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Is A Settled Claim

Government Affairs Alert

January 6, 2010

CMS Issues Three Alerts for Liability, No-Fault and Workers' Compensation (Non-Group Health Plans) Responsible Reporting Entities

During the last two weeks of December 2009, the Centers for Medicare and Medicaid Services (CMS) issued three alerts pertaining to the implementation of Mandatory Insurer Reporting (MIR) as required by Section 111 of the Medicare, Medicaid and SCHIP Extension Act of 2007 (MMSEA). Following is a summary of the alerts issued.

Registration Guidance for Liability Insurance (Including Self-Insurance), No-Fault Insurance, or Workers' Compensation Responsible Reporting Entities (RREs) Who Are Foreign Entities

On December 29, 2009, CMS issued an Alert addressing MMSEA Section 111 reporting for Non-Group Health Plans (NGHP) classified as foreign entities. The Alert defines a foreign entity as “an entity that does not have a U.S. address and/or a U.S. Tax Identification Number (TIN) or Employer Identification Number (EIN).”

Currently, foreign entities cannot register through the Coordination of Benefits Secure Website (COBSW) and report under MMSEA Section 111. CMS is encouraging foreign entities who do not have a TIN or EIN to seek one from the Internal Revenue Service (IRS).

To accommodate foreign entities, CMS is modifying the existing registration process and extending the registration deadline for foreign entities until April 1, 2010. When available, additional registration information will be posted in an updated version of the MMSEA Section 111 NGHP User Guide on the dedicated webpage (<http://www.cms.hhs.gov/MandatoryInsRep>). *The delay in registration for foreign entities does not change existing reporting requirements.* CMS confirmed in the Alert that the delay does not change the reporting date requirements associated with Ongoing Responsibility for Medicals (ORM) and Total Payment Obligation to Claimant (TPOC) which apply to all—foreign and domestic—RREs. Foreign RREs retain the same responsibility and accountability for reporting as domestic RREs.

To view a copy of the Alert [click here](#).

Technical Alert for Liability Insurance (Including Self-Insurance), No-Fault Insurance and Workers' Compensation: Regarding ICD-9 Code Validation, Use of Claim Input File Detail Record Fields 58-62 and Claim Input File Field and Error Code Corrections

Dated December 23, 2009, this Alert serves as notification that the Coordination of Benefits Contractor (COBC) will accept any ICD-9 diagnosis code found in any of the latest three versions of valid codes posted by CMS. This will allow RREs adequate time to incorporate the new versions into their systems and set their own schedule for implementation.



The COBC will implement new versions on January 1st of the following year. For example, Version 27 was posted on the CMS website effective October 1, 2009 and will be incorporated into the MMSEA Section 111 process as of January 1, 2010. An ICD-9 code is considered valid if it exactly matches the first 5 characters of a record on any of the latest 3 files incorporated into the COBC MMSEA Section 111 process. Decimal points are not to be included. When testing and live reporting begins in 2010, ICD-9 codes effective October 1, 2007, 2008 and 2009 will be accepted.

The requirements for Fields 58-62 on the Claim Input File Detail Record are currently under review by CMS. RREs should not use these fields when testing begins in January 2010 or on initial production Claim Input Files in April – June 2010. These fields should be filled with spaces until revised requirements are published.

Other Claim Input File Field and Error Code corrections were also noted in this document. CMS will include these corrections in the next version of the NGHP User Guide.

To view the list of Claim Input File Field and Error Code corrections, for instructions on how to download a copy of valid ICD-9 codes and/or view a copy of this Alert [click here](#).

Technical Alert for Liability Insurance (Including Self-Insurance), No-Fault Insurance and Workers' Compensation: Updates to Query File Processing and HIPAA Eligibility Wrapper Software (HEW) for January 2010

Issued December 23, 2009, this Alert outlines updates to Query File processing and the HEW software effective January 6, 2010.

Two RRE-defined *optional* alpha-numeric DCN fields are available for use on the Query Input and Response Files. These fields may contain spaces, numbers, letters and special characters as defined for an alphanumeric field type and are left justified. Unused bytes should be filled with spaces. If these optional fields are used on the Query Input File, the COBC will always return these values on the Query Response File so the RRE can use them to match records.

A new version of the HEW software will also be made available (Version 2.0.0) as of January 6, 2010. Upgrading to the new version is *optional*. RREs may continue to use the current version if they choose. Version 2.0.0 will include the ability for RREs to submit up to two RRE-defined optional alpha-numeric DCN fields as noted above.

In addition, effective with this new version of the HEW software, the Windows/PC Server version of the HEW may be invoked using a command line interface. Instructions on how to do this are included with software package download. The new HEW software version will process response files downloaded from the COBSW that are in either a UNIX text or MS-DOS text format.

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As of January 4, 2010, Version 2.0.0 Windows PC/Server HEW software may be downloaded from the MMSEA Section 111 COBSW (www.section111.cms.hhs.gov) after login. Updated mainframe HEW software must be obtained directly from the RRE's assigned EDI Representative.

To view the entire Alert, obtain additional information regarding DCNs or view the updated file layouts for the flat file input/output for the HEW software [click here](#).

PMSI Client Recommendations

PMSI recommends that any entity who is considered a NGHP RRE or is involved in the MMSEA Section 111 reporting process review the Alerts from CMS in their entirety to determine organizational impact.

The MMSEA Section 111 reporting process is still evolving as CMS continues to implement requirements, provide further instructions and address industry questions and concerns. RREs should access the [CMS Section 111 web page](#) frequently to keep updated on developments and additional information.

PMSI will continue to provide additional guidance as new information is issued by CMS. RREs may also obtain additional information by attending CMS bi-monthly teleconferences. . [Click here](#) to view the teleconference schedule for 2010 posted by CMS. Following is the most current access information for the teleconferences:

Phone number: 800.603.1774

Pass code: NGHP

PMSI Settlement Solutions Client Support

PMSI is committed to bringing our clients the most current information on MMSEA reporting requirements and provides a complete preparation and compliance program. As further information becomes available, PMSI's Government Affairs team will provide additional insight and analysis.

For more information on Medicare Secondary Payer compliance and related Government Affairs Alerts, visit the [Knowledge Center](#) section of our website at www.pmsisettlement.com or contact us at 888.MSA.PMSI.

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