
CMS Manual System

Pub. 100-06 Medicare Financial Management

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

Transmittal 22

Date: OTOBER 3, 2003

CHANGE REQUEST 2782

I. SUMMARY OF CHANGES: Adds the Provider Overpayment Reporting System manual and the Physician/Supplier Overpayment Reporting System manual to Chapter 3. This Change Request is a Non-Systems Change Request. System Maintainers are not required to make changes to any standard system or any standard system reports.

NEW/REVISED MATERIAL - EFFECTIVE DATE: October 20, 2003

***IMPLEMENTATION DATE: October 20, 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
N	3/180 - Exhibit 1 - Provider Overpayment Reporting System
N	3/180.1.1 – Provider Overpayment Reporting System – Data Entry
N	3/180.1.2 – Provider Overpayment Report Printout
N	3/180.1.3 – POR System User Manual
N	3/180.1.4 – List of Status Codes
N	3/180.1.5 – Posting Interest Entries
N	3/180.2 - Exhibit 2 - Physician/Supplier Overpayment Reporting System
N	3/180.2.1 – Data Entry
N	3/180.2.2 – PSOR User Manual
N	3/180.2.3 – Advance Payments User Manual

III. FUNDING: *Medicare contractors only:

These instructions should be implemented within your current operating budget.

IV. ATTACHMENTS:

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

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