CMS Manual System	Department of Health & Human Services (DHHS)
Pub. 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 18	Date: OCTOBER 31, 2003
	CHANGE REQUEST 2668

I. SUMMARY OF CHANGES

The VMS system maintainer has reported that the space available to add data to the Beneficiary History File and Claims In Process File has reached the system limitation. Any future CMS mandate that would require storing new data on Beneficiary History or CIP could not be implemented until the expansion of these files are completed. This Change Request (CR) is the final phase of the three-phase implementation to complete the associated changes necessary to the VMS system. Phase three will encompass the analysis, design, coding, testing, and implementation of expanding the post-adjudication functionality of the Claims In Process File.

NEW/REVISED MATERIAL - EFFECTIVE DATE: April 1, 2004
                                        *IMPLEMENTATION DATE: April 5, 2004

Disclaimer: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged.

II. SCHEDULE OF CHANGES (R = REVISED, N = NEW, D = DELETED)

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

*III. FUNDING: These instructions should be implemented within your current operating budget.

IV. ATTACHMENTS:

	Business Requirements
	Manual Instruction
	Confidential Requirements
X	**One-Time Notification**

*Medicare contractors only

To download the Filename R18CP1.pdf associated with this instruction, click [here](#).