Program Memorandum Carriers

Transmittal B-03-060 Date: AUGUST 8, 2003

CHANGE REQUEST 2666

Department of Health &

Human Services (DHHS) Centers for Medicare &

Medicaid Services (CMS)

SUBJECT: Expansion of Beneficiary History and Claims In Process (CIP) Files in the VIPS Medicare System (VMS). Phase 2 – Pre-Adjudication CIP File

Expansion

The following table lists the Change Requests (CR) that make up the entire Beneficiary History and CIP File expansion: (The highlighted row indicates the current CR).

CR	Change Request Description
Number	
2656	Expansion of Beneficiary History and Claims In Process Files in VIPS Medicare
	System (VMS). Phase 1 – Beneficiary History File Expansion
2666	Expansion of Beneficiary History and Claims In Process Files in VIPS Medicare
	System (VMS). Phase 2 – Claims In Process File Expansion (pre-adjudication)
Pending	Expansion of Beneficiary History and Claims In Process Files in VIPS Medicare
2668	System (VMS). Phase 3 – Claims In Process File Expansion (post-adjudication)

I. GENERAL INFORMATION

- A. Background: 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 CR is phase two of the three-phase implementation to complete the associated changes necessary to the VMS system. Phase two will encompass the analysis, design, coding, testing, and implementation of expanding the pre-adjudication functionality of the Claims In Process File.
- **B. Policy:** Not Applicable. There is no specific Medicare regulations tied to this CR.

II. BUSINESS REQUIREMENTS

Requirement #	Requirements	Responsibility
01	The VMS maintainer must expand the CIP File to allow CMS the ability to add new data elements to be stored on the Claims In Process File for pre-adjudication processing.	VMS SSM

III. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

X-Ref Requirement #	Instructions

B. Design Considerations:

X-Ref Requirement #	Recommendation for Medicare System Requirements
01	Design should allow flexibility to support future CMS mandates that require changes to store claims related data.

C. Interfaces: N/A

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

E. Dependencies: In order for CMS to gain the full capability of this CR, CR **2656** - Expansion of Beneficiary History and Claims In Process (CIP) Files in the VIPS Medicare System (VMS), Phase 1 – Beneficiary History File Expansion, and CR 2668 – Expansion of Beneficiary History and Claims In Process Files in VIPS Medicare System (VMS), and Phase 3 – Claims In Process File Expansion (post-adjudication) must also be completed.

F. Testing Considerations: N/A

IV. ATTACHMENT(S): None.

Version:	Effective Date: January 1, 2004
Implementation Date: January 1, 2004	Funding: These instructions should be implemented within your current operating
Discard Date: January 1, 2005 Post-Implementation Contact: Whitney Korangkool (410) 786-0551	budget. Pre-Implementation Contact: Whitney Korangkool (410) 786-0551