</b><br/><a href="mailto:jglass@cms.hhs.gov">jglass@cms.hhs.gov</a></p> | <p>These instructions shall be implemented within your current operating budget</p> |
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