CMS Manual System	Department of Health & Human Services (DHHS)
Pub. 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)

Transmittal 86	Date: MAY 28, 2004

CHANGE REQUEST 3142

I. SUMMARY OF CHANGES: Information in this change request will provide contractors a ReMAS generated data format to be incorporated, if they choose, into current MSP debt tracking systems.

NEW/REVISED MATERIAL - EFFECTIVE DATE: Per Attachment 2
                                              ***IMPLEMENTATION DATE: Per Attachment 2**

II. CHANGES IN MANUAL INSTRUCTIONS:
     (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

Pub.100-200	Transmittal: 86	Date: May 28, 2004	Change Request 3142

SUBJECT: Interface File from Recovery Management and Accounting System (ReMAS)

I.   GENERAL INFORMATION

A.   Background: In order to continue to increase recoveries and manage administrative resources prudently, the Centers for Medicare & Medicaid Services (CMS) contracted with VIPS and Northrop Grumman Mission Systems to develop ReMAS. The purpose of ReMAS is to identify and track cases of mistaken and conditional payments that are to be recovered by CMS.

The tracking and resolution of non-group health plan (non-GHP) (liability, workers' compensation, and auto no fault) MSP recovery cases has long placed a significant workload burden on the contractors. The lead recovery contractor role requires that the lead fiscal intermediary (FI) manually request information via an Inter-Contractor Notice (ICN) from other FIs and carriers regarding claims that have been paid conditionally, which are specific to the accident/injury/illness. The claims data that is received from external sources then has to be manually input into the FI tracking systems. Because the effort to develop these cases is so manually intensive, a backlog has developed at the FIs and potential recovery of Medicare dollars is at risk. These conditions also contribute to customer service/industry concerns regarding Medicare's responsiveness to its customers.

The CMS has recognized that ReMAS Release 1 can provide valuable functionality to resolve or alleviate many of these concerns. This implementation is not contingent on the Healthcare Integrated General Ledger Accounting System (HIGLAS) functionality. HIGLAS provides the long-term accounting and letter-writing solutions for recovering all MSP debt. The current MSP recovery systems that are used at the FIs, however, perform these functions with varying degrees of automation. The interim solution provided by this software implementation will enable ReMAS to provide data that can be systematically uploaded into contractor A/R tracking mechanisms that will eliminate manual processes and begin to centralize case tracking and reporting.

B.   Policy: The purpose of this One-Time Notification is to inform FIs, who are currently MSP lead recovery contractors for liability, auto no-fault and workers' compensation cases, of the interface file available from the ReMAS and its interaction with any tools/software that the FIs are currently using for tracking debt for their liability, auto no-fault and workers' compensation workloads.

The ReMAS identifies and creates case files based on two sources: Common Working File (CWF) unsolicited MSP ("HUSC") transactions and user entry of beneficiary HICNs for backlogged non-GHP recovery cases.

   1.   CWF HUSC Lead Receipt:

For this solution, ReMAS processes only valid non-GHP HUSC transactions; these are transactions with MSP Types "L" (liability), "E" (workers' compensation) and "D" (automobile no-fault) and a validity indicator of "Y" (MSP occurrence is confirmed). When a transaction is received, ReMAS checks to see if the beneficiary is in the database and, if not, sends a request to the Medicare Beneficiary Database (MBD) system to obtain the data. The HUSC record indicates the lead contractor designation. If the MSP lead is not assigned to a contractor that is under ReMAS, it is either dropped (beneficiary is already in ReMAS database) or marked for deletion. There will be no further processing against these leads. For those leads that can be assigned, a case is built in ReMAS using the MSP type from the HUSC transaction. The case is automatically assigned to a user at the FI site. A daily report by FI Contractor number of new non-GHP cases added from the CWF process is accessible through ReMAS**.**

2. Backlog Recovery Lead Receipt:

   Each FI has a subset of MSP cases to which they have been assigned as lead contractor, but which have not been fully developed in their own MSP recovery systems. A new ReMAS function, "Add Non-GHP MSP Lead", will be added to allow users to develop fully in ReMAS. The FI enters the HICN, MSP type and dates of service for the beneficiary and ReMAS requests beneficiary data for the HICN from MBD. When the beneficiary data is successfully returned from MBD, a non-GHP case is built in ReMAS. The case is automatically assigned to a user at the FI site. A daily report by FI contractor number of new non-GHP cases added by the "add lead" process is accessible through ReMAS.

3. Initial Claim Retrieval:

   The ReMAS automatically sends an initial request for claims from National Claims History (NCH) and National Medicare Utilization Database (NMUD) through the Data Extract System (DESY) for each new non-GHP case in ReMAS. When (and if) claims are returned from DESY, they are attached to the case. The case is put in a suspended status and a user alert, which is accessible through ReMAS, is issued to the case-assigned user.

   The case-assigned user reviews the claims that have been retrieved. Using the ReMAS Case Detail window, and applying case filters, or manually updating the claim-case association status codes, the user reviews and selects the claims that should be attached to the non-GHP case (i.e., claims related to injury). The user then selects an option that triggers ReMAS interface activity.

   The ReMAS generates standard format interface files that contain the new case information and claim level data for all claim and claim lines that are actively associated with the case in ReMAS. The FI MSP recovery system receives this data and the case and claims are added to that system. The FI MSP recovery system is used to generate the initial conditional payment letter.

4. Subsequent Claim Retrieval:

   Based on an elapsed time parameter established by the central office (CO) in the ReMAS system, an automatic request for additional claims is sent to DESY for every active case in the system. When the new claims are added, the case is suspended and a new user alert is issued. The FI user again screens the claims that have been retrieved and when that is complete, the user selects an option that indicates the new claims are to be sent to the FI MSP recovery system in the standard interface file. The claims are added to the existing case in the FI MSP recovery system.

5. Conditional Payment Letters:

   Based on an elapsed time parameter established by the CO in the ReMAS system, a periodic conditional payment letter request is sent to the FI MSP recovery system in the interface. This is a trigger for the FI system to generate a conditional payment letter using the case and claim data that have been fed to it through the ReMAS interface and stored in the FI system. The actual generation of this letter by the FI is currently optional.

6. Updates:

   If certain updates to the CWF HUSC are received by ReMAS, an automated interface file is created to indicate the changes. The update fields that result in an interface transaction are:

   - MSP occurrence incident date;

   - MSP occurrence termination date;

   - Change to insurer attached to the MSP occurrence;

   - Change to the attorney attached to the MSP occurrence;

   - Change to the address of the insurer attached to the MSP occurrence;

   - Change to the address of the attorney attached to the MSP occurrence; and

   - Change to the address of the beneficiary attached to the MSP occurrence.

7. Case Settlement:

   When the FI user receives information that the settlement has been reached, she/he uses ReMAS to place the case in a status which will trigger a final claim retrieval from DESY. When the claims come back, ReMAS puts the case in a status to indicate that the process is complete and sends an alert to the FI user. The FI user does a final claim screening, enters the settlement data in the ReMAS Settlement Detail window, and ReMAS automatically calculates the demand amount. The user then selects an option to indicate that the case is ready for receivable establishment. All active claims that are associated to the case are sent in the standard FI system

interface files. A settlement transaction is also generated by ReMAS, in which complete settlement data is sent to the FI system. The FI MSP recovery system receives this transaction as a trigger to establish a receivable and send the demand letter.

8. Receivable Tracking:

After the receivable is established in the FI MSP recovery system, all additional tracking is performed through that FI system. This includes the generation of additional demand letters, referrals of debts to collection agencies, responses to requests for waiver, appeal and compromise, and recoupment tracking. Financial reporting, including the Chief Financial Officer (CFO) report and MSP savings reporting is also generated from the FI systems, using the mechanisms currently in place in those systems.

C.   Provider Education: None.

II.   BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement
"Should" denotes an optional requirement

Requirement #	Requirements	Responsibility
3142.1	MSP lead liability contractors should receive an interface file from ReMAS via NDM using connect direct. Every file has a header and trailer record. Within the file are record groupings based on the type of transaction being transmitted. Attachment 1 has the file format. Lead FIs should use this interface file to support their debt tracking mechanisms and eliminate manual processes, if possible.	FIs --MSP lead recovery contractors for liability

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: The interface file is between ReMAS and the tools/software that the FIs are currently using for tracking debt for their liability, no-fault and workers' compensation workloads. The interface will be via NDM using Connect Direct. The CMS will NDM the FI interface file to the proper FI. If the lead FI chooses to implement a systematic interface between ReMAS and their current debt tracking system, the lead FI will NDM to CMS an Interface File Status Notification indicating whether the FI interface file was received and successfully processed. CMS will work with each lead FI site to establish NDM connectivity if it does not exist and to exchange NDM node ids and passwords. Dataset naming conventions for each lead FI will also be established.

D.   Contractor Financial Reporting /Workload Impact: N/A

E.   Dependencies: N/A

F.   Testing Considerations: N/A

IV. SCHEDULE, CONTACTS, AND FUNDING

Effective Date: See Attachment 2 for ReMAS Schedule **Implementation Date: See Attachment 2 for ReMAS Schedule** **Pre-Implementation Contact(s):** Mary Minnick**, (410) 786-7517** **Post-Implementation Contact(s):** Mary Minnick**, (410) 786-7517**	**Funding is available through the regular budget process for costs required for implementation**.

Attachments

ATTACHMENT 1

REMAS INTERFACE FILE

FILE DESCRIPTION

The following Interface Record Types will be generated by ReMAS in the daily interface.

- File Header
- Case Header
- Case Party
- Case Claim
- Case Claim Line
- Case Settlement
- Correspondence
- Case Status
- File Trailer

Each FI receives its own interface file and every file has a header and trailer record. Within the file are groupings of records based on the type of transaction being transmitted. The following table describes the record groupings for each transaction type.

The FI will return a single record file to ReMAS that provides notification of whether the interface file was received and successfully processed. This is termed an Interface File Status Notification.

CMS will send each FI interface file to the proper lead FI using Network Data Mover (NDM). Each FI that chooses to implement a systematic interface with ReMAS and their existing MSP debt tracking system, will NDM to CMS the Interface File Status Notification. CMS will work with each lead FI to establish NDM connectivity between the sites if it does not already exist and exchange NDM node ids and passwords, and agreed-upon dataset names.

Table 1: Interface Transaction Record Sets

Transaction Set Type	Transaction Set Code	Record Types
Header Record	000	File Header
New Case	010	Case Header Case Party – Beneficiary Case Party – Insurer (if applicable) Case Party – Attorney (if applicable) Case Claim (One per Part A claim) Case Claim Line (One per Part B claim line)
Add Claims	020	Case Header Case Claim (One per Part A claim) Case Claim Line (One per Part B claim line)

Transaction Set Type	Transaction Set Code	Record Types
Settlement	030	Case Header Case Settlement Case Claim (One per Part A claim) Case Claim Line (One per Part B claim line)
Case Status	040	Case Header Case Status
Correspondence	050	Case Header Case Correspondence
Change Lead Data	060	Case Header Case Party – Beneficiary (if changed) Case Party – Insurer (if changed) Case Party – Attorney (if changed)
Trailer Record	999	File Trailer

Table 2: File Header Record Layout

Field Name	Description/Value	Picture	Req.?	Data Source
FI Contractor Number	Fiscal Intermediary number of contractor receiving file	X(5)	Y	Program parameter
Case Control Id	0	9(15)	Y	0
Transaction Set Type Code	000	X (3)	Y	0
Transaction Set Sequence Number	0	PIC 9(10)	Y	0
Record Type	FHDR	X(4)	Y	FHDR
Record Sequence Number	Always 0 for this record type	PIC 9(05)	Y	0
File Date/Time	Date and time file was created by ReMAS	X(19): YYYY-MM-DD-hh.mm.ss	Y	Program generated
ReMAS Batch Cycle Control Identifier	Current cycle control identifier from REM_FI_INTRFC	9(15)	Y	REM_FI_INTRFC. BATCH_CYC_CNTL_ID
Party Control Identifier	Party control identifier of the FI	9(15)	Y	REM_FI_INTRFC. PRTY_CNTL_ID
Interface entry posting timestamp	Timestamp from the REM_FI_INTRFC table for the FI interface entry	X(26)	Y	REM_FI_INTRFC. INTRFC_PSTG_TS

Table 3: File Trailer Record Layout

Field Name	Description/Value	Picture	Req ?	Data Source
FI Contractor Number	Fiscal Intermediary number of contractor receiving file	X(5)	Y	The same as the header value
Case Control Id	All nines	9(15)	Y	All nines
Transaction Set Type Code	999	X (3)	Y	999
Transaction Set Sequence Number	0	PIC 9(10)	Y	0
Record Type	FTLR	X(4)	Y	FTLR
Record Sequence Number	Always 0 for this record type	PIC 9(05)	Y	0
Transaction Count	Number of transaction record sets on file	9(7)	Y	Program generated
Record Count	Number of individual records on file	9(7)	Y	Program generated

Table 4: Case Header Record Layout

Field Name	Description/Value	Picture	Req. ?	Data Source
FI Contractor Number	Fiscal Intermediary number of lead contractor receiving file	X(5)	Y	REM_MDCR_ORG/ CMS_ORG_NUM
Case ID	ReMAS Case ID of case being transmitted	9(15)	Y	REM_CASE/ CASE_CNTL_ID
Transaction Set Type Code	See Table 1	X(3)	Y	Program Generated
Transaction Set Sequence Number	Sequence number of this transaction set within the transaction file	PIC 9(10)	Y	Program Generated
Record Type	CHDR	X(4)	Y	CHDR
Record Sequence Number	Always 1 for this record type	PIC 9(05)	Y	1
Case Status	Status of case in ReMAS system	X(3)	Y	REM_CASE.CASE_STUS_CD

Field Name	Description/Value	Picture	Req.?	Data Source

MSP Type	Case MSP Type
	    L: Liability
	    E: Workers' Compensation
	    D: Automobile No-fault
		X(1)	Y	REM_CASE.CASE_TYPE_CD

Incident Date	Date of incident	X(8): YYYYMMDD	N	REM_MSP_LEAD.DT_OF_INCDNT
From Date	MSP Occurrence Begin Date from HUSC	X(8): YYYYMMDD	Y	REM_MSP_LEAD. MSP_CVRG_FROM_DT
Termination Date	MSP Occurrence End Date from HUSC	X(8): YYYYMMDD	N	REM_MSP_LEAD. MSP_CVRG_TO_DT
Diagnosis 1	Diagnosis code 1 from HUSC	X(5)	N	REM_LEAD_DGNS.DGNS_CD
Diagnosis 2	Diagnosis code 2 from HUSC	X(5)	N	REM_LEAD_DGNS.DGNS_CD
Diagnosis 3	Diagnosis code 3 from HUSC	X(5)	N	REM_LEAD_DGNS.DGNS_CD
Diagnosis 4	Diagnosis code 4 from HUSC	X(5)	N	REM_LEAD_DGNS.DGNS_CD

Case Debtor Type	Party type of case debtor
	    B: Beneficiary
	    I: Insurer
	    A: Attorney
		X(1)	Y	REM_DBTR.PRTY_CTGRY_CD

Case Debtor ID	ReMAS party ID of case debtor	9(15)	Y	REM_DBTR.PRTY_CNTL_ID
Assigned User	ReMAS user ID of FI user assigned to the case	X(8)	Y	REM_CASE_ASGNMT. RSPNSBL_USER_ID Where CASE_CNTL_ID = <Case Id > And ASGNMT_DEACTVTN_TS = <Open Timestamp>

Table 5: Case Party Record Layout

Field Name	Description/Value	Picture	Req.?	Data Source
FI Contractor Number	Fiscal Intermediary number of lead contractor receiving file	X(5)	Y	The same as on the Case Header

Field Name	Description/Value	Picture	Req.?	Data Source
Case ID	ReMAS Case ID of the case being transmitted	9(15)	Y	The same as on the Case Header
Transaction Set Type Code	See Table 1	X (3)	Y	The same as on the Case Header
Transaction Set Sequence Number	Sequence number of this transaction set within the transaction file	PIC 9(10)	Y	The same as on the Case Header
Record Type	PRTY	X(4)	Y	PRTY
Record Sequence Number	Sequential record number within the transaction set	PIC 9(05)	Y	Program Generated

Party Action Indicator	Indicates whether the party is new or data on the party is being changed
	
	For transaction New Case:
	
	    A: Establish party for new case
	
	For transaction Change Lead Data:
	
	    A: Replace like party type on existing case (or add previously non-existent party type to existing case)
	
	    U: Change to existing party name/address data
		X(1)	Y	Program Generated

Party Type	Indicates the type of entity this record describes
	    B: Beneficiary
	    I: Insurer
	    A: Attorney
		X(1)	Y	Program Generated

Party ID	ReMAS ID of the party	9(15)	Y	REM_PRTY/ PRTY_CNTL_ID

Party Class	Indicates whether the party is a person or organization
	    P: Person
	    O: Organization
		X(1)	Y	REM_PRTY/ PRTY_CLS_CD

Party Full Name	Name of the party	X(80)	Y	REM_PRTY/ PRTY_FULL_NAME
Party Address Line 1	First line of mailing address of party	X(40)	N	REM_PRTY_ADR/ PRTY_ADR_1_TXT
Party Address Line 2	Second line of mailing address of party	X(40)	N	REM_PRTY_ADR/ PRTY_ADR_2_TXT
Party Address Line 3	Third line of mailing address of party	X(40)	N	REM_PRTY_ADR/ PRTY_ADR_2_TXT

Field Name	Description/Value	Picture	Req.?	Data Source
Party City	Mailing address city of party	X(34)	N	REM_PRTY_ADR/ PRTY_CITY_NAME
Party State	Mailing address state of party	X(2)	N	REM_PRTY_ADR/ STATE_CD
Party ZIP	Mailing zip code of party	X(9)	N	REM_PRTY_ADR/ PRTY_ZIP_CD
Party Telephone	Telephone number of party	X(18)	N	REM_PRTY_TEL/ PRTY_TEL_NUM
Party Fax	Fax number of party	X(18)	N	REM_PRTY_FAX/ PRTY_FAX_NUM
Party Email	Email address of party	X(20)	N	REM_PRTY_EMAIL/ PRTY_EMAIL_ADR_TXT
External Party Identifier	Party identifier assigned by external agencies, such as HICN, EIN, SSN	X(20)	N	For Beneficiary: REM_BENE/ BENE_ID For Insurer: REM_INSRR/ INSRR_PRMRY_TAX_ID

Table 6: Case Claim (Part A Claim) Record Layout

Field Name	Description/Value	Picture	Req.?	Data Source
FI Contractor Number	Fiscal Intermediary number of lead contractor receiving file	X(5)	Y	The same as on the Case Header
Case ID	ReMAS Case ID of case being transmitted	9(15)	Y	The same as on the Case Header
Transaction Set Type Code	See Table 1	X (3)	Y	The same as on the Case Header
Transaction Set Sequence Number	Sequence number of this transaction set within the transaction file	PIC 9(10)	Y	The same as on the Case Header
Record Type	CLMA	X(4)	Y	CLMA
Record Sequence Number	Sequential record number within the transaction set	PIC 9(05)	Y	Program Generated

Field Name	Description/Value	Picture	Req.?	Data Source
Processing contractor	FI Contractor number of the contractor that processed the claim	X(5)	Y	REM_MDCR_ORG. CMS_ORG_NUM Join REM_MDCR_CLM and REM_MDCR_ORG on REM_MDCR_CLM.CNTRCTR_CTGRY_CD = REM_MDCR_ORG.PRTY_CTGRY_CD And REM_MDCR_CLM.CNTRCTR_CNTL_ID = REM_MDCR_ORG.PRTY_CTGRY_CD
Claim ID	ReMAS ID of the claim	9(15)	Y	REM_MDCR_CLM.CLM_CNTL_ID
Claim Number	Contractor assigned number of claim	X(23)	Y	REM_MDCR_CLM.CLM_CNTL_NUM
Base Claim Number	For adjustment, contractor-assigned number of the original claim being adjusted	X(23)	N	REM_MDCR_CLM.CLM_CNTL_NUM of the base claim. If REM_MDCR_CLM. BASE_CLM_CNTL_ID column is non-zero, use this value as CLM_CNTL_ID to get the base claim. If REM_MDCR_CLM. BASE_CLM_CNTL_ID column is zero, set REM_MDCR_CLM.CLM_CNTL_NUM to zero
NCH Claim Type	Two position indicator of the type of claim	X(2)	Y	REM_MDCR_CLM. NCH_CLM_TYPE_CD
Bill Type	Three position code made up of Facility Type, Service Classification and Frequency Code	X (3)	Y	REM_INTRMDRY_CLM. CLM_FAC_TYPE_CD ‖ REM_INTRMDRY_CLM. CLSFCTN_TYPE_CD ‖ REM_INTRMDRY_CLM. CLM_FREQ_CD
Provider Number	OSCAR number of billing provider	X(6)	Y	REM_INTRMDRY_CLM. OSCAR_PRVDR_NUM
Facility Name	Facility name of billing provider	X(80)	N	REM_PRTY.PRTY_FULL_NAME
Billed From Date	From date of service	X (8) : YYYYMMDD	Y	REM_MDCR_CLM. BILLED_FROM_DT

Field Name	Description/Value	Picture	Req.?	Data Source
Billed To Date	To date of service	X (8) : YYYYMM DD	Y	REM_MDCR_CLM. BILLED_THRU_DT
Total Charge	Total billed for claim	PIC S9(9)V99 SIGN IS TRAILING SEPARATE	Y	REM_INTRMDRY_CLM. CLM_TOT_CHRG_AMT
Claim Payment Amount	Total amount paid for claim	PIC S9(9)V99 SIGN IS TRAILING SEPARATE	Y	REM_MDCR_CLM.CLM_PMT_A MT
Primary Diagnosis	Primary diagnosis code on claim	X(5)	Y	REM_CLM_DGNS.DGNS_CD Where REM_CLM_DGNS. DGNS_TYPE_CD = 'P'
Diagnosis 2	Second diagnosis code on claim	X(5)	N	REM_CLM_DGNS.DGNS_CD Where REM_CLM_DGNS. DGNS_TYPE_CD <> 'P'
Diagnosis 3	Third diagnosis code on claim	X(5)	N	REM_CLM_DGNS.DGNS_CD Where REM_CLM_DGNS. DGNS_TYPE_CD <> 'P'
Diagnosis 4	Fourth diagnosis code on claim	X(5)	N	REM_CLM_DGNS.DGNS_CD Where REM_CLM_DGNS. DGNS_TYPE_CD <> 'P'

Table 7: Case Claim Line (Part B & D Claims) Record Layout

Field Name	Description/Value	Picture	Req. ?	Data Source
FI Contractor Number	Fiscal Intermediary number of lead contractor receiving file	X(5)	Y	The same as on the Case Header
Case ID	ReMAS Case ID of case being transmitted	9(15)	Y	The same as on the Case Header
Transaction Set Type Code	See Table 1	X (3)	Y	The same as on the Case Header

Field Name	Description/Value	Picture	Req.?	Data Source
Transaction Set Sequence Number	Sequence number of this transaction set within the transaction file	PIC 9(10)	Y	The same as on the Case Header
Record Type	CCLN	X(4)	Y	CCLN
Record Sequence Number	Sequential record number within the transaction set	PIC 9(05)	Y	Program Generated
Processing contractor	Carrier Number of contractor that processed the claim	X(5)	Y	REM_MDCR_ORG.CMS_ORG_ NUM Select CMS_ORG_NUM From REM_MDCR_CLM, REM_MDCR_ORG Where REM_MDCR_CLM. CNTRCTR_CTGRY_CD = REM_MDCR_ORG. PRTY_CTGRY_CD And REM_MDCR_CLM. CNTRCTR_ CNTL_ID = REM_MDCR_ORG. PRTY_CNTL_ID
Claim ID	ReMAS ID of the claim	9(15)	Y	REM_MDCR_CLM.CLM_CNTL_ID
Claim Number	Contractor-assigned number of the claim	X(23)	Y	REM_MDCR_CLM. CLM_CNTL_ NUM
Line Number	Line number of this claim line	X (3)	Y	REM_CARR_CLM_LINE. CARR_CLM_LINE_NUM
Adjustment Code	Indicates whether this claim is an adjustment Y: Adjustment N: Not an adjustment	X(1)	Y	If REM_CARR_CLM. CARR_CLM_ENTRY_CD = '5', set this field to 'Y', otherwise set this field to 'N'
NCH Claim Type	Two-position indicator of the type of claim	X(2)	Y	REM_MDCR_CLM. NCH_CLM_TYPE_CD
Billing Provider tax ID	Tax ID of the billing provider on this line	X(10)	Y	REM_CARR_CLM_LINE. LINE_PRVDR_TAX_NUM
Billing Provider name	Name of the billing provider on this line	X(80)	N	REM_PRTY.PRTY_FULL_NAME
Performing Provider number	Processing contractor assigned number of the performing provider on this line	X(10)	Y	REM_CARR_CLM_LINE. SUPL_PRVDR_NUM (DME) or REM_CARR_CLM_LINE. PRVDR_NUM (Part B)

Field Name	Description/Value	Picture	Req.?	Data Source
Performing Provider UPIN	UPIN of performing provider on this line	X(6)	N	REM_CARR_CLM_LINE. PRFRMG_UPIN_NUM (Part B only)
Performing Provider name	Name of the performing provider on this line	X(80)	N	REM_PRTY.PRTY_FULL_NAME
Service From Date	From date of service on line	X (8) : YYYYMM DD	Y	REM_MDCR_CLM. BILLED_FROM_DT
Service To Date	To date of service on line	X (8) : YYYYMM DD	Y	REM_MDCR_CLM. BILLED_THRU_DT
HCPCS Code	Procedure code for service provided on this claim line	X(5)	Y	REM_CARR_CLM_LINE.HCPCS_ CD
Modifier 1	Modifier 1 to HCPCS code on line	X(2)	N	REM_CLM_HCPCS_MDFR. PRCDR_MDFR_CD
Modifier 2	Modifier 2 to HCPCS code on line	X(2)	N	REM_CLM_HCPCS_MDFR. PRCDR_MDFR_CD
Modifier 3	Modifier 3 to HCPCS code on line	X(2)	N	REM_CLM_HCPCS_MDFR. PRCDR_MDFR_CD
Modifier 4	Modifier 4 to HCPCS code on line	X(2)	N	REM_CLM_HCPCS_MDFR. PRCDR_MDFR_CD
Place of Service	Place where service on line was provided	X(2)	N	REM_CARR_CLM_LINE. INE_PLC_SRVC_CD
Type of Service	CMS 2-position type of service on claim line	X(2)	N	REM_CARR_CLM_LINE. INE_TYPE_SRVC_CD
Number of services	Number of service units reported on the line	9(3)	Y	REM_CARR_CLM_LINE. LINE_SRVC_CNT
Submitted Charge	Total billed for claim line	PIC S9(9)V99 SIGN IS TRAILING SEPARATE	Y	REM_CARR_CLM_LINE. LINE_SBMTD_AMT
Allowed Charge	Total amount allowed for claim line	PIC S9(9)V99 SIGN IS TRAILING SEPARATE	Y	REM_CARR_CLM_LINE. LINE_ALOWD_AMT
Provider Paid Amount	Amount paid to the provider by Medicare on this claim line	PIC S9(9)V99 SIGN IS TRAILING SEPARATE	Y	REM_CARR_CLM_LINE. LINE_PRVDR_PMT_AMT

Field Name	Description/Value	Picture	Req.?	Data Source
Beneficiary Paid Amount	Amount paid to the beneficiary by Medicare on this claim line	PIC S9(9)V99 SIGN IS TRAILING SEPARATE	Y	REM_CARR_CLM_LINE. LINE_BENE_PMT_AMT
Line Diagnosis	Diagnosis code reported on this line	X(5)	Y	REM_CARR_CLM_LINE. LINE_DGNS_CD
Primary Diagnosis	Primary diagnosis code on claim header	X(5)	Y	REM_CLM_DGNS.DGNS_CD Where REM_CLM_DGNS. DGNS_TYPE_CD = 'P'
Diagnosis 2	Second diagnosis code on claim header	X(5)	N	REM_CLM_DGNS.DGNS_CD Where REM_CLM_DGNS. DGNS_TYPE_CD <> 'P'
Diagnosis 3	Third diagnosis code on claim header	X(5)	N	REM_CLM_DGNS.DGNS_CD Where REM_CLM_DGNS. DGNS_TYPE_CD <> 'P'
Diagnosis 4	Fourth diagnosis code on claim header	X(5)	N	REM_CLM_DGNS.DGNS_CD Where REM_CLM_DGNS. DGNS_TYPE_CD <> 'P'

Table 8: Case Settlement Record Layout

Field Name	Description/Value	Picture	Req.?	Data Source
FI Contractor Number	Fiscal Intermediary number of lead contractor receiving file	X(5)	Y	The same as the on the Case Header
Case ID	ReMAS Case ID of case being transmitted	9(15)	Y	The same as the on the Case Header
Transaction Set Type Code	See Table 1	X (3)	Y	The same as the on the Case Header
Transaction Set Sequence Number	Sequence number of this transaction set within the transaction file	PIC 9(10)	Y	The same as the on the Case Header
Record Type	CSTL	X(4)	Y	'CSTL'
Record Sequence Number	Sequential record number within the transaction set	PIC 9(05)	Y	Program generated

Field Name	Description/Value	Picture	Req.?	Data Source
Settlement Date	Date case was settled	X (8): YYYYMMDD	Y	REM_CASE.CASE_STLMT_DT
Settlement Amount	Amount of settlement, judgment or award	PIC S9(9)V99 SIGN IS TRAILING SEPARATE	Y	REM_CASE.CASE_STLMT_AMT
Attorney Fees	Cost of attorney fees borne by the beneficiary	PIC S9(9)V99 SIGN IS TRAILING SEPARATE	N	REM_CASE.ATRNY_FEE_AMT
Additional Procurement Costs	Any additional costs borne by the beneficiary in reaching the settlement	PIC S9(9)V99 SIGN IS TRAILING SEPARATE	N	REM_CASE.PRCMT_CST_AMT
Amount Excluded from Settlement Procurement Costs	Dollars, such as provided by Medical Payments or Personal Injury Protection (PIP) coverage that are not subject to procurement cost sharing by Medicare	PIC S9(9)V99 SIGN IS TRAILING SEPARATE	N	REM_CASE. EXCLDD_PRCMT_AMT
Override procurement cost ratio	Ratio used to override the usual ratio (procurement costs to settlement amount) used in demand amount calculation	V999	N	REM_CASE. PRCMT_RATIO_QTY
Medicare Conditional Payment Amount	Total paid conditionally by Medicare while waiting for settlement	PIC S9(9)V99 SIGN IS TRAILING SEPARATE	Y	Use logic from the program REMB5000, paragraph B9000
Demand Amount	Demand amount calculated by ReMAS	PIC S9(9)V99 SIGN IS TRAILING SEPARATE	Y	See General Process 8

Table 9: Case Status Record Layout

Field Name	Description/Value	Picture	Req.?	Data Source
FI Contractor Number	Fiscal Intermediary number of lead contractor receiving file	X(5)	Y	The same as on the Case Header

Field Name	Description/Value	Picture	Req.?	Data Source
Case ID	ReMAS Case ID of case being transmitted	9(15)	Y	The same as on the Case Header
Transaction Set Type Code	See Table 1	X (3)	Y	The same as on the Case Header
Transaction Set Sequence Number	Sequence number of this transaction set within the transaction file	PIC 9(10)	Y	The same as on the Case Header
Record Type	CSTS	X(4)	Y	'CSTS'
Record Sequence Number	Sequential record number within the transaction set	PIC 9(05)	Y	1
Case Status Code	New case status	X (3)	Y	REM_CASE. CASE_STUS_CD
Case Status Timestamp	Date and time when status was updated	X(26)	Y	REM_CASE. STUS_PSTG_TS

Table 10: Correspondence Detail

Field Name	Description/Value	Picture	Req.?	Data Source
FI Contractor Number	Fiscal Intermediary number of lead contractor receiving file	X(5)	Y	The same as on the Case Header
Case ID	ReMAS Case ID of the case being transmitted	9(15)	Y	The same as on the Case Header
Transaction Set Type Code	See Table 1	X (3)	Y	The same as on the Case Header
Transaction Set Sequence Number	Sequence number of this transaction set within the transaction file	PIC 9(10)	Y	The same as on the Case Header
Record Type	CLTR	X(4)	Y	'CLTR'
Record Sequence Number	Sequential record number within the transaction set	PIC 9(05)	Y	Program generated
Letter Type	Type of the letter to be generated	X (3)	Y	REM_OUTGNG_CRSPNDC. OUTGNG_TYPE_CD
Medicare Conditional Payment Amount	Total paid conditionally by Medicare while waiting for settlement	PIC S9(9)V99 SIGN IS TRAILING SEPARATE	Y	Use logic from the program REMB5000, paragraph B9000

Field Name	Description/Value	Picture	Req.?	Data Source
Prior letter date	Date the last conditional payment letter was requested by ReMAS interface	X (8): YYYYMM DD	N	Jon REM_OUTGNG_CRSPNSC A, REM_CASE_CRSPNDNC B Select Max (OUTGNG_SEND_DT) From REM_OUTGNG_CRSNSNCS Where A.OUTGNG_TYPE_CD In ('CPL', 'CPN', 'CPW', 'ICL', 'ICN', 'IDW', 'ICW') And A.CRSPNDNC_CNTL_ID = B.CRSPNCNC_CNTL_ID And B.CASE_CNTL_ID = <the selected case identifier>

Table 11: Interface File Status Notification (from FI to ReMAS)

Field Name	Description/Value	Picture	Req.?	Data Source
Record Type	IFSN	X(4)	Y	IFSN
FI Contractor Number	Fiscal Intermediary number of lead contractor sending file	X(5)	Y	Program generated
Status Code	Code indicating whether the file was successfully processed: 88 – File successfully processed 99 – File not successfully processed	X(2)	Y	Program generated
Error Reason	Reason file was not successfully processed (if status code is 99): 010 – Missing/Invalid header record 020 – Missing/Invalid trailer record	X (3)	If status code is 99	Program generated
Transaction Count	Number of transaction record sets on file from ReMAS	9(07)	If status code is 88	Program generated
Record Count	Number of individual records on file from ReMAS	9(07)	If status code is 88	Program generated
ReMAS Batch Cycle Control Identifier	Current cycle control identifier from the file header	9(15)	Y	The same as on the file from ReMAS header record
Party Control Identifier	Party control identifier of the FI from the file header	9(15)	Y	The same as on the file from ReMAS header record

Field Name	Description/Value	Picture	Req.?	Data Source
Interface entry posting timestamp	Interface timestamp from the from the file header	X(26)	Y	The same as on the file from ReMAS header record

Table 12: Interface File Detail Error Notification (from FI to ReMAS)

Field Name	Description/Value	Picture	Req.?	Data Source
Record Type	IFER	X(4)	Y	IFER
FI Contractor Number	Fiscal Intermediary number of lead contractor sending file	X(5)	Y	The same as on the file from ReMAS header record
Case ID	Identification number for the case containing the detail error	9(15)	Y	The same as on the file from ReMAS case header record
Transaction Set Type Code	See Table 1	X (3)	Y	The same as on the file from ReMAS detail record
Error Description	Description of detail error	X(40)	Y	Program generated
ReMAS Batch Cycle Control Identifier	Current cycle control identifier from the file header	9(15)	Y	The same as on the file from ReMAS header record
Party Control Identifier	Party control identifier of the FI from the file header	9(15)	Y	The same as on the file from ReMAS header record
Interface entry posting timestamp	Interface timestamp from the from the file header	X(26)	Y	The same as on the file from ReMAS header record

ATTACHMENT 2

TENTATIVE SCHEDULE FOR RELEASE 1 OF ReMAS

CONTRACTOR	SCHEDULE DATE	RECEIVED FILE
Empire	12/16/03	8/19/2003
Alabama-Cahaba	03/17/04	8/19/2003
Trailblazer	03/17/04	8/19/2003
AdminaStar	03/17/04	8/19/2003
Arkansas	03/17/04	8/19/2003
Anthem Health Plan	03/17/04	
Palmetto	05/24/04	
AHS	03/17/04	
Noridian Part A	05/24/04	
TriSpan	05/24/04	
Riverbend GBA	05/24/04	
Blue Cross/Blue Shield Arizona	05/24/04	
Carefirst	06/28/04	
Montana	06/28/04	
UGS, Region 3	06/28/04	
Wyoming Part A	06/28/04	
Puerto Rico	06/28/04	
Mutual of Omaha	06/28/04	
Medicare Northwest	06/28/04	
NHIC	07/26/04	
Rhode Island	06/28/04	
Blue Cross/Blue Shield Georgia	07/26/04	
First Coast Service Options	07/26/04	
UGS California	07/26/04	
Oklahoma Blue Cross	07/26/04	

Expect training 1 week prior to implementation.