## **Representative Registration Introduction**

## Slide 1 of 25 - Representative Registration Introduction



## **Slide notes**

Welcome to the Medicare Secondary Payer Recovery Portal (MSPRP) Representative Registration course.

Note: This course is intended for those entities who will register for a representative account. A representative account type indicates that the entity does not have an Employer Identification Number (EIN)/Tax Identification Number (TIN) but may have involvement in multiple cases. Representative accounts may have up to five Account Designees.

## Slide 2 of 25 - 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: https://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: <u>MSPRP Website</u>.

## Slide 3 of 25 - Course Overview



## Slide notes

This course will provide instruction on how to complete a New Registration on the MSPRP for a representative account type and the steps that must be followed once the registration has been submitted.

## Slide 4 of 25 - Getting Started



## Slide notes

Users must be authorized to access the MSPRP. Before a new user can become authorized, the representative entity must complete the registration process which involves the following steps:

- New Registration and
- Account Setup.

Note: The focus of this CBT is on the New Registration process. For more information on Account Setup, please see the <u>Representative Account Setup</u> CBT.

## Slide 5 of 25 - Getting Started



## Slide notes

To begin the New Registration process, go to the following MSPRP URL: MSPRP Website.

## Slide 6 of 25 - 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 a system, which includes: (1) this computer network, (2) all computers connected to this network, and (3) all devices and storage media attache computer on this network. This system is provided for Government-authorized use only.	ccessing this Government d to this network or to a
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 monitor	ing.
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. Therefore, you have no reasonable expectation of privacy regarding any communication or data transiting or stored on this system. At any tim Government purpose, the Government may monitor, intercept, and search and seize any communication or data transiting or stored on this sy	s or to conduct HHS business. e, and for any lawful stem.
*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.I collected will be used to identify and recover past conditional and mistaken Medicare primary payments and to prevent Medicare from making future for those Medicare Secondary Payer situations that continue to exist. The Privacy Act (5 U.S.C. 552a(b)), as amended, prohibits the dis maintained by the Centers for Medicare & Medicaid Services (CMS) in a system of records to third parties, unless the beneficiary provides a w consent/authorization for a party to receive such information. Where the beneficiary provides written consent/proof of representation, CMS will access requisite information.	R. 411.24). The information mistaken payments in the closure of information vritten request or explicit written permit authorized parties to
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 unders Medicare & Medicaid Services information at http://cms.gov/Medicare/Coordination-of-Benefits-and-Recovery/Coordination-of-Benefits-and-Re Secondary-Payer/Medicare-Secondary-Payer.html.	tand all of the Centers for ecovery-Overview/Medicare-
LOG OFF IMMEDIATELY if you do not agree to the conditions stated in this warning.	
I Accept	
Decline	

## Slide notes

Each time a user visits the MSPRP website, the Login Warning page will appear. This page provides information about MSPRP security measures including access, penalty, and privacy laws.

This page can be printed from the MSPRP by clicking the "Print this page" link on the website.

## Slide 7 of 25 - Login Warning Page

Login Warning	Print this page
INAUTHORIZED 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 system, which includes: (1) this computer network, (2) all computers connected to this network, and (3) all devices and storag computer on this network. This system is provided for Government-authorized use only.	al guidance for accessing this Government e media attached to this network or to a
Jnauthorized or improper use of this system is prohibited and may result in disciplinary action, as well as civil and criminal pe	nalties.
Personal use of social media and networking sites on this system is limited as to not interfere with official work duties and is su	ubject 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 Therefore, you have no reasonable expectation of privacy regarding any communication or data transiting or stored on this sy Government purpose, the Government may monitor, intercept, and search and seize any communication or data transiting or	for official duties or to conduct HHS business. stem. At any time, and for any lawful 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)) (s collected will be used to identify and recover past conditional and mistaken Medicare primary payments and to prevent Medica uture for those Medicare Secondary Payer situations that continue to exist. The Privacy Act (5 U.S.C. 552a(b)), as amended, naintained by the Centers for Medicare & Medicaid Services (CMS) in a system of records to third parties, unless the benefic consent/authorization for a party to receive such information. Where the beneficiary provides written consent/proof of represen- access requisite information.	ee also 42, C.F.R. 411.24). The information are from making mistaken payments in the prohibits the disclosure of information iary provides a written request or explicit written ntation, CMS will permit authorized parties to
Attestation of Information	
The information provided is complete, truthful, accurate, and meets all requirements set forth to use this process; and, I have Aedicare & Medicaid Services information at http://cms.gov/Medicare/Coordination-of-Benefits-and-Recovery/Coordination-of Secondary-Payer/Medicare-Secondary-Payer.html.	read and understand all of the Centers for -Benefits-and-Recovery-Overview/Medicare-
.OG OFF IMMEDIATELY if you do not agree to the conditions stated in this warning.	
I Accept	

## Slide notes

Scroll to the bottom of this page to review the entire statement. Users must agree to the terms of this warning each time they access the MSPRP.

Click the I Accept link at the bottom of the page to continue with the New Registration step.

Slide 8 of 25 - Welcome to the MSPRP/Login Page



## **Slide notes**

Once the I Accept link is clicked, the MSPRP Login page will appear. Click the New Registration button to continue.

## Slide 9 of 25 - Select Account Type Page

			HOW 10	Reference Materials	Contact Us	Sign off
Select Ac	count lype				Help About This	Page
lease select the ty	pe of account for which y	ou are registering:				
Corporate account	t type indicates that the e requests.	ntity has an Employer Iden	tification Number (EIN	) and will be regularly		
Representative						
A representative ac eqularly submitting	count type indicates that MSPRP requests.	the entity does not have an	Employer Identification	n Number (EIN) but will be		
Continue	Cancel M					
Continue						

## Slide notes

The Select Account Type page will appear. Select the Representative radio button and click Continue.

Note: If at any point during the registration process the user wishes to stop, they should click Cancel.

Once clicked, information entered on the current page and any previous pages will NOT be saved and the user will be returned to the MSPRP Login page.

JILLE IN OF 23 - REPRESENTATIVE INFORMATION Page	Slide	10 of	- 25	Repre	esentative	Information	tion	Page
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Representativ	e Informat	ion		Quick Help	
An asterisk (*) indicates a r	equired field.			Help About This	Page
*First Name			ti aat Namai 🗍		
*Social Security Number:			Last Name.		
*E-Mail Address:					
*Re-enter E-Mail Address					
*Phone:		- ext.			
*Fax:					
Mailing Address					
*Address Line 1:	[				
Address Line 2:					
*City:					
*State:	Please Select	~			
*Zip Code:					

## Slide notes

The Representative Information page will appear. Information for the representative account that will be submitting MSPRP requests must be entered on this page.

All fields denoted with a red asterisk are required.

The Social Security Number must be unique in the MSPRP. It cannot be registered for more than one account.

Additionally, it cannot be the same as the Social Security Number of the associated Beneficiary (i.e., a user cannot register on behalf of themselves).

The email address submitted on this page will be used to send the post-registration email that includes the Personal Identification Number (PIN).

Once all required information has been entered, you must click Continue.

## Slide 11 of 25 - Validation



## Slide notes

The system will validate each field on each registration page for accuracy and completeness.

If errors are found, the system will show applicable error messages on the screen indicating what error condition(s) were found.

When errors are discovered, the cursor will be placed on the first field that generates an error condition.

This will either be a required field that is missing data or a field that contains a data error.

The user must correct the error before the system will allow the user to proceed to the next page. Once the data has been corrected, the system will revalidate all data that has been entered.



Home About	This Site CM	S Links	How Io	Reference Materi	als Con	tact Us	Sign off
Beneficiary Infor	mation					Quick Help	
An asterisk (*) indicates a requir	ed field.				+	lelp About This Pa	ge
*Beneficiary Last Name:	Ť.		*First Initial:				
*Medicare ID(MBI):	-	] 0	R				
Beneficiary Social Security N (SSN):	umber	[	(SSN is required	if Medicare ID is not pr	ovided)		
Beneficiary Date of Birth:			(MM/DD/CCY)	0			
Beneficiary Gender:	- Select - 🗸	]					
Con	tinue 🔉 Cance	1 🛛					

## Slide notes

After successfully completing the Representative Information page, the Beneficiary Information page will appear.

Enter information for a beneficiary associated with a case(s) that will be accessed using this account. All fields are required.

Note: The Social Security Number (SSN) is required if the Medicare ID is not provided.

After entering the beneficiary information, click Continue to proceed.

The MSPRP will attempt to determine if the entered information can be matched to a Medicare beneficiary. The system will find an exact Social Security match.

Then at least three out of four of the following fields must be matched exactly:

- First six characters of the Last Name,
- First Initial,
- Date of Birth, and
- Gender.

If a match is not found, the user will receive an error message that states, "Data does not match what is on our records for the Beneficiary" and registration may not continue.

## Slide 13 of 25 - Registration Summary Page

Home About This Site	CMS Links	How To	Reference Materials	Contact Us Sigr	n off
Registration Summary			<b>A</b>	Quick Help	
Please review your registration information. If yo with the information, click the Continue button to Please note: all data will be lost. Click the Previo	u need to change the infor submit the registration. Cl us button to return to the p	rmation, click the Ec lick the Cancel butto previous screen. Pri	Print this page lit button. If you are satisfied on to cancel the process. nt this page for your records.	Help About This Page	
Account Type: Representative	it				
Representative Information	Beneficiary Ir	formation	dit		
First Name: Jane MI: A	Last Name:	Doe First Initial:	J		
Last Name: Smith	Medicare II	D: 987654321A			
SSN: 999-99-9999	SSN:				
E-Mail Address: jsmith@abcassociates.com	Date of Birt	th: July 20, 1940			
Phone: 410- 832- 8350 ext. 9877	Gender: Ma	ale			
Fax: 410- 832- 8999					
Representative Mailing Address:					
Address Line 1: 200 Test Avenue					
Address Line 2: Suite 2-B					
City: Towson					
State: Maryland					
Zin Code: 21204- 3276					

## Slide notes

As long as the MSPRP was able to validate the beneficiary information (i.e., the entered information was matched to a Medicare beneficiary), the Registration Summary page will appear.

Users can print this page by clicking the Print this page link.

This page lists all the information that was previously entered and provides users with the opportunity to make changes. All information should be reviewed and verified before continuing.

Changes can be made to Account Type, Representative Information, or Beneficiary Information. To make any corrections, click the Edit button next to the applicable section. The system will show that information entry page.



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iired field.				Help About This F	age
·		Tingt Initials			
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Number	].	(SSN is required	f Medicare ID is not provided)		
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## Slide notes

Add, change, or delete any of the information. Once all corrections have been made, you must click Continue until they have navigated back to the Registration Summary page.

## Slide 15 of 25 - Registration Summary Page

Home About this Site	CMS Links	How To	Reference Materials	Contact Us	Sign off
Registration Summary			<u></u>	Quick Hel	p
Please review your registration information. If you with the information, click the Continue button to Please note: all data will be lost. Click the Previou	need to change the in submit the registration. Is button to return to the	ormation, click the E Click the Cancel butt a previous screen. Pr	Print this page dit button. If you are satisfied on to cancel the process. int this page for your records.	Help About 1	This Page
Account Type: Representative	t				
Representative Information Edit	Beneficiary	Information	Edit		
First Name: Jane MI: A	Last Nam	e: Doe First Initial:			
Last Name: Smith	Medicare	ID: 987654321A			
SSN: 999-99-9999	SSN:				
E-Mail Address: jsmith@abcassociates.com	Date of B	irth: July 20, 1940			
Phone: 410- 832- 8350 ext. 9877	Gender: I	Vale			
Fax: 410- 832- 8999					
Representative Mailing Address:					
Address Line 1: 200 Test Avenue					
Address Line 2: Suite 2-B					
City: Towson					
State: Maryland					
Zin Code: 21204 2276					

## Slide notes

When the Registration information has been verified, click Continue to submit the registration.

Slide 16 of 25 -	<b>MSPRP</b> Registration	<b>Completed Successfully</b>	y – Thank you Page
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	tration Completed Succes	sfully Thank You		Ω.
MOFRF Negi	tration completed Succes	Siully. Malik Tou		Print this page
You have successfully con print this page for your rea	pleted the initial registration for the Medicare Seco ords.	ndary Payer Recovery Portal Web sit	e Your assigned Account ID is: 123	45. It is important to
Next Steps				
The information captured Account Representative c	luring initial registration will be vetted to verify the R optured during initial registration, with your PIN only	epresentative is an appropriate subm It will not contain the Account ID.	itter. After successful vetting, an em	ail will be sent to the
Account Setup				
Upon receipt of the email Portal web site to complet	d PIN, the Account Representative will be instructed the account setup. The Account Manager will need the account setup.	d to have the appropriate Account Ma d to enter the Account ID and PIN on	nager return to the Medicare Secon the Account Setup page to begin se	dary Payer Recovery tup.
If your AR does not receiv	the PIN email within 7 business days, please cont	act an EDI Representative by phone	at: (646) 458-6740 or e-mail at: COB	3VA@ bcrcgdit.com.
Exit 🔉				
	CMS/HHS Vulnerability Disclosure P	olicy   Privacy Policy   User Agreeme	nt   Adobe Reader	

## Slide notes

The MSPRP Registration Completed Successfully - Thank You page displays confirmation that the initial registration has been successfully completed. The assigned Account ID will appear on the Thank You page and will need to be recorded by the representative to provide in the Account Setup - Step 2 process.

## Slide 17 of 25 - Next Steps



## Slide notes

The information submitted in the New Registration step will be vetted by the Electronic Data Interchange (EDI) Department to ensure it is valid and complete.

Within seven business days, an email will be sent to the email address submitted on the Representative Information page during the New Registration.

This email will include the PIN and instructions for the next step in the registration process - Account Setup.

If this email is not received within seven business days, contact an EDI Representative by phone at (646) 458-6740 or email at COBVA@bcrcgdit.com.

## Slide 18 of 25 - Next Steps



## Slide notes

The Account ID and PIN must be given to the Account Manager for the representative account to use to complete the Account Setup.

Note: The person who performed the initial registration can become the Account Manager for the account.





## Account Manager (only) actions

- Complete Account Setup
- Administer the MSPRP account
- Invite other users (Account Designees)
- Have the option to assign the Account Manager role to another person
- Access to view Open Debt Reports

## Account Manager and Account Designee actions (as applicable to the case)

- Submit authorization documentation
- · Request conditional payment letter
- Dispute claims
- Submitting and verifying case settlement information
- Initiate the demand letter
- Make an electronic payment

## Slide notes

In addition to completing Account Setup, the Account Manager is responsible for administering the account on the MSPRP and inviting others to assist as Account Designees. Account Managers also have access to view Open Debt reports.

Both the Account Manager and the Account Designee can perform case recovery tasks, such as:

- submitting authorization documentation,
- requesting a conditional payment letter,
- disputing claims,
- submitting and verifying case settlement information,
- initiating the demand letter, and
- make an electronic payment.

Note: Only those actions that are applicable to the case will be available.

Account representatives can register as an Account Representative for other MSPRP corporate accounts or register as an Account Manager or Account Designee for other MSPRP accounts.

## Slide 20 of 25 - Account Setup



## Slide notes

The Account Manager must return to the MSPRP to complete the Account Setup. The Account Manager will need to enter the Account ID and PIN on the main page to begin setup.

For more information on the Account Setup process, please see the <u>Representative Account Setup</u> CBT.

## Slide 21 of 25 - Profile Report

Pro	file Re	eport Medicare Se	econda	ry Payer Re	covery Por	tal	
			Rec	overy Portal		1 Contractor	
Account ID-31304			Pro	nie Report		Bater Month Bate Year	
EDI Cantact Inform	alon.			No.		and the second second	
Email:	AAAABAAAA			Phone			
Representative:							
fileres: Automati	AAAA AAAA			Pharm	*****		
	2000	.0.0					
Email:	AAAA@AAA.AAA						
Account Banagar				12	and a start		
Accient	AAAA			Phase	Annual Honore		
Carl	MANA	.A.A	880.00				
Cross.	anagencia						
Account ID:31304 EDI Centect Marrie	4 500		Acco	unt Type Representative		Date Month Date Year	
Ernal	-			Phane MM	* *****		
BAFEGUARDNAS & L the undersigned A betef, and I authors processing. Proper 1369; Section 1874 extablish appropriat authorspet represen- with the security rec- request access to 11 personnel shall be a applicable Federal L	EIMITING ACCESS TO DATA count Manager for the MSPR COSts to work the internation and and the social Security Act ( a doministrative Activical pro- tative of the COS's shall be gra- paritors of the COS's shall be gra- paritors their efficial clusters in a devised of (1) the confidential rule area.	Imposentative account defined a Lagree to restative and implementations and precedence lagree of policies and precedence lagree of policies and precedence lagree of the policies of the pre- text of the policies of the pre- entation any information exchange eccentration any information exchange eccentration any information exchange eccentration of the information (2) subgradies that in the information (2) subgradies.	blows, ce-tily that the ext proper calegous to ensure that the c EQE() of the Secal a protect the coeffic e Mechane data as d during the M201 M of the information ands registed to pro-	to information contained in the fit against unsufficient use a bits accessed with be used of Security Act (A2 US C. 1 100 entails) of the data set to pre- k logither the parpose of maps knowney poscess shall be wait (2) encound to authorized law each the information, and (3) th	Registration is the accurate disclosure of the data bits (in accedance with Sector ((b)) and the Finadov Act of the environment of the finadov act of the final security antigeneets a cited to CHS COBEC and MS enforcement investigations, or administrative cief and often	and Convolves in the test of my knowledge properties of MSPHP proposality inview at 1146 of the Social Security And 120103 for MR, as mended to 0.5 C. 7 Social User exits provided by the CMS for a speech for a content of white the same is in compa SSC presentation and other addresses to 19 invitant to my resembling process, as penalties for maccompliance contained	pi and and C. 7 ex stall Marca Hamch
Bignature of Account	t Manager	1					

## Slide notes

Once the Account Manager has completed the account setup, an email notification will be sent to them.

This notification will include a Profile Report that contains information regarding the representative for the account and associated contact information as well as a Data Use Agreement.

It may take up to 10 business days to receive the Profile Report. A sample Profile Report is shown on the slide.

## Slide 22 of 25 - Profile Report



## Slide notes

The Account Manager must review the Profile Report for accuracy.

If information on the Profile Report is inaccurate or requires modifications, please contact an EDI Representative by phone at (646) 458-6740 or email at COBVA@bcrcgdit.com.

The Account Manager will have 60 business days to review, sign, and return the Profile Report to the Medicare - EDI Department. When returning the signed Profile Report via email, put 'MSPRP Profile Report' in the subject line.

If a signed Profile Report is not received within that timeframe, the account will be automatically deleted on the 60th business day.

If the account is deleted, the registration process must be started from the beginning.

## Slide 23 of 25 - Course Summary



## Slide notes

This course provided instruction on how to complete a New Registration on the MSPRP for a representative account type and the steps that must be followed once the registration has been submitted.

## Slide 24 of 25 - Conclusion



## Slide notes

You have completed the Representative Registration course. Information in this course can be referenced by using the MSPRP User Manual found at the following link: <u>MSPRP Website</u>.

For general information on Medicare Secondary Payer Recovery, go to this URL: <u>CMS COB&R Overview</u>.

## Slide 25 of 25 - MSPRP Training Survey



## Slide notes

If you have any questions or feedback on this material, please go the following URL: <u>MSPRP Training</u> <u>Survey</u>.