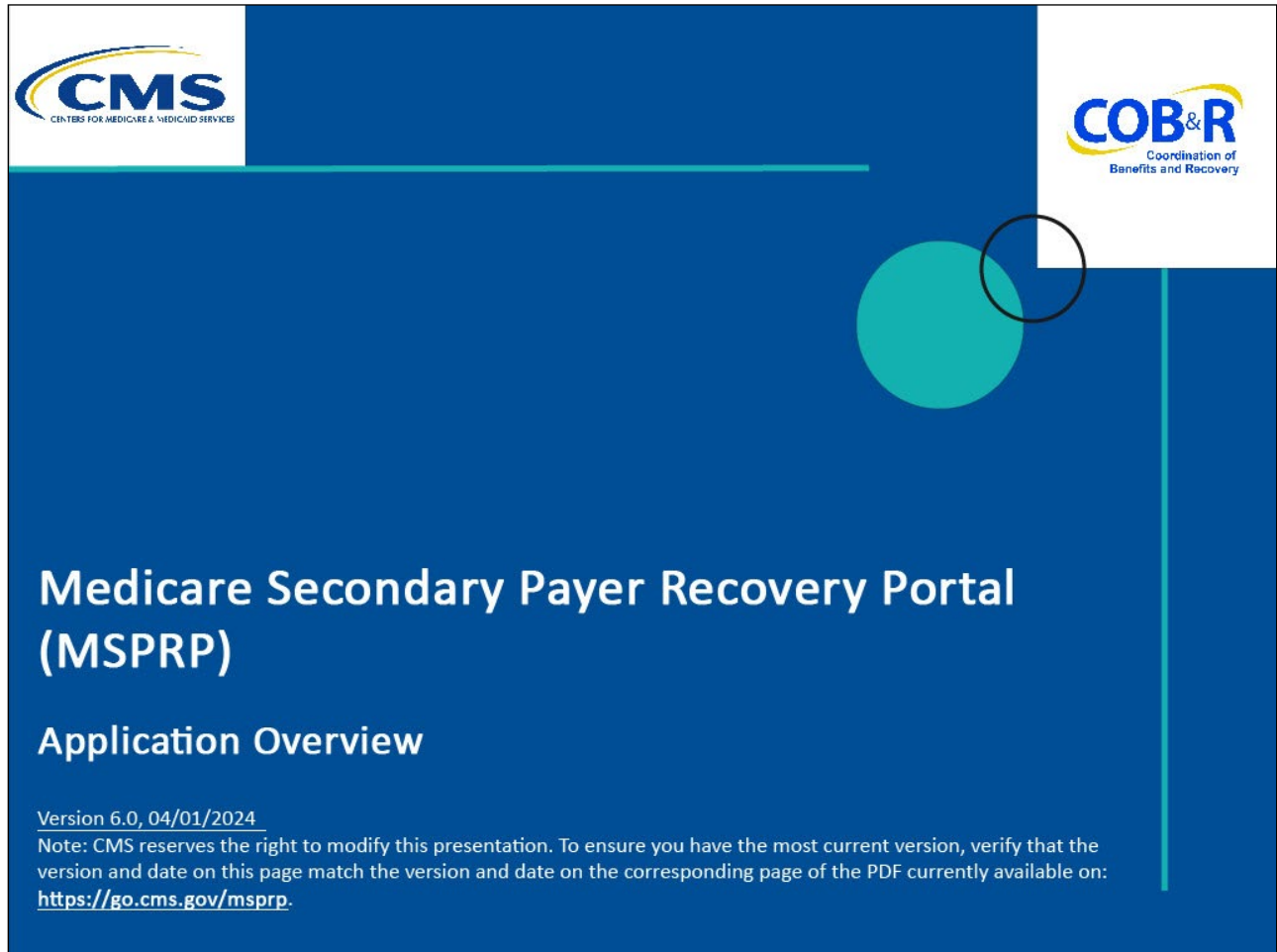


## Application Overview

### Slide 1 of 57 - Application Overview Introduction



The slide features a dark blue background with a light blue circle and a black circle on the right side. The CMS logo is in the top left, and the COB&R logo is in the top right. The main title is 'Medicare Secondary Payer Recovery Portal (MSPRP)' and the subtitle is 'Application Overview'. Below the subtitle, it says 'Version 6.0, 04/01/2024' and includes a note about CMS reserving the right to modify the presentation, with a link to the PDF version.

**CMS**  
CENTERS FOR MEDICARE & MEDICAID SERVICES

**COB&R**  
Coordination of  
Benefits and Recovery

# Medicare Secondary Payer Recovery Portal (MSPRP)

## Application Overview

Version 6.0, 04/01/2024

Note: CMS reserves the right to modify this presentation. To ensure you have the most current version, verify that the version and date on this page match the version and date on the corresponding page of the PDF currently available on:  
<https://go.cms.gov/msprp>.

### Slide notes

Welcome to the Medicare Secondary Payer Recovery Portal (MSPRP) Application Overview course.

**Slide 2 of 57 - Disclaimer**

## Disclaimer

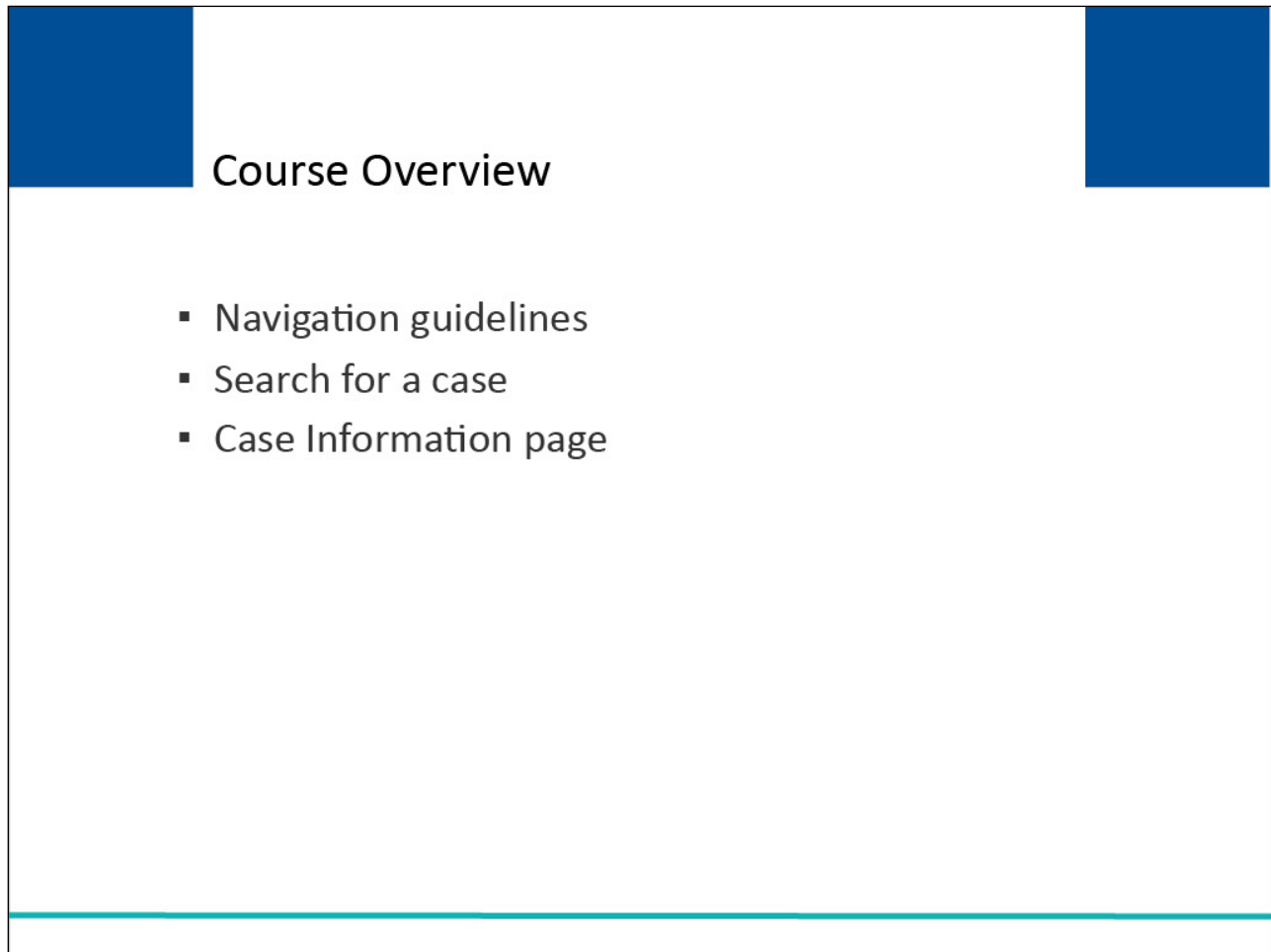
While all information in this document is believed to be correct at the time of writing, this Computer Based Training (CBT) is for educational purposes only and does not constitute official Centers for Medicare & Medicaid Services (CMS) instructions. All affected entities are responsible for following the instructions found in the MSPRP User Manual found at the following link:  
<http://www.cob.cms.hhs.gov/MSPRP/>.

**Slide notes**

While all information in this document is believed to be correct at the time of writing, this Computer Based Training (CBT) is for educational purposes only and does not constitute official Centers for Medicare & Medicaid Services (CMS) instructions.

All affected entities are responsible for following the instructions found in the MSPRP User Manual found at the following link: [CMS MSPRP Website](http://www.cob.cms.hhs.gov/MSPRP/).

**Slide 3 of 57 - Course Overview**

The slide content area is a large rectangle with a white background. It is framed by a dark blue header bar at the top and a dark blue footer bar at the bottom. The title "Course Overview" is positioned in the top left corner of the white area. Below the title, there is a bulleted list of three items: "Navigation guidelines", "Search for a case", and "Case Information page".

## Course Overview

- Navigation guidelines
- Search for a case
- Case Information page




**Slide notes**

This course will provide an overview of the MSPRP including general navigation guidelines. It will also include information on how to search for a case and the Case Information page.

**Slide 4 of 57 - MSPRP**

## MSPRP

- Provides a quick and efficient way to request and access case information
- Provides information to assist in resolving Medicare's recovery claim
- Allows you to
  - Submit a valid authorization
  - Request a copy of a conditional payment letter
  - Obtain final conditional payment information
  - Dispute claims
  - Submit settlement information
  - Initiate the demand letter
  - View/Submit redetermination (First Level Appeal)
  - View/Submit a waiver request or compromise request (beneficiary debtor cases only)
  - Make electronic payments
  - Open Debt Report



**Slide notes**

The MSPRP provides a quick and efficient way to request and access case information and provide information to assist in resolving Medicare's recovery claim.

With the use of this portal, you may submit a valid authorization, request a copy of the conditional payment letter, obtain final conditional payment information, dispute claims, submit settlement information, initiate the demand letter, view/submit redetermination (First Level Appeal), View/Submit waiver request or compromise request, make electronic payments, and view the Open Debt Report.

Note: Only those actions that are applicable to the case will be available. For example, waiver and compromise requests can only be submitted for beneficiary debtor cases.



**Slide 5 of 57- Getting Started**

## Getting Started

- MSPRP users must register and be associated to a registered account
- Before a new user can register, the corporate or representative entity must complete the initial registration process for the MSPRP account
  - Determine MSPRP Account Type
  - Identify MSPRP Users
  - Register on the MSPRP
  - Complete Account Setup on the MSPRP
  - Return signed Profile Report

**Slide notes**

All users of the MSPRP, except for Medicare beneficiaries, must register and be associated to a registered account.

Before a new user can register, the corporate or representative entity must complete the initial registration process for the MSPRP account which involves the following steps:

- Determine MSPRP Account Type (Representative or Corporate)
- Identify MSPRP users
- Register on the MSPRP
- Complete Account Setup on the MSPRP
- Return Signed Profile Report

**Slide 6 of 57 - Determine MSPRP Account Type**

## Determine MSPRP Account Type

- Representative Account
  - Intended for a non-corporate, single representative of a beneficiary without a corporate Employer Identification Number (EIN)
  - Requires entry of a personal Social Security Number (SSN)
- Corporate Account
  - Intended for an organization under which multiple people will work on multiple cases related to multiple Medicare beneficiaries
  - Requires entry of an EIN or Tax Identification

**Slide notes**

There are two types of MSPRP accounts, Representative and Corporate. Account types are mutually exclusive; you can only select one account type.

A representative account is intended for a non-corporate, single representative of a beneficiary without a corporate Employer Identification Number (EIN). This type of account allows you to work on multiple cases for multiple different beneficiaries.

You must provide your personal Social Security Number (SSN) to register for a representative account. Examples of a representative account include an attorney who is not part of a law firm or a member of the beneficiary's family.

A corporate account is intended for an organization under which multiple people will work on multiple cases related to multiple Medicare beneficiaries.

You must provide an EIN or Tax Identification Number (TIN) assigned to your organization by the Internal Revenue Service (IRS) to register for a corporate account.

Examples of a corporate account include a law firm with attorneys that represent beneficiaries, an insurer or self-insured entity, or a recovery agent that represents insurers or provides services to beneficiaries and/or their attorneys.

Note: Recovery agents may often wish to be invited as Account Designees under their clients' accounts, rather than or in addition to creating their own corporate account, depending on the circumstances.

The information you are required to submit during MSPRP registration and the way your account is validated depend on the type of account you choose.

**Slide 7 of 57 - Identify MSPRP Users**

## Identify MSPRP Users

- Account Representative
  - Legal authority to bind the organization to a contract and the terms of MSPRP
  - Information provided on the MSPRP during Registration
- Account Manager
  - Manages account recovery case workload
  - Manages Account Designees access to cases
  - Information provided on the MSPRP during Account Setup
- Account Designees
  - Assists the Account Manager with the case recovery process
  - Invited to register by the Account Manager

**Slide notes**

The MSPRP permits multiple users per account. Each user is defined by one of three possible roles: Account Representative, Account Manager, and Account Designee.

The Account Representative is the individual in the organization who has the legal authority to bind the organization to a contract and the terms of MSPRP requirements.

The Account Representative information will be provided on the MSPRP during Registration. Each MSPRP account can only have one Account Representative.

The Account Manager manages your account recovery case workload and Account Designees access to those cases. The Account Manager information will be provided on the MSPRP during Account Setup. Each MSPRP account can only have one Account Manager.

Account Designees assist the Account Manager with the case recovery process. Your Account Manager may, but is not required to, invite individuals to register as an Account Designee and become users of the MSPRP associated with your account.

The Account Designee information is provided by the Account Manager. Each MSPRP account may have up to 200 Account Designees per corporate account.

**Slide 8 of 57 - Registration and Account Setup**

## Registration and Account Setup

- Corporate Entity
  - Corporate Registration CBT
  - Corporate Account Setup CBT
- Representative Entity
  - Representative Registration CBT
  - Representative Account Setup CBT
- Once Registration and Account Setup is complete and the Profile Report has been signed, the Account Manager may login and invite Account Designees
- Once the Profile Report has been marked as received and your account has been activated by your EDI Representative, users may begin working on cases on the MSPRP
  - To access the MSPRP, enter the following URL into your browser:  
<https://www.cob.cms.hhs.gov/MSPRP/>

**Slide notes**

If you plan to register as a corporate entity, see the [Corporate Registration](#) and [Corporate Account Setup](#) CBTs for additional information.

If you plan to register as a representative entity, review the [Representative Registration](#) and [Representative Account Setup](#) CBTs for additional information.

Once Registration and Account Setup have been completed and the Profile Report has been signed and returned to your Electronic Interchange Department (EDI) Representative, the Account Manager may login and invite Account Designees.


Once your Profile Report has been marked as received and your account has been activated by your EDI Representative, you may begin working on cases using the MSPRP.

To access the MSPRP, enter the following URL into your web browser: [CMS MSPRP Website](https://www.cob.cms.hhs.gov/MSPRP/).

Note: To limit the number of cases submitted in error, beneficiaries, insurers, and authorized representatives now have the ability to close and permanently remove a case from their account that was reported in error.

## Slide 9 of 57- Login Warning Page

## Login Warning

 [Print this page](#)

**UNAUTHORIZED ACCESS TO THIS COMPUTER SYSTEM IS PROHIBITED BY LAW**

This warning banner provides privacy and security notices consistent with applicable federal laws, directives, and other federal guidance for accessing this Government system, which includes: (1) this computer network, (2) all computers connected to this network, and (3) all devices and storage media attached to this network or to a computer on this network. This system is provided for Government-authorized use only.

Unauthorized or improper use of this system is prohibited and may result in disciplinary action, as well as civil and criminal penalties.

Personal use of social media and networking sites on this system is limited as to not interfere with official work duties and is subject to monitoring.

By using this system, you understand and consent to the following:

\*You have no reasonable expectation of privacy regarding any communication or data transiting or stored on this system.

\*The Government may monitor, record, and audit your system usage, including usage of personal devices and email systems for official duties or to conduct HHS business. Therefore, you have no reasonable expectation of privacy regarding any communication or data transiting or stored on this system. At any time, and for any lawful Government purpose, the Government may monitor, intercept, and search and seize any communication or data transiting or stored on this system.

\*Any communication or data transiting or stored on this system may be disclosed or used for any lawful Government purpose.

<http://www.cms.hhs.gov/About-CMS/Agency-Information/Aboutwebsite/Security-Protocols.html>

**Privacy Act Statement**

The collection of this information is authorized by Section 1862(b) of the Social Security Act (codified at 42 U.S.C 1395y(b)) (see also 42, C.F.R. 411.24). The information collected will be used to identify and recover past conditional and mistaken Medicare primary payments and to prevent Medicare from making mistaken payments in the future for those Medicare Secondary Payer situations that continue to exist. The Privacy Act (5 U.S.C. 552a(b)), as amended, prohibits the disclosure of information maintained by the Centers for Medicare & Medicaid Services (CMS) in a system of records to third parties, unless the beneficiary provides a written request or explicit written consent/authorization for a party to receive such information. Where the beneficiary provides written consent/proof of representation, CMS will permit authorized parties to access requisite information.

**Attestation of Information**

The information provided is complete, truthful, accurate, and meets all requirements set forth to use this process; and, I have read and understand all of the Centers for Medicare & Medicaid Services information at <http://cms.gov/Medicare/Coordination-of-Benefits-and-Recovery/Coordination-of-Benefits-and-Recovery-Overview/Medicare-Secondary-Payer/Medicare-Secondary-Payer.html>.

LOG OFF IMMEDIATELY if you do not agree to the conditions stated in this warning.

## Slide notes

Each time you enter the MSPRP, the Login Warning page will appear. After reviewing the information, click I Accept to continue to the Welcome/Login page.

## Slide 10 of 57- Welcome to the MSPRP/Login Page

**Welcome to the MSPRP**

The Medicare Secondary Payer Recovery Portal provides a quick and efficient way to request case information and provide information to assist in resolving Medicare's recovery claim. With the use of this portal, you may submit a valid authorization, request an update conditional payment amount, submit settlement information and dispute claims.

**MSPRP Message**

Check this location for important information regarding system outages, scheduled maintenance and special announcements.

**Getting Started**

If you are a Medicare Beneficiary and would like to use the MSPRP to request case information, please login to your Medicare account by visiting the Medicare.gov website at <https://medicare.gov/>.

Registration is required to use this application. For corporate accounts, your **Account Representative** must complete the *New Registration* and your **Account Manager** must complete the *Account Setup*. These individuals cannot be the same person.

The **Account Representative (AR)** is the person in your organization who has the legal authority to bind your organization to a contract and to the terms of MSPRP requirements. This is usually a senior executive or partner of your company or firm. The AR has ultimate accountability for the information submitted on the MSPRP.

The **Account Manager (AM)** is the person who will actively manage your account recovery case workload. This includes inviting **Account Designees (ADs)** and managing their access to the account.

For more information on the registration process and MSPRP user roles, please refer to the *How to Get Started* help document, located under the How To menu on the Navigation bar. To begin the registration process, your MSPRP **Account Representative** will click the *New Registration* button.

**STEP 1**  
**New Registration**

**STEP 2**  
**Account Setup**  
(Account ID and PIN required.)

**Sign in to your account**

Username:  
  
[Forgot ID](#)

Password:  
  
[Forgot Password](#)

## Slide notes

If you have previously used the MSPRP, select login to access the cases you need to review.

Registration is required to use this application. For corporate accounts, your Account Representative must complete Step 1: New Registration (PIN Request), and your Account Manager must complete Step 2: Account Setup. These individuals cannot be the same person.

The Account Representative (AR) is the person in your organization who has the legal authority to bind your organization to a contract and to the terms of MSPRP requirements. This is usually a senior executive or partner of your company or firm. The AR has ultimate accountability for the information submitted on the MSPRP.

The Account Manager (AM) is the person who will actively manage your account recovery case workload. This includes inviting Account Designees (ADs) and managing their access to the account.

For more information on the registration process and MSPRP user roles, please refer to the How to Get Started help document, located under the How To menu on the Navigation bar. To begin the registration process, your MSPRP Account Representative will click the New Registration button.



## Slide 11 of 57- Account List Page

[Print this page](#)

## Account List

Click the desired link to access the associated account. Accounts with a green leaf (🌿) include an address that has opted to "Go Paperless" via the MMSEA Section 111 Reporting process. These accounts receive letter notification e-mails instead of mailed letters for the "Go Paperless" addresses. You are responsible for viewing all "Go Paperless" correspondence on the MSPRP. **Note:** To obtain information on the account's paperless addresses, please contact your Section 111 file submitter/reporting agent.

You may update your personal information or change your current password by clicking the appropriate link under the Account Settings List.

### Multi-Factor Authentication

MSPRP users may request access to view unmasked claims data that was previously only accessible to the beneficiary. Individuals requesting this access must complete the ID Proofing and Multi-Factor Authentication (MFA) process. The status of your request will display as a link under the Multi-Factor Authentication box. You will click this link to progress through the required steps. Once you have successfully completed the process your status will be changed to Complete.

During the ID Proofing process, you will be asked to provide current personal information and respond to questions created by Experian Credit Services (an outside entity) to confirm your identity. This information, the questions, and your answers will not be stored on the MSPRP. This process will not impact your credit score.

To use MFA services, you will be required to register for a Factor Type (Voice Call and/or Text Message(SMS) ) as a method of receiving your security token to access the MSPRP application using your MFA Login. When registering for Voice Call, a landline phone or mobile device may be used to receive the security token via phone call. To register for Text Message(SMS) you must register with a mobile phone number in order to receive your security token via text message. After the Factor registration, you then must activate the Factor for your login ID. You may only have ONE registered or activated phone number per factor type.

You will be able to activate the factor after the Next Step link has changed to Factor Required. To begin the ID Proofing process, click the Next Step: [Getting Started](#) link.

**Associated Account IDs:**

<a href="#">30401</a>	ABC Corporation	🌿
<a href="#">30324</a>	Smith Associates	
<a href="#">30184</a>	Robert Jones	

**Quick Help**

[Help About This Page](#)

**Account Settings**

[Update Personal Information](#)  
[Change Password](#)

**Multi-Factor Authentication**

Status: [Initial Process](#)  
Next Step: [Getting Started](#)

## Slide notes

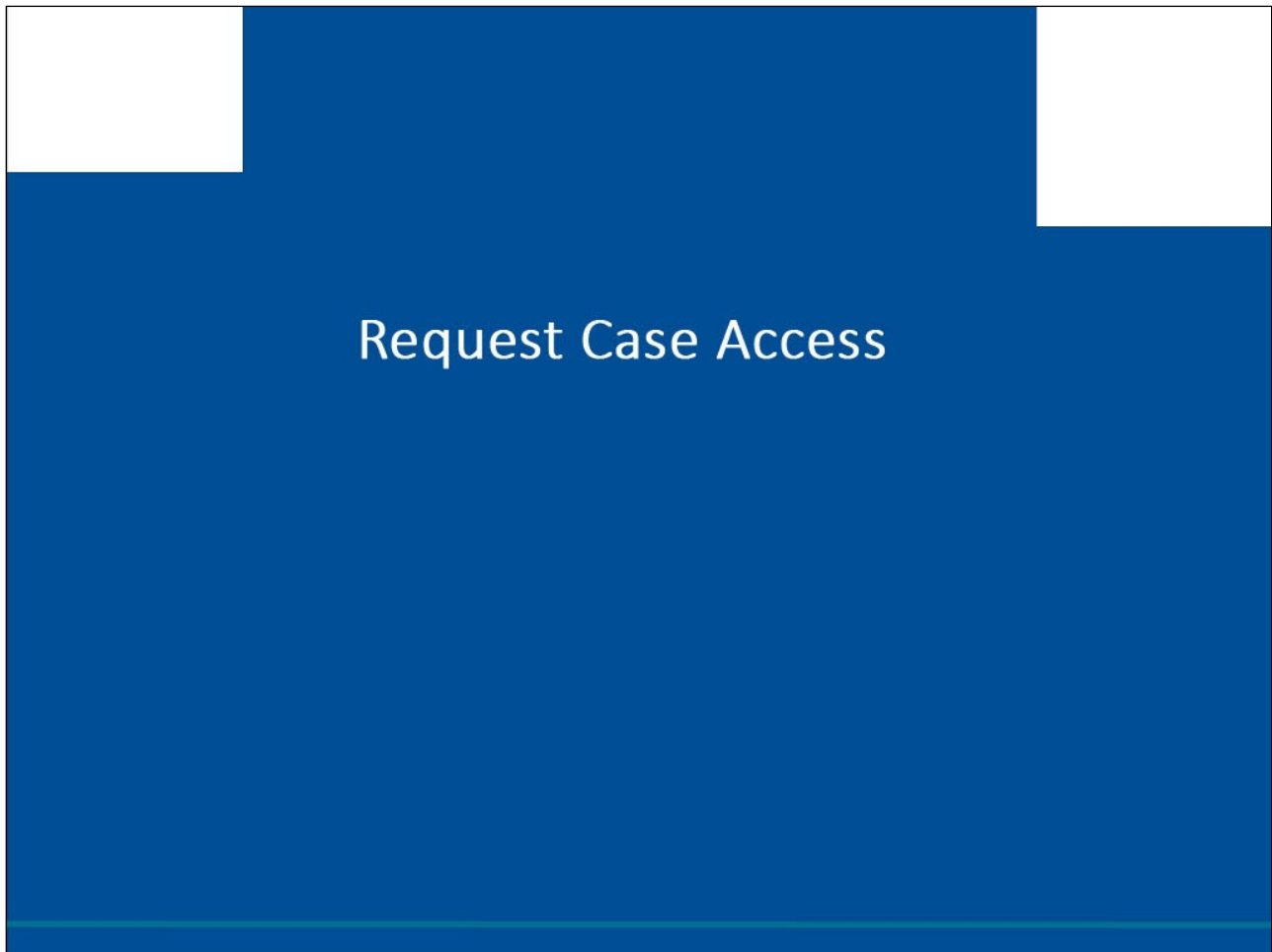
To access an MSPRP account, the Account Manager must first successfully login to the MSPRP application. After a successful login, the Account List page will appear. Click the desired link to access the associated account.

Note: A green leaf (Go Paperless icon) will appear next to the account name on the Account List and Welcome pages. This icon will also appear next to the account ID on the Open Debt Report and Case Listing pages. Additionally, this icon appears next to the case ID on the Case Information page if the MSPRP account is currently receiving letter notification emails instead of mailed letters for the case.

Additionally, MSPRP users who are registered for both the MSPRP and CRCP systems can now initiate the ID proofing process on one application and then continue the process on the other. Once ID proofing is completed in one, users are automatically ID proofed in the other. Additionally, now that both applications support MFA and ID proofing, related references associated with only MSPRP have been changed to the more generic reference COBSW.



**Slide 12 of 57 - Request Case Access**



**Slide notes**

The following section will explain how to Request Case Access.

**Slide 13 of 57- Welcome! Page**

**Welcome!**

Account: 30401 ABC Corporation 🟢

The Medicare Secondary Payer Recovery Portal provides a quick and efficient way to request case information and provide information to assist in resolving Medicare's recovery claim.

With the use of this portal, you may submit a valid authorization, request an update conditional payment amount, submit settlement information and dispute claims.

You may view the account activity by clicking the appropriate link under the Account Settings.

To request information regarding a case you have not already associated to your account, click the Request Case Access link below.

To see cases that you have previously associated to your account, click the Case Listing link below.

To submit a case, click the Report A Case link below.

To request an Open Debt Report, click the Open Debt Report link below.

To view/print "Paperless" letter notification e-mails and letters, click the Go Paperless Letter Notifications link below.

**Note:** You will not be able to use the links below until your Profile Report has been returned.

[Request Case Access](#)

[Case Listing](#)

[Report A Case](#)

[Open Debt Report](#)

[Go Paperless Letter Notifications](#)

[Previous](#)

**Slide notes**

Once the MSRP Welcome! page appears, you will see the following links: Request Case Access, Case Listing, and Report A Case. Account Managers will also have access to the Open Debt Report and Go Paperless Letter Notifications links.

Request Case Access is used to associate a case to the MSRP account.

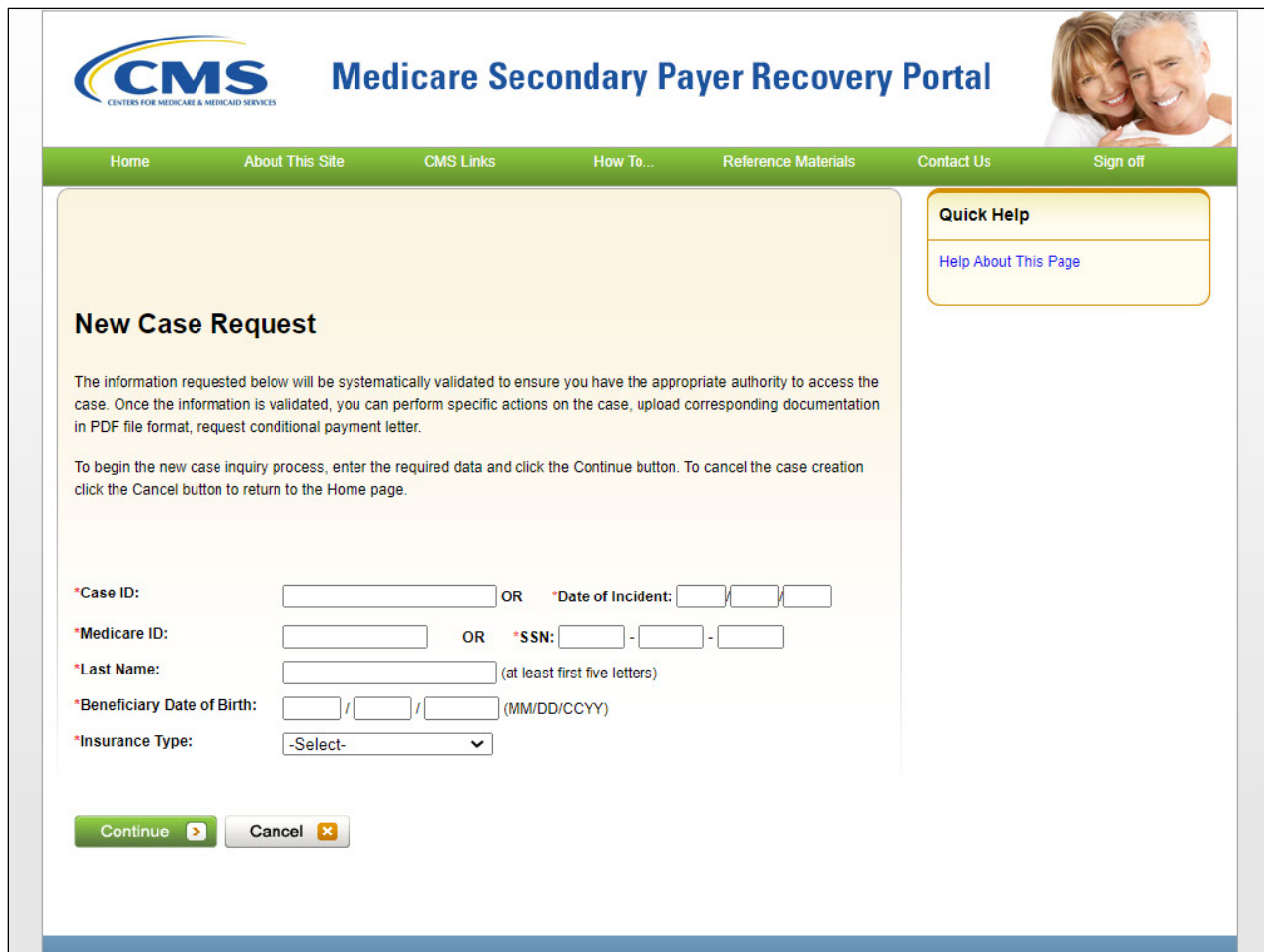
You must always perform this step to link a case to your MSRP account for the first time. Case Listing is used to view all cases that have been previously associated/linked to your MSRP account. If you are approaching settlement on a case that is not yet available on the MSRP and you wish to initiate the Final Conditional Payment process, you can add this case using the Report a Case link found on this page.

The Open Debt Report page displays a nightly-refreshed, on-demand report showing the status for open debts for Non-Group Health Plans (NGHP) insurer-debtor cases. This report is only available to Account Managers.

The Go Paperless Letter Notifications page allows Account Managers (AMs) and Account Designees (ADs) to easily see when an account is associated with at least one address that has opted in to Go

Paperless (i.e., opted to receive letter notifications electronically instead of by mail); view letter notification emails and letters for Go Paperless, and update the email distribution list for Go Paperless (AMs only).

## Slide 14 of 57 - New Case Request Page



The screenshot shows the Medicare Secondary Payer Recovery Portal. At the top, there is a CMS logo and the title "Medicare Secondary Payer Recovery Portal". Below the title is a green navigation bar with links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. On the right side of the page, there is a "Quick Help" section with a link "Help About This Page". The main content area is titled "New Case Request" and contains the following text:

The information requested below will be systematically validated to ensure you have the appropriate authority to access the case. Once the information is validated, you can perform specific actions on the case, upload corresponding documentation in PDF file format, request conditional payment letter.

To begin the new case inquiry process, enter the required data and click the Continue button. To cancel the case creation click the Cancel button to return to the Home page.

The form fields are as follows:

- \*Case ID:  OR \*Date of Incident:  /  /
- \*Medicare ID:  OR \*SSN:  -  -
- \*Last Name:  (at least first five letters)
- \*Beneficiary Date of Birth:  /  /  (MM/DD/CCYY)
- \*Insurance Type:

At the bottom of the form, there are two buttons: "Continue" (with a right arrow icon) and "Cancel" (with a close icon).

## Slide notes

When the Request Case Access link is selected, the New Case Request page will appear. Fields noted with a red asterisk are required.

MSPRP pages may include the following buttons: [Continue] and [Cancel].

The [Continue] button will advance you to the next page if there are no errors on the current page. Cancel will return you to the Home page. When [Cancel] is clicked, the information entered will not be saved.

To request case access, enter the Case ID (Case Identification), the Beneficiary's Medicare ID, the Beneficiary's Last Name, and the Beneficiary's Date of Birth.

If the Beneficiary's Medicare ID is not known, the Beneficiary's Social Security Number (SSN) may be entered instead of the Medicare ID.

After entering this information, click [Continue].

If the case is not located, a message stating, 'No Matching Case Record Found based upon the information provided' will appear. Note: The following cases will not be available on the MSPRP:

- Cases referred to CMS
- Cases referred to Department of Justice
- Cases involving Workers' Compensation Medicare Set-Aside Amount (WCMSA).

WCMSA cases are only accessible on the Workers' Compensation Medicare Set-Aside Portal (WCMSAP).

For information on the WCMSAP, see the link shown here: [WCMAP Webpage](#).

## Slide 15 of 57 - Case Results Page

The screenshot shows the Medicare Secondary Payer Recovery Portal. The header includes the CMS logo, the portal title, and a navigation bar with links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. A status bar indicates the environment and time stamp: Env: QUA Time Stamp: Wed Oct 14 12:58:03 EDT 2015 Skip Navigation.

### Case Results

To view case detail information, click the case number.

Case ID	Bene Last Name	Medicare ID	Bene DOB	DOI	Industry DOI	Insurance Type	Case Status	Contractor
<a href="#">201200309000018</a>	NELSON	*****3057A	02/08/1949	02/03/2008	02/03/2008	D	In development	BCRC
<a href="#">301104609001830</a>	NELSON	*****3057A	02/08/1949	02/03/2008		L	Open	CRC

Navigation buttons: Previous, Cancel.

Footer: CMS/HHS Vulnerability Disclosure Policy | Privacy Policy | User Agreement | Adobe Reader

## Slide notes

When results are found in the system, they will appear on the Case Results page. To view case specific information, click the case ID link.

## Slide 16 of 57 - Case Information Page

Print this page
 [Quick Help : Help About This Page](#)

## Case Information

Case ID: 201117409000150

Case Type: Liability Insurance

Case Status: Demand [What is this?](#)

Current Status of Debt: Intent to Refer Letter Sent

RRE Name: Sample Name

Date of Incident: 09/15/2009

Industry Date of Incident: 09/15/2009 [What is this?](#)

ORM: Yes

Medicare ID: 987654321A

Beneficiary DOB: 02/08/1940

Beneficiary Last Name: Smith

Treasury Account Number: 12345678

Treasury Referral Date: 01/01/2016

Authorization Level: Proof of Representation

Authorization Status: Verified [What is this?](#)

ORM Termination Date: 01/01/2016

Payment Information

Electronic Payment History

Refund Information

Correspondence Activity

Waiver/Redetermination/Compromise

Final Conditional Payment Process

\*Current Conditional Payment Amount: \$2,800.00

*\*Note: Claims are retrieved daily. This amount is current as of: 07/23/2018. Please be advised that the claims associated to this case are currently being evaluated for relevance. This typically takes 3-5 business days. The conditional payment amount will be automatically updated once this process is complete. Please contact the BCRC or CRC at (855) 798-2627 if immediate assistance with this amount is required.*

Rights and Responsibilities Letter Mail Date: 06/10/2010

Section 111 No-Fault Policy Limit Reported: \$32456.76

Conditional Payment Letter Amount: \$496.06

Conditional Payment Letter Mail Date: 06/01/2011

Conditional Payment Amount Update Requested: 06/01/2011

Demand Letter Mail Date: 06/01/2011

Demand Amount: \$3,754.00

Interest Rate: 10%

Conditional Payment Notice Amount: \$500.00

Conditional Payment Notice Mail Date: 06/18/2011

Conditional Payment Notice Response Due Date: 07/31/2011

Balance Amount: \$1,234.56

Balance as of Date: 06/30/2011

Remaining Principal Balance Amount: \$1,234.56

## Slide notes

The Case Information page will appear.

The top-half of this page allows you to view information related to the case, such as:

- Case ID
- Case Type (type of insurance coverage provided by the plan for the case (liability, workers' compensation, or no-fault))
- Case Status (In Development, Open, Claim Retrieval, Demand, Bill Issued, or Closed)
- Current Status of Incident
- Date of Incident
- Industry Date of Incident
- The beneficiary's Medicare ID, Date of Birth, and Last Name will display.
- Treasury Account Number, Treasury Referral Date, the Authorization Level (i.e., Beneficiary Proof of Representation, Beneficiary Consent to Release, or Recovery Agent Authorization) and the Authorization Status (Verified, Unverified, or Invalid) are also displayed.

Note: The field, Treasury Account Number (i.e., the unique Department of Treasury Federal Agency ID assigned to a debt), was added to the Case Information page to assist Non-Group Health Plan (NGHP) debtors when they discuss their debt with Treasury.



## Slide 17 of 57 - Case Information - Payment Information Tab

<b>Date of Incident:</b> 09/15/2009 <b>Industry Date of Incident:</b> 09/15/2009 <a href="#">What is this?</a> <b>ORM:</b> Yes		<b>Authorization Level:</b> Proof of Representation <b>Authorization Status:</b> Verified <a href="#">What is this?</a> <b>ORM Termination Date:</b> 01/01/2016	
--	--	---	--

<b>Payment Information</b>	<a href="#">Electronic Payment History</a>	<a href="#">Refund Information</a>	<a href="#">Correspondence Activity</a>	<a href="#">Waiver/Redetermination/Appeal/Compromise</a>	<a href="#">Final Conditional Payment Process</a>
----------------------------	--	------------------------------------	---	--	---

**\*Current Conditional Payment Amount:** \$2,800.00  
*\*Note: Claims are retrieved daily. This amount is current as of: 07/23/2018. Please be advised that the claims associated to this case are currently being evaluated for relevance. This typically takes 3-5 business days. The conditional payment amount will be automatically updated once this process is complete. Please contact the BCRC or CRC at (855) 798-2627 if immediate assistance with this amount is required.*

**Rights and Responsibilities Letter Mail Date:** 06/10/2010      **Section 111 No-Fault Policy Limit Reported:** \$32456.76

<b>Conditional Payment Letter Amount:</b> \$496.06 <b>Conditional Payment Letter Mail Date:</b> 06/01/2011 <b>Conditional Payment Amount Update Requested:</b> 06/01/2011  <b>Demand Letter Mail Date:</b> 06/01/2011 <b>Demand Amount:</b> \$3,754.00 <b>Interest Rate:</b> 10% <b>Last Interest Accrual Date:</b> 06/08/2018 <b>Total Interest Accrued:</b> \$145.79	<b>Conditional Payment Notice Amount:</b> \$500.00 <b>Conditional Payment Notice Mail Date:</b> 06/18/2011 <b>Conditional Payment Notice Response Due Date:</b> 07/31/2011  <b>Balance Amount:</b> \$1,234.56 <b>Balance as of Date:</b> 06/30/2011 <b>Remaining Principal Balance Amount:</b> \$1,234.56 <b>Principal Activity Amount:</b> \$8,971.40 <b>Remaining Interest Balance Amount:</b> \$1,234.56 <b>Interest Activity Amount:</b> \$145.79
--	--

[Make a Payment](#) [What is this?](#)

*Note: Remaining balance amounts may not reflect recent payments.*

Please select an action from the following list, if the option is disabled (grayed out) it may not be available for the

## Slide notes

On the middle portion of the Case Information page, several tabs appear. The Payment Information tab is the default and will display each time the Case Information page is accessed. The Payment Information tab will display.

When there is a balance, the Balance Amount and Balance as of Date as well as the Remaining Principal Balance Amount and Remaining Interest Balance Amount. You also have the ability to make an electronic payment. These payments can occur when selecting the “Make A Payment” button. The accepted payment of methods is Automated Clearing House- ACH (or banking information), debit card, and PayPal accounts (linked to a banking accounts). Credit card payments are not currently accepted.

## Slide 18 of 57 - Case Information - Electronic Payment History Tab

<b>Date of Incident:</b> 09/15/2009 <b>Industry Date of Incident:</b> 09/15/2009 <a href="#">What is this?</a> <b>ORM:</b> Yes		<b>Authorization Level:</b> Proof of Representation <b>Authorization Status:</b> Verified <a href="#">What is this?</a> <b>ORM Termination Date:</b> 01/01/2016	
--	--	---	--

Payment Information	<b>Electronic Payment History</b>	Refund Information	Correspondence Activity	Waiver/Redetermination/ Appeal/ Compromise	Final Conditional Payment Process
---------------------	-----------------------------------	--------------------	-------------------------	--	-----------------------------------

<b>Demand Letter Mail Date:</b> 04/15/2020 <b>Demand Amount:</b> \$3,500.00	<b>Remaining Principal Balance Amount:</b> \$2,500.00 <b>Remaining Interest Balance Amount:</b> \$0.00 <b>Total Remaining Balance Amount:</b> \$2,500.00
--	--

When the payment process at Pay.gov has finalized and the Pay.gov Status is **Accepted**, your payment will be processed by the BCRC/CRC and applied to the remaining balance. The remaining balance amounts will not reflect your payment until the Demand Balance Status is **Complete**.

Payment Date	Payment Method	Account Holder Name	Payment Amount	Pay.gov Payment Status	Pay.gov Confirmation Number	Demand Balance Status	Demand Balance Update Date
06/10/2019	ACH	John Dorsett	\$2,500.00	Accepted	34786590	In Process	
05/01/2019	PayPal	John Dorsett	\$1,000.00	Accepted	43578796	Complete	5/7/2019
05/01/2019	Debit Card	John Dorsett	\$1,000.00	Pending	34535478		
05/01/2019	Unknown	John Dorsett	\$1,000.00	Declined	99999999		

*Note: Only payments made electronically will display on this page. To verify if a paper check was received, please click on the Correspondence Activity tab and select 'Correspondence Received'.*

Please select an action from the following list, if the option is disabled (grayed out) it may not be available for the case at this time:

## Slide notes

The Electronic Payment History tab lists payment history detail for electronic payments submitted through the MSPRP on Pay.gov. It only displays when there is electronic payment data for the case.

## Slide 19 of 57 -Case Information - Refund Information Tab

<b>Date of Incident:</b> 09/15/2009 <b>Industry Date of Incident:</b> 09/15/2009 <a href="#">What is this?</a> <b>ORM:</b> Yes		<b>Authorization Level:</b> Proof of Representation <b>Authorization Status:</b> Verified <a href="#">What is this?</a> <b>ORM Termination Date:</b> 01/01/2016	
--	--	---	--

<a href="#">Payment Information</a>	<a href="#">Electronic Payment History</a>	<b><a href="#">Refund Information</a></b>	<a href="#">Correspondence Activity</a>	<a href="#">Waiver/Redetermination/Appeal/Compromise</a>	<a href="#">Final Conditional Payment Process</a>
-------------------------------------	--	---	---	--	---

<b>Demand Letter Mail Date:</b> 06/01/2011	<b>Demand Amount:</b> \$3754.00
<b>Balance Amount:</b> \$1234.56	<b>Balance as of Date:</b> 06/30/2011

Please select an action from the following list, if the option is disabled (grayed out) it may not be available for the case at this time:

- ☐ View / Request Authorizations
- ☐ Request an update to the conditional payment amount [What is this?](#)
- ☐ Request an electronic conditional payment letter with Current Conditional Payment Amount [What is this?](#)
- ☐ Request a mailed copy of the conditional payment letter [What is this?](#)
- ☐ Begin Final Conditional Payment Process and Provide 120 Days' Notice of Anticipated Settlement [What is this?](#)
- ☐ Calculate Final Conditional Payment Amount [What is this?](#)

## Slide notes

If there is a refund on the case, the Demand Letter Mail Date, Demand Amount, Balance Amount, and Balance as of Date can be viewed on the “Refund Information” tab.

**Slide 20 of 57 - Case Information - Letter Activity Tab**

**Date of Incident:** 09/15/2009  
**Industry Date of Incident:** 09/15/2009 [What is this?](#)  
**ORM:** Yes

**Authorization Level:** Proof of Representation  
**Authorization Status:** Verified [What is this?](#)  
**ORM Termination Date:** 01/01/2016

[Payment Information](#)

[Electronic Payment History](#)

[Refund Information](#)

[Correspondence Activity](#)

[Waiver/Redetermination/Appeal/Compromise](#)

[Final Conditional Payment Process](#)

Select the correspondence option you wish to view:

☒ All Correspondence Received and All Letters sent ☐ Correspondence Received ☐ Letters Sent

Correspondence Type	Uploaded Document Name	Date Received	Date Sent	Status	Status Date
Redetermination testing with long descriptions to see if it will wrap or not.	Document1	03/01/2015		Open	03/01/2015
Notice of Settlement Information	Document2	03/01/2001		Closed	03/01/2001
<a href="#">1st Level Appeal Request</a>				Open	03/01/2017
<a href="#">Special Project Case Correspondence</a>				Open	03/01/2017

**Slide notes**

The Correspondence Activity tab displays a listing of all correspondence that has been sent or received for the case.

To view outgoing letters on the Correspondence Activity tab, users must have logged in with multi-factor authentication (MFA) and have a verified authorization, which has been either a beneficiary Proof of Representation (POR) or a Recovery Agent Authorization. With this release, the list of allowed authorizations now includes Consent to Release (CTR) authorizations.

**Slide 21 of 57 - Case Information - Waiver/ Redetermination/Appeal/Compromise Tab**

<b>Industry Date of Incident:</b> 09/15/2009 <a href="#">What is this?</a> <b>ORM:</b> Yes			<b>Authorization Status:</b> Verified <a href="#">What is this?</a> <b>ORM Termination Date:</b> 01/01/2016																				
<div style="display: flex; justify-content: space-around; margin-bottom: 10px;"> <span>Payment Information</span> <span>Electronic Payment History</span> <span>Refund Information</span> <span>Correspondence Activity</span> <span style="border: 2px solid red; padding: 2px;">Waiver/Redetermination/Appeal/Compromise</span> <span>Final Conditional Payment Process</span> </div>																							
<b>Waiver Information</b>		<b>Redetermination Information</b>		<b>Compromise Information</b>																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Received</th> <th>Decision</th> <th>Decision Date</th> </tr> </thead> <tbody> <tr> <td>04/01/2017</td> <td>Pending Review</td> <td></td> </tr> <tr> <td>10/30/2016</td> <td>Dismissal</td> <td>12/31/2016</td> </tr> </tbody> </table>	Received	Decision	Decision Date	04/01/2017	Pending Review		10/30/2016	Dismissal	12/31/2016	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Received</th> <th>Decision</th> <th>Decision Date</th> </tr> </thead> <tbody> <tr> <td>04/01/2017</td> <td>Pending Review</td> <td></td> </tr> </tbody> </table>	Received	Decision	Decision Date	04/01/2017	Pending Review		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Received</th> <th>Decision</th> <th>Decision Date</th> </tr> </thead> <tbody> <tr> <td>04/01/2017</td> <td>Pending Review</td> <td></td> </tr> </tbody> </table>	Received	Decision	Decision Date	04/01/2017	Pending Review	
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04/01/2017	Pending Review																						
Received	Decision	Decision Date																					
04/01/2017	Pending Review																						
<b>QIC Information</b>		<b>ALJ Information</b>																					
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Received	Decision	Decision Date																					
04/01/2017	Pending Review																						
Received	Decision	Decision Date																					
04/01/2017	Pending Review																						

**Please select an action from the following list, if the option is disabled (grayed out) it may not be available for the case at this time:**

**Slide notes**


The “Waiver/Redetermination/Appeal/Compromise” tab displays the received date, decision, and decision date for submitted waivers, redeterminations, and compromise requests.

Note: A new section has been added to display QIC or ALJ Appeal Information. The new section will display similar to the existing Redetermination Information content and will include fields to provide data for the following QIC or ALJ information:


- Determination Received
- Determination Decision
- Determination Decision Date

## Slide 22 of 57 - Case Information - Final Conditional Payment Tab

[Home](#) [About This Site](#) [CMS Links](#) [How To...](#) [Reference Materials](#) [Contact Us](#) [Sign off](#)

 [Print this page](#) [Quick Help : Help About This Page](#)

## Case Information

**Case ID:** 201117409000150 

**Case Type:** Liability Insurance

**Case Status:** Demand [What is this?](#)

**Current Status of Debt:** Intent to Refer Letter Sent

**RRE Name:** Sample Name

**Date of Incident:** 09/15/2009

**Industry Date of Incident:** 09/15/2009 [What is this?](#)

**ORM:** Yes

**Medicare ID:** 987654321A

**Beneficiary DOB:** 02/08/1940

**Beneficiary Last Name:** Smith

**Treasury Account Number:** 12345678

**Treasury Referral Date:** 01/01/2016

**Authorization Level:** Proof of Representation

**Authorization Status:** Verified [What is this?](#)

**ORM Termination Date:** 01/01/2016

[Payment Information](#) [Electronic Payment History](#) [Refund Information](#) [Correspondence Activity](#) [Waiver/Redetermination/Appeal/Compromise](#) [Final Conditional Payment Process](#)

**Final Conditional Payment Status:** Complete

**Final Conditional Payment Status Date:** 07/01/2017

**Final Conditional Payment Process Initiated:** 06/05/2017

**Request Final Conditional Payment by:** 08/01/2017

**Final Conditional Payment Requested:** 05/01/2017

**Final Conditional Payment Amount:** \$4528.00

**120 days' Notice of Anticipated Settlement Mail Date:** 04/01/2017

## Slide notes

If the case is in the Final Conditional Payment Process, details can be viewed on the “Final Conditional Payment Process” tab.



**Slide 23 of 57 - Case Information - Case Actions**

Please select an action from the following list, if the option is disabled (grayed out) it may not be available for the case at this time:

- ☐ View / Request Authorizations
- ☐ Request an update to the conditional payment amount [What is this?](#)
- ☐ Request an electronic conditional payment letter with Current Conditional Payment Amount [What is this?](#)
- ☐ Request a mailed copy of the conditional payment letter [What is this?](#)
- ☐ Begin Final Conditional Payment Process and Provide 120 Days' Notice of Anticipated Settlement [What is this?](#)
- ☐ Calculate Final Conditional Payment Amount [What is this?](#)
- ☐ Request an electronic Dispute Denial for Final Conditional Payment Case Letter with Current Conditional Payment Amount [What is this?](#)
- ☐ View / Dispute Claims Listing [What is this?](#)
- ☐ View/Provide the Notice of Settlement Information [What is this?](#)
- ☐ Initiate Demand Letter [What is this?](#)
- ☐ View / Submit Redetermination (First Level Appeal) [What is this?](#)
- ☐ Submit Waiver Request [What is this?](#)
- ☐ Submit Compromise Request [What is this?](#)
- ☐ Submit Case Documentation [What is this?](#)

[Previous](#) [Continue](#) [Cancel](#)

**Slide notes**

The bottom portion of the Case Information page identifies various actions that can be taken on a case. Note: Only actions that are applicable to the case will appear.

For example, a recovery case initiated by the Commercial Repayment Center (CRC) based on an insurer's or workers' compensation entity's ongoing responsibility for medicals (ORM) will not involve a settlement.

For these cases, the request a copy of the conditional payment letter (CPL) and provide notice of settlement information actions will not appear.

The View/Request Authorization (Beneficiary Proof of Representation (POR), or Beneficiary Consent to Release (CTR) or Recovery Agent Authorization) action is used to view authorizations already associated with the case or to submit new authorization requests.

The Request an electronic conditional payment letter with Current Conditional Payment Amount action allows you to make a request for an electronic conditional payment letter (eCPL) through the MSPRP.

The Request a mailed copy of the conditional payment letter action is used to request a CPL via mail.

This letter identifies Medicare's current conditional payment amount for the case and includes a Payment Summary Form that lists each payment made by Medicare that was related to the case. It is sent to each authorized individual/entity associated to the case.

The Begin Final Conditional Payment Process and Provide 120 Days' Notice of Anticipated Settlement; Calculate Final Conditional Payment Amount; and the Request an Electronic Dispute Denial for Final Conditional Payment Case Letter with Current Conditional Payment Amount actions are used to carry out Final Conditional Payment processes, if applicable.

The View/Dispute Claims Listing action is used to view and/or dispute the claims included in the conditional payment amount. When this action is selected, the MSPRP will display all claim information that is included in the conditional payment amount.

If you identify claims that are not related to the case, you can select them for dispute. Medicare will then review the disputed claims and make a determination as to whether the claims are/are not associated to the case.

The conditional payment amount will be adjusted accordingly. The Provide the Notice of Settlement Information action is used to submit Notice of Settlement information.

It will also be used to elect the Fixed Percentage Option (when applicable).

This page also contains a previous button, the user does not have to return to the Account List page or restart your search a new search.

Note: To prevent users from taking any action on BCRC or CRC NGHP ORM (Ongoing Responsibility for Medicals) cases related to a deleted Section 111 lead, the following Case Information page actions will be disabled for cases with deleted S111 leads:

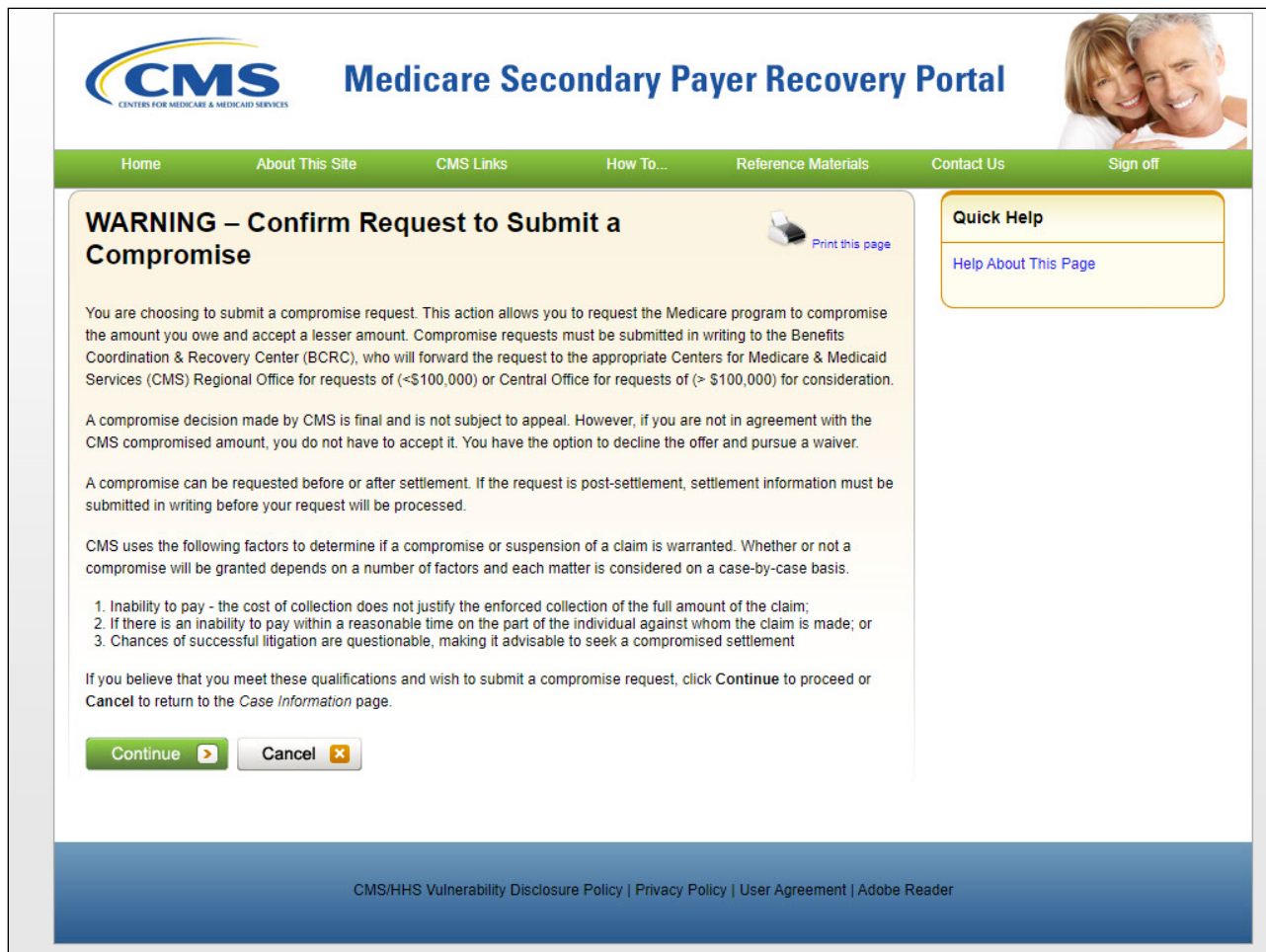
View/Request Authorizations,

Request an update to the conditional payment amount, and

Request a mailed copy of the conditional payment letter.



## Slide 24 of 57 - Warning - Confirm Request to Submit a Compromise Page



The screenshot displays the Medicare Secondary Payer Recovery Portal. At the top, there is a header with the CMS logo (Centers for Medicare & Medicaid Services) and the title "Medicare Secondary Payer Recovery Portal". To the right of the title is a photo of a smiling couple. Below the header is a green navigation bar with links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off.

The main content area has a yellow background and is titled "WARNING – Confirm Request to Submit a Compromise". To the right of the title is a "Print this page" icon. The text explains that the user is choosing to submit a compromise request, which allows them to request the Medicare program to compromise the amount owed and accept a lesser amount. It states that compromise requests must be submitted in writing to the Benefits Coordination & Recovery Center (BCRC), who will forward the request to the appropriate Centers for Medicare & Medicaid Services (CMS) Regional Office for requests of (<\$100,000) or Central Office for requests of (> \$100,000) for consideration.

It further states that a compromise decision made by CMS is final and is not subject to appeal. However, if you are not in agreement with the CMS compromised amount, you do not have to accept it. You have the option to decline the offer and pursue a waiver.

A compromise can be requested before or after settlement. If the request is post-settlement, settlement information must be submitted in writing before your request will be processed.

CMS uses the following factors to determine if a compromise or suspension of a claim is warranted. Whether or not a compromise will be granted depends on a number of factors and each matter is considered on a case-by-case basis.

1. Inability to pay - the cost of collection does not justify the enforced collection of the full amount of the claim;
2. If there is an inability to pay within a reasonable time on the part of the individual against whom the claim is made; or
3. Chances of successful litigation are questionable, making it advisable to seek a compromised settlement

If you believe that you meet these qualifications and wish to submit a compromise request, click **Continue** to proceed or **Cancel** to return to the *Case Information* page.

At the bottom of the main content area are two buttons: "Continue" (green) and "Cancel" (gray).

On the right side of the page, there is a "Quick Help" section with a link "Help About This Page".

At the bottom of the page, there is a blue footer bar with the text: "CMS/HHS Vulnerability Disclosure Policy | Privacy Policy | User Agreement | Adobe Reader".

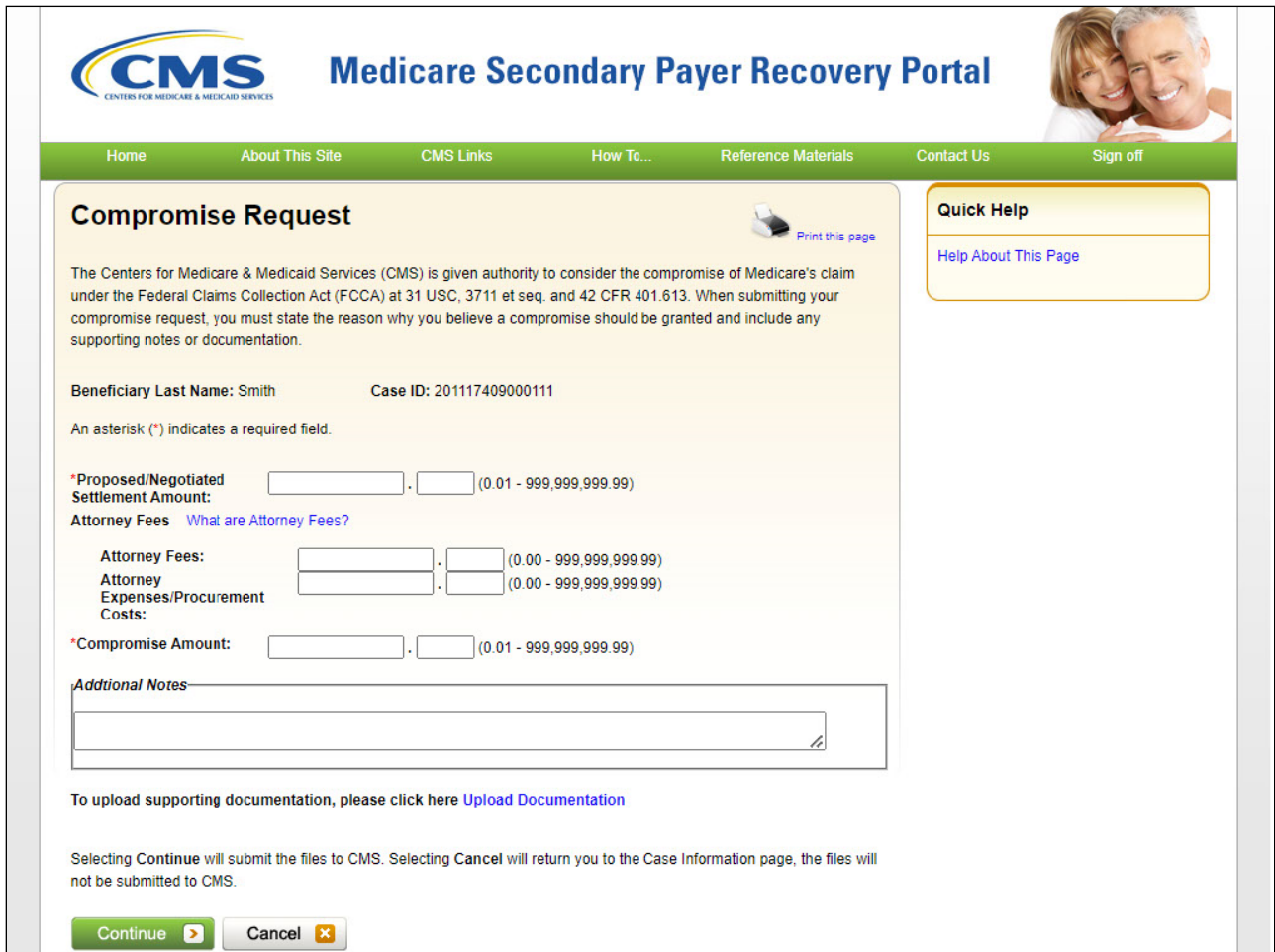
## Slide notes

The Submit Compromise Request action allows you to submit an offer for Medicare to accept less than the amount Medicare is owed. When Submitting Compromise Request, from the case information page, a warning page will appear to confirm submitting a compromise request is the action you want to complete.

You can request a compromise before a demand letter is issued (called a pre-settlement compromise), or after the case settles and funds have been paid (called a post-settlement compromise).

If you believe that you meet the qualifications for this compromise request, click Continue to proceed.

## Slide 25 of 57- Compromise Request Page



The screenshot shows the "Compromise Request" page of the Medicare Secondary Payer Recovery Portal. The page header includes the CMS logo and the portal title. A green navigation bar contains links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. A "Quick Help" sidebar on the right offers a "Help About This Page" link. The main content area is titled "Compromise Request" and includes a "Print this page" icon. It explains that CMS has authority to consider compromise of Medicare's claim under the FICA Act. Pre-filled information shows the Beneficiary Last Name as "Smith" and Case ID as "201117409000111". A note states that an asterisk (\*) indicates a required field. The form contains several input fields: "Proposed/Negotiated Settlement Amount" (0.01 - 999,999,999.99), "Attorney Fees" (0.00 - 999,999,999.99), "Attorney Expenses/Procurement Costs" (0.00 - 999,999,999.99), and "Compromise Amount" (0.01 - 999,999,999.99). There is also a text area for "Additional Notes". Below the form, a link "Upload Documentation" is provided. At the bottom, instructions state that "Continue" will submit files to CMS, while "Cancel" will return to the Case Information page. "Continue" and "Cancel" buttons are at the bottom.

**Compromise Request**

The Centers for Medicare & Medicaid Services (CMS) is given authority to consider the compromise of Medicare's claim under the Federal Claims Collection Act (FCCA) at 31 USC, 3711 et seq. and 42 CFR 401.613. When submitting your compromise request, you must state the reason why you believe a compromise should be granted and include any supporting notes or documentation.

Beneficiary Last Name: Smith      Case ID: 201117409000111

An asterisk (\*) indicates a required field.

\*Proposed/Negotiated Settlement Amount:  .  (0.01 - 999,999,999.99)

Attorney Fees [What are Attorney Fees?](#)

Attorney Fees:  .  (0.00 - 999,999,999.99)

Attorney Expenses/Procurement Costs:  .  (0.00 - 999,999,999.99)

\*Compromise Amount:  .  (0.01 - 999,999,999.99)

Additional Notes:

To upload supporting documentation, please click here [Upload Documentation](#)

Selecting **Continue** will submit the files to CMS. Selecting **Cancel** will return you to the Case Information page, the files will not be submitted to CMS.

**Continue** **Cancel**

## Slide notes

The Compromise Request page will appear. The user must complete the required fields. If this is a Post Demand Compromise Request, a different page will appear.

## Slide 26 of 57 - Compromise Request Confirmation Page



The screenshot displays the Medicare Secondary Payer Recovery Portal. At the top, the CMS logo is on the left, and the title "Medicare Secondary Payer Recovery Portal" is in the center. To the right is a photo of a smiling couple. Below the title is a green navigation bar with links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. The main content area has a yellow background and is titled "Compromise Request Confirmation". It includes a "Print this page" icon and a paragraph explaining that the request was received on 6/19/2017 for Case ID 2114532222 and that the BCRC will forward the correspondence and case file to the appropriate Regional Office for processing. A green "Continue" button with a right arrow is at the bottom left of the main content area. On the right side, there is a "Quick Help" box with a link to "Help About This Page". The footer contains links to "CMS/HHS Vulnerability Disclosure Policy", "Privacy Policy", "User Agreement", and "Adobe Reader".

**Compromise Request Confirmation**

Print this page

Your compromise request was received on 6/19/2017 for Case ID 2114532222. As a Medicare Contractor, the Benefits Coordination and Recovery Contractor (BCRC) does not have the authority under the law to make a decision regarding compromise or waiver of interest. The BCRC will forward a copy of your correspondence and a complete copy of the case file to the appropriate Centers for Medicare and Medicaid Services Regional Office for processing. A staff member from the Regional Office will contact you, if needed, as they evaluate your request.

Continue

**Quick Help**

[Help About This Page](#)

CMS/HHS Vulnerability Disclosure Policy | Privacy Policy | User Agreement | Adobe Reader

## Slide notes

The Compromise Request Confirmation page will appear. Select continue to return to the Case Information page. From the Case Information Page, scroll down to the Case Action Section to select the next action.

**Slide 27 of 57- Case Action - View/Submit Redetermination**

Please select an action from the following list, if the option is disabled (grayed out) it may not be available for the case at this time:

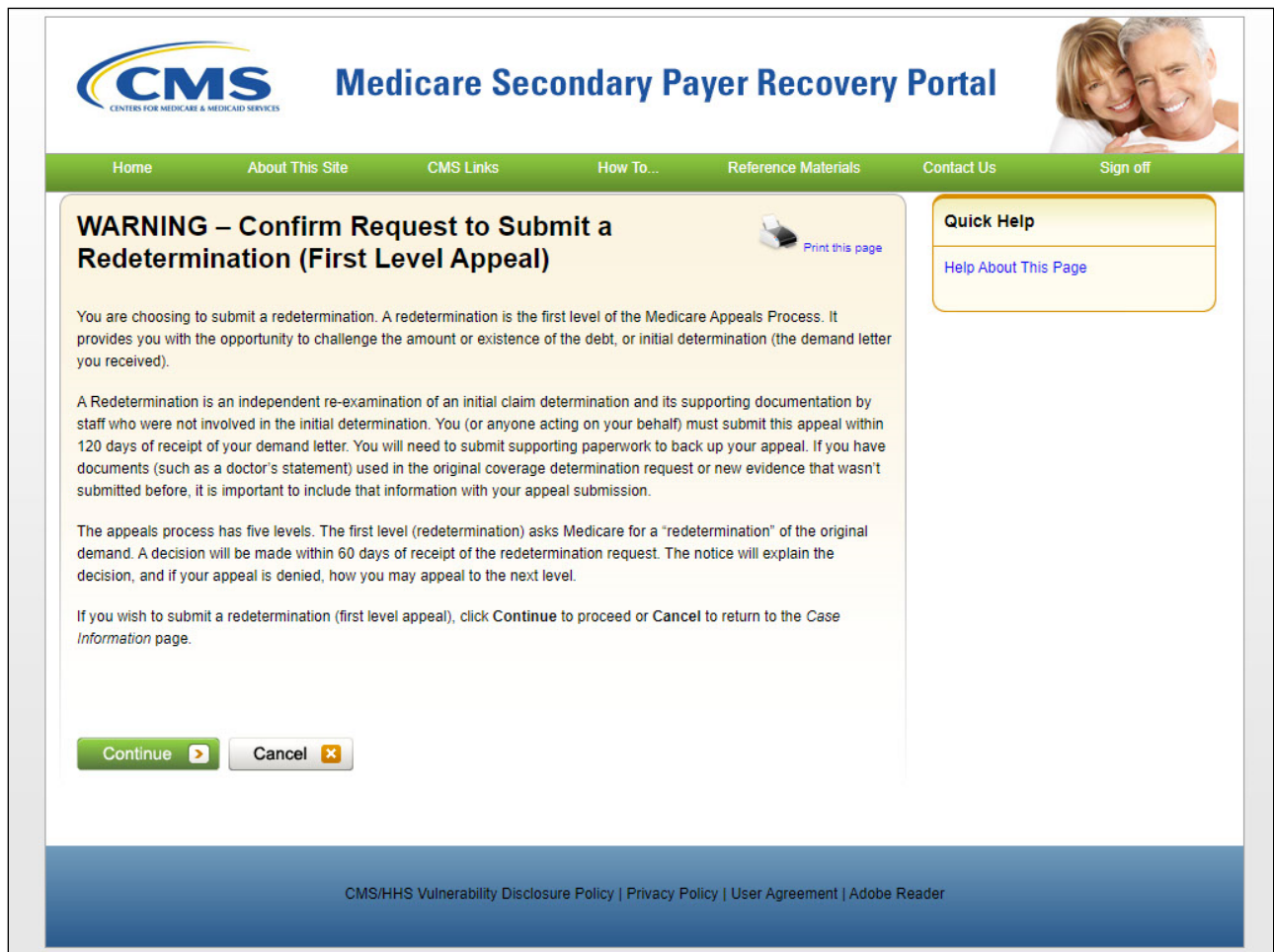
- ☐ View / Request Authorizations
- ☐ Request an update to the conditional payment amount [What is this?](#)
- ☐ Request an electronic conditional payment letter with Current Conditional Payment Amount [What is this?](#)
- ☐ Request a mailed copy of the conditional payment letter [What is this?](#)
- ☐ Begin Final Conditional Payment Process and Provide 120 Days' Notice of Anticipated Settlement [What is this?](#)
- ☐ Calculate Final Conditional Payment Amount [What is this?](#)
- ☐ Request an electronic Dispute Denial for Final Conditional Payment Case Letter with Current Conditional Payment Amount [What is this?](#)
- ☐ View / Dispute Claims Listing [What is this?](#)
- ☐ View/Provide the Notice of Settlement Information [What is this?](#)
- ☐ Initiate Demand Letter [What is this?](#)
- ☐ View / Submit Redetermination (First Level Appeal) [What is this?](#)
- ☐ Submit Waiver Request [What is this?](#)
- ☐ Submit Compromise Request [What is this?](#)
- ☐ Submit Case Documentation [What is this?](#)

[Previous](#) [Continue](#) [Cancel](#)

**Slide notes**

The View/Submit Redetermination case action is used to identify claims that you believe are not related to this case and include them in the request.

## Slide 28 of 57 - Warning - Confirm Request to Submit a Redetermination Page



The screenshot displays the Medicare Secondary Payer Recovery Portal. At the top, there is a header with the CMS logo (Center for Medicare & Medicaid Services) and the title "Medicare Secondary Payer Recovery Portal". To the right of the header is a photo of a smiling couple. Below the header is a green navigation bar with links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off.

The main content area has a yellow background and is titled "WARNING – Confirm Request to Submit a Redetermination (First Level Appeal)". To the right of the title is a "Print this page" link with a printer icon. Below the title, there is a paragraph explaining that the user is choosing to submit a redetermination, which is the first level of the Medicare Appeals Process. It provides the opportunity to challenge the amount or existence of the debt, or initial determination (the demand letter you received).

Next, a paragraph explains that a Redetermination is an independent re-examination of an initial claim determination and its supporting documentation by staff who were not involved in the initial determination. It states that the user (or anyone acting on their behalf) must submit this appeal within 120 days of receipt of their demand letter. They will need to submit supporting paperwork to back up their appeal. If they have documents (such as a doctor's statement) used in the original coverage determination request or new evidence that wasn't submitted before, it is important to include that information with their appeal submission.

Then, a paragraph explains the appeals process, which has five levels. The first level (redetermination) asks Medicare for a "redetermination" of the original demand. A decision will be made within 60 days of receipt of the redetermination request. The notice will explain the decision, and if the appeal is denied, how the user may appeal to the next level.

Finally, a paragraph states that if the user wishes to submit a redetermination (first level appeal), they should click "Continue" to proceed or "Cancel" to return to the Case Information page.

At the bottom of the main content area are two buttons: a green "Continue" button with a right arrow and a grey "Cancel" button with a red X icon.

On the right side of the page, there is a "Quick Help" section with a "Help About This Page" link.

At the very bottom of the page, there is a blue footer bar containing the text: "CMS/HHS Vulnerability Disclosure Policy | Privacy Policy | User Agreement | Adobe Reader".

## Slide notes


When a redetermination request is being processed at any level of review, no collection action will be taken. When attempting to submit a redetermination, a warning page will appear to confirm Redetermination is the action you want to complete.

When a redetermination request is being processed at any level of review, no collection action will be taken.

## Slide 29 of 57 - Redetermination Submission Page

Home
About This Site
CMS Links
How To...
Reference Materials
Contact Us
Sign off

## Redetermination (First Level Appeal) Submission

 [Print this page](#)

Quick Help : [Help About This Page](#)

An asterisk (\*) indicates a required field.

The Claims listed on this page were included in the demand letter and are currently associated to Case ID: 123456124324  
Demand Amount: \$10,523.86 Demand Letter Date: 10/01/2015

To request a redetermination, select the applicable claims and apply the relevant redetermination reason to those claims. A claim/line item can only be submitted for redetermination one time. If you previously submitted a redetermination and it was resolved in your favor, that claim is no longer associated to your case. Click Continue to proceed. The screen that displays next will allow you to verify the selected claims and provide any supporting documentation. Click Cancel to return to the Case Information page without submitting your redetermination. Click Clear to remove any sorting or filtering and restore the default display of claims information.

Clear
Export

\* Claims:

Select for Redeterm.	Select for Reason	Claim Control ID (ICN) ▾	Line #	Redeterm. Reason ▾	Redeterm. Received	Total Charges ▾	Reimbursement Amount	Conditional Payment Amount
		<input type="text" value="Search"/>		<input type="text" value=""/>		<input type="text" value="Search"/>		
<a href="#">Select All</a> <a href="#">Deselect All</a>	<a href="#">Select All</a> <a href="#">Deselect All</a>							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999992	1		Mail/Fax	\$9.27	\$9.27	\$9.27
<input type="checkbox"/>	<input type="checkbox"/>	*****99999993	1			\$36.14	\$36.14	\$36.14
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999991	3	Relatedness	MSPRP 07/25/2019	\$51.98	\$51.98	\$51.98
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999991	2		Mail/Fax	\$105.20	\$105.20	\$105.20
<input type="checkbox"/>	<input type="checkbox"/>	*****99999992	2			\$131.50	\$131.50	\$131.50
<input type="checkbox"/>	<input type="checkbox"/>	*****99999994	1			\$798.00	\$798.00	\$798.00
<input type="checkbox"/>	<input type="checkbox"/>	*****99999994	1			\$798.00	\$798.00	\$798.00
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999991	1	Duplicate Primary Payment	MSPRP 07/25/2019	\$5,296.23	\$5,296.23	\$5,296.23

Select a Redetermination Reason to apply to the selected claims:

Continue
Cancel

## Slide notes

The Redetermination (First Level Appeal) Submission page appears. The details shown for each of the listed claims depends on your authorization level. All claims appear in the same order in the PSF.


Select the check boxes to select one or more claims from the list to include with the redetermination request.



## Slide 30 of 57 - Redetermination Submission Page

[Home](#) [About This Site](#) [CMS Links](#) [How To...](#) [Reference Materials](#) [Contact Us](#) [Sign off](#)

## Redetermination (First Level Appeal) Submission

 [Print this page](#)

[Quick Help : Help About This Page](#)

An asterisk (\*) indicates a required field.

The Claims listed on this page were included in the demand letter and are currently associated to Case ID: 123456124324  
Demand Amount: \$10,523.86 Demand Letter Date: 10/01/2015

To request a redetermination, select the applicable claims and apply the relevant redetermination reason to those claims. A claim/line item can only be submitted for redetermination one time. If you previously submitted a redetermination and it was resolved in your favor, that claim is no longer associated to your case. Click Continue to proceed. The screen that displays next will allow you to verify the selected claims and provide any supporting documentation. Click Cancel to return to the Case Information page without submitting your redetermination. Click Clear to remove any sorting or filtering and restore the default display of claims information.

[Clear](#) [Export](#)

**\* Claims:**

Select for Redeterm.	Select for Reason	Claim Control ID (ICN)	Line #	Redeterm. Reason	Redeterm. Received	Total Charges	Reimbursement Amount	Conditional Payment Amount
		<input type="text" value="Search"/>		<input type="text" value="v"/>		<input type="text" value="Search"/>		
<a href="#">Select All</a>	<a href="#">Deselect All</a>							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999992	1		Mail/Fax	\$9.27	\$9.27	\$9.27
<input type="checkbox"/>	<input type="checkbox"/>	*****99999993	1			\$36.14	\$36.14	\$36.14
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999991	3	Relatedness	MSPRP 07/25/2019	\$51.98	\$51.98	\$51.98
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999991	2		Mail/Fax	\$105.20	\$105.20	\$105.20
<input type="checkbox"/>	<input type="checkbox"/>	*****99999992	2			\$131.50	\$131.50	\$131.50
<input type="checkbox"/>	<input type="checkbox"/>	*****99999994	1			\$798.00	\$798.00	\$798.00
<input type="checkbox"/>	<input type="checkbox"/>	*****99999994	1			\$798.00	\$798.00	\$798.00
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999991	1	Duplicate Primary Payment	MSPRP 07/25/2019	\$5,296.23	\$5,296.23	\$5,296.23

Select a Redetermination Reason to apply to the selected claims:  [Apply](#) [Remove Reason](#)

[Continue](#) [Cancel](#)

## Slide notes

Clicking Select All selects (and deselects) all the claims. As the Account Manager (AM), when a claim is selected, the information can be exported so the AM to review.

## Slide 31 of 57- Redetermination Verification Page

Home
About This Site
CMS Links
How To...
Reference Materials
Contact Us
Sign off

## Redetermination (First Level Appeal) Submission

[Print this page](#)

[Quick Help : Help About This Page](#)

An asterisk (\*) indicates a required field.

The Claims listed on this page were included in the demand letter and are currently associated to Case ID: 123456124324  
Demand Amount: \$10,523.86 Demand Letter Date: 10/01/2015

To request a redetermination, select the applicable claims and apply the relevant redetermination reason to those claims. A claim/line item can only be submitted for redetermination one time. If you previously submitted a redetermination and it was resolved in your favor, that claim is no longer associated to your case. Click Continue to proceed. The screen that displays next will allow you to verify the selected claims and provide any supporting documentation. Click Cancel to return to the Case Information page without submitting your redetermination. Click Clear to remove any sorting or filtering and restore the default display of claims information.

**\* Claims:**

Select for Redeterm.	Select for Reason	Claim Control ID (ICN) ▾	Line #	Redeterm. Reason ▾	Redeterm. Received	Total Charges ▾	Reimbursement Amount	Conditional Payment Amount
		<input type="text" value="Search"/>		<input type="text" value=""/>		<input type="text" value="Search"/>		
<a href="#">Select All</a>	<a href="#">Select All</a>							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999992	1		Mail/Fax	\$9.27	\$9.27	\$9.27
<input type="checkbox"/>	<input type="checkbox"/>	*****99999993	1			\$36.14	\$36.14	\$36.14
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999991	3	Relatedness	MSPRP 07/25/2019	\$51.98	\$51.98	\$51.98
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999991	2		Mail/Fax	\$105.20	\$105.20	\$105.20
<input type="checkbox"/>	<input type="checkbox"/>	*****99999992	2			\$131.50	\$131.50	\$131.50
<input type="checkbox"/>	<input type="checkbox"/>	*****99999994	1			\$798.00	\$798.00	\$798.00
<input type="checkbox"/>	<input type="checkbox"/>	*****99999994	1			\$798.00	\$798.00	\$798.00
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999991	1	Duplicate Primary Payment	MSPRP 07/25/2019	\$5,296.23	\$5,296.23	\$5,296.23

Select a Redetermination Reason to apply to the selected claims:

## Slide notes

Clicking continue to proceed will direct you to the verification page where you can verify the selected claims and submit supporting documentation.


Note: Users should not upload documents with formats larger than 8.5 x 11 inches.



## Slide 32 of 57 -Redetermination Verification Page

[Home](#) [About This Site](#) [CMS Links](#) [How To...](#) [Reference Materials](#) [Contact Us](#) [Sign off](#)

## Redetermination (First Level Appeal) Verification

 [Print this page](#)

Below is the list of claims associated to Case ID: 123456124324 that you have selected for redetermination. Please review for accuracy. To revise your selection, click [Previous](#).


**Claims included in the redetermination request:**

TOS	Claim Control ID (ICN)	Line #	Redeterm. Reason	Total Charges	Reimbursement Amount	Conditional Payment Amount
1	99999999999991	1	Other	\$5,296.23	\$5,296.23	\$5,296.23
2	99999999999991	2	Previous Payment to CMS/Treasury/BCRC	\$105.20	\$105.20	\$105.20
3	99999999999991	3	Previous Payment to CMS/Treasury/BCRC	\$51.98	\$51.98	\$51.98
4	99999999999992	1	Previous Payment to CMS/Treasury/BCRC	\$9.27	\$9.27	\$9.27


**Supporting Information & Documentation:** [What is this?](#)

You are required to enter an explanation or upload at least one document if you did not supply a Redetermination Reason for each claim included with your request or supplied a reason of 'Other' for any claim. It is in your best interest to provide complete and accurate supporting documentation to ensure proper review of the redetermination. Once the redetermination is submitted, you will not have the option to submit additional documentation on the MSPRP for this request. You may use the following text box for this purpose.

For redeterminations that require additional information, please upload supporting documentation. (Examples of when supporting documentation should be uploaded include: providing clarification of injuries related to the date of incident or establishing incident end date of treatment).

To upload supporting documentation, please click here [Upload Documentation](#) 

Click [Continue](#) to confirm submission of the redetermination and to submit any uploaded documents. Click [Previous](#) to return to the Redetermination (First Level Appeal) Submission page. Click [Cancel](#) to return to the Case Information page without submitting your redetermination.

[Previous](#) [Continue](#) [Cancel](#) 

## Slide notes

To upload supporting documents, you can click the link “Upload Documentation”. To continue to the confirmation page, click Continue.

**Slide 33 of 57 -Redetermination Submission Confirmation Page**

If you need to submit any additional documentation, you may upload it on the MSPRP using the **Submit Case Documentation** action found on the Case Information page or alternatively, mail it to the Commercial Repayment Center at the following address:

Commercial Repayment Center (CRC)  
PO Box 1610  
Lathrop, CA 95330

Click **Continue** return to the Case Information page.

**Claims submitted with the redetermination request:**

Type Of Service (TOS)	Claim Control ID (ICN)	Line #	Redeterm. Reason	Total Charges	Reimbursement Amount	Conditional Payment Amount
1	99999999999991	1	Other	\$5,296.23	\$5,296.23	\$5,296.23
2	99999999999991	2	Previous Payment to CMS/Treasury/BCRC	\$105.20	\$105.20	\$105.20
3	99999999999991	3	Previous Payment to CMS/Treasury/BCRC	\$51.98	\$51.98	\$51.98
4	99999999999992	1	Previous Payment to CMS/Treasury/BCRC	\$9.27	\$9.27	\$9.27

**Notes submitted with the redetermination request:**

This claim is not related to the treatment.

**Documents submitted with the redetermination request:**

- Redetermination1.pdf
- Redetermination2.pdf

Click **Continue** to return to the Case Information page.

**Continue** ➤

**Slide notes**

To upload supporting documents, you can click the link “Upload Documentation”. To continue to the confirmation page, click Continue.

**Slide 34 of 57- Case Action - Submit Waiver Request**

Please select an action from the following list, if the option is disabled (grayed out) it may not be available for the case at this time:

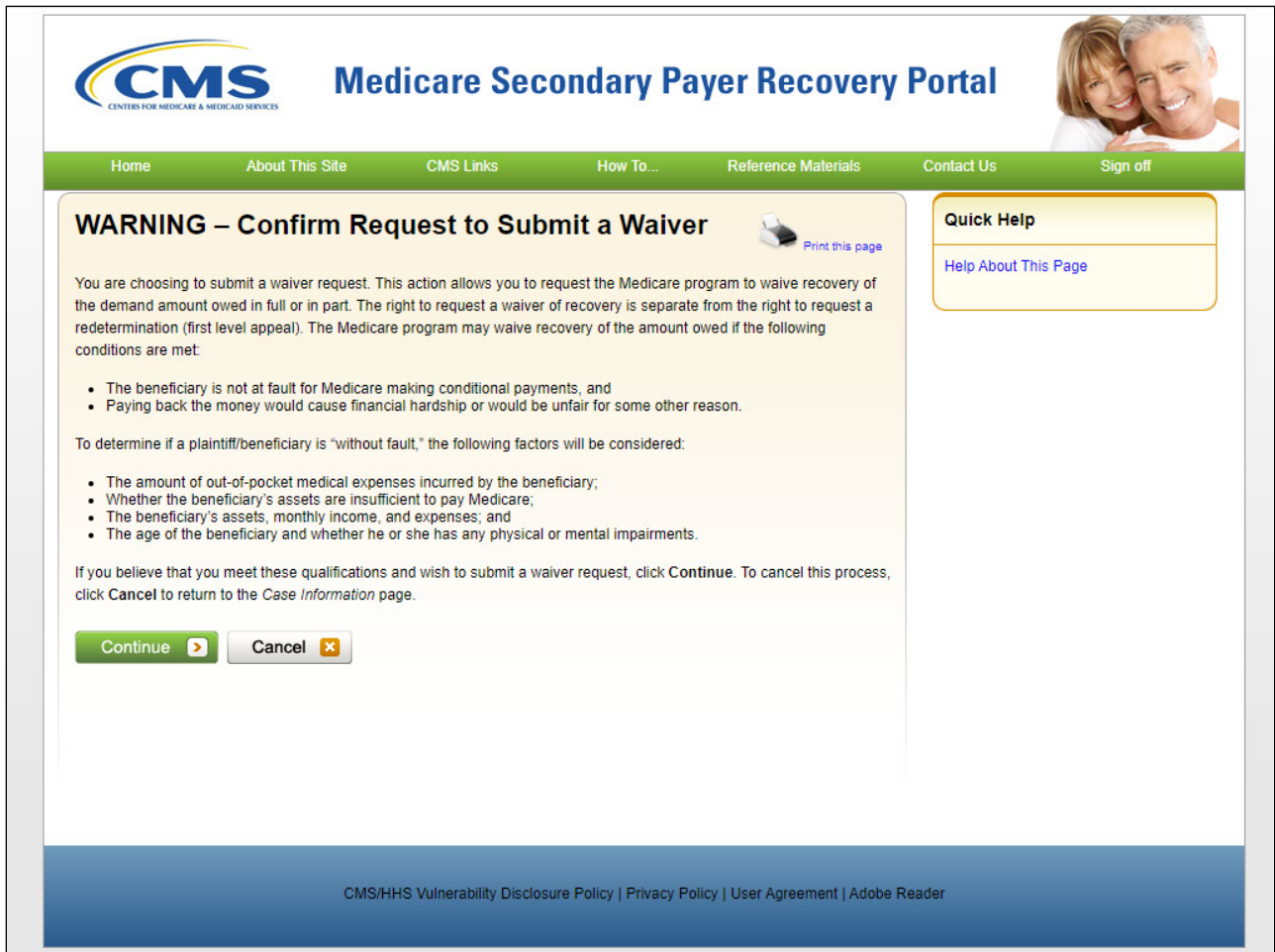
- ☐ View / Request Authorizations
- ☐ Request an update to the conditional payment amount [What is this?](#)
- ☐ Request an electronic conditional payment letter with Current Conditional Payment Amount [What is this?](#)
- ☐ Request a mailed copy of the conditional payment letter [What is this?](#)
- ☐ Begin Final Conditional Payment Process and Provide 120 Days' Notice of Anticipated Settlement [What is this?](#)
- ☐ Calculate Final Conditional Payment Amount [What is this?](#)
- ☐ Request an electronic Dispute Denial for Final Conditional Payment Case Letter with Current Conditional Payment Amount [What is this?](#)
- ☐ View / Dispute Claims Listing [What is this?](#)
- ☐ View/Provide the Notice of Settlement Information [What is this?](#)
- ☐ Initiate Demand Letter [What is this?](#)
- ☐ View / Submit Redetermination (First Level Appeal) [What is this?](#)
- ☐ **Submit Waiver Request** [What is this?](#)
- ☐ Submit Compromise Request [What is this?](#)
- ☐ Submit Case Documentation [What is this?](#)

[Previous](#) [Continue](#) [Cancel](#)

**Slide notes**

The Submit Waiver Request action is used to submit a request for a waiver.

## Slide 35 of 57 - Warning - Confirm Request to Submit a Waiver Page



The screenshot displays the Medicare Secondary Payer Recovery Portal. At the top, the CMS logo is on the left, and a photo of a smiling couple is on the right. The title "Medicare Secondary Payer Recovery Portal" is centered. Below the title is a green navigation bar with links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. The main content area has a yellow background and is titled "WARNING – Confirm Request to Submit a Waiver". It includes a "Print this page" link. The text explains that the user is choosing to submit a waiver request and lists the conditions for waiver: the beneficiary is not at fault, and paying back would cause financial hardship. It also lists factors for determining if a plaintiff/beneficiary is "without fault". At the bottom, there are "Continue" and "Cancel" buttons. A "Quick Help" sidebar on the right contains a "Help About This Page" link. The footer contains links to CMS/HHS Vulnerability Disclosure Policy, Privacy Policy, User Agreement, and Adobe Reader.

**WARNING – Confirm Request to Submit a Waiver** [Print this page](#)

You are choosing to submit a waiver request. This action allows you to request the Medicare program to waive recovery of the demand amount owed in full or in part. The right to request a waiver of recovery is separate from the right to request a redetermination (first level appeal). The Medicare program may waive recovery of the amount owed if the following conditions are met:

- The beneficiary is not at fault for Medicare making conditional payments, and
- Paying back the money would cause financial hardship or would be unfair for some other reason.

To determine if a plaintiff/beneficiary is "without fault," the following factors will be considered:

- The amount of out-of-pocket medical expenses incurred by the beneficiary;
- Whether the beneficiary's assets are insufficient to pay Medicare;
- The beneficiary's assets, monthly income, and expenses; and
- The age of the beneficiary and whether he or she has any physical or mental impairments.

If you believe that you meet these qualifications and wish to submit a waiver request, click **Continue**. To cancel this process, click **Cancel** to return to the *Case Information* page.

[Continue](#) [Cancel](#)

**Quick Help**

[Help About This Page](#)

CMS/HHS Vulnerability Disclosure Policy | Privacy Policy | User Agreement | Adobe Reader

## Slide notes

A waiver is when all, or part of, the demand amount owed to Medicare is dismissed. When submitting a Waiver Request from the case information page, a warning page will appear. Select continue to advance.

## Slide 36 of 57 - Wavier Submission Page

The screenshot shows the Medicare Secondary Payer Recovery Portal. At the top, there is a CMS logo and the title "Medicare Secondary Payer Recovery Portal" next to a photo of a smiling couple. Below the title is a green navigation bar with links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. The main content area is titled "Waiver Submission" and includes a "Print this page" icon. It states: "An asterisk (\*) indicates a required field." Below this, it displays case information: "Case ID: 123456124324 Demand Amount: \$10,523.86 Demand Letter Mail Date: 10/01/2015". The text explains that the waiver submission requires completing and submitting the SSA 632 Request for Waiver form, which requests specific information about the beneficiary's income, assets, expenses, and the reasons why waiver of recovery should be granted. A link is provided for the SSA 632 Request for Waiver form. It also states that once a decision has been made, the user will receive a letter explaining the reason(s) for the decision and the steps to be followed to appeal that decision if it is less than fully favorable. The user is instructed to click "Continue" to proceed and "Cancel" to return to the Case Information page. At the bottom of the main content area, there are two buttons: "Continue" (green with a right arrow) and "Cancel" (gray with a close icon). To the right of the main content area is a "Quick Help" box with a link to "Help About This Page". At the very bottom of the page, there is a blue footer bar with links to CMS/HHS Vulnerability Disclosure Policy, Privacy Policy, User Agreement, and Adobe Reader.

**Waiver Submission**

An asterisk (\*) indicates a required field.

Case ID: 123456124324 Demand Amount: \$10,523.86 Demand Letter Mail Date: 10/01/2015

The waiver submission requires you to complete and submit the **SSA 632 Request for Waiver** form which requests specific information about the beneficiary's income, assets, expenses, and the reasons why waiver of recovery should be granted. A copy of this form and instructions on how to complete this form may be accessed at the following link: [SSA 632 Request for Waiver](#).

Once a decision has been made, you will receive a letter that explains the reason(s) for the decision and the steps to be followed to appeal that decision if it is less than fully favorable. Click **Continue** to proceed. The screen that displays next will allow you to enter information to justify the waiver request and provide any supporting documentation. Click **Cancel** to return to the *Case Information* page to cancel the waiver request at this time.

**Continue** **Cancel**

**Quick Help**

[Help About This Page](#)

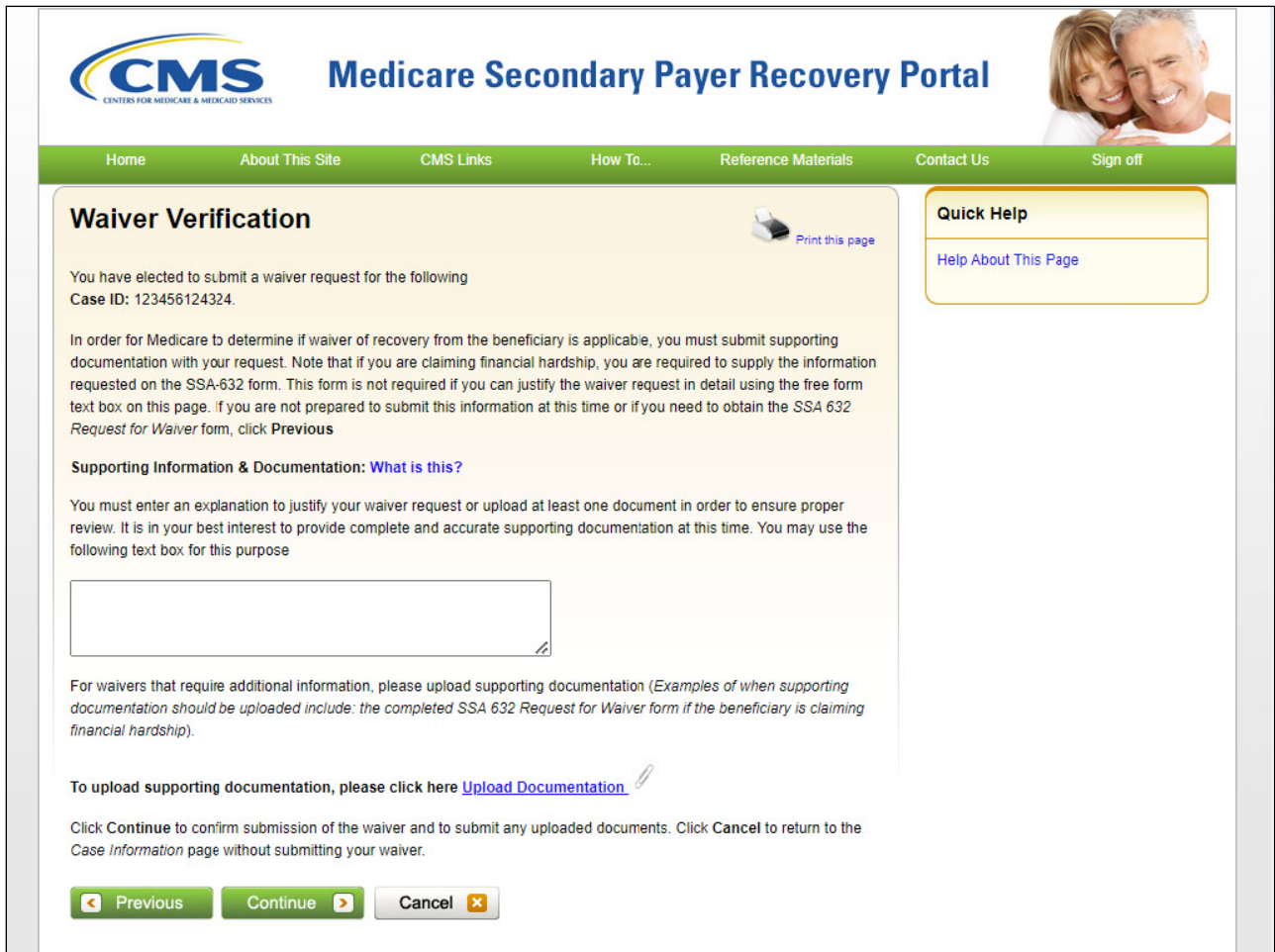
CMS/HHS Vulnerability Disclosure Policy | Privacy Policy | User Agreement | Adobe Reader

## Slide notes

The Submit Waiver Request action is used to submit a request for a waiver.

A waiver is when all or part of the demand amount owed to Medicare is dismissed. When submitting a Waiver Request from the case information page, a warning page will appear, and waiver submission page will appear. Click Continue to process with Waiver Submission.

## Slide 37 of 57 - Waiver Verification Page



The screenshot shows the Medicare Secondary Payer Recovery Portal. The header includes the CMS logo and the title "Medicare Secondary Payer Recovery Portal". A navigation bar contains links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. The main content area is titled "Waiver Verification" and includes a "Print this page" icon. The text states: "You have elected to submit a waiver request for the following Case ID: 123456124324." It explains that supporting documentation is required for Medicare to determine if a waiver of recovery is applicable. It notes that if claiming financial hardship, the SSA-632 form is required. A text box is provided for justification. Below the text box, it says: "For waivers that require additional information, please upload supporting documentation (Examples of when supporting documentation should be uploaded include: the completed SSA 632 Request for Waiver form if the beneficiary is claiming financial hardship)." A link "Upload Documentation" is provided. At the bottom, it says: "Click Continue to confirm submission of the waiver and to submit any uploaded documents. Click Cancel to return to the Case Information page without submitting your waiver." The footer contains three buttons: "Previous", "Continue", and "Cancel".

**Waiver Verification**

You have elected to submit a waiver request for the following  
Case ID: 123456124324.

In order for Medicare to determine if waiver of recovery from the beneficiary is applicable, you must submit supporting documentation with your request. Note that if you are claiming financial hardship, you are required to supply the information requested on the SSA-632 form. This form is not required if you can justify the waiver request in detail using the free form text box on this page. If you are not prepared to submit this information at this time or if you need to obtain the SSA 632 Request for Waiver form, click [Previous](#)

**Supporting Information & Documentation: [What is this?](#)**

You must enter an explanation to justify your waiver request or upload at least one document in order to ensure proper review. It is in your best interest to provide complete and accurate supporting documentation at this time. You may use the following text box for this purpose

For waivers that require additional information, please upload supporting documentation (Examples of when supporting documentation should be uploaded include: the completed SSA 632 Request for Waiver form if the beneficiary is claiming financial hardship).

To upload supporting documentation, please click here [Upload Documentation](#)

Click **Continue** to confirm submission of the waiver and to submit any uploaded documents. Click **Cancel** to return to the Case Information page without submitting your waiver.

[Previous](#) [Continue](#) [Cancel](#)

## Slide notes

The Waiver Verification page will appear to verify the detail of the waiver. To upload any supporting documents, use the Upload Documentation link.

## Slide 38 of 57 - Waiver Submission Confirmation



The screenshot displays the Medicare Secondary Payer Recovery Portal. At the top, the CMS logo is on the left, and a smiling couple is on the right. The page title "Medicare Secondary Payer Recovery Portal" is centered. A green navigation bar contains links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. The main content area is titled "Waiver Submission Confirmation" and includes a "Print this page" icon. The text states: "You have successfully submitted a waiver for Case ID: 123456124324. The following information has been included in this submission. If you need to submit any additional documentation, you may upload it on the MSPRP using the **Submit Case Documentation** action found on the Case Information page or alternatively, mail it to the Benefits Coordination & Recovery Center (BCRC) at the following address:"

Medicare  
NGHP  
PO Box 138832  
Oklahoma City, OK 73113

Notes submitted with the waiver request:

Notes submitted with the waiver request

Documents submitted with the waiver request:

- Waiver1.pdf
- Waiver2.pdf

Click **Continue** to return to the *Case Information* page.

**Continue** >

Quick Help  
[Help About This Page](#)

CMS/HHS Vulnerability Disclosure Policy | Privacy Policy | User Agreement | Adobe Reader

## Slide notes

The Waiver Submission Confirmation Page will appear to verify the detail of the waiver. Any documents uploaded will display on this page (under document submitted area).



**Slide 39 of 57 - Case Listing**



**Slide notes**

The section following will talk about more case specific information including the Case Listing and the actions that follow.



## Slide 40 of 57 - Welcome! Page

## Welcome!

Account: 30401 ABC Corporation 🟢

The Medicare Secondary Payer Recovery Portal provides a quick and efficient way to request case information and provide information to assist in resolving Medicare's recovery claim.

With the use of this portal, you may submit a valid authorization, request an update conditional payment amount, submit settlement information and dispute claims.

You may view the account activity by clicking the appropriate link under the Account Settings.

To request information regarding a case you have not already associated to your account, click the Request Case Access link below.

To see cases that you have previously associated to your account, click the Case Listing link below.

To submit a case, click the Report A Case link below.

To request an Open Debt Report, click the Open Debt Report link below.

To view/print "Paperless" letter notification e-mails and letters, click the Go Paperless Letter Notifications link below.

**Note:** You will not be able to use the links below until your Profile Report has been returned.

[Request Case Access](#)

[Case Listing](#)

[Report A Case](#)

[Open Debt Report](#)

[Go Paperless Letter Notifications](#)

[Previous](#)


### Account Settings

- [Update Account Information](#)
- [Designee Maintenance](#)
- [View Account Activity](#)
- [Update Paperless E-mail Distribution](#)

## Slide notes


As mentioned previously, Case Listing is used to view cases that have been previously associated to the MSPRP account. When the Case Listing link is selected, the Case Listing page will appear.

## Slide 41 of 57 - Case Listing Page

 [Print this page](#)

**Quick Help**  
[Help About This Page](#)

### Case Listing

The following are the case reports associated to Account ID: **30401** .

To view case detail information, click the case number. To manage Designee access to the case, click on the Manage Access link. To perform a search, enter any search criteria and click the **Search** button.

If you are approaching settlement on a case that is not yet available on the MSPRP and you wish to initiate the Final Conditional Payment process, you can add this case using the Report A Case link found on the MSPRP Welcome page.

To remove a case from displaying on your Case Listing page, select the case(s) you wish to remove and click the **Remove Case(s)** button. This action will only remove the cases from displaying on this page. The selected cases will still be associated to your account.

To close a case on your account, select the case(s) you wish to close and click the **Close Case(s)** button. Only cases that have been reported via the MSPRP "Report A Case" process that are not yet demanded can be closed. Please note: A case should only be closed if it was reported in error as the case will be closed and recovery will cease.

Case ID:  [Search Hint](#)

Medicare ID:

Beneficiary SSN:  -  -

Beneficiary Last Name:  [Search Hint](#)

#### Cases

\*Case IDs denoted with an asterisk were reported via the MSPRP Report A Case process.

Select	Case ID	Bene Last Name	Medicare ID	Bene Date of Birth	Case Status	Authorization Level	Authorization Status	Case Access
--------	---------	----------------	-------------	--------------------	-------------	---------------------	----------------------	-------------

## Slide notes

The cases that have been previously associated to the MSPRP account appear at the bottom of this page.

The Case ID, Beneficiary Last Name, Medicare ID/SSN, Date of Birth, Case Status, Authorization Level, and Authorization Status are noted for each case. You may click [Print this page] to print the case listing for record keeping purposes.

Note: The page displayed is one that the Account Manager would view. If the User is an Account Designee, the Manage Access Column on the right would not appear.

The Manage Access links under the Manage Access column allows the Account Manager to assign cases to an Account Designee.

The case listing is displayed in ascending order by Case ID. To change the sort order to descending, click the arrow next to the Case ID. Click the arrow again to return to ascending order.

To sort the case listing by beneficiary last name, click the arrow next to the Bene Last Name column heading. The case listing will be sorted in descending order. Click the arrow again to sort in ascending order.

## Slide 42 of 57 - Remove Cases

To remove a case from displaying on your Case Listing page, select the case(s) you wish to remove and click the **Remove Case(s)** button. This action will only remove the cases from displaying on this page. The selected cases will still be associated to your account.

To close a case on your account, select the case(s) you wish to close and click the **Close Case(s)** button. Only cases that have been reported via the MSPRP "Report A Case" process that are not yet demanded can be closed. Please note: A case should only be closed if it was reported in error as the case will be closed and recovery will cease.

Case ID:  [Search Hint](#)

Medicare ID:

Beneficiary SSN:  -  -

Beneficiary Last Name:  [Search Hint](#)

### Cases

\*Case IDs denoted with an asterisk were reported via the MSPRP Report A Case process.

Select	Case ID	Bene Last Name	Medicare ID	Bene Date of Birth	Case Status	Authorization Level	Authorization Status	Case Access
<input type="checkbox"/>	201117409000150	Smith	****9999A	09/01/1940	Demand	Beneficiary Proof of Representation	Verified	<a href="#">Manage Access</a>
<input type="checkbox"/>	201117409000151	Jones	****8888B	04/19/1945	Closed			<a href="#">Manage Access</a>
<input type="checkbox"/>	201117409000152 *	Williams	****7777B	08/20/1939	DEMAND IN PROGRESS	Beneficiary Consent to Release	Verified	<a href="#">Manage Access</a>
<input type="checkbox"/>	201117409000153	Ryan	***-**-1234	10/14/1941	Open	Case Debtor		<a href="#">Manage Access</a>

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## Slide notes

You may remove cases from displaying on your case listing. You may choose to remove a case when there are no more actions you can take on it and you no longer wish to see it on this page. Some reasons for removing a case are:

- Case has been closed
- Case had the Demand Letter issued
- Case has been approved for the Fixed Percentage Option
- Case has been approved for the Self-Calculated Conditional Payment Amount

To remove a case(s), select the checkbox next to the case(s). Click [Remove Cases] to remove the selected case(s) from the Claims Listing page.

Note: When an Account Designee removes a case, it will be removed from their Case Listing page but will still be visible and available on the Account Manager's Case Listing page.

When an Account Manager removes a case, it will be removed from the Case Listing page of both the Account Manager and the Account Designee.

Click [Continue] to return to the Case Listing page.

Note: To limit the number of cases submitted in error, beneficiaries, insurers, and authorized representatives now have the ability to close and permanently remove a case from their account that was reported in error.

## Slide 43 of 57 - Remove Cases Verification Page

The screenshot shows the 'Remove Cases Verification' page in the Medicare Secondary Payer Recovery Portal. The page has a green header with the CMS logo and navigation links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. A photo of a smiling couple is in the top right corner. The main content area is titled 'Remove Cases Verification' and includes a 'Print this page' icon. Below the title, a message states: 'Below is a list of cases you have selected for removal from the Case Listing screen, please review for accuracy. To cancel or revise your selection, click the Previous button.' A table titled 'Cases Removed' displays one case with the following details:

Case ID	Bene Last Name	Medicare ID	Bene Date of Birth
201117409000150	Smith	*****9999A	09/01/1940

Below the table, a message states: 'Selecting Continue will remove the cases from the Case Listing screen.' At the bottom of the main content area are two buttons: 'Previous' (with a left arrow) and 'Continue' (with a right arrow). A 'Quick Help' sidebar on the right contains a 'Help About This Page' link. The footer of the page contains links for CMS/HHS Vulnerability Disclosure Policy, Privacy Policy, User Agreement, and Adobe Reader.

## Slide notes

The Remove Cases Verification page will display the list of cases selected for removal. Verify this list to ensure that it only includes cases you wish to remove from your Case Listing page.

To revise the list, click the [Previous] button to return to the Case Listing page. After you have verified that the only cases listed are those cases you wish to remove, click [Continue].

## Slide 44 of 57 - Case Listing Page

### Case Listing

The following are the case reports associated to Account ID: 30401.

To view case detail information, click the case number. To manage Designee access to the case, click on the Manage Access link. To perform a search, enter any search criteria and click the **Search** button.

If you are approaching settlement on a case that is not yet available on the MSPRP and you wish to initiate the Final Conditional Payment process, you can add this case using the Report A Case link found on the MSPRP Welcome page.

To remove a case from displaying on your Case Listing page, select the case(s) you wish to remove and click the **Remove Case(s)** button. This action will only remove the cases from displaying on this page. The selected cases will still be associated to your account.

To close a case on your account, select the case(s) you wish to close and click the **Close Case(s)** button. Only cases that have been reported via the MSPRP "Report A Case" process that are not yet demanded can be closed. Please note: A case should only be closed if it was reported in error as the case will be closed and recovery will cease.

Case ID:  [Search Hint](#)

Medicare ID:

Beneficiary SSN:  -  -

Beneficiary Last Name:  [Search Hint](#)

### Cases

\*Case IDs denoted with an asterisk were reported via the MSPRP Report A Case process.

Select	Case ID	Bene Last Name	Medicare ID	Bene Date of Birth	Case Status	Authorization Level	Authorization Status	Case Access
<input type="checkbox"/>	201117409000150	Smith	*****9999A	09/01/1940	Demand	Beneficiary Proof of Representation	Verified	<a href="#">Manage Access</a>
<input type="checkbox"/>	201117409000151	Jones	*****8888B	04/19/1945	Closed			<a href="#">Manage Access</a>
<input type="checkbox"/>	201117409000152 *	Williams	*****7777B	08/20/1939	DEMAND IN PROGRESS	Beneficiary Consent to Release	Verified	<a href="#">Manage Access</a>

## Slide notes

The Case Listing page also allows you to search for a case that has been previously associated to the MSPRP account by entering the Case ID,

the beneficiary's Medicare ID, the beneficiary's SSN or the beneficiary's last name and then clicking [Search].

Once [Search] is clicked, the case or cases that met the search criteria will display at the bottom of the page.

To make your search more effective, you can search for variations of the Case ID and the Beneficiary Last Name using the percent sign (%) as a wildcard symbol. The wildcard symbol can only be used in these two fields.

When used, the percent sign (%) replaces one (or more than one) number(s) at the end of the Case ID. Only one percent sign (%) can be used and a minimum of 5 characters must be entered (4 numbers plus the percent sign).

For example, to locate all recovery cases where the Case ID begins with the numbers 2011, enter 2011% in the Case ID field and click [Search].

The MSPRP will retrieve all recovery case records associated to your Account ID with a Case ID that begins with 2011.


When using the wildcard symbol in the Beneficiary Last Name field, the percent sign (%) replaces one (or more than one) character(s) at the end of the Beneficiary Last Name.

Only one percent sign (%) can be used and a minimum of 2 characters must be entered (one character plus the percent sign). For example, to locate all recovery cases where the Beneficiary Last Name begins with SM (such as Smith, Smithson, Small), enter SM% in the Beneficiary Last Name field and click [Search]. The MSPRP will retrieve all recovery case records associated to your Account ID with a Beneficiary Last Name that begins with SM.

To view case information on a specific case, you will click the Case ID link that appears in the list of cases.

## Slide 45 of 57 - Case Information Page

## Case Information

 [Print this page](#)

[Quick Help : Help About This Page](#)

**Case ID:** 201117409000150 [What is this?](#)

**Case Type:** Liability Insurance

**Case Status:** Demand [What is this?](#)

**Current Status of Debt:** Intent to Refer Letter Sent

**RRE Name:** Sample Name

**Date of Incident:** 09/15/2009

**Industry Date of Incident:** 09/15/2009 [What is this?](#)

**ORM:** Yes

**Medicare ID:** 987654321A

**Beneficiary DOB:** 02/08/1940

**Beneficiary Last Name:** Smith

**Treasury Account Number:** 12345678

**Treasury Referral Date:** 01/01/2016

**Authorization Level:** Proof of Representation

**Authorization Status:** Verified [What is this?](#)

**ORM Termination Date:** 01/01/2016

Payment Information

Electronic Payment History

Refund Information

Correspondence Activity

Waiver/Redetermination/Compromise

Final Conditional Payment Process

**\*Current Conditional Payment Amount:** \$2,800.00

*\*Note: Claims are retrieved daily. This amount is current as of: 07/23/2018. Please be advised that the claims associated to this case are currently being evaluated for relevance. This typically takes 3-5 business days. The conditional payment amount will be automatically updated once this process is complete. Please contact the BCRC or CRC at (855) 798-2627 if immediate assistance with this amount is required.*

**Rights and Responsibilities Letter Mail Date:** 06/10/2010

**Section 111 No-Fault Policy Limit Reported:** \$32456.76

**Conditional Payment Letter Amount:** \$496.06

**Conditional Payment Letter Mail Date:** 06/01/2011

**Conditional Payment Amount Update Requested:** 06/01/2011

**Demand Letter Mail Date:** 06/01/2011

**Demand Amount:** \$3,754.00

**Interest Rate:** 10%

**Conditional Payment Notice Amount:** \$500.00

**Conditional Payment Notice Mail Date:** 06/18/2011

**Conditional Payment Notice Response Due Date:** 07/31/2011

**Balance Amount:** \$1,234.56

**Balance as of Date:** 06/30/2011

**Remaining Principal Balance Amount:** \$1,234.56

## Slide notes

When a Case ID link is selected on the Case Listing page, the Case Information page will appear.

Again, the top-half of this page allows you to view information related to the case and the bottom-half of this page allows you to perform a specific action on the case.



## Slide 46 of 57 - Welcome! Page

**Welcome!**

Account: 30401 ABC Corporation 🟢

The Medicare Secondary Payer Recovery Portal provides a quick and efficient way to request case information and provide information to assist in resolving Medicare's recovery claim.

With the use of this portal, you may submit a valid authorization, request an update conditional payment amount, submit settlement information and dispute claims.

You may view the account activity by clicking the appropriate link under the Account Settings.

To request information regarding a case you have not already associated to your account, click the Request Case Access link below.

To see cases that you have previously associated to your account, click the Case Listing link below.

To submit a case, click the Report A Case link below.

To request an Open Debt Report, click the Open Debt Report link below.

To view/print "Paperless" letter notification e-mails and letters, click the Go Paperless Letter Notifications link below.

**Note:** You will not be able to use the links below until your Profile Report has been returned.

[Request Case Access](#)

[Case Listing](#)

[Report A Case](#)

[Open Debt Report](#)

[Go Paperless Letter Notifications](#)

[Previous](#)

**Account Settings**

- [Update Account Information](#)
- [Designee Maintenance](#)
- [View Account Activity](#)
- [Update Paperless E-mail Distribution](#)

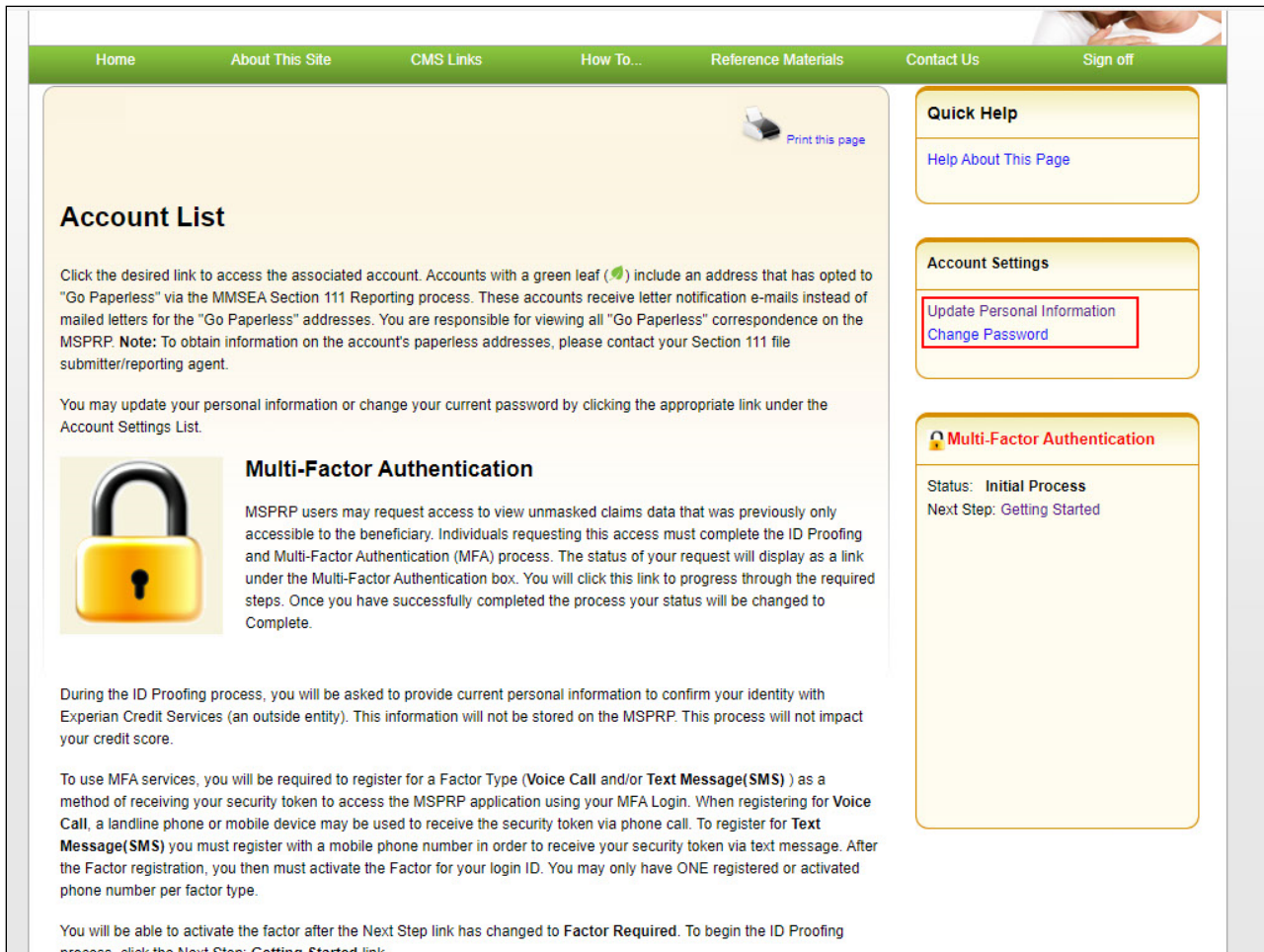
## Slide notes

From the Welcome! page, Account Designees can also access the View Account Activity link. This link is used to view which users performed which activity on this MSPRP account, such as when account registration was completed and who performed this step. Account Managers will be able to update account information and perform designee maintenance from their Welcome! page.

They can use the Update Account Information link to update the case processing mailing address. The Designee Maintenance link may be used to add and delete Account Designees.

Additionally, if an invited Account Designee has not yet registered, this link is used to update the Account Designee's personal information and to regenerate the invitation email (if necessary).

## Slide 47 of 57 - Account List Page

A screenshot of a web application interface. At the top is a green navigation bar with links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. The main content area has a light beige background. On the left, there's a section titled 'Account List' with a paragraph explaining account types and a 'Print this page' icon. Below this is a 'Multi-Factor Authentication' section featuring a yellow padlock icon and text about requesting access to unmasked claims data. On the right, there are three yellow-bordered boxes: 'Quick Help' with a 'Help About This Page' link, 'Account Settings' with 'Update Personal Information' and 'Change Password' links (the latter is highlighted with a red box), and 'Multi-Factor Authentication' showing a status of 'Initial Process' and a 'Next Step: Getting Started' link.

Home About This Site CMS Links How To... Reference Materials Contact Us Sign off

**Account List**

Click the desired link to access the associated account. Accounts with a green leaf (🌿) include an address that has opted to "Go Paperless" via the MMSEA Section 111 Reporting process. These accounts receive letter notification e-mails instead of mailed letters for the "Go Paperless" addresses. You are responsible for viewing all "Go Paperless" correspondence on the MSPRP. **Note:** To obtain information on the account's paperless addresses, please contact your Section 111 file submitter/reporting agent.

You may update your personal information or change your current password by clicking the appropriate link under the Account Settings List.

**Multi-Factor Authentication**

MSPRP users may request access to view unmasked claims data that was previously only accessible to the beneficiary. Individuals requesting this access must complete the ID Proofing and Multi-Factor Authentication (MFA) process. The status of your request will display as a link under the Multi-Factor Authentication box. You will click this link to progress through the required steps. Once you have successfully completed the process your status will be changed to Complete.

During the ID Proofing process, you will be asked to provide current personal information to confirm your identity with Experian Credit Services (an outside entity). This information will not be stored on the MSPRP. This process will not impact your credit score.

To use MFA services, you will be required to register for a Factor Type (Voice Call and/or Text Message(SMS) ) as a method of receiving your security token to access the MSPRP application using your MFA Login. When registering for Voice Call, a landline phone or mobile device may be used to receive the security token via phone call. To register for Text Message(SMS) you must register with a mobile phone number in order to receive your security token via text message. After the Factor registration, you then must activate the Factor for your login ID. You may only have ONE registered or activated phone number per factor type.

You will be able to activate the factor after the Next Step link has changed to Factor Required. To begin the ID Proofing process, click the Next Step: Getting Started link.

**Quick Help**

[Help About This Page](#)

**Account Settings**

[Update Personal Information](#)

[Change Password](#)

**Multi-Factor Authentication**

Status: Initial Process

Next Step: Getting Started

## Slide notes

Additional Account Settings are available from the Account Designee's and Account Manager's Home page, the Account List page. The Account List page contains the following links:

Update Personal Information - Used to update your contact information, such as e-mail address and phone number.

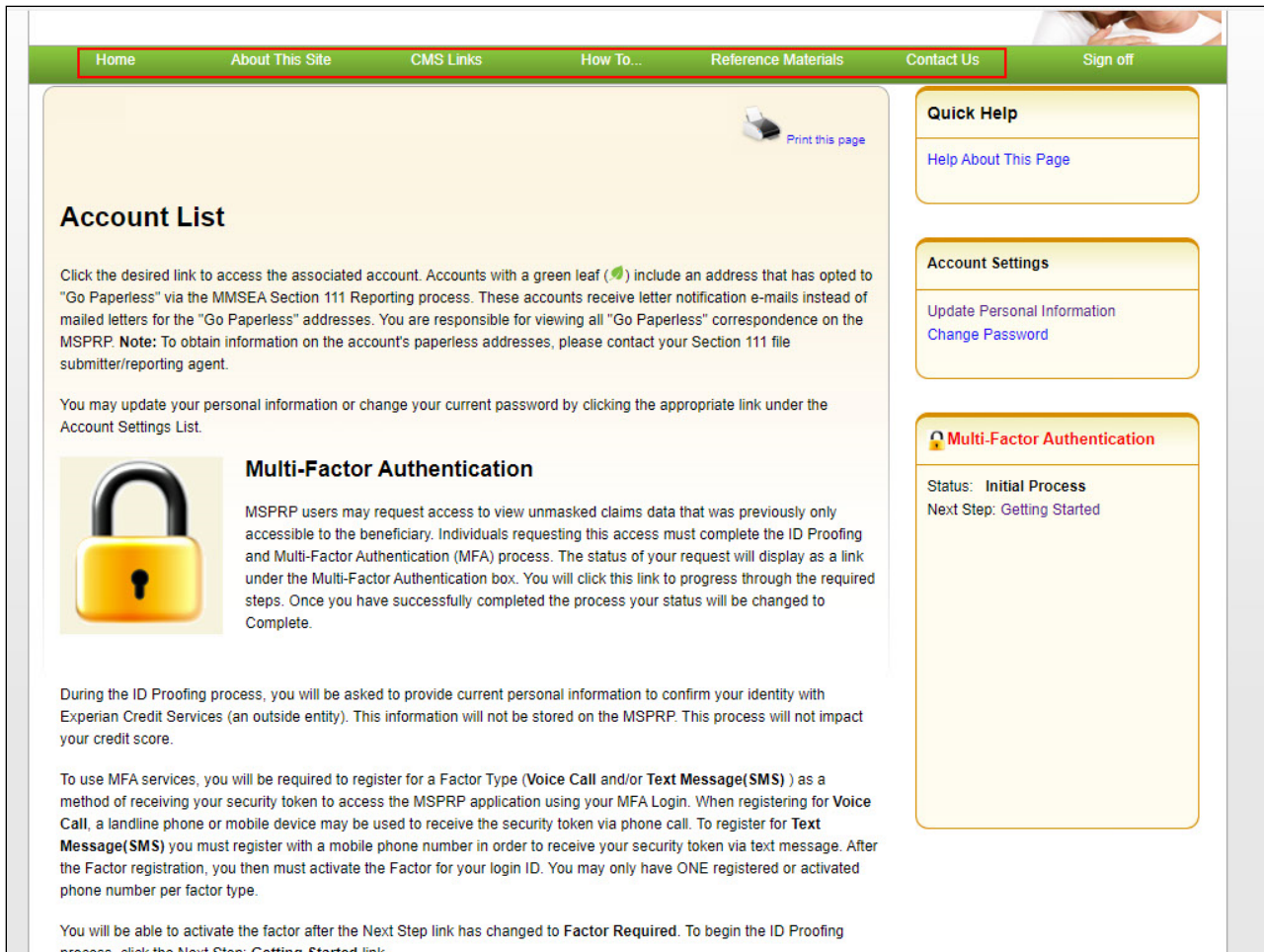
Change Password - Used to change your Password, whether it has expired, has been compromised, or you have been issued a temporary Password.

From this page, users can also request to use Multi-Factor Authentication (MFA) services to view unmasked claims data that was previously only accessible to the beneficiary.

Individuals requesting this access must complete the ID Proofing and MFA verification process. See the [Multi-Factor Authentication](#) Process CBT for more information.


Note: MSPRP users who are registered for both the MSPRP and CRCP systems can now initiate the ID proofing process on one application and then continue the process on the other. Once ID proofing is completed in one, users are automatically ID proofed in the other.

## Slide 48 of 57 - Navigation Menu



The screenshot displays the MSPRP application interface. At the top is a green navigation bar with links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. The 'Contact Us' link is highlighted with a red box. Below the navigation bar, the main content area is divided into two columns. The left column features a section titled 'Account List' with a printer icon and a 'Print this page' link. It contains text explaining how to access accounts, including a note about 'Go Paperless' addresses. Below this is a section for 'Multi-Factor Authentication' featuring a padlock icon and detailed instructions on the ID Proofing process, including the requirement to provide personal information to Experian Credit Services. The right column contains three yellow-bordered boxes: 'Quick Help' with a 'Help About This Page' link, 'Account Settings' with 'Update Personal Information' and 'Change Password' links, and 'Multi-Factor Authentication' showing a status of 'Initial Process' and a 'Next Step: Getting Started' link.

[Home](#) [About This Site](#) [CMS Links](#) [How To...](#) [Reference Materials](#) [Contact Us](#) [Sign off](#)


 [Print this page](#)

### Account List

Click the desired link to access the associated account. Accounts with a green leaf (🌿) include an address that has opted to "Go Paperless" via the MMSEA Section 111 Reporting process. These accounts receive letter notification e-mails instead of mailed letters for the "Go Paperless" addresses. You are responsible for viewing all "Go Paperless" correspondence on the MSPRP. **Note:** To obtain information on the account's paperless addresses, please contact your Section 111 file submitter/reporting agent.

You may update your personal information or change your current password by clicking the appropriate link under the Account Settings List.

### Multi-Factor Authentication



MSPRP users may request access to view unmasked claims data that was previously only accessible to the beneficiary. Individuals requesting this access must complete the ID Proofing and Multi-Factor Authentication (MFA) process. The status of your request will display as a link under the Multi-Factor Authentication box. You will click this link to progress through the required steps. Once you have successfully completed the process your status will be changed to Complete.

During the ID Proofing process, you will be asked to provide current personal information to confirm your identity with Experian Credit Services (an outside entity). This information will not be stored on the MSPRP. This process will not impact your credit score.

To use MFA services, you will be required to register for a Factor Type (Voice Call and/or Text Message(SMS) ) as a method of receiving your security token to access the MSPRP application using your MFA Login. When registering for Voice Call, a landline phone or mobile device may be used to receive the security token via phone call. To register for Text Message(SMS) you must register with a mobile phone number in order to receive your security token via text message. After the Factor registration, you then must activate the Factor for your login ID. You may only have ONE registered or activated phone number per factor type.

You will be able to activate the factor after the Next Step link has changed to Factor Required. To begin the ID Proofing process, click the Next Step: Getting Started link.

#### Quick Help

[Help About This Page](#)

#### Account Settings

[Update Personal Information](#)  
[Change Password](#)

#### Multi-Factor Authentication

Status: Initial Process  
Next Step: Getting Started

## Slide notes

The navigation menu at the top of the Home page (and each page in the portal) provides access to various parts of the MSPRP to facilitate using the application.

The following menu options are available: Home, About This Site; CMS Links; How To; Reference Materials; and Contact Us.

## Slide 49 of 57 - About This Site

**CMS**  
CENTERS FOR MEDICARE & MEDICAID SERVICES

## Medicare Secondary Payer Recovery Portal

Home **About This Site** CMS Links How To... Reference Materials Contact Us Sign off

**How To Use This Site**

[Print this page](#)

### Account List

Click the desired link to access the associated account. Accounts with a green leaf (🍃) include an address that has opted to "Go Paperless" via the MMSEA Section 111 Reporting process. These accounts receive letter notification e-mails instead of mailed letters for the "Go Paperless" addresses. You are responsible for viewing all "Go Paperless" correspondence on the MSPRP. **Note:** To obtain information on the account's paperless addresses, please contact your Section 111 file submitter/reporting agent.

You may update your personal information or change your current password by clicking the appropriate link under the Account Settings List.

### Multi-Factor Authentication

MSPRP users may request access to view unmasked claims data that was previously only accessible to the beneficiary. Individuals requesting this access must complete the ID Proofing and Multi-Factor Authentication (MFA) process. The status of your request will display as a link under the Multi-Factor Authentication box. You will click this link to progress through the required steps. Once you have successfully completed the process your status will be changed to Complete.

During the ID Proofing process, you will be asked to provide current personal information to confirm your identity with Experian Credit Services (an outside entity). This information will not be stored on the MSPRP. This process will not impact your credit score.

To use MFA services, you will be required to register for a Factor Type (Voice Call and/or Text Message(SMS) ) as a method of receiving your security token to access the MSPRP application using your MFA Login. When registering for Voice Call, a landline phone or mobile device may be used to receive the security token via phone call. To register for Text Message(SMS) you must register with a mobile phone number in order to receive your security token via text message. After

#### Quick Help

[Help About This Page](#)

#### Account Settings

[Update Personal Information](#)  
[Change Password](#)

#### Multi-Factor Authentication

Status: **Initial Process**  
Next Step: [Getting Started](#)

## Slide notes

About This Site navigates to the How to Use This Site link, offering general information on how to use the MSPRP application.



## Slide 50 of 57 - CMS Links

The screenshot shows the Medicare Secondary Payer Recovery Portal (MSPRP) interface. At the top, the CMS logo is on the left, and a photo of a smiling couple is on the right. The main header is "Medicare Secondary Payer Recovery Portal". Below this is a green navigation bar with links: Home, About This Site, CMS Links (highlighted), How To..., Reference Materials, Contact Us, and Sign off. Under "CMS Links", there are two sub-links: "CMS.gov" and "General Medicare" (highlighted). The main content area has a "Print this page" icon. The "Account List" section explains that users can click links to access accounts, with green leaf icons indicating "Go Paperless" status. It also mentions that users can update personal information or change passwords under the Account Settings List. The "Multi-Factor Authentication" section, accompanied by a padlock icon, describes the process for requesting access to unmasked claims data, requiring ID Proofing and MFA. It states that the status of the request will be displayed as a link under the MFA box. The right sidebar contains three sections: "Quick Help" with a "Help About This Page" link; "Account Settings" with links for "Update Personal Information" and "Change Password"; and "Multi-Factor Authentication" showing a status of "Initial Process" and a next step of "Getting Started".

**CMS**  
CENTERS FOR MEDICARE & MEDICAID SERVICES

## Medicare Secondary Payer Recovery Portal

Home About This Site **CMS Links** How To... Reference Materials Contact Us Sign off

[CMS.gov](#)  
[General Medicare](#)

[Print this page](#)

### Account List

Click the desired link to access the associated account. Accounts with a green leaf (🍃) include an address that has opted to "Go Paperless" via the MMSEA Section 111 Reporting process. These accounts receive letter notification e-mails instead of mailed letters for the "Go Paperless" addresses. You are responsible for viewing all "Go Paperless" correspondence on the MSPRP. **Note:** To obtain information on the account's paperless addresses, please contact your Section 111 file submitter/reporting agent.

You may update your personal information or change your current password by clicking the appropriate link under the Account Settings List.

### Multi-Factor Authentication

MSPRP users may request access to view unmasked claims data that was previously only accessible to the beneficiary. Individuals requesting this access must complete the ID Proofing and Multi-Factor Authentication (MFA) process. The status of your request will display as a link under the Multi-Factor Authentication box. You will click this link to progress through the required steps. Once you have successfully completed the process your status will be changed to Complete.

During the ID Proofing process, you will be asked to provide current personal information to confirm your identity with Experian Credit Services (an outside entity). This information will not be stored on the MSPRP. This process will not impact your credit score.

To use MFA services, you will be required to register for a Factor Type (Voice Call and/or Text Message(SMS) ) as a method of receiving your security token to access the MSPRP application using your MFA Login. When registering for Voice Call, a landline phone or mobile device may be used to receive the security token via phone call. To register for Text Message(SMS) you must register with a mobile phone number in order to receive your security token via text message. After

#### Quick Help

[Help About This Page](#)

#### Account Settings

[Update Personal Information](#)  
[Change Password](#)

#### Multi-Factor Authentication

Status: **Initial Process**  
Next Step: [Getting Started](#)

## Slide notes

CMS Links provides links to other Centers for Medicare & Medicaid Services (CMS) Medicare and Medicare Secondary Payer website and General Medicare.

## Slide 51 of 57 - How To...

**CMS**  
CENTERS FOR MEDICARE & MEDICAID SERVICES

## Medicare Secondary Payer Recovery Portal

Home About This Site CMS Links **How To...** Reference Materials Contact Us Sign off

**How To...**

- How to Get Started
- How To Request Your Login ID
- How To Request Your Password
- How To Change Your Password
- How To Reset Your PIN
- How To Change Your Authorized Representative
- How To Change Your Account Manager
- How To Invite Account Designees

### Account List

Click the desired link to access the associated account. Accounts with a green leaf (🍃) include an address that has opted to "Go Paperless" via the MMSEA Section 111 Reporting process. These accounts receive letter notification e-mails instead of mailed letters for the "Go Paperless" addresses. You are responsible for viewing all "Go Paperless" correspondence on the MSPRP. **Note:** To obtain information on the account's paperless addresses, please contact your Section 111 file submitter/reporting agent.

You may update your personal information or change your current password by clicking the appropriate link under the Account Settings List.

### Multi-Factor Authentication

MSPRP users may request access to view unmasked claims data that was previously only accessible to the beneficiary. Individuals requesting this access must complete the ID Proofing and Multi-Factor Authentication (MFA) process. The status of your request will display as a link under the Multi-Factor Authentication box. You will click this link to progress through the required steps. Once you have successfully completed the process your status will be changed to Complete.

During the ID Proofing process, you will be asked to provide current personal information to confirm your identity with Experian Credit Services (an outside entity). This information will not be stored on the MSPRP. This process will not impact your credit score.

To use MFA services, you will be required to register for a Factor Type (Voice Call and/or Text Message(SMS) ) as a method of receiving your security token to access the MSPRP application using your MFA Login. When registering for Voice Call, a landline phone or mobile device may be used to receive the security token via phone call. To register for Text Message(SMS) you must register with a mobile phone number in order to receive your security token via text message. After

**Quick Help**

[Help About This Page](#)

**Account Settings**

[Update Personal Information](#)  
[Change Password](#)

**Multi-Factor Authentication**

Status: **Initial Process**  
Next Step: **Getting Started**

## Slide notes

The How To section provides detailed information on performing the following functions: 'Getting Started'; 'Requesting your Login ID'; 'Requesting your Password'; 'Changing your Password'; 'Resetting your PIN';

'Changing your Authorized Representative'; 'Changing Your Account Manager; and 'Inviting Account Designees'.

## Slide 52 of 57 - Reference Materials

**CMS**  
CENTERS FOR MEDICARE & MEDICAID SERVICES

## Medicare Secondary Payer Recovery Portal

Home About This Site CMS Links How To... **Reference Materials** Contact Us Sign off

**Reference Materials**  
MSPRP Site User Manual  
About Remote Identity Proofing

Print this page

### Account List

Click the desired link to access the associated account. Accounts with a green leaf (🍃) include an address that has opted to "Go Paperless" via the MMSEA Section 111 Reporting process. These accounts receive letter notification e-mails instead of mailed letters for the "Go Paperless" addresses. You are responsible for viewing all "Go Paperless" correspondence on the MSPRP. **Note:** To obtain information on the account's paperless addresses, please contact your Section 111 file submitter/reporting agent.

You may update your personal information or change your current password by clicking the appropriate link under the Account Settings List.

### Multi-Factor Authentication

MSPRP users may request access to view unmasked claims data that was previously only accessible to the beneficiary. Individuals requesting this access must complete the ID Proofing and Multi-Factor Authentication (MFA) process. The status of your request will display as a link under the Multi-Factor Authentication box. You will click this link to progress through the required steps. Once you have successfully completed the process your status will be changed to Complete.

During the ID Proofing process, you will be asked to provide current personal information to confirm your identity with Experian Credit Services (an outside entity). This information will not be stored on the MSPRP. This process will not impact your credit score.

To use MFA services, you will be required to register for a Factor Type (Voice Call and/or Text Message(SMS)) as a method of receiving your security token to access the MSPRP application using your MFA Login. When registering for Voice Call, a landline phone or mobile device may be used to receive the security token via phone call. To register for Text Message(SMS) you must register with a mobile phone number in order to receive your security token via text message. After

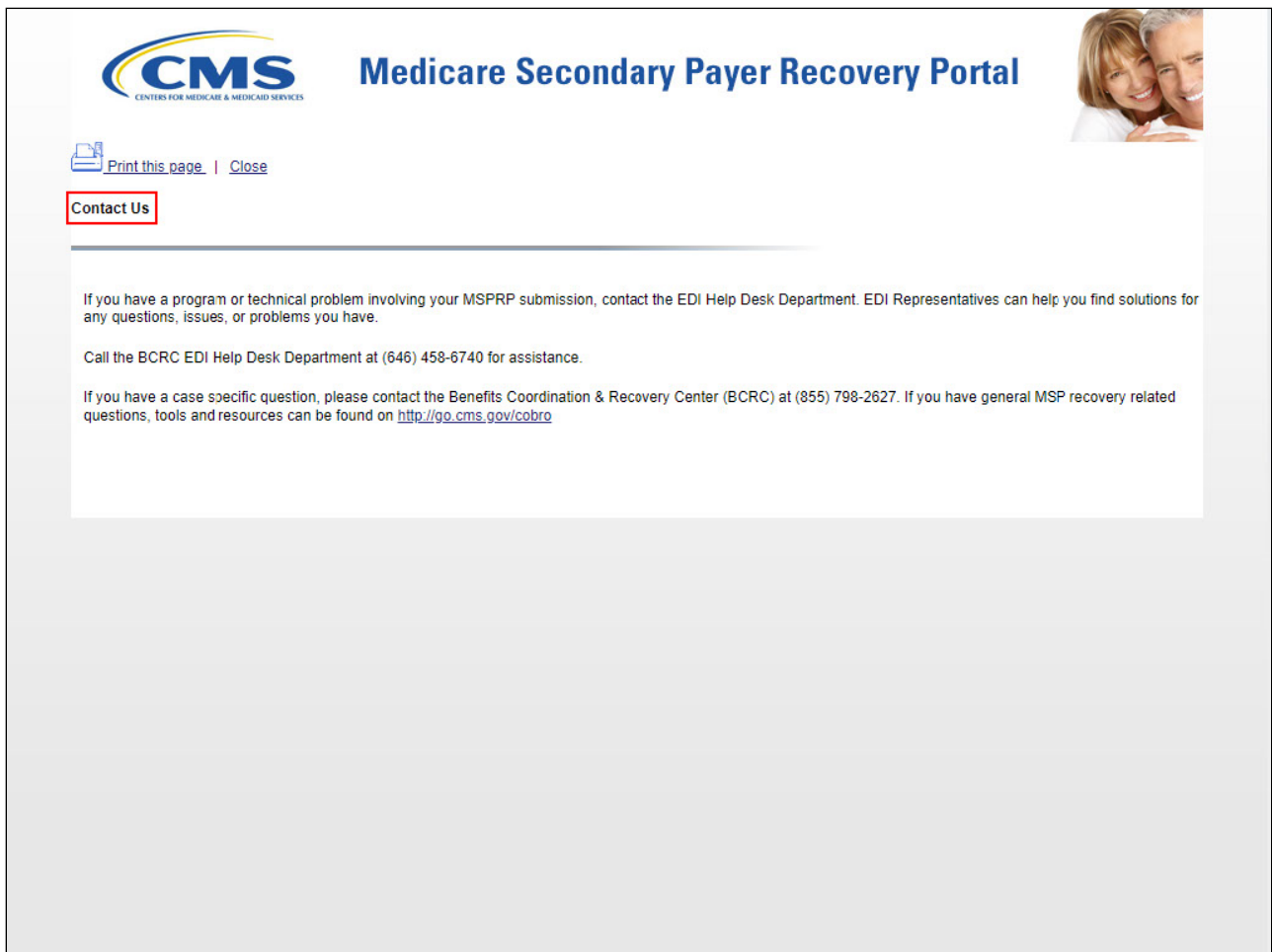
**Help**  
Help About This Page

**Account Settings**  
Update Personal Information  
Change Password

**Multi-Factor Authentication**  
Status: Initial Process  
Next Step: Getting Started

## Slide notes

Reference Materials provides a link to the MSPRP User Manual and About Remote Identity Proofing.

**Slide 53 of 57 - Contact Us**

The screenshot shows the 'Contact Us' page of the Medicare Secondary Payer Recovery Portal. At the top left is the CMS logo (Centers for Medicare & Medicaid Services). To its right is the page title 'Medicare Secondary Payer Recovery Portal'. In the top right corner is a small photo of a smiling couple. Below the CMS logo are links for 'Print this page' and 'Close'. The 'Contact Us' link is highlighted with a red box. The main content area contains the following text:

If you have a program or technical problem involving your MSPRP submission, contact the EDI Help Desk Department. EDI Representatives can help you find solutions for any questions, issues, or problems you have.

Call the BCRC EDI Help Desk Department at (646) 458-6740 for assistance.

If you have a case specific question, please contact the Benefits Coordination & Recovery Center (BCRC) at (855) 798-2627. If you have general MSP recovery related questions, tools and resources can be found on <http://go.cms.gov/cobro>

**Slide notes**

Contact Us displays information on where to go for assistance with program or technical problems, case-specific questions, or MSP recovery-related questions.

You can select the Help About This Page link in the Quick Help box to obtain access to online help documentation for each page in the portal.

To log off, select Sign Off.



## Slide 54 of 57- Sign Off Successful



The screenshot displays the Medicare Secondary Payer Recovery Portal (MSPRP) after a successful sign-off. The page features the CMS logo and the portal title at the top. A green navigation bar contains links for Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. The main content area has a yellow background with the heading 'Sign off successful'. It informs the user that they have successfully signed off and provides details about the portal's purpose. It also offers a link to log back into the MSPRP system and instructions for Medicare beneficiaries to log in via the Medicare.gov website. A 'Quick Help' sidebar on the right includes a link to 'Help About This Page'. The footer contains links to the CMS/HHS Vulnerability Disclosure Policy, Privacy Policy, User Agreement, and Adobe Reader.

**CMS**  
CENTERS FOR MEDICARE & MEDICAID SERVICES

## Medicare Secondary Payer Recovery Portal

Home About This Site CMS Links How To... Reference Materials Contact Us Sign off

### Sign off successful

You have successfully signed off the Medicare Secondary Payer Recovery Portal system.

The Medicare Secondary Payer Recovery Portal provides a quick and efficient way to request case information and provide information to assist in resolving Medicare's recovery claim.

With the use of this portal, you may submit a valid authorization, request an update conditional payment amount, submit settlement information and dispute claims.

If you would like to login to the MSPRP system again, please click the link below:

- [Login to MSPRP](#)
- If you are a Medicare Beneficiary and would like to use the MSPRP to request case information, please login to your Medicare account by visiting the Medicare.gov website at <https://medicare.gov/>.

#### Quick Help

[Help About This Page](#)

CMS/HHS Vulnerability Disclosure Policy | Privacy Policy | User Agreement | Adobe Reader


## Slide notes

The Sign off successful page will appear.

**Slide 55 of 57 - Course Summary**



## Course Summary

- Navigation guidelines
- Search for a case
- Case Information page



**Slide notes**

This course provided an overview of the MSPRP including general navigation guidelines. It also included information on how to search for a case and the Case Information page.

**Slide 56 of 57 - Conclusion**

You have completed the MSPRP Application Overview course.  
Information in this course can be referenced by using the  
MSPRP User Manual found at the following link:  
<https://www.cob.cms.hhs.gov/MSPRP/>

For general information on Medicare Secondary Payer Recovery,  
go to this URL:  
<http://go.cms.gov/cobro>

**Slide notes**

You have completed the MSPRP Application Overview course. Information in this course can be referenced by using the MSPRP User Manual found at the following link: [CMS MSPRP Website](#).

For general information on Medicare Secondary Payer Recovery, go to this URL: [CMS COB&R Overview](#)

**Slide 57 of 57 - MSPRP Training Survey**



If you have any questions or feedback on this material,  
please go the following URL:  
<https://www.surveymonkey.com/s/MSPRPTraining>.



**Slide notes**

If you have any questions or feedback on this material, please go the following URL: [Training Survey](#)