
CMS Manual System

Pub. 100-08 Medicare Program Integrity

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

Transmittal 58

Date: NOVEMBER 28, 2003

CHANGE REQUEST 2939

I. SUMMARY OF CHANGES: The Provider Enrollment, Chain and Ownership System (PECOS) is the national repository for all Medicare provider enrollment information. Fiscal intermediaries and most carriers are being instructed to cease data input into the CROWD system since PECOS can provide CMS with the required workload reports.

NEW/REVISED MATERIAL - EFFECTIVE DATE: June 30, 2003

***IMPLEMENTATION DATE:** December 10, 2003.

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
R	10/20/Tracking Requirements

III. FUNDING: *Medicare contractors only:

These instructions should be implemented within your current operating budget.

IV. ATTACHMENTS:

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

Business Requirements

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I. GENERAL INFORMATION

A. Background: Prior to PECOS, Medicare contractors have submitted provider enrollment workload data into CROWD on a quarterly basis. Now that PECOS is operational, most contractors can cease provider enrollment workload input into the CROWD system.

B. Policy: N/A

C. Provider Education: None

II. BUSINESS REQUIREMENTS:

"Shall" denotes a mandatory requirement

"Should" denotes an optional requirement

Requirement #	Requirements	Responsibility
	Carriers that process more than one state or workload under one number yet reports those workloads under separate numbers to CROWD shall continue to submit the provider enrollment information separately into CROWD.	Carriers

II. SUPPORTING INFORMATION AND 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: This is a reduction to the contractor workload reporting.

E. Dependencies: N/A

F. Testing Considerations: N/A

IV. OTHER CHANGES: N/A

Citation	Change

V. SCHEDULE, CONTACTS, AND FUNDING

<p>Effective Date: June 30, 2003 Implementation Date: December 10, 2003 Pre-Implementation Contact(s): N/A Post-Implementation Contact(s): N/A</p>	<p>These instructions should be implemented within your current operating budget</p>
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20 - Tracking Requirements

(Rev. 58, 11-28-03)

The Provider Enrollment, Chain, and Ownership System (PECOS) is the national repository for all provider and supplier enrollment information and all provider enrollment application information will be logged into PECOS. PECOS will respond to all tracking inquiries about the application, and only the Medicare contractor responsible for the application can change an application's status as information is received. All others will have read-only access, i.e., Railroad Retirement Board. PECOS will provide contractor workload reports as needed. These reports will automatically calculate the statistics requested in the yearly Budget Performance Requirements, which will be reported via the monthly Interim Expenditure Report (IER). IER directions can be found in the Medicare Financial Management Manual, Chapter 2, Budget Execution. Therefore, FIs and most carriers are no longer responsible for submission of provider enrollment quarterly reports via the CROWD system to CMS. Carriers that process more than one state or workload under one number yet reports those workloads under separate numbers to CROWD must continue to submit provider enrollment information separately into CROWD.

For FIs only: FIs will get a separate count for a CMS 855A submitted by the old entity as a change of information and an initial CMS 855A submitted by the new entity in the case of a Change of Ownership, Acquisition/Merger, or Consolidation.