24.5.7 CMS-64 Implementation Log Exhibit

The following exhibit documents changes implemented to the CMS-64 reporting subsystem.

| **Ticket Number** | **Project Memo** | **Description** | **Implementation**  **Date** | **Notes** |
| --- | --- | --- | --- | --- |
| RAT2855 | 151344 | Modify CMS64 logic to Report a new FCOS 17D for crossover claims | 12/1/2015 |  |
| RAT2677 |  | Modify CMS64 to reset indicator when CCare Claim assigned BASE Report Id; Added FRC116 to 88 Level | 10/1/2015 |  |
| RAT2655 | 150791 | Modify CMS64 logic related to HCBW COEs and report assignment | 10/1/2015 |  |
| RAT2583 | 150651 | Modify CMS64 to report Waiver related Financial claims according to FRC | 10/1/2015 |  |
| RAT2569 | 150600 | Modify CMS64 to add Column Id for Miscellaneous Reports | 10/1/2015 |  |
| RAT2549 | 150564 | Modify CMS64 to remove DEX and Admit Date from logic to determine CC vs BASE and prevent SCHP Report ID | 6/29/2015 |  |
| RAT2558 | 150588 | Modify CMS64 to report expenditures for Renal Dialysis Clinics in FCOS 10 instead of 49 | 6/22/2015 |  |
| RAT2398 | 150298 | Modify CMS64 to include financial transactions for report MVNA | 4/3/2015 |  |
| RAT2240B | 141807 | Added COE 054 to COEs to report to BASE report | 4/3/2015 | Doing the correction I found an omission in my code installed 3/6/2015. This was corrected. |
| RAT2398 | 150298 | Modify CMS64 to include financial transactions for report MVNA | 4/3/2015 |  |
| RAT2343 | 150194 | Modify cost center assignment percentage for cost center 86702 | 3/6/2015 |  |
| RAT2325 | 150136 | Modify CMS64 to include Column E for MEG Waiver Reporting | 3/6/2015 |  |
| RAT2240 | 141807 | Added COE 054 to COEs to report to BASE report | 3/6/2015 |  |
| RAT1957 |  | Corrected logic for prior period processing in financial FCOS assignment | 01/23/2014 |  |
| RAT2125 |  | Corrected errors in Family Planning Split Logic | 11/17/2014 |  |
| ICD10 |  | ICD10 Changes | 10/01/2014 |  |
| RAT2021 | 141220 | CMS64 MEG7 Report Changes | 10/01/2014 |  |
| RAT2035 |  | Fix Centennial Care Bug for DRG 374 | 10/01/2014 |  |
| RAT1898 | 140860 | CMS 64 Reporting Change for COEs 095 and 096 | 10/01/2014 |  |
| RAT1871 | 140802 | Add new Financial Reason Codes for Centennial Care | 09/01/2014 |  |
| N/A | N/A | Modified FCOS 12 and added additional cohort to capitation 88 level | 05/07/2014 | Per Chris Pruett |
| N/A | N/A | Added Date File to hold Current Calendar Year/Qtr, Changed to not bypass any capitations; Fixed Waiver where not assigning report type; Fixed Financial to Store Settle Thru in Current FFY/Q; Reset CCare Indicator for Waiver and updated RAT0581 88 level | 05/01/2014 | This was group of miscellaneous changes some for correcting bug and others from Chris Pruett |
| RAT0985 | 130216 | Change Family Planning Assignment for CMS64 for EMSA COEs | 04/01/2014 | Implemented as part of RAT1485 |
| RAT1064 |  | CMS64 Reporting Not Always Using Billing/Rendering Provider in FCOS Assignment As Required | 04/01/2014 | Implemented as part of RAT1485 – This resulted in the FCOS Assignment Matrices for MEG/BASE/CHIP Assignment being redone. |
| RAT1555 |  | CMS64 Extract Program Incorrectly Handling Family Plan Split for SCHIP Reported Claim | 04/01/2014 | Implemented as part of RAT1485 |
| RAT1383 | 131562 | Modify Existing CMS21 Report Criteria for FCOS 31 | 04/01/2014 | Implemented as part of RAT1485 |
| RAT1264 | 131187 | Modify CMS64 bypass logic related to Abortion codes | 04/01/2014 | Implemented as part of RAT1485 |
| RAT0581 | 120844 | Modify CMS 64 Reporting of Financials | 04/01/2014 | Implemented as part of RAT1485  This resulted in the Financial FCOS Assignment Matrices being redone. |
| RAT1485 | 131876 | CMS 64 Reporting Requirements for Centennial Care | 04/01/2014 |  |
| RAT0712 | 121610 | Add F-RSN-CD 094 to CMS 64 logic to report financial claim reimbursement amount as negative | 09/16/2013 |  |
| RAT0698 | 111912 | Add F-RSN-CD 094 to CMS 64 logic to report financial claim reimbursement amount as negative | 06/07/2013 |  |
| RAT0685 | 121250 | Change CMS64.21 FCOS 31 to 25 | 06/06/2013 | Changed both Exhibit 24.5.3 and 24.5.5 for RAT0685 because PLOG 9171 SYSDOC updates were not applied |
| RAT0330 | 111912 | Create New Report IDs & FCOS AMENDED | 0828/2013 | Update 24D-5exhb-A with new section 24.5.6.2 Miscellaneous Reports Exhibit and associated table |
| RAT0330 | 111912 | Create New Report IDs & FCOS AMENDED | 01/26/2013 | Added New Exhibit 24.5.6.2 Miscellaneous Reports Exhibit |
| RAT0330 | 111912 | Create New Report IDs & FCOS AMENDED | 01/26/2013 | Create a total of seven new reports as outlined in the matrix attached to the amendment to memo 111912 (most recent version entitled: “Create New Report IDs & FCOS Amended 062812”).   1. 64.9A BASE Summary 2. 64.10 BASE Summary 3. 64.9C2 4. 64.9C1 5. 64.S9 RAC 6. 64.9A 7. CMS21 Base |
| RAT0468 | 120533 | Modify CMS64 for Redefined Provider Type | 8/2/2012 | Modify description of provider type  343 to methadone clinic and assign to FCOS 10. Add provider type 342 to FCOS 49. |
| RAT0469 | 120534 | Report Presumptive Eligible Children on CMS 64.21 instead of CMS 64.9 | 7/5/2012 | Remove presumptive eligible kids  (cost center 86771) from the  CMS 64 base report. Route cost center 86771 to CMS 64 SCHP report. After assigning FCOS, change cost center 86771 claims to CMS report id '6421'. |
| RAT0250 | N/A | Reprocess rejected or bypassed claims back through the CMS64 download program | 6/11/2012 | The DW fedcms64 table was loaded with 4,972 ‘Line 7-Prior Period Expenditures, Not Previously Reported’ records on 6/11/2012. |
| RAT0461 | N/A | NMMJCX64 assigns incorrect prior period CMS64-RPT-TYPE to encounters | 5/10/2012 | Check the sign of the CMS64 reimbursement determine whether a positive adjustment or negative adjustment report type code needs to be assigned for prior period. |
| RAT0389 | 120289 | Remove Audit related Financial Reason Codes from CMS64 Base | 4/6/2012 | Bypass audit related financial reason codes and claim adjustment reason codes. Also remove TPL report logic. |
| RAT0300 | 111137 | Modifications to CMS64/CMS21 0711 FCOS37 and Rsn Codes 043 044 | 4/6/2012 | Move the categorization of FCOS 37 on the BASE report to FCOS 12 - Home Health. |
| RAT0334 | 111933 | Modify HCBW Matrix for CMS64 | 3/22/2012 | Add provider type 463 to the Mi Via 64.10 Financial Edits. Add new provider ID 18076823 to the system list ‘4952-Mi Via Providers’. |
| N/A | N/A | Fix so the RC=0002 doesn't get wiped out after call to system list 4952 (HCBW providers) | 3/22/2012 | Programming change tagged with ‘RETCD02’ identifier and implemented with RAT0334. |
| N/A | N/A | Fix so the BCBW report ids display in reject file records | 3/22/2012 | Programming change tagged with ‘HCBWFX1’ identifier and implemented with RAT0334. |
| 10001 | 111392 | Modify CMS64 Prior Period Report Assignment 090711 | 3/8/2012 | Modify prior period report assignment. Comment out code related to state/public provider sysin file. Replace valid value list of CMS 64 financial reason codes with working storage 88-level list of those codes. |
| 9555 | N/A | Add a separate CMS64 AD HOC trigger file process | 12/1/2011 | Modify existing data warehouse trigger file to prompt update of the CMS64 table. Add a new data warehouse trigger to update the SHARE table. |
| 9950 | 111206 | Modify Fed Match criteria for exclusion in CMS64 | 12/1/2011 | Remove fed match codes 6 & 8 from list of non cms64 fed  Match codes. |
| 9505 | 101934 | Add New Report Type Code for CMS64 Line 7 Report | 9/4/2011 | Add report type X. |
| 9503 | 101933 | Add New Report Type Code for CMS64 Corrections | 9/4/2011 | Add report types Y and Z. Update the existing fedcms64 data warehouse table index to include download date and CMS64 report type code, to enable storage of duplicate TCNs. |
| 9708 | 110512 | Add Mi Via Consultant Agencies to CMS64 HCBW | 9/4/2011 | Add provider IDs 09285211 and 41586077 to the HCBW reporting criteria for financial claims. Replace the hard-coded list of HCBW provider IDs with system list ‘4952 – Mi Via Providers’. |
| 9171 | 100960 | Modify CMS64 criteria for Base, Family Planning and SCHIPs Reports | 9/4/2011 | Modify FCOS assignment logic for the following:  • BASE REPORT: FCOS 06A Outpatient Hospital  • BASE REPORT: FCOS 09A Other Practitioners’ Services Regular Payments  • SCHIP REPORT: FCOS 25 Other Services |
| 9964 | N/A | HCBW claims not being picked up on fedcms64 table | 9/1/2011 | 664 credit adj claims with cost center 86632 for provider 55821065 were missing from the fedcms64 table for July, 2011. The credit claims did not have specialty 069 that the system needed to recognize them as MI Via waiver expenditures.  •An adhoc process changed the claims’ specialty to 069 and the claims were rerun back through program NMMJCX64 to build download files for the data warehouse.  •The missing claims were loaded to the fedcms64 table on 9/1/2011. |
| 9823 | N/A | Populate Additional CMS-64 Fields for CRDTOFADJS Claims | 8/29/2011 | Reprocess 3 credit pharmacy claims that are missing from fedcms64 table because COE/FM was not populated from original claims.  •The 3 claims were added to the fedcms64 table on 9/8/2011 with report type X. |
| 9579 | 110071 | Modify Encounters Due to CHIP Retros | 6/30/2011 | The mainframe DB2 tables and the DW Claim tables were updated on Thursday, June 9, 2011. The DW CMS64 tables were updated on Thursday, June 30, 2011. |
| 8756 | N/A | Modify the CMS64 program to write out the claims that are currently being bypassed and rejected. | 5/19/2011 | Add a file to store bypassed claims. Add a file to store TCN of Rejected claims. The TCN file will serve as input to new job NMJWCX6B which exctracts the rejected TCNs from the weekly paid claims file. The NMJWCX6B extract file can then be used as input to NMMJCX64 after the logic causing the reject has been updated. |
| 9396 | 101578 | Modify CMS64 Criteria for Sterilization | 3/24/2011 | Add criteria for the setting of FCOS 13 for professional and institutional claims with COS 60 on the BASE report when sterilization codes are present. Changes to update FCOS 13 on Family Planning report were not required. |
| 9511 | 101957 | Eliminate Family Planning Waiver Report and Include COE029 to BASE | 2/24/2011 |  |
| 9062 | 100603 | Modify SCHIP CMS64 Report for FCOS 06 | 2/3/2011 | Modify the CMS64 logic so that the SCHIP report criteria for “FCOS 06 - Outpatient Hospital Services” for professional claims matches the BASE report criteria for “FCOS 06A - Outpatient Hospital Services”. |
| 9406 | 101622 | Modify CMS64 for HCBW to Use Provider IDs for Mi Via | Part 1 – 12/10/2010  Part 2 – 1/28/2010 | • Part 1 - Five TCNs were reprocessed and were loaded into the fedcms64 table on both the XEROX and MAD servers and verified on Monday, 12/13/2010.  • Part 2 - Research of the CMS64 Rejections for the current quarter ending March 31, 2011 indicates that there are no current quarter claims to reprocess. |
| 9364 | 101494 | Remove the hard-coded paid date sysin used in CMS64 | 11/5/2010 | Remove the hard coded “paid date SYSIN” file used in the CMS64 program, NMMJCX64. This SYSIN file is no longer needed. Instead the claim header paid date from the incoming encounter claim will be used. |
| 9374 | N/A | Add missing diagnosis codes to list of CMS64 family planning diagnosis codes and correct Family planning split logic for FCOS 13 | 10/28/2010 |  |
| 9179 | 100967 | Modify CMS64 for new Mi Via FMA | 9/23/2010 | Bug fix |
| 9179 | 100967 | Modify CMS64 for new Mi Via FMA | 7/2/2010 | Modify the CMS64 logic related to the CMS 64.9 and CMS 64.10 HCBW Reports to look at the combination of Provider Type and Specialty when determining the HCBW report ID. The Old logic looks at hard coded provider IDs. |
| 9165 | N/A | CMS64 data problem with SCHP claims | 7/2/2010 | An edit in the CMS64 program is incorrectly assigning a FCOS of 05A to certain Professional SCHP claims. This is incorrect. The correct FCOS for these claims should be FCOS 05. |
| 7296 | 271190 | Develop the CMS 64.9 Reports for SALUD and BH Programs (HCBW changes only); Implemented HCBW for 1915C | 5/21/2010 | Modify cms64 for one line change related to plog 7296. |
| 7296 | 271190 | Develop the CMS 64.9 Reports for SALUD and BH Programs (HCBW changes only); Implemented HCBW for 1915C | 4/30/2010 |  |
| 8864 | 100046 | Modify CMS64 Report to Bypass PERM Adjustments | 2/18/2010 | Temporary bypass for PERM adjustments until Line 10b report is developed. |
| N/A | Email from Chris Pruett /Gary Gorczyca | EMSA claims paid 10/01/09 - 12/31/09 not in CMS table | 2/1/2010 | Fedcms64 table updated for missing claims. |
| 8675 | 291707 | Update CMS64 Hardcoded Public Providers to Remove Amarillo Diagnostic Clinic Rx | 1/25/2010 |  |
| N/A | Email from Chris Pruett | Expired Fed COS '06' and '09' for BASE report | 1/5/2010 | For FFY/Quarter = 2010/1  Encounters processed have the 'paid' date' moved up a week in the download program. Those that were processed at the end of Sep, 2009, were allocated to FCOS 06 and 09, FCOS that were replaced beginning 10/1/2009. The fedcms54\_tbl was updated to change those encounters to FCOS 06A and 09A. |
| N/A | Email from Chris Pruett | Claims missed in prior downloads added to the fedcms64 table. | 1/5/2010 | For Retro FFY/Quarter = 2008/2 to 2009/24  Per Chris Pruett, these claims were already reported in prior quarters but these are being added so that the fedcms64 table agrees with the reports filed. |
| N/A | Compare CMS 64 and SHARE | Results of comparison summarized in document ‘*Share CMS64 Comparison Findings’.* Total amount discovered in error $83,915,561.38. | 12/1/2009 | All problems except for history only adjustments, NMRX, and correct COS reporting on share corrected. |
| 8768 | 291894 | Re-Process Rejected Claims from fedcms64 table | 12/16/2009 |  |
| 8738 | 290826 | Modify the CMS 64 program to no longer bypass FED-MATCH-CD 05 and 07. | 11/20/2009 | Reprocess claims with FED-MATCH-CD 05 and 07 that were bypassed by CMS64 and download these claims to DW fedcms64 table.  Also at one time referenced under: "8417 - 290826 - EMSA Reimbursement 2009 - CMS64 Changes" until PLOG 8738 was created. |
| N/A | N/A | Modify CMS64 Base Report to Capture NMRx Service Expenditures | 11/18/2009 |  |
| N/A | N/A | Change request issued to modify CMS64 to capture EMSA claims (fed match 7 and 4 not included) implemented | 11/10/2009 |  |
| N/A | N/A | Claims for emergency services for aliens not reported on cms64 | 11/10/2009 | Data sent to ASD to report as line 7 expenditures on 11/10/09. Change request to modify CMS64 to capture these claims implemented |
| N/A | N/A | XEROX sent Akilah Sharif to participate in daily meetings with ASD and MAD to compare results of the multi-quarter compare | 11/3/2009 thru 11/9/2009 |  |
| 7791 | 281179 | Run supplemental Financial Payout report |  | For FFY/Quarter = 2008/3  MS Access queries being run MS Access queries being run until payouts included in fedcms64 table. *(Query run canceled Jan. 2010 as PIB was going to determine what ASD needed as a report.)* |
| N/A | N/A | FFS Encounters Not Grouping on CMS64 and thus rejected |  | Treatment Foster Care not reported; CMS64 criteria already corrected to capture |
| N/A | N/A | Financial Transactions For Nmrx Encounters |  | Because these payouts are for services paid by the ASO administering NMRX, there has been no mechanism established to report these financial transactions. Project request written to XEROX to add to base report of svc exps |
| 8310 | 290501 | Changed the filter for the vvcmscos table from bracketing the input date range to bracketing the paid date range. | 10/9/2009 | For FFY/Quarter = 2010/1  DW change |
| 8290 | 290501 | Modify CMS 64 Base and Family Planning Waiver Reports | 10/2/2009 |  |
| N/A | N/A | Correction to PIB produced reports to correct 3rd & 4th qtrs 2009 TO MOVE COE 036 CLIENT’S IHS CAPS. | 10/1/2009 |  |
| N/A | N/A | New CMS64 Revisions Implemented | 10/1/2009 |  |
| N/A | N/A | Modify COGNOS reports to remove the exclusion logic for adjustments from the CMS64 so that all adjustments, positive and negative report on the CMS64 and CMS21 regardless of when the original claim was paid. | 9/30/2009 |  |
| 8531 | 291193 | Update CMS 64 Hardcoded Public Providers | 9/25/2009 |  |
| 8623 | 291563 | Removed the filter on adjusted claims over 2 years. All adjustments are now being reported | 9/9/2009 | For FFY/Quarter = 2009/4  DW change. |
| N/A | Compare CMS 64 and SHARE | Comparison expanded to include qtrs ending 12/2007 thru 12/2009. Identified changes required to CMS 64 and SHARE accounting detail file to correct errors in both. | 9/1/2009 thru 11/1/2009 |  |
| 8310 | 290501 | Added FCOS - some reusing old numbers | 8/15/2009 | For FFY/Quarter = 2010/1  DW change.  Added begin and end dates to vvcmscol and vvcmscos tables; carried through view and Cognos to add date filters to the report designs |
| 8339 | 290646 | Modify SCI to Meet CHIPRA Requirements | 7/9/2009 |  |
| 8361 | 290684 | Modify Cost Center 86736 & CMS64 BASE and SCHIP Reports | Part 1 – 7/9/2009  Part 2 – 10/22/2009 | Part 1 of this project modified the CMS 64 logic so that cost center 86736 reports to the SCHIP report and is excluded from the Base report.  Part 2 of this project addressed the system changes required in the financial subsystem to recognize 86736 as a SCHIPs cost center.  Also changed where cms64-rpt-typ Is being populated for financial Claims to be consistent with other claim types. |
| 7398 | 271601 clarification (email from Chris) | Apply 2-yr filter to report only adjustments on claims to all reports, including 'current' | 6/30/2009 | For FFY/Quarter = 2009/3  Cognos will filter out adjustment claims where the original claim is more than 8 qtrs past - no changes to download pgm. Filter was previously applied on to the prior period adj report; modified designs to add to all reports |
| 8145 | 290223 | Change CMS64 Requirements to Capture Tx Foster Care | 6/25/2009 | Capture TX foster care transactions. Also added relevant comments as needed and stripped out sequence numbers in cols 1-7 left over from plog 6913. |
| N/A | 280684.1 | Apply 86736 claims to SCHP instead of BASE report | 6/1/2009 | For FFY/Quarter = 2009/3  DW updated for claims paid Apr-Jun 09. Another update will be applied in 2009-4 qtr until program changes implemented into PROD. |
| 8122 | N/A | CMS64 needs to reinitialize fields after each record processed to ensure currect data is sent to the output file(s). | 5/29/2009 |  |
| 8092 | N/A | Fix Subscripts for PAID DATE and STATE PROVIDER sysin | 5/29/2009 | CMS64 does not read all rows of the sysin member for populating paid date on output file. The same problem occurs with the State Provider SYSIN. Correct paid date sysin and state provider sysin to increment their read subscripts only after a record as been written to the Cobol table. |
| 8091 | N/A | Add Claim Type 'K' to 88 - Level for HEADER-BUILD-SW | 4/23/2009 |  |
| N/A | N/A | Request made to compare CMS 64 and SHARE accounting detail file – stated problem ASD is using the CMS64 for the draws and the SHARE totals from the SHARE Activity File for the expenditures. |  | Begin Date = 5/1/2009  The $100 million that we are off is in relation to revenues and expenditures.  We have recorded in the General Ledger in SHARE more expenditures (SHARE Activity File) than revenue (CMS64 weekly draw). REQUIRES Implementing a new SHARE file in the data warehouse – ESTIMATED 8 WEEKS TO ACHIEVE |
| 8140 | 290329 | Transition from VO to OptumHealth | 4/23/2009 | Add Optum Health provider number and logic to include Optum health as new provider. |
| 8122 | N/A | CMS64 REJECT record contains bad data from previous record; | 4/23/2009 | CMS 64 reject record not being initialized after every write of the reject file. Causes bad data to be written to the reject file. |
| N/A |  | Salud IHS capitations not reported on CMS64 | 4/1/2009 | Clients with COE 036 were switched to the SCHIPS meg effective 4/1/09 but the switch to move their IHS caps did not occur. PIB has corrected their SALUD programs |
| 7979 | 281747 | Add Two Financial Reason Codes: 017 - Upper Limit Payment, 101 - SCI Payment | 3/8/2009 |  |
| 7790 | 281178 | Add PE supplemental report | 1/1/2009 | For FFY/Quarter = 2009/1  PE report added to Cognos - replaces Access version (280895) |
| 7370 | 271442 | Change CMS64 Report Criteria To Correct DSH Payment Placement | 10/10/2008 |  |
| 6913 | 270269 | Add Financial Reason Codes | 10/10/2008 |  |
| 7800 | 281200 | CMS 64 Report and the 2009 ICD-9 Update | 10/3/2008 | Increase upper range of diagnosis codes from 669.99 to 679.14 to reflect new 2009 diagnosis codes. |
| 7746 | 281089 | Update FEDCMS64 Data Warehouse Table With New Fields | 10/3/2008 | Update CMS 64 download file to pass three new fields to data warehouse for all record types  (medical '60', institutional '61'  Pharmacy '62' and financial '66')  They are:  B-SYS-ID  B-COE-CD  B-FED-MTCH-CD |
| 7747 | 281089 | Add columns to fedcms64 table | 10/1/2008 |  |
| 7746 | 281089 | Update FEDCMS64 Data Warehouse Table With New Fields - Pass SYSID, COE and FED-MTCH-CD to DW fedcms64 table | 9/30/2008 |  |
| 7800 | 281200 | CMS 64 Report and the 2009 ICD-9 Update - UPDATE 2009 DIAGNOSIS CODES by changing upper range from 669.99 to 679.14 | 9/30/2008 |  |
| 7708 | N/A | Modify the CMS64 to look at DRG code 767 instead of 374 for Family Planning; DRG for family planning changed from 374 to 767 for effective dates after 10/01/2007 | 7/24/2008 |  |
| 7716 | 280895 | CMS 64 Reporting - Reverse PE System Logic of 28-0500 | 7/2/2008 | Remove code that checks for FED MATCH CODE = '3' when assigning CMS64 Report ID and Column ID |
| 7716 | 280895 | Reverse 280500 changes for PE reporting and add adhoc report of PE expenditures | 7/1/2008 | For FFY/Quarter = 2008/3  • DW change - PE supp report developed initially in MS Access. MF reran qtr ended Jun08 with changes. Records sent down to DW for the table update. (Need added columns in fedcms64 table to add this report to supplemental Cognos reports.)  • Mainframe Change - modified to not include COE 071/3 on the SCHIPS report |
| 7658 | 280847 | CMS Perm Recovery Project - PDCS | 6/1/2008 | Add adj reason code 082. Manual change to vvadjrsn table made for 082 |
| 7551 | 280500 | COGNOS CMS64 Report Changes (PE expenditures) | 4/18/2008 | Added all code that assigns CMS64 Report ID's and Column ID's for BASE, FMPL and SCHP reports  • Modified for the SCHIPs PE  COE 071/3 to be included on  The SCHIPS report  • Also excluded rev code '001 'as total line PL7548 |
| Apr08 | N/A | Added PT WV-P0204-C-PSYC-BACHLR | 4/3/2008 | Some undocumented changes use 'APR08' as tags in NMMJCX64.  Add provider type 932 - PSYCHOLOGIST  Other changes include –  • added STATE PROVIDER SYSIN, PAID DATE SYSIN,  • added read of DB record FPYBLETB,  • added check for NON-CMS64-ACCOUNT-CODE,  • added check for F-RSN-CDs in Bypass Logic,  • added code to assign TPL report ID, Prior period report ID,  Correct Last DOS for Institutional Claims |
| 7551 | 280500 | Remove PE expenditures from BASE report and include in SCHIP report | 4/1/2008 | For FFY/Quarter = 2008/3    see revised run for 280895  Indicators changed in download program to facilitate Cognos report redirection of claims. (Note: Mainframe changes made on 4/18/2008 and first two weeks of download files were rerun to update table.) |
| 7546 | 280481 | Run adhoc report for PE clients included in CMS64 reports | 4/1/2008 | For FFY/Quarter = 2008/3  Cheryl Gentsch developed MS Access queries. |
| 7395 | 271598 | Add CPT Code V2787 To The CMS 64 Report Criteria | 3/27/2008 |  |
| 7476 | 280159 | Change CMS 64 Criteria For FCOS 09 | 3/27/2008 |  |
| 7398 | 271601 | Revise CMS64 Reporting Related To Adjustments and TPL | 3/27/2008 | Mainframe changes |
| 7398 | 271601 | Revise CMS64 Reporting Related To Adjustments and TPL | 3/1/2008 | For FFY/Quarter = 2008/2  DW change  Additional reports added to Cognos. Prior period 'P' and 'N' reports filter modified.  Add separate TPL reports. Change prior period adjustments to report if original paid date is within 8 qtrs.("original paid date plus 7 qtrs rather than the original payment date plus 8 qtrs as is currently counted.") |
| N/A | 280219 | Create desktop application for ASD/PIB use in weekly draws | 3/1/2008 | Reports created with Date Range Prompt so user could select variable date range. Cognos folders created for ASD to use to run CMS64 reports at will for weekly draws. |
| N/A | N/A | COGNOS changes due to CMS directed to discontinue reporting claims adjustments on Lines 8 and 10b and to report TPL recoveries on Line 9a of the TPL report instead of reporting them on line 10b as they are currently |  | Begin Date = 11/30/2007 |
| 7135 | 270871 | Change Definition for COS 56 | 10/24/2007 | In program NMMJCX64 change all (6) occurrences of WV-C0175-C-MAINTENANCE to WV-C0175-C-LODGING-MEALS. |
| 6667 | 260986 | CMS 64 Creation from MMIS and Data Warehouse | 10/15/2007 |  |
| N/A | N/A | Added change to check for Dental Records (C-HDR-TYP-CD = 'D') in addition to provider types = WV-P0204-C-DENTIST on medical claims | 9/23/2007 | Changes made to program NMMJCX64 |
| N/A | N/A | CMS64 QTRS ENDING 3/04 THRU 9/05 PRODUCED |  | Begin Date = 8/1/2007 |
| N/A | N/A | Set JOB RC=002 when a record is rejected |  | Change made to program NMMJCX64 |
| N/A | N/A | Initial implementation of NMMJCX64 | 7/15/2007 | Initial implementation of NMMJCX64, EXTRACT FOR THE DATA WAREHOUSE CMS64 TABLE |
| 7088 | 270763 | Produce CMS 64 for Retroactive Periods |  |  |
| N/A | N/A | Request to produce 9 prior quarters of CMS 64. |  | Begin Date = 6/1/2007 |
| N/A | N/A | Based on continued review and changes requested, CMS 64 qtrs ending 6/06, 9/06 and 12/06 were reproduced |  | Begin Date = 5/1/2007 |
| N/A | N/A | COGNOS changes to exclude expenditures of adjustments greater than 7 quarters from date of original paid claim. |  |  |
| N/A | N/A | Presentation to CMS (John Castro and Margaret Cano) re: new reports |  | Begin Date = 2/27/2007 |
| N/A | N/A | FIRST OMNICAID PRODUCTION CMS64 REPORTS AND SUPPORTING DOCUMENTATION FOR BASE, SCHIP AND FAMILY PLANNING PRODUCED FOR QTRS ENDING 6/06, 9/06 AND 12/06.  1915B WAIVER REPORTING (SALUD, SCI, BH) AND HCBW REPORTS PRODUCED BY PIB FOR FIRST TIME.  QTRS 3/04 ONGOING FOR SALUD, QTRS 9/05 FOR ALL OTHERS |  | Begin Date = 1/29/2007 |
| N/A | N/A | Review of CMS64 test results and compares with existing CMS64 involving ASD, MAD, & XEROX | 12/1/2006 thru 1/1/2007 |  |
| N/A | N/A | HSD requests additional support to meet CMS timeline for delivery of system generated CMS 64 report of qtr ending **12/2006** |  | Begin Date = 8/22/2006 |
| N/A | N/A | HSD Requests Omnicaid Development Of CMS64 Reports |  | Begin Date = 12/16/2005 |