



January 3, 2012

CMS Alert Regarding Submission of Third Party Administrator (TPA) Information and Publication of NGHP User Guide Version 3.3

On December 23, 2011 the Centers for Medicare and Medicaid Services (CMS) issued an alert dated December 20, 2011 providing information pertaining to submission of TPA information under Section 111 of the Medicare, Medicaid and SCHIP Extension Act (MMSEA). The information contained in this alert will be incorporated into the next version of the User Guide that is released (this was not included in User Guide 3.3). This alert provides a temporary solution for Responsible Reporting Entities (RREs) to submit TPA information using existing Section 111 Tax Identification Number (TIN) Reference File fields.

Many RREs use TPAs to perform or assist with claim handling in addition to Medicare Secondary Payer (MSP) compliance, which regularly includes corresponding with the Medicare Secondary Payer Recovery Contractor (MSRPC) regarding recovery demands. Previously, an RRE's only option to provide TPA information to CMS was to manually submit an authorization on RRE letterhead, thus allowing MSRPC to forward recovery-related correspondence directly to the TPA.

Submission of this information via Section 111 will provide CMS and the MSRPC necessary notification that the listed TPA is representing the RRE and will eliminate a need for separate, manual communication. CMS indicated **that this is a temporary workaround** until specific TPA-related fields can be added to the Section 111 TIN Reference File.

The requirement for submitting information on the TIN Reference File indicating that the TPA is representing an RRE for claims submitted under the same TIN/Office Code combination are as follows:

- Submit RRE's IRS-assigned TIN in Field 3
- Submit applicable Office Code/Site ID in Field 4
- Submit RRE's name in Field 5
- Submit TPA's address in Fields 6 and 8-11
- Submit TPA's name in Field 7, prefaced by "C/O" or "ATTN"
- Submit all other TIN Reference File fields as specified in file layouts in Appendix B of the User Guide

It is important to note that if an RRE submits its TPA's address using this workaround, all correspondence associated with MSP-related recoveries **will only be sent to the TPA** and not the RRE. It is up to the RRE and its TPA to arrange sharing of this information with each other as appropriate as the RRE retains ultimate responsibility for adhering to Section 111 mandatory reporting requirements and all other pertinent MSP regulations.



RREs should immediately begin providing TPA information in the appropriate TIN Reference File fields (as applicable) in order to allow MSP recovery-related correspondence to be issued to the TPA.

[Click here](#) to review the CMS Alert in its entirety.

On December 23, 2011 CMS also issued NGHP User Guide Version 3.3. As noted in the December 14, 2011 teleconference held by CMS, changes to the User Guide are minor and mainly include addition of alerts issued since publication of NGHP User Guide Version 3.2. Additional changes include:

- Section 8.2 was updated to confirm that the RRE's Authorized Representative must review, sign and return the profile report to the Coordination of Benefits Contractor (COBC) within 30 days. If COBC has not received this signed report within 60 days, the RRE's ID will be placed in "Discontinued" status.
- Sections 8.2 and 20 were revised to include information regarding annual e-mailing of the RRE's profile report and RRE response requirements.
- Section 11.2.5 was revised to remove the following E Codes from the narrative: E8498 - Accidents occurring in other specified places, and E8499 - Accidents occurring in unspecified place. These codes cannot be used since they are on the list of excluded ICD-9 codes.
- Section 12.1 was updated to note that RREs should not submit a record known to be missing required data elements. Submitting an erroneous record will not fulfill the RRE's requirements and is no more compliant than failing to submit a record. Prior to submitting claim information, the RRE should obtain all required information, correct all known errors, and then submit a proper and complete claim record.

[Click here](#) to review the NGHP User Guide Version 3.3 in its entirety.

PMSI Client Support

PMSI is committed to providing our clients with the most current information on MMSEA reporting requirements and will continue to deliver updates as new information is issued by CMS. RREs should attend CMS teleconferences and consult the MMSEA Section 111 dedicated website at <http://www.cms.gov/MandatoryInsRep/> to obtain additional information about reporting requirements.

For more information on this alert or other Medicare Secondary Payer-related topics, please contact your PMSI Representative at 888.MSA.PMSI, or visit the [Knowledge Center](#) section of PMSI's website at www.pmsionline.com.

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