CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12574	**Date: April 11, 2024**
	Change Request 13562

SUBJECT: Implementation of the Award for the Jurisdiction 15 (J-15) Part A and Part B Medicare Administrative Contractor (J15 A/B MAC)

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to announce the Jurisdiction J15 A/B MAC recompete procurement that was recently awarded to CGS Administrators LLC, the incumbent contractor for this workload.

The current J15 workload identifier numbers, the Fiscal Intermediary Shared System (FISS) roll-up identifier and the Business Segment Identifiers (BSI) will not change.

EFFECTIVE DATE: May 31, 2024 - Part A and B
**Unless otherwise specified, the effective date is the date of service.*
IMPLEMENTATION DATE: May 31, 2024 - Part A and B

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)
R=REVISED, N=NEW, D=DELETED-*Only One Per Row.*

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

III. FUNDING:
For Medicare Administrative Contractors (MACs):
The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:
One Time Notification

Attachment - One-Time Notification

Pub. 100-20	Transmittal: 12574	Date: April 11, 2024	Change Request: 13562

SUBJECT: Implementation of the Award for the Jurisdiction 15 (J-15) Part A and Part B Medicare Administrative Contractor (J15 A/B MAC)

EFFECTIVE DATE: May 31, 2024 - Part A and B
**Unless otherwise specified, the effective date is the date of service.*
IMPLEMENTATION DATE: May 31, 2024 - Part A and B

I. GENERAL INFORMATION

A. Background: The Centers for Medicare & Medicaid Services (CMS) recently competed the J15 A/B MAC workload. CMS awarded this workload to CGS Administrators, LLC the incumbent contractor for this workload.

CGS Administrators, LLC is located at 26 Century Blvd. Nashville, TN 37214.

The CMS has determined that it will not need to change the current workload identifier numbers, the FISS roll-up identifier or the Business Segment Identifiers (BSI) when this new contract is implemented on May 31, 2024, for Part A and Part B.

The following applications or business owners shall continue to accept the existing J15 A/B workload identifier numbers once the above cited workloads are transitioned to the J15 A/B MAC.

• Administrative Qualified Independent Contractor (AdQIC),

• Benefits Coordination and Recovery Center (BCRC),

• CMS Analysis, Reporting and Tracking System (CMSARTS),

• Commercial Repayment Center (CRC),

• Contractor Administrative, Budget and Cost Reporting System (CAFM),

• Comprehensive Error Rate Testing System (CERT),

• Contractor Management Information System (CMIS),

• CMS Baltimore Data Center (BDC),

• Coordination of Benefits Agreement program (COBA),

• Contractor Reporting of Operational Workload Data System (CROWD),

• Common Working File (CWF),

• CWF Host,

• CWF Part B Eligibility and Security Maintenance (CWFELGE),

• Customer Service Assessment and Management System (CSAMS),

• Debt Collection System (DCS),

• Electronic Correspondence Referral System (ECRS),

• Electronic Health Records Incentive Program (EHR),

• Expert Claims Processing System (ECPS),

• Electronic Submission of Medical Documentation System (esMD),

• Fiscal Intermediary Shared System (FISS),

• Fraud Prevention System (FPS),

• Health Care Information System (HCIS),

• Health Care Integrated General Ledger Accounting System (HIGLAS),

• Health Insurance Master Record (HIMR),

• HIPAA Eligibility Transaction System (HETS),

• Integrated Data Repository (IDR),

• Intern and Resident Information System (IRIS),

• Internet Quality Improvement and Evaluation System (iQIES),

• Local Coverage Determination Database (LCD),

• Medicare Appeals System (MAS),

• Medicare Coverage Data Base (MCD),

• Multi-Carrier System (MCS),

•MAC/CMS Data Exchange (MDX),

• National Claims History (NCH),

• National Data Warehouse (NDW),

• National Part B Pricing Files,

• National Part A Pricing Files,

• Next Generation Desktop (NGD),

• Part B Analytics Reporting System (PBAR),

• Production Performance Monitoring System (PULSE),

• Provider Enrollment Chain and Ownership System (PECOS),

• Provider Customer Service Program Contractor Information Database (PCID),

• Provider Inquiry Evaluation System (PIES),

• Provider Statistical and Reimbursement System (PS&R),

• Qualified Independent Contractor (QIC),

• Recovery Audit Contractor (RAC),

• Recovery Management and Accounting System (REMAS),

• Renal Management Information System (REMIS),

• Strategic Work Information Folder Transfer System (SWIFT),

• Supplemental Medical Review Contractor (SMRC),

• System Tracking for Audit and Reimbursement (STAR),

• Virtual Data Centers (VDCs),

• ZIP Code File, and

• Unified Program Integrity Contractors (UPICs).

B. Policy: There are no policy changes associated with this Change Request (CR).

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
13562.1	The Jurisdiction J-15 A/B MAC shall process the J-15 A/B MAC workload under their current MAC workload identifiers.									J15 A/B MAC
13562.2	The Jurisdiction J-15 A/B MAC shall process the J-15 A/B MAC workload under the current BSIs.									J15 A/B MAC
13562.3	All systems applications and business owners listed in the background section of this CR shall continue to accept the J-15 A/B MAC	X	X	X						BCRC, CERT, CMS, CROWD, CWF

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
	workload numbers, as per the first business requirement listed.									Host, ECRS, FPS, HETS, HIGLAS, IDR, NCH, NGD, PECOS, PS&R, PULSE, QIC, QIES, QIO, RAC, SMRC, UPICs, VDC, esMD
13562.4	Following the expiration of the current contract, the J-15 A/B MAC shall track and charge all costs related to that contract to the appropriate Contract Line Item (CLIN), as instructed by CMS.									J15 A/B MAC
13562.5	Once the new contract becomes effective, the J-15 A/B MAC shall track and charge all costs related to that contract to the appropriate CLIN, as instructed by CMS.									J15 A/B MAC

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		A	B	HHH		
	None					

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):
The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

ATTACHMENTS: 0