

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-20 One-Time Notification</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
<b>Transmittal 1790</b>	<b>Date: February 3, 2017</b>
	<b>Change Request 9974</b>

**SUBJECT: Shared System Enhancement 2016: Complete Disablement of Health Maintenance Organization (HMO) Inquiry Transaction, HIHO, and Related Vestige Within Common Working File (CWF)**

**I. SUMMARY OF CHANGES:** The purpose of this Change Request (CR) is for CWF to completely remove HMO inquiry transaction, HIHO, disabled back in 2008, and associated changes within the CWF system.

**EFFECTIVE DATE: July 1, 2017**

*\*Unless otherwise specified, the effective date is the date of service.*

**IMPLEMENTATION DATE: July 3, 2017**

*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

<b>R/N/D</b>	<b>CHAPTER / SECTION / SUBSECTION / TITLE</b>
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

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## I. GENERAL INFORMATION

**A. Background:** The Centers for Medicare & Medicaid Service (CMS) instructs CWF to completely remove HMO inquiry transaction, HIHO, and associated changes from the CWF system.

The CWF HIHO transaction allowed access to a small subset of HIMR inquiries, accessing the Beneficiary Master Part B data, MSPAUX data, and the Hospice Summary data without allowing access to other HIMR displays.

The CWF HIHO transaction was disabled in 2008 and is not used by CWF users anymore. As part of the removal of HIHO, the CWF Host was instructed to disable the HIHO transaction. However, the HIHO software was not fully removed from the CWF. Some of the HIHO software is integrated with the HIMR software modules.

**B. Policy:** N/A

## II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility								
		A/B MAC			D M E M A C	Shared- System Maintainers				Other
		A	B	H H H		F I S S	M C S	V M S	C W F	
9974.1	<p>CWF shall completely remove the CICS transaction, HIHO, disabled back in 2008, and its associated logic from the CWF system.</p> <p>Note: This would eliminate the need for CWF to maintain dormant code related to HIHO embedded into other CWF inquiry, HIMR.</p>							X		

### III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E	C E D I
		A	B	H H H		
	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

**Pre-Implementation Contact(s):** Vinay Vuyyuru, 410-786-9111 or [Vinay.Vuyyuru@cms.hhs.gov](mailto:Vinay.Vuyyuru@cms.hhs.gov)

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

### VI. FUNDING

**Section A: For Medicare Administrative Contractors (MACs):**

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**ATTACHMENTS: 0**