

November 10, 2014

Medicare Secondary Payer (MSP) Mandatory Reporting Provisions Section 111 of the Medicare, Medicaid, and SCHIP Extension Act of 2007 (See 42 U.S.C. 1395y(b)(7)&(b)(8))

Technical Alert: Option for Responsible Reporting Entities (RREs) to
Submit Recovery Agent Information for MSP Recovery Related
Correspondence for Liability Insurance (Including Self-Insurance), No-Fault
Insurance, and Workers' Compensation

Effective July 13, 2015, CMS will be implementing a permanent solution for RREs to submit their recovery agent information in designated fields on the Tax Identification Number (TIN) Reference File and Direct Data Entry (DDE) claim submissions. The submission of recovery agent information will remain optional, and the current workaround for submission of a "Third Party Administrator (TPA) Address" should no longer be used. RREs are encouraged to use the new reporting methodology as both the RRE and recovery agent will be copied on recovery correspondence.

Background & Policy:

Some Non-Group Health Plan (NGHP) RREs use a separate agent(s) to assist with tasks related to Medicare Secondary Payer recovery demands or potential recovery demands. However, the Section 111 file layouts do not accommodate separate name and address fields for this purpose.

As a temporary workaround, RREs were previously allowed to submit "TPA information" in existing Section 111 TIN Reference File fields or DDE fields. As of July 13, 2015, RREs that wish to submit recovery agent information as part of the Section 111 reporting should submit their recovery agent information in new fields designated for this purpose. These fields should *not* be used to submit information for a reporting agent who *only* assists the RRE with their Claim Input File submissions. These fields should *only* be used to provide the name and address for an agent assisting the RRE with the *recovery* process.

Under this new process, if Recovery Agent information is provided, both the RRE and its recovery agent will receive recovery-related correspondence. Specifically:

• If Recovery Agent Information *is included* on the RRE's submission, all recovery correspondence associated with Section 111 claim reports with the same RRE ID, TIN and Office Code/Site ID combination as that submitted on the matching TIN Reference File Record will be issued to the RRE using the address provided in Fields 5-11 *and* a copy shall be sent to the Recovery Agent using the address provided in new Fields 16-22.

• If Recovery Agent Information *is not included* on the RRE's submission, all recovery correspondence associated with Section 111 claim reports with the same RRE ID, TIN and Office Code/Site ID combination as that submitted on the matching TIN Reference File Record will be issued to the RRE using the address provided in Fields 5-11.

For purposes of MMSEA Section 111 NGHP submission of Recovery Agent information only, CMS will utilize the designation of an agent and submission of that agent's name and address on the TIN Reference File/DDE Submission, as an authorization by the RRE for the agent to resolve any recovery correspondence related to claim submissions with a matching RRE ID, TIN and Office Code/Site ID combination. CMS will consider the RRE bound by the agent's actions on such matters. The RRE still retains ultimate responsibility for adhering to Section 111 mandatory reporting requirements and all other MSP obligations and requirements.

Requirements

As of July 13, 2015, if an RRE wants to submit Recovery Agent information, the RRE should include the following information on the NGHP TIN Reference File Detail Record:

- RRE ID in Field 2
- RRE's IRS-assigned tax identification number (TIN) in Field 3
- Applicable Office Code/Site ID in Field 4
- RRE's name in Field 5
- RRE's address in Fields 6-11. This is the address at which the RRE will receive recovery-related correspondence.
- Recovery Agent's name if applicable, in new Field 16
- Recovery Agent's address, if applicable, in new Fields 17-22. This is the address at which the Recovery Agent will receive recovery-related correspondence.
- All other TIN Reference File fields as specified in the file TIN Reference File Detail Record Layout included with this Alert and documented in the NGHP User Guide.
- For TIN records submitted under the former workaround, recovery correspondence will continue to be issued to the address previously provided in Fields 5-11.

Submission of Recovery Agent information is optional. If an RRE is not using an agent for recovery purposes, the RRE must space-fill fields 16-22 on the TIN reference File/DDE submission, as applicable.

RREs are advised to submit updated TIN Reference File Records after the implementation of the new Recovery Agent fields in July 2015 in order to replace records previously submitted using the "TPA workaround".

Revised TIN Reference File Detail Record – 2220 bytes

Field 16, previously defined as filler, has been redefined to accommodate new Fields 16-22 for Recovery Agent Name and Address information.

Field	Name	Size	Start Pos.	End Pos.	Data Type	Description
1	Record 4 Identifier		1	4	Alphabetic	Must be "NGTD"
						Required.
2	Section 111 RRE ID	9	5	13	Numeric	BCRC assigned Section 111 Responsible Reporting Entity Identification Number (RRE ID).
						Pad with leading zeroes.
						Required.
3	TIN	9	14	22	Numeric	RRE's TIN. Federal Tax Identification Number of the insurer, applicable plan (s), workers' compensation law/plan (s), or self- insured entities reported in Field 52 of each Detail Claim Record. Used in conjunction with the Office Code/Site ID reported in Field 53 of the Detail Claim Record.
						Also known as the Employer Identification Number (EIN).
						Each TIN/Office Code combination reported in Fields 52 and 53 of the Detail Claim Records must have a corresponding record reported on the TIN Reference File. A record must be submitted on the TIN Reference File for each unique TIN/Office Code combination.
						If RRE ID is associated with a foreign entity with no TIN, fill with a pseudo-TIN formatted as 9999xxxxx where 'xxxxx' is an RRE-assigned number.
						Required.

Field	Name	Size	Start Pos.	End Pos.	Data Type	Description
4	Office Code/Site ID	9	23	31	Alpha- Numeric	RRE-defined 9-digit number to uniquely identify variations in insurer addresses/claim offices/Plan Contact Addresses as reported in Field 53 of each Detail Claim Record. Used in conjunction with the TIN reported in Field 52 of the Detail Claim record to uniquely specify different addresses associated with one TIN.
						If only one address will be used per reported TIN, leave blank. If not used, must be spaces. If used, must be a non-zero 9-digit number, right justified and padded on the left with zeroes. No letters or special characters are accepted.
						Each TIN/Office Code combination reported in Fields 52 and 53 of the Detail Claim Records must have a corresponding record reported on the TIN Reference File. A record must be submitted on the TIN Reference File for each unique TIN/Office Code combination.
						Required if Office Code/Site ID is supplied in Field 53 of the Claim Input File Detail Record.
5	TIN/Office Code Mailing Name	70	32	101	Alpha- Numeric	Name associated with the RRE reflected by the unique TIN/Office Code combination. (The Recovery Agent's name (where a Recovery Agent exists) shall not be used in this field.)
						This name should reflect what should be used to address recovery-related correspondence to the RRE related to the associated, matching claim reports. This is the name used for recovery demand notifications, if applicable.
						The first two characters of this field must be non-blank (filled with characters other than spaces). Limit field to no more than eight separate words in the first 40 characters for best results.
						Required.

Field	Name	Size	Start Pos.	End Pos.	Data Type	Description
6	TIN/Office Code Mailing	50	102	151	Alpha- Numeric	First line of the address associated with the unique TIN/Office Code combination reflected on this record.
	Address Line 1					This mailing address should reflect where the RRE wishes to have all recovery-related correspondence directed for the TIN/Office Code combination. Note : If Recovery Agent information is submitted in Fields 16-22, the Recovery Agent will also receive a copy of all recovery-related correspondence that is sent to the RRE.
					Must be a US address.	
						Limit field to no more than eight separate words in the first 40 characters for best results. This address line should be used for the primary street address information including suite and/or apartment number if possible.
						If the RRE has registered as a foreign entity and no US address is available, fill with spaces and supply "FC" in the TIN/Office Code State (Field 9).
						If TIN/Office Code State (Field 9) = "FC," this field must be spaces.
						Required.

Field	Name	Size	Start Pos.	End Pos.	Data Type	Description
7	TIN/Office Code Mailing	50	152	201	Alpha- Numeric	Second line of the address associated with the unique TIN/Office Code combination reflected on this record.
	Address Line 2					This mailing address should reflect where the RRE wishes to have all recovery-related correspondence directed for the TIN/Office Code combination. Note : If Recovery Agent information is submitted in Fields 16-22, the Recovery Agent will also receive a copy of all recovery-related correspondence that is sent to the RRE.
						Must be a US address.
						Limit field to no more than eight separate words in the first 40 characters for best results. This address line should be used for the secondary street address information such as "ATTN TO," internal mailstops, department name, etc.
						If the RRE has registered as a foreign entity and no US address is available, fill with spaces and supply "FC" in the TIN/Office Code State (Field 9).
						If TIN/Office Code State (Field 9) = "FC." this field must be spaces.
8	TIN/Office Code City	30	202	231	Alpha- Numeric	City of the address associated with the unique TIN/Office Code combination reflected on this record.
						This mailing address should reflect where the RRE wishes to have all recovery-related correspondence directed for the TIN/Office Code combination. Note : If Recovery Agent information is submitted in Fields 16-22, the Recovery Agent will also receive a copy of all recovery-related correspondence that is sent to the RRE.
						Must be a US city.
						Field may contain only alphabetic, Space, Comma, &—'. @ #/;: characters. No numeric characters allowed.
						If the RRE has registered as a foreign entity and no US address is available, fill with spaces and supply "FC" in the TIN/Office Code State (Field 9).
						If TIN/Office Code State (Field 9) = "FC," this field must be spaces.
						Required.

Field	Name	Size	Start Pos.	End Pos.	Data Type	Description
9	TIN/Office Code State	2	232	233	Alphabetic	US Postal state abbreviation of the address associated with the unique TIN/Office Code combination reflected on this record.
						See http://www.usps.com
						The District of Columbia, American Samoa, Guam, Puerto Rico, and the US Virgin Islands are considered to have US addresses.
						This mailing address should reflect where the RRE wishes to have all recovery-related correspondence directed for the TIN/Office Code combination. Note : If Recovery Agent information is submitted in Fields 16-22, the Recovery Agent will also receive a copy of all recovery-related correspondence that is sent to the RRE.
						If the RRE has registered as a foreign entity and no US address is available, supply "FC" and place the correct international mailing address in Fields 12-15.
						Required.
10	TIN/Office Code Zip	5	234	238	Alpha- Numeric	5-digit Zip Code of the address associated with the unique TIN/Office Code combination reflected on this record.
						Must be a US Zip Code.
						If the RRE has registered as a foreign entity and no US address is available, fill with zeroes (or all spaces) and supply "FC" in the TIN/Office Code State (Field 9).
						If TIN/Office Code State (Field 9) = "FC," this field must be spaces.
						Required.
11	TIN/Office Code Zip+4	4	239	242	Alpha- Numeric	4-digit Zip+4 code of the address associated with the unique TIN/Office Code combination reflected on this record.
						If not applicable fill with zeroes (0000).
						If the RRE has registered as a foreign entity and no US address is available, fill with zeroes and supply "FC" in the TIN/Office Code State (Field 9).
						If TIN/Office Code State (Field 9) = "FC," this field must be spaces.

Field	Name	Size	Start Pos.	End Pos.	Data Type	Description
12	Foreign RRE	\mathcal{E}	243	274	Alpha- Numeric	First line of mailing address of a foreign RRE.
	Address				Numeric	Use only if RRE has no US address.
	Line 1					Required if TIN/Office Code State (Field 9) = "FC."
13	Foreign RRE	32	275	306	Alpha- Numeric	Second line of mailing address of a foreign RRE.
	Address Line 2					Use only if RRE has no US address.
						Optional.
14	14 Foreign RRE Address Line 3	32	307	338	Alpha- Numeric	Third line of mailing address of a foreign RRE.
						Use only if RRE has no US address.
						Optional.
15	Foreign RRE	32 339	339	370	Alpha- Numeric	Fourth line of mailing address of a foreign RRE.
	Address Line 4				Use only if RRE has no US address.	
						Optional.
16	Recovery Agent Mailing Name	70	371	440	Alpha- Numeric	Name to be used on the Recovery Agent's copy of recovery-related correspondence reflected by the unique TIN/Office Code combination.
						If the RRE is not submitting Recovery Agent Address information, fill with spaces.
						The first two characters of this field must be non-blank (filled with characters other than spaces). Limit field to no more than eight separate words in the first 40 characters for best results.
						Optional.

Field	Name	Size	Start Pos.	End Pos.	Data Type	Description
17	Recovery Agent Mailing Address Line 1	50	441	490	Alpha- Numeric	Address line 1 to be used on the Recovery Agent's copy of recovery-related correspondence. If the RRE is not submitting Recovery Agent Address information, fill with spaces.
						Must be a US address.
						Limit field to no more than eight separate words in the first 40 characters for best results. This address line should be used for the primary street address information including suite and/or apartment number if possible.
						If Recovery Agent Mailing Name (Field 16) is submitted, this field is required.
						Optional.
18	Recovery 50 49 Agent Mailing Address Line 2	491 540	Alpha- Numeric	Address line 2 to be used on the Recovery Agent's copy of recovery-related correspondence. If the RRE is not submitting Recovery Agent Address information, fill with spaces.		
						Must be a US address.
						Limit field to no more than eight separate words in the first 40 characters for best results. This address line should be used for the secondary street address information such as "ATTN TO," internal mailstops, department name, etc.
						Optional.
19	Recovery Agent City	30	541	570	Alpha- Numeric	City to be used on the Recovery Agent's copy of recovery-related correspondence. If the RRE is not submitting Recovery Agent Address information, fill with spaces.
						Must be a US city.
						Field may contain only alphabetic, Space, Comma, &—' . @ #/; : characters. No numeric characters allowed.
						If Recovery Agent Mailing Name (Field 16) is submitted, this field is required.
						Optional.

Field	Name	Size	Start Pos.	End Pos.	Data Type	Description
20	Recovery Agent State	2	571	572	Alphabetic	US Postal state abbreviation to be used on the Recovery Agent's copy of recovery-related correspondence. If the RRE is not submitting Recovery Agent Address information, fill with spaces.
						See http://www.usps.com
						The District of Columbia, American Samoa, Guam, Puerto Rico, and the US Virgin Islands are considered to have US addresses.
						If Recovery Agent Mailing Name (Field 16) is submitted, this field is required.
						Optional.
21	Recovery Agent Zip	5	573	577	Alpha- Numeric	5-digit Zip Code to be used on the Recovery Agent's copy of recovery-related correspondence. If the RRE is not submitting Recovery Agent Address information, fill with spaces.
						Must be a US Zip Code.
						If Recovery Agent Mailing Name (Field 16) is submitted, this field is required.
						Optional.
22	Recovery Agent Zip+4	4	578	581	Alpha- Numeric	4-digit Zip+4 to be used on the Recovery Agent's copy of recovery-related correspondence. If the RRE is not submitting Recovery Agent Address information, fill with spaces.
						If not applicable fill with zeroes (0000).
23	Reserved for Future Use	1639	582	2220	Alpha- Numeric	Fill with spaces.

Revised TIN Reference Response File Detail Record -1000 bytes

Field 34, previously defined as filler, has been redefined to accommodate new Fields 35-48 for Recovery Agent Name and Address information.

Field	Name	Size	Start Pos.	End Pos.	Data Type	Description
1	Record Identifier	4	1	4	Alphabetic	Contains value "NTRD"
2	Section 111 RRE ID	9	5	13	Numeric	BCRC assigned Section 111 Responsible Reporting Entity Identification Number (RRE ID).
						Padded with leading zeroes.
						As supplied by RRE input record.
3	Submitted TIN	9	14	22	Numeric	Tax identification number of the entity as provided on the input record.
4	Submitted Office Code/Site ID	9	23	31	Alpha- Numeric	Office Code/Site ID as provided on the input record.
5	Submitted TIN/Office Code Mailing Name	70	32	101	Alpha- Numeric	TIN/Office Code Mailing Name as provided on input record.
6	Submitted TIN/Office Code Mailing Address Line 1	50	102	151	Alpha- Numeric	TIN/Office Code Mailing Address Line 1 as provided on input record.
7	Submitted TIN/Office Code Mailing Address Line 2	50	152	201	Alpha- Numeric	TIN/Office Code Mailing Address Line 2 as provided on input record.
8	Submitted TIN/Office Code City	30	202	231	Alpha- Numeric	TIN/Office Code City as provided on input record.
9	Submitted TIN/Office Code State	2	232	233	Alphabetic	TIN/Office Code State as provided on input record.
10	Submitted TIN/Office Code Zip	5	234	238	Numeric	TIN/Office Code Zip code as provided on input record.

Field	Name	Size	Start Pos.	End Pos.	Data Type	Description
11	Submitted TIN/Office Code Zip+4	4	239	242	Alpha- Numeric	TIN/Office Code Zip+4 as provided on input record.
12	Applied TIN/Office Code Mailing Address Line 1	50	243	292	Alpha- Numeric	TIN/Office Code Address line 1, after address validation completed, which will be used by Medicare for subsequent processing. TIN/Office Code Address Change Flag (Field 33) will equal Y if the applied address in Fields 12—17 is different from the submitted address (Fields 6—11) and N if it is the same as the submitted address. Will contain spaces if the TIN record was rejected. The field will also contain spaces if the submitted TIN/Office State code contained "FC" indicating a foreign RRE address was submitted.
13	Applied TIN/Office Code Mailing Address Line 2	50	293	342	Alpha- Numeric	TIN/Office Code Mailing Address Line 2 after address validation completed. See description for Field 12.
14	Applied TIN/Office Code City	30	343	372	Alpha- Numeric	TIN/Office Code City after address validation completed. See description for Field 12.
15	Applied TIN/Office Code State	2	373	374	Alphabetic	TIN/Office Code State after address validation completed. See description for Field 12.
16	Applied TIN/Office Code Zip	5	375	379	Alpha- Numeric	TIN/Office Code Zip after address validation completed. See description for Field 12.
17	Applied TIN/Office Code Zip+4	4	380	383	Alpha- Numeric	TIN/Office Code Zip+4 after address validation completed. See description for Field 12.
18	Submitted Foreign RRE Address Line 1	32	384	415	Alpha- Numeric	Foreign RRE Address Line 1 as provided on input record.

Field	Name	Size	Start Pos.	End Pos.	Data Type	Description
19	Submitted Foreign RRE Address Line 2	32	416	447	Alpha- Numeric	Foreign RRE Address Line 2 as provided on input record.
20	Submitted Foreign RRE Address Line 3	32	448	479	Alpha- Numeric	Foreign RRE Address Line 3 as provided on input record.
21	Submitted Foreign RRE Address Line 4	32	480	511	Alpha- Numeric	Foreign RRE Address Line 4 as provided on input record.
22	TIN Disp Code	2	512	513	Alpha- Numeric	Code to indicate validation processing results of the submitted TIN Reference File Detail Record: "01" – TIN Record accepted "TN" – TIN Record rejected
23	TIN Error Code 1	4	514	517	Alpha- Numeric	Code associated with an error found by the BCRC in the submitted TIN Reference record. Provided only if disposition code denotes error. See the TIN Reference Response File Error Code Resolution Table for values.
24	TIN Error Code 2	4	518	521	Alpha- Numeric	Code associated with an error found by the BCRC in the submitted TIN Reference record. Provided only if disposition code denotes error. See the TIN Reference Response File Error Code Resolution Table for values.
25	TIN Error Code 3	4	522	525	Alpha- Numeric	Code associated with an error found by the BCRC in the submitted TIN Reference record. Provided only if disposition code denotes error. See the TIN Reference Response File Error Code Resolution Table for values.
26	TIN Error Code 4	4	526	529	Alpha- Numeric	Code associated with an error found by the BCRC in the submitted TIN Reference record. Provided only if disposition code denotes error. See the TIN Reference Response File Error Code Resolution Table for values.

Field	Name	Size	Start Pos.	End Pos.	Data Type	Description
27	TIN Error Code 5	4	530	533	Alpha- Numeric	Code associated with an error found by the BCRC in the submitted TIN Reference record. Provided only if disposition code denotes error.
						See the TIN Reference Response File Error Code Resolution Table for values.
28	TIN Error Code 6	4	534	537	Alpha- Numeric	Code associated with an error found by the BCRC in the submitted TIN Reference record. Provided only if disposition code denotes error.
						See the TIN Reference Response File Error Code Resolution Table for values.
29	TIN Error Code 7	4	538	541	Alpha- Numeric	Code associated with an error found by the BCRC in the submitted TIN Reference record. Provided only if disposition code denotes error.
						See the TIN Reference Response File Error Code Resolution Table for values.
30	TIN Error Code 8	4	542	545	Alpha- Numeric	Code associated with an error found by the BCRC in the submitted TIN Reference record. Provided only if disposition code denotes error.
						See the TIN Reference Response File Error Code Resolution Table for values.
31	TIN Error Code 9	4	546	549	Alpha- Numeric	Code associated with an error found by the BCRC in the submitted TIN Reference record. Provided only if disposition code denotes error.
						See the TIN Reference Response File Error Code Resolution Table for values.
32	TIN Error Code 10	4	550	553	Alpha- Numeric	Code associated with an error found by the BCRC in the submitted TIN Reference record. Provided only if disposition code denotes error.
						See the TIN Reference Response File Error Code Resolution Table for values.
33	TIN/Office Code Address	1	554	554	Alpha- Numeric	Code indicating whether Submitted Address (Fields 6—11) differs from the Applied Address (Fields 12—17).
	Change Flag					Values:
	11.00					Y – address changed
						N – address did not change
						Space – record could not be validated or Submitted TIN/Office Code State (Field 9) = "FC"

Field	Name	Size	Start Pos.	End Pos.	Data Type	Description
34	Recovery Agent. Address Change	1	555	555	Alpha- Numeric	Code indicating whether Recovery Agent Address Submitted Address (Fields 36—41) differs from the Recovery Agent Address Applied Address (Fields 42—47).
	Flag					Values:
						Y – address changed
						N – address did not change
						Space – record could not be validated
35	Submitted Recovery Agent Mailing Name	70	556	625	Alpha- Numeric	Recovery Agent Mailing Name as provided on input record.
36	Submitted Recovery Agent Mailing Address Line 1	50	626	675	Alpha- Numeric	Recovery Agent Mailing Address Line 1 as provided on input record.
37	Submitted Recovery Agent Mailing Address Line 2	50	676	725	Alpha- Numeric	Recovery Agent Mailing Address Line 2 as provided on input record.
38	Submitted Recovery Agent City	30	726	755	Alpha- Numeric	Recovery Agent City as provided on input record.
39	Submitted Recovery Agent State	2	756	757	Alphabetic	Recovery Agent State as provided on input record.
40	Submitted Recovery Agent Zip	5	758	762	Numeric	Recovery Agent Zip code as provided on input record.
41	Submitted Recovery Agent Zip+4	4	763	766	Alpha- Numeric	Recovery Agent Zip+4 as provided on input record.

Field	Name	Size	Start Pos.	End Pos.	Data Type	Description
42	Applied Recovery Agent Mailing Address Line 1	50	767	816	Alpha- Numeric	Recovery Agent Address line 1, after address validation completed, which will be used by Medicare for subsequent processing. Recovery Agent Address Change Flag (Field 34) will equal Y if the applied address in Fields 42—47 is different from the submitted address (Fields 36—41) and N if it is the same as the submitted address. Will contain spaces if the TIN record was rejected.
43	Applied Recovery Agent Mailing Address Line 2	50	817	866	Alpha- Numeric	Recovery Agent Mailing Address Line 2 after address validation completed. See description for Field 42.
44	Applied Recovery Agent City	30	867	896	Alpha- Numeric	Recovery Agent City after address validation completed. See description for Field 42.
45	Applied Recovery Agent State	2	897	898	Alphabetic	Recovery Agent State after address validation completed. See description for Field 42.
46	Applied Recovery Agent Zip	5	899	903	Alpha- Numeric	Recovery Agent Zip after address validation completed. See description for Field 42.
47	Applied Recovery Agent Zip+4	4	904	907	Alpha- Numeric	Recovery Agent e Zip+4 after address validation completed. See description for Field 42.
48	Reserved for Future Use	93	908	1000	Alpha- Numeric	Filled with spaces.

New NGHP TIN Reference Response File Errors

Error Code	NGHP TIN Reference File Field	Description
TN24	Recovery Agent Mailing Name – Field 16	Invalid Recovery Agent Name. If supplied, Recovery Agent Name must contain at least 2 characters. The first 2 characters must be non-blank. Special characters other than other than comma, ampersand, dash, @ # / semicolon, colon, quote are not allowed.

Error Code	NGHP TIN Reference File Field	Description
TN25	Recovery Agent Mailing Address Line 1 – Field 17	Invalid Recovery Agent Mailing Address Line 1. If supplied, Recovery Agent Mailing Address Line 1 cannot contain any characters other than alpha, numeric, A-Z, 0-9, space, and special characters other than comma, ampersand, dash, @ #/semicolon, colon, quote.
TN26	Recovery Agent Mailing Address Line 2 - Field 18	Invalid Recovery Agent Mailing Address Line 2. If supplied, Recovery Agent Mailing Address Line 2 cannot contain any characters other than alpha, numeric A-Z, 0-9, space, and special characters other than comma, ampersand, dash, @ #/semicolon, colon, quote.
TN27	Recovery Agent City - Field 19	Invalid Recovery Agent City. If supplied, Recovery Agent City cannot contain characters other than alpha A-Z, space, 0-9, and special characters other than comma, ampersand, dash, @ # / semicolon, colon, quote.
TN28	Recovery Agent State – Field 20	Invalid Recovery Agent State. If supplied, Recovery Agent State must contain a valid US postal state code.
TN29	Recovery Agent Zip – Field 21	Invalid Recovery Agent Zip. If supplied, Recovery Agent Zip must contain 5 numeric digits.
TN30	Recovery Agent Zip+4 – Field 22	Invalid Recovery Agent Zip+4. If supplied, Recovery Agent Zip+4 must contain 4 numeric digits, all zeroes or all spaces.
TN31	Fields 16 - 22	Invalid Recovery Agent address. The address supplied was insufficient or missing components needed to determine a unique match to the postal database.
TN32	Fields 16 - 22	Invalid Recovery Agent address. The address matches one to which mail is undeliverable, such as a vacant lot.
TN33	Fields 16 - 22	Invalid Recovery Agent address. The apartment number was not found in the postal database or was not supplied for an address that requires apartment number.
TN34	Fields 16 - 22	Invalid Recovery Agent address. The house number or box number was not found on the street.
TN35	Fields 16 - 22	Invalid Recovery Agent address. The street name was not found in the ZIP Code.
TN36	Fields 16 - 22	Invalid Recovery Agent address. The Zip Code was not found in the postal database

The information included in this Alert supersedes the applicable language in the MMSEA Section 111 Medicare Secondary Payer Mandatory Reporting Liability Insurance (Including Self-Insurance), No-Fault Insurance, and Workers' Compensation User Guide (Version 4.3) and the MMSEA Section 111 Coordination of Benefits Secure Website (COBSW) User Guide (Version 7.8) and will be incorporated into subsequent versions of these User Guides.