



## Government Affairs Alert

January 23, 2012

### **Self Reporting Ongoing Responsibility for Medicals No Longer Required Due to MMSEA Section 111 Implementation**

On January 10, 2012, the Centers for Medicare & Medicaid Services (CMS) issued an alert providing information pertaining to the self-reporting of claims involving Ongoing Responsibility for Medicals (ORM) outside of the MMSEA Section 111 reporting process.

CMS defines self-reporting as a direct notification by the Responsible Reporting Entity (RRE) via telephone or written correspondence to Coordination of Benefits Contractor (COBC) or Medicare Secondary Payer Recovery Contractor (MSPRC) outside the Section 111 mandatory reporting process. Self-reporting of ORM by liability, no-fault and workers' compensation RREs will no longer be required now that Section 111 Mandatory Insurer Reporting has been implemented.

The alert further outlines the following information as it pertains to reporting claims with or without ORM:

#### **RRE Reporting of ORM Information:**

- RREs are **not** required to self-report ORM
- RREs must report ORM through the Section 111 reporting process as required
- RREs should no longer self-report exhaustion of benefits to COBC or MSPRC
- RREs must report termination/exhaustion of ORM through the Section 111 reporting process
  - RREs wishing to make an immediate report of ORM termination prior to their quarterly file submission can contact COBC to report an ORM termination date for a single claim report previously submitted and accepted via Section 111 reporting. **This does not eliminate Section 111 reporting obligations.** Where an RRE self-reports an ORM termination date, the RRE must **still** report termination through via Section 111 reporting.
  - RREs using the Direct Data Entry (DDE) option may update a claim at any time and therefore eliminate the need to contact COBC via telephone or mail
  - For additional guidance, refer to Section 11.8 of the 111 Non-Group Health Plan (NGHP) User Guide Version 3.3

#### **RRE Reporting of Non-ORM Claims Prior to Settlement, Judgment, Award or Other Payment:**

- RREs do not report Total Payment Obligations to Claimant (TPOCs) until there is a settlement, judgment, award or other payment
- A preliminary self-report by RRE is not required, but will be accepted
- A self-report does not eliminate RRE's Section 111 reporting obligations



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This information was finalized after release of Version 3.3 of the Section 111 NGHP User Guide and is expected to be incorporated at a later date.

To review the Alert in its entirety **[CLICK HERE](#)**.

<http://www.cms.gov/MandatoryInsRep/Downloads/NGHPSelfRep.pdf>

### **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](http://www.pmsionline.com).

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