MMSEA Section 111
Medicare Secondary Payer Mandatory Reporting

Liability Insurance (Including Self-Insurance), No-Fault Insurance, and Workers' Compensation USER GUIDE

Chapter II: REGISTRATION PROCEDURES

Version 4.3

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Revision History

Date	Version	Reason for Changes
November 17, 2008	N/A	First publication of Interim Record Layout Information
December 5, 2008	N/A	Second publication of Interim Record Layout Information
March 16, 2009	1.0	Initial Publication of User Guide
July 31, 2009	2.0	Changes listed in Section 1 including the reporting of multiple TPOC Amounts, an updated Claim Input File Auxiliary Record, updated Claim Response File layout and addition of reporting thresholds.
February 22, 2010	3.0	Changes listed in Section 1.
July 12, 2010	3.1	Changes listed in Section 1.
August 17, 2011	3.2	Changes listed in Section 1.
December 16, 2011	3.3	Changes listed in Section 1.
July 3, 2012	3.4	NGHP User Guide was split into 5 Chapters: Introduction & Overview, Registration Procedures, Policy Guidance, Technical Information, and Appendices. Specific changes are listed in Section 1 of each chapter.
April 22, 2013	3.5	Changes listed in Section 1.
May 6, 2013	3.6	Corrections made to Claimant Information Requirements. See Section 1
October 7, 2013	4.0	• Change Request (CR) #10701: Implementation of the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10) for diagnosis coding. • Outdated hyperlinks have been replaced. • The definition for Disposition Code 50 has been clarified. • The registration process for computer based training (CBT) has been modified
February 3, 2014 (January Release B)	4.1	Change Request (CR) #10770: Prevent certain diagnosis codes that are unrelated to the incident from applying to no-fault records found in the Common Working File (CWF). Branding changes for the Benefits Coordination & Recovery Center (BCRC).
March 3, 2014	4.2	Edits to reflect change in liability insurance (including self-insurance) TPOC reporting threshold change in Chapters III & IV. See Chapter 1.

Date	Version	Reason for Change
October 6, 2014	4.3	Change Request (CR) 12120: When implemented, RREs will not be allowed to report ICD-10 “Z” codes. These are now excluded from Section 111 claim reports (Chapters IV & V). CR 12178: Missing excluded ICD-10 codes added to Appendix J, Chapter V. CR 12373: Updated to reflect the delay of ICD-10 diagnosis code implementation from October 2014 to 2015 (Chapters IV & V). CR 12590: For ICD-10 changes, field numbering/layout discrepancies were corrected in Table A-2 (Claim Input File Supplementary Information), Chapter V. CR 12170: Two threshold error checks for the Claim Input File were implemented in July 2011. These errors are related to the dollar values reported for both the cumulative TPOC amounts and the No-Fault Insurance Limit (Chapter IV). CR 12593: Reviewed to ensure that spouse references are gender-neutral according to DOMA. CR 12636: The Appendix L alerts table has been removed and replaced with links to the Section 111 web site, which posts all current alerts and stores all archived alerts (Chapter V). CR 12829: Updated CS field numbers in Table F-4 (Claim Response File Error Code Resolution Table) to accommodate ICD-10 revisions (Chapter V). See Chapter 1.

Table of Contents

CHAPTER 1 : SUMMARY OF VERSION 4.1 UPDATES 1-1

CHAPTER 2 : INTRODUCTION 2-1

CHAPTER 3 : PROCESS OVERVIEW 3-1

CHAPTER 4 : REGISTRATION AND ACCOUNT SETUP 4-1

4.1 Overview 4-1

4.2 Process 4-3

4.2.1 Step 1: Identify an Authorized Representative and Account Manager 4-4

4.2.2 Step 2: Determine Reporting Structure 4-10

4.2.3 Step 3: Register on the Section 111 COBSW 4-12

4.2.4 Step 4: Setup Account on the Section 111 COBSW 4-14

4.2.5 Step 5: Return Signed RRE Profile Report 4-16

4.2.6 Foreign RRE Registration 4-18

4.3 Changes to RRE Registration and Reporting 4-19

4.3.1 Abandoned RRE IDs 4-19

4.3.2 Ceasing and Transitioning Reporting 4-20

4.3.3 Changing RRE Information 4-21

CHAPTER 5 : DATA USE AGREEMENT 5-1

CHAPTER 6 : SECTION 111 COB SECURE WEB SITE (COBSW) 6-1

CHAPTER 7 : CUSTOMER SERVICE AND REPORTING ASSISTANCE FOR SECTION 111 7-1

7.1 Electronic Data Interchange (EDI) Representative 7-1

7.2 Contact Protocol for the Section 111 Data Exchange 7-1

CHAPTER 8 : TRAINING AND EDUCATION 8-1

CHAPTER 9 : CHECKLIST—SUMMARY OF STEPS TO REGISTER, TEST AND SUBMIT PRODUCTION FILES 9-1

List of Tables

Table 4-1: Account Representative Responsibilities 4-5
Table 4-2: Account Manager Responsibilities, Abilities, and Restrictions 4-6
Table 4-3: Account Designee Responsibilities, Abilities, and Restrictions 4-7
Table 6-4: System Generated E-Mails 6-4

List of Figures

Figure 4-1: Section 111 Registration and Account Setup Process 4-3
Figure 4-2: RRE ID Role Structure Example 4-4
Figure 4-3: One Insurer One RRE ID Example 1 4-8
Figure 4-4: One Insurer, One RRE ID Example 2 4-8
Figure 4-5: One Insurer, One RRE ID Example 3 4-9
Figure 4-6: One Insurer, Two RRE IDs Example 1 4-9

Figure 4-7: One Insurer, Two RRE IDs Example 2 4-10
Figure 4-8: RRE ID Profile Information Page..... 4-13
Figure 4-9: Sample Profile Report 4-17

Chapter 1: Summary of Version 4.3 Updates

The updates listed below have been made to the Registration Procedures Chapter Version 4.3 of the NGHP User Guide. As indicated on prior Section 111 NGHP Town Hall teleconferences, the Centers for Medicare & Medicaid Services (CMS) continue to review reporting requirements and will post any applicable updates in the form of revisions to Alerts and the User Guide as necessary.

The following update was made to Chapter II of this release:

- The Department of Health & Human Services has adopted a policy treating same-sex marriages on the same terms as opposite-sex marriages to the greatest extent reasonably possible. Any same-sex marriage legally entered into in a U.S. jurisdiction that recognizes the marriage - including one of the 50 states, the District of Columbia, or a U.S. territory -- or a foreign country, so long as that marriage would also be recognized by a U.S. jurisdiction, will be recognized. Consistent with this policy and the purpose of the MSP provisions, effective January 1, 2015, the rules below apply with respect to the term “spouse” under the MSP Working Aged provisions. This is true for both opposite-sex and same-sex marriages as described herein.
    - If an individual is entitled to Medicare as a spouse based upon the Social Security Administration’s rules, that individual is a “spouse” for purposes of the MSP Working Aged provisions.
    - If a marriage is valid in the jurisdiction in which it was performed as described herein, both parties to the marriage are “spouses” for purposes of the MSP Working Aged provisions.
    - Where an employer, insurer, third party administrator, GHP, or other plan sponsor has a broader or more inclusive definition of spouse for purposes of its GHP arrangement, it may (but is not required to) assume primary payment responsibility for the “spouse” in question. If such an individual is reported as a “spouse” pursuant to MMSEA Section 111, Medicare will pay accordingly and pursue recovery, as applicable.

Chapter 2: Introduction

The Liability Insurance (including Self-Insurance), No-Fault Insurance, and Workers' Compensation User Guide, Version 4.3 has been written for use by all Section 111 liability insurance (including self-insurance), no-fault insurance, and workers' compensation Responsible Reporting Entities (RREs). The five chapters of the User Guide—referred to collectively as the "Section 111 NGHP User Guide"—provides information and instructions for the MSP NGHP reporting requirements mandated by Section 111.

This Registration Procedures Chapter of the MMSEA Section 111 NGHP User Guide provides detailed information on the Section 111 registration process including the purpose of registering, the registration and account setup requirements, registration timeframes, the five steps of the Section 111 registration and account set up, and information on the steps Responsible Reporting Entities (RREs) must take if changes occur after their initial Section 111 registration is completed. The other four chapters of the NGHP User Guide: Introduction and Overview, Policy Guidance, Technical Information, and Appendices should be referenced as needed, for applicable guidance.

Please note that the CMS will continue to implement the Section 111 requirements in phases. New versions of the Section 111 User Guide will be issued when necessary to document revised requirements and when additional information has been added for clarity. At times, certain information may be released in the form of an Alert document. Any Alert dated subsequent to the date of the currently published User Guide supersedes the applicable language in the User Guide. All updated Section 111 policy guidance published in the form of an Alert will be incorporated into the next version of the User Guide. Until such time, RREs must refer to the current User Guide and any subsequently dated Alerts for complete information on Section 111 reporting requirements. The NGHP User Guide Appendices Chapter (Appendix K) contains a list of all NGHP Alerts posted prior to the publication of this version of the User Guide.

All official instructions pertinent to Section 111 reporting are on the Section 111 Web site found at: http://go.cms.gov/mirnghp. Please check this site often for the latest version of this guide and for other important information, such as new Alerts. In order to be notified via e-mail of updates posted to this Web page, click the "Subscription Sign-up for Mandatory Insurer Reporting (NGHP) Web Page Update Notification" link found in the Related Links section of the web page and add your e-mail address to the distribution list. When new information regarding mandatory insurer reporting for NGHPs is available, you will be notified. These announcements will also be posted to the NGHP **What's New** page. Additional information related to Section 111 can be found on the login page at http://www.section111.cms.hhs.gov of the Section 111 Coordination of Benefits Secure Web site (COBSW).

Note: All requirements in this guide apply equally to RREs using a file submission method or Direct Data Entry (DDE), except those specifically related to the mechanics of constructing and exchanging an electronic file or as otherwise noted.

Chapter 3: Process Overview

Purpose: The purpose of the Section 111 MSP reporting process is to enable CMS to pay appropriately for Medicare covered items and services furnished to Medicare beneficiaries. Section 111 reporting helps CMS determine primary versus secondary payer responsibility—that is, which health insurer pays first, which pays second, and so on. A more detailed explanation of Section 111 related legislation, MSP rules, and the structure of the Section 111 reporting process is provided in the NGHP User Guide Policy Guidance Chapter.

Section 111 RREs: Entities responsible for complying with Section 111 are referred to as Responsible Reporting Entities, or "RREs". Section 111 requires RREs to submit information specified by the Secretary of Health and Human Services (HHS) in a form and manner (including frequency) specified by the Secretary. The Secretary requires data for both Medicare claims processing and for MSP recovery actions, where applicable. For Section 111 reporting, RREs are required to submit information electronically on liability insurance (including self-insurance), no-fault insurance, and workers' compensation claims, where the injured party is a Medicare beneficiary. The actual data submission process takes place between the RREs, or their designated reporting agents, and the CMS Benefits Coordination & Recovery Center (BCRC). The BCRC manages the technical aspects of the Section 111 data submission process for all Section 111 RREs.

Querying for Medicare eligibility: RREs must be able to determine whether an injured party is a Medicare beneficiary, and gather the information required for Section 111 reporting. CMS allows RREs that are file submitters to submit a *query* to the BCRC to determine the Medicare status of the injured party prior to submitting claim information for Section 111 reporting. The query record must contain the injured party's Social Security Number (SSN) (or Medicare Health Insurance Claim Number (HICN)), name, date of birth and gender. On the query response record, the BCRC will provide information on whether the individual has been identified as a Medicare beneficiary based upon the information submitted and if so, provide the Medicare HICN (and other updated information for the individual) found on the Medicare Beneficiary Database (MBD). The reason for Medicare entitlement, and the dates of Medicare entitlement and enrollment (coverage under Medicare), are not returned on the query file response.

Note: With DDE, the separate query function is not available. Instead, with the DDE application, the RRE will learn, in real time, whether an injured party is a Medicare beneficiary when the RRE enters the injured party information (i.e., Medicare HICN or SSN, first name, last name, date of birth and gender) on-line on the DDE Injured Party Information screen.

What should be submitted?: For purposes of NGHP data submissions, the term "**claim**" has a specific reference. It is used to signify the overall compensation claim for liability insurance (including self-insurance), no-fault insurance or workers' compensation, rather than to a single (or disaggregated) claim for a particular medical service or item. NGHP

claim information is to be submitted where the injured party is a Medicare beneficiary and payments for medical care ("medicals") are claimed and/or released, or the settlement, judgment, award, or other payment has the effect of releasing medicals.

Web site: The BCRC maintains an application for Section 111 processing at http://www.section111.cms.hhs.gov on the Section 111 COB Secure Web site (the COBSW).

Please see Section Chapter 6 (: Section 111 COB Secure Web Site (COBSW)) for a more thorough explanation of this Web site and instructions on how to obtain the Section 111 COBSW User Guide.

Data Submission Method: RREs may choose to submit claim information through either:

- An electronic file exchange, **OR**
- A manual direct data entry (DDE) process using the Section 111 COBSW (if the RRE has a low volume of claim information to submit).

More information on data exchange options can be found in the NGHP User Guide Technical Information Chapter (Section 10).

RREs who select an electronic file submission method must first fully test the file exchange process. RREs who select the DDE submission method will not perform testing. More information on the testing process can be found in the NGHP User Guide Technical Information Chapter (Section 9).

When the BCRC has cleared an RRE for "production" input file submissions, the RRE will submit claim information for **all** no-fault insurance, and workers' compensation claims involving a Medicare beneficiary as the injured party where the **TPOC Date** for the settlement, judgment, award, or other payment date is **October 1, 2010**, or subsequent, and which meet the reporting thresholds described in the NGHP User Guide Policy Guidance Chapter (Section 6.4). Information is also to be submitted for all liability insurance (including self-insurance) claims involving a Medicare beneficiary as the injured party where the **TPOC Date** for the settlement, judgment, award, or other payment date is **October 1, 2011**, or subsequent, and which meet the reporting thresholds described in the NGHP User Guide Policy Guidance Chapter III. In addition, RREs must submit information related to no-fault insurance, workers' compensation, and liability insurance (including self-insurance) claims for which **ongoing responsibility for medical** payments exists as of **January 1, 2010** and subsequent, regardless of the date of an initial acceptance of payment responsibility (see the *Special Qualified Reporting Exception for ORM…* in the NGHP User Guide Policy Guidance Chapter III).

Ongoing DDE and quarterly file submissions are to contain only new or changed claim information using add, update and delete transactions. Detailed specifications for the Section 111 reporting process are provided in the NGHP User Guide Technical Information Chapter IV.

Chapter 4: Registration and Account Setup

4.1 Overview

In order to comply with the requirements of Section 111 of the MMSEA, Responsible Reporting Entities (RREs) are required to provide notification to the Benefits Coordination & Recovery Center (BCRC) of their intent to report data by registering on the Section 111 COBSW. Each applicable RRE must complete the registration process regardless of whether an agent will be submitting files on that entity's behalf. An agent cannot complete the initial registration; however the agent can complete the RRE's account setup and may also be the Account Manager. Registration and account setup must be completed on the Section 111 COBSW (http://www.section111.cms.hhs.gov).

Registration ***by the RRE*** is required and must be completed before testing between the RRE (or its agent) and the BCRC can begin or before reporting via DDE may commence. Through the registration process, the BCRC will obtain the information needed to the following:

- Validate information provided by the RRE registrant.
- Identify the method (file submission or DDE) an RRE will use to submit claim information.
- Assign a Section 111 Responsible Reporting Entity Identification Number (RRE ID).
- Develop a Section 111 reporting profile for each entity including estimates of the volume and type of data to be exchanged, for planning purposes.
- Assign a file submission timeframe for Claim Input File submission, to each entity selecting an electronic file submission method.
- Establish the file transfer mechanisms.
- Assign an Electronic Data Interchange (EDI) Representative to each entity to assist with ongoing communication, use of the Section 111 COBSW and data exchange.
- Assign Login IDs to individual users associated with each RRE ID account.

Registration Timeframes

- Potential Section 111 RREs are not required to register if they will have nothing to report for purposes of the Section 111 liability insurance (including self-insurance), no-fault insurance, or workers' compensation.
    - For example, if an entity is self-insured (as defined by CMS) solely for the deductible portion of a liability insurance policy but it always pays any such deductible to its insurer, who then pays the claim, it may not have anything to report.
- Section 111 RREs must register in time for a full quarter of testing if they have future situations where they have a reasonable expectation of having to report (including

those who do not register initially because they have no expectation of having claims to report).

- The registration process will remain available indefinitely for existing and new RREs:
  - To alter your reporting structure if needed
  - To request additional RRE IDs in the future if changes in your business operations require changes in your data reporting requirements.
- **Note:** If you have registered for an RRE ID that you later determine you will not need or no longer use, contact your EDI Representative to have it deactivated.

For those RREs that will be submitting claim information via a file (File Submitters):

- Must complete registration before testing may begin.
- Once testing is complete and the RRE ID is set to a production status, the RRE:
  - Must submit a Claim Input File once per quarter during the assigned file submission timeframe for each RRE ID (if there is new or changed information to report). May, but are not required to, submit an empty quarterly Claim Input File if there is no new information to report.

For those RREs that will be submitting claim information via direct data entry (DDE Submitters):

- Must complete registration before reporting may begin.
- Will not perform testing.
- Must submit claim information via the Section 111 COBSW. Although DDE submitters will not have an assigned window for reporting claim reports, claim information must still be submitted within 45 calendar days of the Total Payment Obligation to Claimant (TPOC) or assumption/termination of ongoing responsibility for medicals (ORM).

Accessing Additional Tools

For additional information on New Registration, Account Setup, and other process:

1. Go to the COBSW web site URL: http://www.Section111.cms.hhs.gov.
2. Click the **I Accept** link and accept the terms of the Login Warning. The homepage will display.
3. The following *Help* pages can be found under the *How To* menu option at the top of the page, whether before or after clicking the "I Accept" link and proceeding to the login page. Click the *How To* drop-down menu to display the list, then click the item you want to access. A Login ID is not needed to access this menu option.
   - 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 Designees
- How to Change Your File Transmission Method

In particular, please read the documents found under **How to Get Started** and **How to Invite Account Designees**.

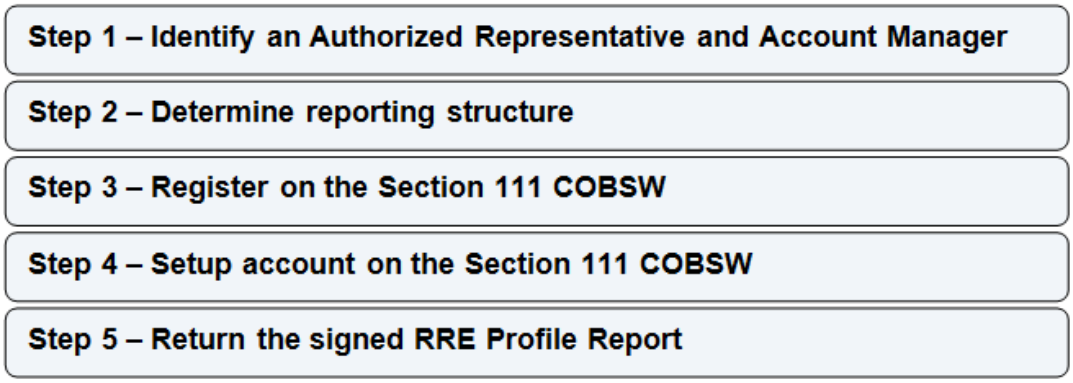
Once you have begun the registration process on the Section 111 COBSW, you will have access to *Help* information on each page displayed. By clicking on the link for the Help page, a new window will open with instructions and information needed to complete the page you are working on.

Once you have finished the New Registration and Account Setup steps and obtain a Login ID for the Section 111 COBSW, you may log into the application using the Login fields displayed on the right side of the homepage. After login, a detailed Section 111 COBSW User Guide is available under the "Reference Materials" menu option. You must be logged into the application to gain access to the Section 111 COBSW User Guide.

4.2 Process

The five steps in the Section 111 registration and account setup process are illustrated in Figure 4-1. A thorough description of each step follows.

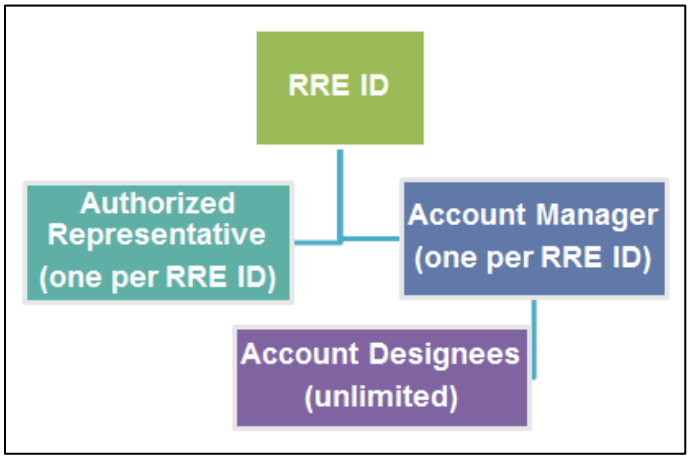
Figure 4-1: Section 111 Registration and Account Setup Process



4.2.1 Step 1: Identify an Authorized Representative and Account Manager

The first step in the registration and account setup process is to identify an Authorized Representative and an Account Manager. Each RRE ID can have only one designated Authorized Representative and one Account Manager. The Account Manager can then register other Section 111 COBSW users, known as Account Designees, who are associated with the RRE's account. Please see the example shown in Figure 4-2.

Figure 4-2: RRE ID Role Structure Example



Authorized Representative

The Authorized Representative is the individual in the RRE organization who has the legal authority to bind the organization to the terms of MMSEA Section 111 requirements and processing. This is normally a person at the executive level of the organization. The Authorized Representative has ultimate accountability for the RRE's compliance with Section 111 reporting requirements. The person named as the Authorized Representative cannot be a user of the Section 111 COBSW for any RRE ID nor can they be an agent for the RRE.

If you need to change your Authorized Representative after completing the New Registration step, you must contact your assigned EDI Representative. Please refer to the Data Use Agreement in Chapter 5 to make sure the person you name as your Authorized Representative has the authority to sign this agreement.

The Authorized Representative Responsibilities are listed in Table 4-1.

Table 4-1: Account Representative Responsibilities

Type	Description
Preliminary	• May perform the initial registration on the COBSW or delegate this task to another individual, but will not be provided with a Login ID. • Will designate the Account Manager. • Must approve the account setup, by physically signing the profile report, which includes the Data Use Agreement, and return it to the BCRC.
Ongoing	• Overall accountability for Section 111 reporting. • Recipient of BCRC notifications related to non-compliance with Section 111 reporting requirements. • Approve changes to the account.

To register an Authorized Representative:

1. Go to the website URL: http://www.Section111.cms.hhs.gov.
2. Click the **I Accept** link and accept the terms of the *Login Warning*. The home page will display.
3. Click **Step 1-New Registration**.
4. Click **Continue** to enter the RRE and corporate structure information. Authorized Representative information is required for registration.

Account Manager

Each RRE must assign or name an Account Manager. Each RRE ID can have only one Account Manager. This is the individual who controls the administration of an RRE's account and manages the overall reporting process. The Account Manager may be an RRE employee or agent. The Account Manager may choose to manage the entire account and data file exchange, or may invite other company employees or data processing agents to assist. Account Managers reporting for multiple RRE IDs must test and submit files by RRE ID. However, each individual will only need one Login ID and can access multiple RRE ID accounts after being invited by the respective Authorized Representative.

The Account Manager Responsibilities, Abilities, and Restrictions are illustrated in Table 4-2.

Table 4-2: Account Manager Responsibilities, Abilities, and Restrictions

Type	Description
Responsibilities	• Register on the COBSW, obtain a Login ID and complete the account setup tasks. • Personally agree to the terms of the User Agreement.
Abilities	• Invite other users to register on the COBSW and function as Account Designees. • Remove an Account Designee's association to an RRE ID account. • Be an Account Manager associated with another RRE ID if they receive the authorized PIN from the BCRC mailing. This can occur when a reporting entity has multiple RRE IDs under which they will report separate Claim Input Files or when the entity chooses to name an agent or TPA as its Account Manager. • Manage the RRE's profile including selection of a data submission method. • Upload and download files to the COBSW if the RRE has specified HTTPS as the file transfer method. • Use his/her Login ID and Password to transmit files if the RRE has specified SFTP as the file transfer method. • Submit and view claim information if the RRE has specified the DDE option. • Review file transmission history. • Review file processing status and file statistics. • Change account contact information (e.g., address, phone, etc.). • Change his/her personal information.
Restrictions	• Cannot be an Authorized Representative for any RRE ID or an Account Designee for the same RRE ID.

To register an Account Manager:

1. Click **Step 1-New Registration** (required).

   The BCRC will then send a letter to the named Authorized Representative with a personal identification number (PIN) and the BCRC-assigned RRE ID (Section 111 Reporter ID) associated with the registration. The Authorized Representative must give this PIN and RRE ID to their Account Manager.

2. Ask the Account Manager to go to the Section 111 COBSW and click **Step 2-Account Setup**.

   During the account setup process the Account Manager will create a Login ID and Password.

Account Designees

At the RRE's discretion, the Account Manager may designate other individuals, known as Account Designees, to register as users of the COBSW associated with the RRE's account. Account Designees assist the Account Manager with the reporting process. Account Designees may be RRE employees or agents. There is no limit to the number of Account Designees associated with one RRE ID.

The Account Designee Responsibilities and Abilities are illustrated in Table 4-3.

Table 4-3: Account Designee Responsibilities, Abilities, and Restrictions

Type	Description
Responsibilities	• Register on the Section 111 COBSW, obtain a Login ID and complete the account setup tasks.
Abilities	• Can be associated with multiple RRE accounts, but only by an Account Manager invitation for each RRE ID. • Upload and download files to the COBSW if the RRE has specified HTTPS as the file transfer method. • Use his/her Login ID and Password to transmit files if the RRE has specified SFTP as the file transfer method. • Submit and view claim information if the RRE has specified the DDE option. • Review file transmission history. • Review file-processing statuses and file statistics. • Change his/her personal information. • Can remove himself/herself from the RRE ID.
Restrictions	• Cannot be an Authorized Representative for any RRE ID or the Account Manager for the same RRE ID. • Cannot invite other users to the account. • Cannot update RRE account information.

Agent

RREs may use agents to submit data on their behalf. An agent is a data services company, consulting company, or the like, that can create and submit Section 111 files to the BCRC on behalf of the RRE. Information on the use of agents is required as part of the Section 111 registration process.

To supply agent company information:

1. Click **Step 1-New Registration** (required).
2. If you have gone through the initial registration process and have received your mailing containing your RRE ID and PIN from the BCRC, your Account Manager can click **Step 2- Account Set Up**.
3. Agent information is collected as part of this process. An individual associated with an RRE's agent can be the Account Manager or an Account Designee associated with the RRE ID.

Note: Each user of the Section 111 application on the COBSW will have only one Login ID and Password. With that Login ID and Password, you may be associated with multiple RRE IDs (RRE accounts). With one Login ID, you may be an Account Manager for one RRE ID and an Account Designee for another. In other words, the role you play on the COBSW is by RRE ID.

Examples on designating and assigning Section 111 COBSW User Roles

CMS allows RREs multiple ways to designate and assign their Section 111 COBSW user roles for their RRE ID(s). The following examples help to illustrate this.

Figure 4-3 illustrates the following example: Insurer A has determined that they want one RRE ID. They have assigned an Authorized Representative and an Account Manager, but have decided not to use Account Designees.

Figure 4-3: One Insurer One RRE ID Example 1

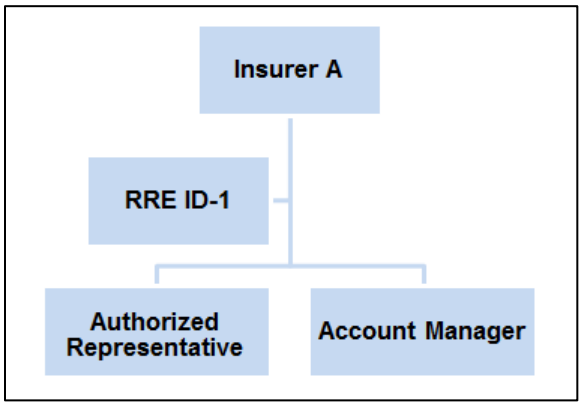


Figure 4-4 illustrates the following example: Insurer B has determined that they want one RRE ID. They have assigned an Authorized Representative and an Account Manager as well as an Account Designee to assist the Account Manager with the reporting process.

Figure 4-4: One Insurer, One RRE ID Example 2

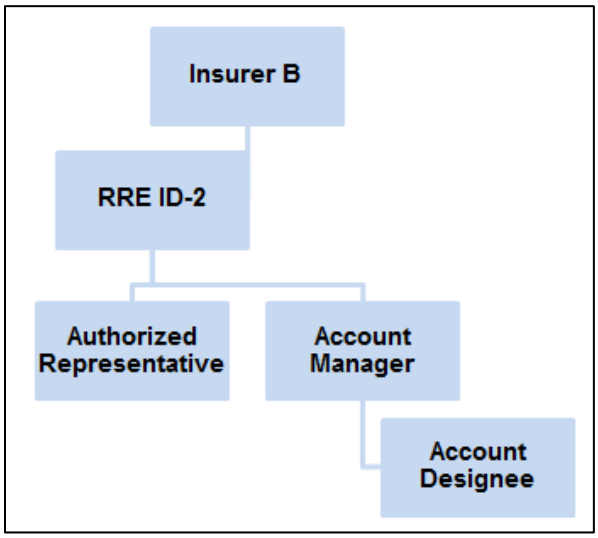


Figure 4-5 illustrates the following example: Insurer C has determined that they want one RRE ID. They have assigned an Authorized Representative, an Account Manager and two Account Designees. One of the Account Designees is Insurer C's agent who will be transferring files for Insurer C.

Figure 4-5: One Insurer, One RRE ID Example 3

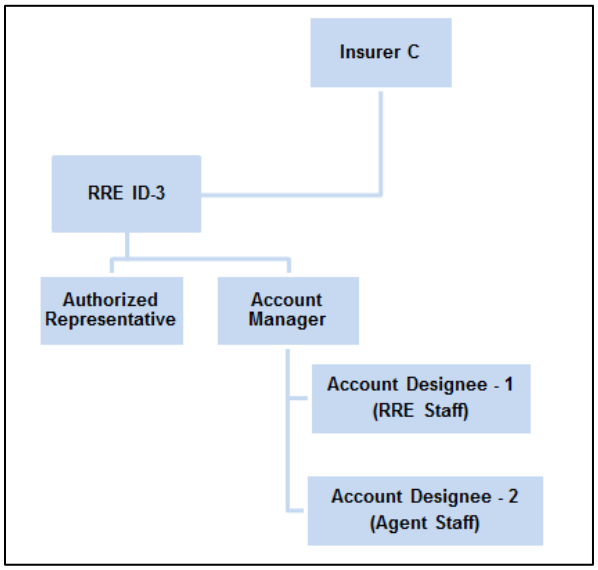


Figure 4-6 illustrates the following example: Insurer D has two claims systems and determines that they want to use 2 RRE IDs. Insurer D decides to use the same Authorized Representative and Account Manager for each RRE ID. Insurer D decides not to use any Account Designees.

Figure 4-6: One Insurer, Two RRE IDs Example 1

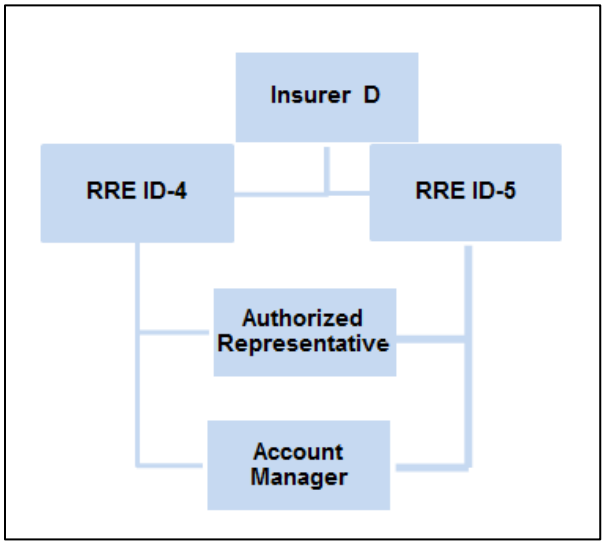
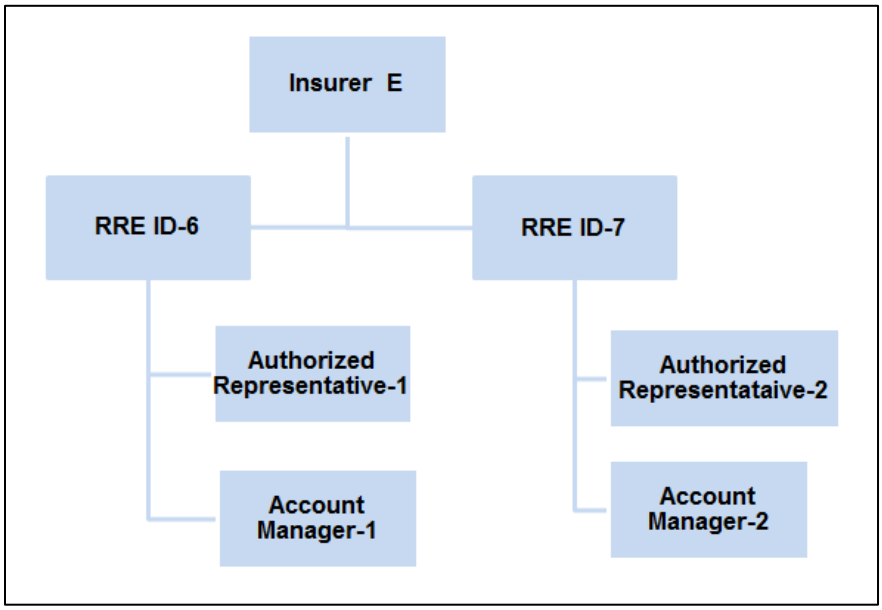


Figure 4-7 illustrates the following example: Insurer E has two claims systems and determines that they want to use two RRE IDs. However, they have determined that they will assign a separate Authorized Representative and Account Manager for each RRE ID. Insurer E decides not to use any Account Designees.

Figure 4-7: One Insurer, Two RRE IDs Example 2



4.2.2 Step 2: Determine Reporting Structure

The second step in the registration and account setup process is to determine the reporting structure. Before beginning the registration process, an RRE must determine how to submit Section 111 claim information to the BCRC (i.e., data transmission method) and how many Section 111 Responsible Reporting Entity Identification Numbers (RRE IDs) will be needed.

Data Transmission Method Selection

There are four separate methods of data transmission that Section 111 Responsible Reporting Entities may utilize:

- Connect: Direct (NDM via a connection to the CMS Extranet Network and CMS's private CMSNet network)
- Secure File Transfer Protocol (SFTP)
- Hypertext Transfer Protocol over Secure Socket Layer (HTTPS)
- Direct Data Entry (DDE)

For more specific instruction on the data transmission methods, refer to the NGHP User Guide Technical Information Chapter.

Determining the number of RRE IDs needed

The number of RRE IDs needed depends on the number of Claim Input Files an RRE will transmit to the BCRC each quarter. File submitters can only submit one Claim Input File on a quarterly basis for each RRE ID. Most DDE submitters will only need one RRE ID since multiple users can have access to the same RRE ID account.

Due to corporate organization, claim system structures, data processing systems, data centers and agents that may be used for data submission, an RRE may want to submit

more than one Claim Input File to the BCRC on a quarterly basis and therefore will need more than one RRE ID in order to do so. For example, if an RRE will use one agent to submit workers' compensation claims in one file and another agent to submit liability and no-fault claims in another file, the RRE must register on the Section 111 COBSW twice to obtain two RRE IDs that will be used by each agent respectively. Alternatively, you may use one agent to report Claim Input Files and another agent to submit Query Input Files using the same RRE ID. In addition, the RRE may choose to report one file type (claim or query) and have an agent report the other under the same RRE ID. Note: agents reporting for multiple RRE IDs that are submitting files, must test and submit files by RRE ID.

You are not required to register and obtain an RRE ID by line of business, but file submitters must do so if separate input files will be submitted for each. For example, under the same RRE ID you may submit one Claim Input File with a mix of liability, no-fault and workers' compensation claims. Or, using separate RRE IDs, you may submit separate files for each or any combination by line of business that suits your reporting structure.

Likewise, if a file submitter has two or more subsidiary companies that process workers' compensation claims using different claims systems and it will not combine the claim files for Section 111 reporting, the RRE must register for each claim file submission to obtain separate RRE IDs in order to submit multiple claim files in one quarter. You are not required to obtain an RRE ID for each subsidiary separately but you must do so if separate input files will be submitted for each or if each/any subsidiary is handling its own reporting. Alternatively, the parent organization may register, obtain one RRE ID and report for all applicable subsidiaries under that RRE ID if they submit just one file a quarter..

File submitters **may not** set up a separate RRE ID for submission of the Query Input File only. RREs **must** submit Claim Input Files, or provide claim information using the DDE option, for every RRE ID established.

Note: If a file submitter has nothing to report according to the requirements specified in the NGHP User Guide Policy Guidance Chapter, the RRE may, but is not required to, submit an "empty" file for the RRE ID with a header record, no detail records, and a trailer record with a record count of zero.

You must complete the *New Registration* and *Account Setup* steps for **each** RRE ID you establish, so careful consideration must be given to the number of RRE IDs requested.

Once logged into the Section 111 COBSW, most functions are performed by RRE ID. Your Account Manager must invite and identify Account Designees that will need access to multiple accounts by RRE ID. However, each individual Account Designee will only need one Login ID and can access multiple RRE ID accounts after being invited by the respective Account Manager(s).

File transmission and viewing the results of file processing is done by RRE ID. So, to ease the management of reporting, account maintenance and user access, we suggest that fewer RRE IDs are better than many.

If you register for multiple RRE IDs:

- You can use the same Federal Tax Identification Number (TIN) for each RRE ID or different TINs for each RRE ID. No matching is done between the TINs supplied at registration and the TINs supplied on your input files/claim submission.

  The RRE TIN supplied during registration is used by the BCRC to authenticate the RRE prior to establishing the reporting account. The RRE TINs supplied on Claim Input Files/DDE submissions are used to associate the claim report to contact information for the RRE that is used by Medicare for coordination of benefits and recovery efforts as needed.
- You can name the same Authorized Representative for each or a different Authorized Representative for each.
- You can name the same Account Manager for each or a different Account Manager for each.
- You can invite the same Account Designee to be associated with multiple RRE IDs or invite different Account Designees to different RRE IDs.
- The system randomly assigns EDI Representatives to RRE IDs. If you register for multiple RRE IDs and want them all assigned to one EDI Representative, then contact one of the assigned EDI Representatives and request a reassignment of all RRE IDs to one EDI Representative.

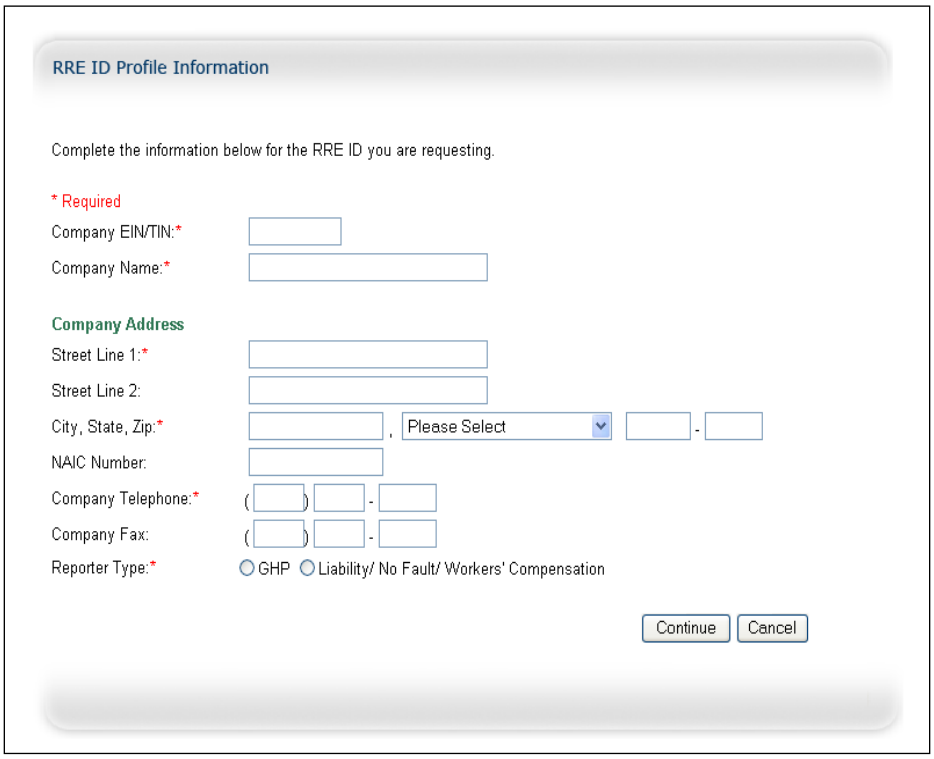
4.2.3 Step 3: Register on the Section 111 COBSW

The third step in the registration and account setup process is the RRE Registration on the Section 111 COBSW (Figure 4-8). The COBSW application will require you to submit the following information so have this information available when you register:

- A Federal Tax Identification Number (TIN) for the RRE.
- Company name and address.
- Company **Authorized Representative** contact information including name, job title, address, phone and e-mail address.
- National Association of Insurance Commissioners (NAIC) company codes, if applicable. If your organization does not have NAIC company codes, you may default this field to all zeroes.
- Reporter Type: Select the Liability Insurance (Including Self-Insurance)/No-Fault Insurance/Worker’s Compensation option, not GHP.
- Optional Subsidiary company information to be included in the file submission.

  TINs supplied for subsidiaries must be unique and not match the RRE TIN or TINs supplied for other subsidiaries in this step.

Figure 4-8: RRE ID Profile Information Page



Registration Steps for the Section 111 COBSW

1. If you are the individual assigned by the RRE, go to the Section 111 COBSW URL (http://www.Section111.cms.hhs.gov) and click the **New Registration** button.
2. Complete and submit the registration for the RRE.

   The New Registration step is for the RRE, and the RRE's information; it is not for information regarding an agent of the RRE. The RRE's Authorized Representative may complete this task or delegate it to an individual of his/her choosing. The *New Registration* step on the Section 111 COBSW must be performed for each RRE ID needed for Section 111 reporting.

   It is critical that you provide contact information (including e-mail address) for your Authorized Representative in this step regardless of who is actually performing this task on the Section 111 COBSW. The Authorized Representative cannot be a user of the Section 111 COBSW for any RRE ID. If you need to change your Authorized Representative after completing this step, you must contact your assigned EDI Representative.

   When a registration application is submitted, the information provided will be validated by the BCRC. Once this is completed, the BCRC will send a letter via the US Postal Service to the named Authorized Representative with a personal identification number (PIN) and the BCRC-assigned RRE ID associated with the registration. PIN letters will be sent to the Authorized Representative within 10 business days.

3. The Authorized Representative must give this PIN and RRE ID to their Account Manager to use to complete the *Account Setup* step on the Section 111 COBSW. If you need more than one RRE ID for Section 111 reporting, this step must be repeated for each.

The RRE TIN provided during registration is used to authenticate the RRE for Section 111 reporting. You are asked to provide TINs for subsidiaries of the RRE that will be included in reporting under the RRE ID. Doing so will assist CMS in its efforts to help assure that you are in compliance with the Section 111 reporting requirements. Further, CMS may require this information at a later date. However, this subsidiary information is optional. During registration you do **not** have to provide all of the TINs that you might later use on your Claim Input File and TIN Reference File submissions.

If you do provide subsidiary information during the New Registration step, all TINs supplied for subsidiaries under one RRE ID must be unique. In other words, all TINs for the RRE ID and subsidiaries listed in the New Registration step must be different within one specific RRE ID. You can use the same TIN for multiple, different RRE IDs. TINs just need to be unique within the same RRE ID. For example, if you are one entity with one TIN registering five different RRE IDs, you can use the same TIN for all five distinct RRE IDs. If you have trouble with data entry on the corporate structure/subsidiary page, since this page is not required in order to complete the New Registration step, you may simply click the Continue button to bypass this page.

The TINs provided on the Claim Input File and TIN Reference File will be used by Medicare for coordination of benefits and recovery efforts related to particular claim reports as needed. No comparison is done between those TINs and the RRE TIN and subsidiary TINs provided during registration.

Note: Please see Section 4.2.6 (Foreign RRE Registration) for information on how foreign entities may register on the COBSW.

4.2.4 Step 4: Setup Account on the Section 111 COBSW

The fourth step in the registration and account setup process is when the RRE's Account Manager sets up the RRE's account on the Section 111 COBSW. The individual who completes the Account Setup **must** be the Account Manager for the RRE, so plan for this step accordingly.

To perform the RRE account setup tasks, the RRE's Account Manager must go to the Section 111 COBSW URL (http://www.Section111.cms.hhs.gov) with the PIN and RRE ID and click the **Account Setup** button.

The Account Manager will:

1. Enter the RRE ID and associated PIN.
2. Enter personal information including name, job title, address, phone and e-mail address.
3. Create a Login ID for the COBSW.

4. Enter account information related to expected volume of data to be exchanged under this RRE ID (estimated number of annual paid claims for the lines of business that will be reported under the RRE ID).
5. Enter applicable reporting agent name, address, contact e-mail and TIN. If using one agent for Claim Input File reporting and another agent for Query Input File Reporting, then provide the agent that will be doing your Claim Input File reporting. Individuals from both agents may be invited later to be Account Designees associated with the RRE ID.
6. Select a data transmission method (file or DDE).

   There are four separate methods of data transmission that RREs may utilize. Three involve the submission of electronic files:

   - Connect:Direct [formerly known as Network Data Mover (NDM)] via a connection to the CMS Extranet Network and CMS's private CMSNet network hosted by Verizon Business Networx Services,
   - Secure File Transfer Protocol (SFTP) over the Internet to the Section 111 SFTP Server, and
   - Hypertext Transfer Protocol over Secure Socket Layer (HTTPS) file upload and download over the Internet using the Section 111 Coordination of Benefits Secure Web site (COBSW).

   The fourth method is a manual direct data entry (DDE) process on the Section 111 COBSW. Your choice of data transmission methods is dependent on your current capabilities and the volume of data to be exchanged.

   - If you expect to be transmitting files with more than 24,000 records in one file submission on a regular basis, it is suggested that you use either the Connect:Direct or SFTP methods.
   - If you expect to be transmitting files with less than 24,000 records in one file submission on a regular basis, you may select HTTPS.
   - If you expect to submit 500 or fewer NGHP claim reports per year, you may select DDE.

   Provide file transmission information needed if the Connect:Direct transmission method is selected. Refer to the NGHP User Guide Technical Information Chapter IV for more information. ***You must have destination dataset names available if the Connect:Direct method is selected or this step cannot be completed and all the other data you provided will be lost.***

Once the Account Manager has successfully obtained a Section 111 COBSW Login ID, he/she may log into the application and invite Account Designees to register for Login IDs. In addition, after completing Account Setup for his/her first RRE ID, since only one Login ID is required per user, the Account Manager will bypass the steps for creating another Login ID and Password when setting up subsequent RRE IDs.

Things to remember

- The Account Setup step must be completed by your Account Manager. In this step, the Account Manager will obtain a Login ID.

- The Account Manager must personally agree to the terms of the User Agreement.
- The Account Manager may be changed after completing this step. If you need to change your Account Manager, contact your assigned EDI Representative.
- Account setup must be repeated for each RRE ID.

NOTE: If you have been invited to be an Account Designee for an RRE ID previously, you must complete the Account Designee registration process and obtain a Login ID before you may complete the *Account Setup* step for another RRE ID as the Account Manager. In other words, if you have an Account Designee invitation pending, you must complete the *Account Designee* registration process and obtain a Login ID before you may proceed with setting yourself up as an Account Manager for other RRE IDs. We strongly encourage users to register as soon as possible after receiving an invitation e-mail to avoid problems completing the Account Setup step for other RRE IDs.

4.2.5 Step 5: Return Signed RRE Profile Report

The last step in the registration and account setup process is when the Authorized Representative returns the signed RRE profile report (Figure 4-9). Once account setup has been completed by the Account Manager on the Section 111 COBSW and processed by the BCRC, a profile report will be sent to the RRE's Authorized Representative and Account Manager via e-mail. Profile report e-mails will be transmitted within 10 business days upon completion of the Account Setup step on the COBSW.

The profile report contains:

- A summary of the information you provided on your registration and account setup.
- Important information you will need for your data file transmission.
- Your RRE ID that you will need to include on all files transmitted to the BCRC.
- Your quarterly file submission timeframe for the Claim Input File.
- Contact information for your EDI Representative who will support you through testing, implementation and subsequent production reporting.

Figure 4-9: Sample Profile Report

Reporter ID: 000123456 Date: 04/11/2009
Profile Changed: 04/10/2009

COBC EDI Representative: Jane Smith
Email: JaneSmith@ghi.com
Phone: (555)666-7777

Company Information:

TIN: 9876534321
NAIC: 12345

Name: Insurer USA
Phone: (555)111-1212
Address: 207 Smith Lane
Fax: (555)111-2222
New York NY 10036-5412

Line of Business: X No-Fault X Workers' Compensation X Liability

Authorized Representative:

Name: James Jones Phone: (555)232-7878
Title: Vice President
Fax: (555)232-1212
Address: 400 Main Street
New York NY 10036-5412
Email: JohnSmithl@InsurerUSA.com

The RRE's Authorized Representative must review, sign and return the profile report to the BCRC within 30 days. If the BCRC has not received this signed report within 60 days, the RRE ID will be placed in "Discontinued" status.

Once your profile report has been marked as received by the BCRC, you may begin testing your Section 111 files. The BCRC will send an e-mail to your Account Manager indicating that testing can begin.

Note: The RRE's profile report will be e-mailed to the Authorized Representative and Account Manager annually, based upon the receipt date of the last signed profile report. The Authorized Representative will be asked to respond to their EDI Representative via e-mail within 10 days of receipt of the profile report. If all information contained within the profile report is still accurate, simply e-mail your EDI Representative and inform them as such. If changes to the profile information are required, the Authorized Representative must inform the BCRC about the revisions needed. The BCRC will then make the appropriate updates and generate an updated profile report. The Authorized Representative must return a signed copy of the report. If the Authorized Representative has not responded to the annual profile report e-mail within 30 days of receipt, they shall receive a non-receipt e-mail. The Account Manager will be copied on this e-mail. Failure to confirm this information may result in deactivation of the RRE ID. If your RRE ID is deactivated, contact your EDI Representative. Once you provide your EDI Representative with the previously requested information, the RRE ID will be reactivated immediately.

The status of your RRE ID will be updated by the system as each step of the registration process is completed. Once the BCRC receives your signed profile report, your RRE ID will be placed in a "testing" status. Once testing is completed (See the NGHP User Guide Technical Information Chapter (Section 9)), your RRE ID will be placed in a "production" status. RRE IDs are expected to move to a production status within 180 days after initiation of the registration process (completion of the New Registration step). No testing is required for the DDE option. RRE IDs for DDE submitters will be set to a production status after the signed profile report is received at the BCRC and production reporting may begin immediately thereafter.

4.2.6 Foreign RRE Registration

This section provides information on how RREs who have no IRS-assigned TIN and/or US mailing address (including Guam, Puerto Rico, and the US Virgin Islands as part of the US) may register for Section 111 reporting on the COBSW.

Foreign RREs must follow the five steps in the Section 111 registration and account setup process to complete registration like any other RRE. However, since the foreign RRE does not have a TIN and/or US address, there are additional requirements needed to complete registration without that information. **Please review the 5 steps above and then follow these additional instructions.**

CMS encourages foreign entities that do not have a U.S. TIN or EIN to apply for a U.S. EIN by completing the Internal Revenue Service (IRS) SS-4 Application and use that number to register if possible. For instructions to complete Form SS-4, go the IRS General Instructions URL http://www.irs.gov/instructions/iss4/ch01.html.

An individual assigned by the RRE must go to the Section 111 COBSW URL (http://www.Section111.cms.hhs.gov)

1. Click the **New Registration** button' then complete and submit the registration for the RRE.

   If the RRE has a valid IRS-assigned TIN, provide that number. If the RRE does not have an IRS-assigned TIN, then enter a fake or pseudo-TIN in the format of 9999xxxxx where "xxxxx" is a 5-digit number created by the RRE.

   If the RRE does not have a mailing address in the United States, enter 'FC' in the RRE state code and leave the other RRE address fields blank.

2. Supply a valid e-mail address for the Authorized Representative.

   If the Authorized Representative does not have a mailing address in the United States, enter "FC" in the Authorized Representative state code and leave the other address fields blank.

   After successfully completing the *New Registration* step on the COBSW, a page will display with your RRE ID and assigned Section 111 EDI Representative.

3. You must contact your EDI Representative or call the EDI Department at 646-458-6740 to continue with the registration process.

4. Provide your EDI Representative with the actual valid international addresses for the RRE, Authorized Representative and Account Manager as applicable. You may be asked to provide other supporting documentation depending on the circumstances.

   A letter will then be sent to your Authorized Representative with the PIN needed to complete the Account Setup step on the COBSW.

5. Upon receipt of the PIN, the Account Manager for the RRE must go to the Section 111 COBSW *Login* page and click the **Account Setup** button to continue with the registration process.

6. If your Account Manager does not have a mailing address in the US, then he/she may enter "FC" in the Account Manager state code field and leave the rest of the address fields blank.

   After the Account Manager has completed the *Account Setup* step on the COBSW and the registration has been accepted by the BCRC, an e-mail will be sent to the RRE's Authorized Representative and Account Manager with a profile report.

   Once the Authorized Representative has signed and returned the profile report to the BCRC and its receipt has been noted by your EDI Representative in the system, the status for the RRE ID will be set to "testing" (or directly to "production" in the case of DDE submitters) and data submission may commence as for other RREs.

The assigned RRE ID will be the primary identifier used by the BCRC for a foreign entity that registers with a pseudo-TIN. That RRE ID must be submitted on all input files as is the case with all RREs. Foreign RREs, who have registered with a pseudo-TIN, will be able to use the pseudo-TIN created for registration in the TIN Field 52 of the Claim Input File Detail Record and in the TIN Field 3 of the TIN Reference File Detail Record. International addresses for the RRE must be provided in the Foreign Address Lines 1-4 (Fields 12-15) on the TIN Reference File Detail Record. Please refer to the NGHP User Guide Technical Information Chapter (Section 6.3) and the NGHP User Guide Appendices Chapter V for more information on formatting the TIN Reference File.

Regardless of when a foreign RRE completes registration and testing, it is required to adhere to retroactive reporting requirements documented in the NGHP User Guide Policy Guidance Chapter III, as applicable, when submitting its initial Claim Input File.

4.3 Changes to RRE Registration and Reporting

This section provides information regarding steps RREs must take if changes occur after initial Section 111 registration is completed.

4.3.1 Abandoned RRE IDs

If you erroneously registered for an RRE ID that you no longer need or have abandoned due to starting the registration process over, and you will not use the RRE ID for Section 111 file submission, please contact your assigned EDI Representative to have that ID deleted. Unused RRE IDs may trigger automated warning notifications and follow-up by the BCRC to the associated Authorized Representative and/or Account Manager. **Delete**

requests should only be made for RRE IDs that have **never** been used for production file submission.

4.3.2 Ceasing and Transitioning Reporting

Cease Reporting

If you have been reporting production Section 111 files under an RRE ID but will cease reporting under it in the future due to changes in your reporting structure, changes to what entity is the RRE, ceasing business operations or other reasons, then please contact your assigned EDI Representative. Inform your EDI Representative of circumstances affecting the change. Since the RRE ID was used for production reporting, it will ***not*** be deleted. You and your EDI Representative will create a transition plan and your EDI Representative will change the status of your RRE ID to an "inactive" status after your last production file/DDE submission has been processed. Once the status is changed, information for the RRE ID will remain in the BCRC Section 111 system. However, production data submissions will no longer be accepted or expected. This change in RRE ID status will prevent the automatic generation of the Late File Submission e-mails and subsequent follow-up contact by the BCRC to your Authorized Representative and Account Manager related to Section 111 reporting compliance.

Transition Reporting

The transition of reporting responsibility from one RRE to another is the responsibility of the RREs involved. The BCRC cannot supply a file of previously submitted and accepted records for use in the transition by the new or former RRE or their reporting agents. The new RRE may register for a new RRE ID or report the transitioned claim records under one of its existing RRE IDs. ***The new RRE may update and delete records previously submitted by the former RRE under a different RRE ID as long as the key fields for the records match.*** The RRE IDs do not need to match. The former RRE must ***NOT*** delete previously submitted and accepted records. If the ORM previously reported has ended, then update transactions should be sent with applicable ORM Termination Dates. The new RRE may send add transactions for new ORM and new claims with TPOCs or update transactions to change existing records with new information such as the new RRE TIN. Please see the NGHP User Guide Technical Information Chapter (Sections 6.7 and 6.8) for more information on submitting claims with ORM and submitting add, delete and update transactions.

Change Reporting Agents

If an RRE is changing reporting agents, the new agent should continue to submit files under the RRE's existing RRE ID(s). Again, the BCRC cannot supply a file of previously submitted and accepted records for the RRE IDs. It is the RRE's responsibility to coordinate the transition of reporting from the former agent to the new agent. Individuals from the new reporting agent should be given access to the RRE ID on the Section 111 COBSW (http://www.section111.cms.hhs.gov/). This can be done by the Account Manager for the RRE ID by using the Designee Maintenance action off the RRE Listing page and inviting these individuals as Account Designees. The new agent may then use their COBSW login IDs for access to the RRE ID on the COBSW as well as for the HTTPS and SFTP file transmission methods. The Account Manager should remove any

Account Designees associated with the former agent from their RRE ID account on the COBSW.

If you have questions regarding your specific circumstances related to ceasing or transitioning reporting, please contact your EDI Representative.

4.3.3 Changing RRE Information

After registration is completed on the Section 111 COBSW, your Account Manager may update certain information related to the RRE profile. After logging on to the Section 111 COBSW (http://www.section111.cms.hhs.gov), Account Managers may use the RRE Information action off the RRE Listing page to update the RRE name, address and telephone information. Account Managers may also invite new Account Designees and remove Account Designee access to the RRE ID as appropriate. Account Managers may also change from the HTTPS or SFTP file submission method to DDE (if the RRE indicated they had less than 500 paid claims per year during registration as specified in the NGHP User Guide Technical Information Chapter IV.

Updates to other information such as changing reporting agent, changing from one file transmission method to another, changing from DDE to a file transmission method, overriding the 500 claim limit for DDE, or changing the TIN associated with the RRE ID must be requested through your EDI Representative. You must also contact your EDI Representative to change your Authorized Representative or Account Manager to a different individual.

Note that all users of the Section 111 COBSW may update their own personal information associated with their login ID such as e-mail address or phone number after logging on to the site.

Chapter 5: Data Use Agreement

As part of the Section 111 registration process, the Authorized Representative for each Section 111 RRE will be asked to sign a copy of the Data Use Agreement below. It will be included on the profile report sent to the Authorized Representative after Section 111 COBSW registration and account setup. The Authorized Representative must sign and return the last page of the profile report to the BCRC. In addition, all users must agree to similar language, which appears in the Data Use Agreement, each time they log on to the Section 111 application of the COBSW. Data exchanged for Section 111 is to be used solely for the purposes of coordinating health care benefits for Medicare beneficiaries between Medicare and Section 111 RREs. Measures must be taken by all involved parties to secure all data exchanged and ensure it is used properly.

SAFEGUARDING & LIMITING ACCESS TO EXCHANGED DATA

I, the undersigned Authorized Representative of the Responsible Reporting Entity (RRE) defined above, certify that the information contained in this Registration is true, accurate and complete to the best of my knowledge and belief, and I authorize CMS to verify this information. I agree to establish and implement proper safeguards against unauthorized use and disclosure of the data exchanged for the purposes of complying with the Medicare Secondary Payer Mandatory Reporting Provisions in Section 111 of the Medicare, Medicaid and SCHIP Extension Act (MMSEA) of 2007. Proper safeguards shall include the adoption of policies and procedures to ensure that the data obtained shall be used solely in accordance with Section 1106 of the Social Security Act [42 U.S.C. § 1306], Section 1874(b) of the Social Security Act [42 U.S.C. § 1395kk(b)], Section 1862(b) of the Social Security Act [42 U.S.C. § 1395y(b)], and the Privacy Act of 1974, as amended [5 U.S.C. § 552a]. The Responsible Reporting Entity and its duly authorized agent for this Section 111 reporting, if any, shall establish appropriate administrative, technical, procedural, and physical safeguards to protect the confidentiality of the data and to prevent unauthorized access to the data provided by CMS. I agree that the only entities authorized to have access to the data are CMS, the RRE or its authorized agent for Mandatory Reporting. RREs must ensure that agents reporting on behalf of multiple RREs will segregate data reported on behalf of each unique RRE to limit access to only the RRE and CMS and the agent. Further, RREs must ensure that access by the agent is limited to instances where it is acting solely on behalf of the unique RRE on whose behalf the data was obtained. I agree that the authorized representatives of CMS shall be granted access to premises where the Medicare data is being kept for the purpose of inspecting security arrangements confirming whether the RRE and its duly authorized agent, if any, is in compliance with the security requirements specified above. Access to the records matched and to any records created by the matching process shall be restricted to authorized CMS and RRE employees, agents and officials who require access to perform their official duties in accordance with the uses of the information as authorized under Section 111 of the MMSEA of 2007. Such personnel shall be advised of (1) the confidential nature of the information; (2) safeguards required

to protect the information, and (3) the administrative, civil and criminal penalties for noncompliance contained in applicable Federal laws.

Chapter 6: Section 111 COB Secure Web Site (COBSW)

The BCRC maintains an application on the Section 111 COB Secure Web site (COBSW) to support Section 111 reporting. Section 111 Liability Insurance (including Self-Insurance), No-Fault Insurance, and Workers' Compensation RREs register and set up accounts on the COBSW. The COBSW URL is http://www.Section111.cms.hhs.gov.

On the COBSW, Section 111 reporters will be able to:

- Complete the registration process. Obtain RRE IDs for each account under which the RRE will submit files. All information is collected through an interactive Web application.
- Obtain Login IDs and assign users for Section 111 RRE ID COBSW accounts.
- Exchange files via HTTPS or SFTP directly with the BCRC. Alternatively, submit claim information via the Direct Data Entry option.
- View and update Section 111 reporting account profile information such as contacts and company information.
- View the status of current file processing such as when a file was marked as received and whether a response file has been created.
- View statistics related to previous file submission and processing.
- View statistics related to compliance with Section 111 reporting requirements such as whether files and records have been submitted on a timely basis.
- Utilize an online query function, the Beneficiary Lookup, to determine the Medicare status of an injured party.
- Extract a list of all RRE IDs to which the user is associated.

The registration and account setup processes are described in Section Chapter 4 (: Registration and Account Setup) of this guide.

Sources of Help Related to Using the Section 111 COBSW

To access the Section 111 COBSW, go to http://www.Section111.cms.hhs.gov using your Internet browser. Once you click the **I Accept** link and accept the terms of the *Login Warning*, the home page will display.

- Information on the New Registration, Account Setup, and other processes can be found under the *How To* menu at the top of the homepage. A Login ID is not needed to access this menu option. Click the menu option and a drop down list will appear. Then click the item desired in the list.
- All pages of the Section 111 COBSW application provide access to *Quick Help* information. Click the link for **Quick Help** and a new window will open with instructions and information needed to complete the page you are working on.

- Once you have obtained a Login ID for the Section 111 COBSW, you may log into the application using the Login fields displayed on the right side of the home page. After login, a detailed **Section 111 COBSW User Guide** is available under the *Reference Materials* menu option at the top of the page. You must be logged into the application to gain access to the user guide.
- **Computer-Based Training (CBT)** modules for the Section 111 application on the COBSW are available free of charge to RREs and their agents. These courses are all available on the Mandatory Insurer Reporting (NGHP) Training Material page at http://www.cms.gov/Medicare/Coordination-of-Benefits-and-Recovery/Mandatory-Insurer-Reporting-For-Non-Group-Health-Plans/NGHP-Training-Material/NGHP-CBTs.html on the CMS web site.
- Contact your assigned **EDI Representative** for additional help and assistance using the COBSW. See Chapter 7: Customer Service and Reporting Assistance for Section 111) for more information.

Login IDs

Each person using the Section 111 COBSW must obtain their own Login ID and Password. Your personal Login ID may be used for access to multiple RRE IDs. Your Login ID will also be used to transmit files via SFTP (see the NGHP User Guide Technical Information Chapter (Section 10)). You can play one of two roles under an RRE ID with your single Login ID—Account Manager or Account Designee. Authorized Representatives **cannot** be users of the COBSW. See Section Chapter 4 (: Registration and Account Setup) for more information.

To obtain a Login ID, you must either perform the Account Setup step of the registration process for the RRE ID on the COBSW and become the **Account Manager** or be invited by an already established Account Manager to be associated to the RRE ID as an **Account Designee**. Refer to the information in Chapter 4 on the registration process and the “How Tos” referenced above for more information on obtaining Login IDs during the registration process.

If your organization has completed the registration process and you need a Login ID for the COBSW, contact your Account Manager and request that he or she add you as an Account Designee. You will receive an e-mail invitation to come to the site and set up your Login ID and Password. Likewise, if you are a reporting agent and need access to a customer’s COBSW account to assist with the reporting process, contact the RRE’s Account Manager to be invited as an Account Designee.

Note: Each user of the Section 111 application on the COBSW will have only one Login ID and Password. With that Login ID and Password, you may be associated with multiple RRE IDs (RRE accounts). With one Login ID, you may be an Account Manager for one RRE ID and an Account Designee for another. In other words, the role you play on the COBSW is by RRE ID.

COBSW Maintenance

Routine maintenance on the COBSW and Section 111 SFTP server is typically performed during the third weekend of each month as needed. However, bulletins will be posted to the COBSW Login screen to notify RREs of any changes to scheduled maintenance.

During this time, access to the COBSW and SFTP will be limited. When the COBSW is unavailable, users attempting to login will receive a page to notify them that the site is unavailable. This work usually commences on Friday at 8:00 p.m. (EST) and is completed no later than Monday at 6:00 a.m. (EST).

Best Practices

CMS advises all Section 111 COBSW users to implement the following best practices:

- Keep the personal computer Operating System and Internet Browser software (e.g., Internet Explorer or Firefox) at the most current patch level.
- Install and use the latest versions of anti-virus/spyware software to continuously protect personal computers.
- Use desktop firewall software on personal computers and ensure that file sharing is disabled.
- Never use a public computer (library, internet café, etc.) to login to CMS resources.

System-Generated E-Mails

Table 6-4 lists the e-mails that are generated by the system to the Authorized Representative, and/or Account Manager for the RRE ID. E-mails will be sent from cobva@section111.cms.hhs.gov. Please do not reply to this e-mail address as replies are not monitored by the BCRC. If additional information or action is needed, please contact your EDI Representative directly.

Table 6-4: System Generated E-Mails

E-Mail Notification	Recipient	Purpose
Profile Report	Authorized Representative, Account Manager	Sent within 10 business days upon completion of the Account Setup step on the Section 111 COBSW. Includes attachment with profile report. The RRE's Authorized Representative must review, sign and return the profile report to the BCRC within 30 days. If the BCRC has not received this signed report within 60 days, the RRE ID will be placed in "Discontinued" status. **Note**: RREs must return their signed profile via e-mail to their assigned EDI Representative. Do not return the signed profile report to the COBVA e-mail address from which it was received. When returning this via e-mail, ensure that the profile report is a scanned copy of the document with a wet signature (i.e., an original signature is included on the profile report).
Non-Receipt of Signed Profile Report	Authorized Representative, Account Manager	Generated 30 days after the profile report e-mail if a signed copy of the profile report has not been received at the BCRC. The Authorized Representative for the RRE ID must sign and return the profile report. If another copy is needed, contact your EDI Representative.
Successful File Receipt	Account Manager	Sent after an input file has been successfully received but not yet processed at the BCRC. Informational only. No action required. ***Subsequent e-mails will be sent regarding the results of actual file processing that may require follow up action.***
Late File Submission	Authorized Representative, Account Manager	Sent 7 days after the end of the file submission period if no Claim Input File was received for the RRE ID. Send the file immediately and contact your EDI Representative. This e-mail may be ignored if you have nothing to report for the quarter.
Threshold Error	Account Manager	Sent after the Successful File Receipt e-mail when an input file has been suspended for a threshold error. Contact your EDI Representative to resolve.
Severe Error	Account Manager	Sent after the Successful File Receipt e-mail when an input file has been suspended for a severe error. Contact your EDI Representative to resolve.

E-Mail Notification	Recipient	Purpose
Ready for Testing	Account Manager	Account setup is complete and the signed profile report has been received at the BCRC. The RRE may begin testing.
Ready for Production	Account Manager	Testing requirements have been met and production files will now be accepted for the RRE ID.
Successful File Processed	Account Manager	The BCRC has completed processing on an input file and the response file is available.
Account Designee Invitation	Account Designee	Sent to an Account Designee after the Account Manager for the RRE ID adds the Account Designee to the RRE ID on the COBSW. If the Account Designee is a new user, the e-mail will contain an URL with a secure token link for the user to follow to obtain a Login ID for the COBSW.
Personal Information Changed	User Affected (Account Manager or Account Designee)	Generated after a user changes his personal information on the COBSW. Informational only.
Password Reset	User Affected (Account Manager or Account Designee)	Generated when a user's password is reset on the COBSW.
Login ID Request	User Affected (Account Manager or Account Designee)	Generated after a user completes the "Forgot Login ID" function on the COBSW.

Chapter 7: Customer Service and Reporting Assistance for Section 111

Please be sure to visit the Section 111 page on the CMS Web site http://go.cms.gov/mirnghp frequently for updated information on Section 111 reporting requirements including updates to this guide. In order to be notified via e-mail of updates to this Web page, click the "Subscription Sign-up for Mandatory Insurer Reporting (NGHP) Web Page Update Notification" link found in the Related Links section of the web page and add your e-mail address to the distribution list. When new information regarding mandatory insurer reporting for NGHPs is available, you will be notified. These announcements will also be posted to the NGHP *What's New* page.

To submit a policy-related comment or inquiry to CMS regarding Section 111 Mandatory Reporting, please send an e-mail to the Section 111 Resource Mailbox at PL110-173SEC111-comments@cms.hhs.gov. You will not receive a direct response from this e-mail address but CMS will review each submission received and follow up with additional outreach and education as needed.

All technical questions should be directed to your EDI Representative as explained below.

Please note that e-mails from CMS or the BCRC may come from @section111.cms.hhs.gov, @cms.hhs.gov, @ghimedicare.com, and @ehmedicare.com addresses. Please update your spam filter software to allow receipt of these e-mail addresses.

7.1 Electronic Data Interchange (EDI) Representative

After you register for Section 111 reporting, you will be assigned an EDI Representative to be your main contact for Section 111 file transmission and technical reporting issues. Contact information for your EDI Representative will be provided on your profile report. Your profile report is sent to the RRE's Authorized Representative and Account Manager via e-mail after the account set up has been completed.

If you have not yet registered and been assigned an EDI Representative, and need assistance, please call the EDI Department number at 646-458-6740.

7.2 Contact Protocol for the Section 111 Data Exchange

In all complex electronic data management programs there is the potential for an occasional breakdown in information exchange. **If you have a program or technical problem involving your Section 111 data exchange, the first person to contact is your own EDI Representative at the BCRC.** Your EDI Representative should always be sought out first to help you find solutions for any questions, issues or problems you have.

If you have not yet been assigned an EDI Representative, please call the EDI Department number at 646-458-6740 for assistance.

The CMS and the BCRC places great importance in providing exceptional service to its customers. To that end, we have developed the following escalation process to ensure our customers' needs are met. It is imperative that RREs and their reporting agents follow this process so that BCRC Management can address and prioritize issues appropriately.

1. Contact your EDI Representative at the BCRC. If you have not yet been assigned an EDI Representative, please call the EDI Department at 646-458-6740 for assistance.
2. If your Section 111 EDI Representative does not respond to your inquiry or issue within **two business days**, you may contact the EDI Department Manager, Jeremy Farquhar, at 646-458-6614. Mr. Farquhar's e-mail address is JFarquhar@ehmedicare.com.
3. If the EDI Department Manager or the manager's designee does not respond to your inquiry or issue within **one business day**, you may contact the EDI Director, William Ford, at 646-458-6613. Mr. Ford's e-mail address is WFord@ehmedicare.com.
4. If the EDI Director does not respond to your inquiry or issue within **one business day**, you may contact the BCRC Project Director, Jim Brady, who has overall responsibility for the EDI Department and technical aspects of the Section 111 reporting process. Mr. Brady can be reached at 646-458-6682. His e-mail address is JBrady@ehmedicare.com. Please contact Mr. Brady only after attempting to resolve your issue following the escalation protocol provided above.

Chapter 8: Training and Education

Various forms of training and educational materials are available to help you with Section 111 in addition to this guide.

- CMS Publications—The Section 111 CMS Web page (http://go.cms.gov/mirnghp) has links to all CMS publications regarding the MSP Mandatory Reporting Requirements under Section 111 of the MMSEA of 2007. In order to be notified via e-mail of updates to this Web page, click the "Subscription Sign-up for Mandatory Insurer Reporting (NGHP) Web Page Update Notification" link found in the Related Links section of the web page and add your e-mail address to the distribution list. When new information regarding mandatory insurer reporting for NGHPs is available, you will be notified. These announcements will also be posted to the NGHP *What's New* page.
- Section 111 Teleconferences—CMS conducts Town Hall Teleconferences to provide information and answer questions regarding Section 111 reporting requirements. The schedule for these calls is posted (and updated as new calls are scheduled) on the Section 111 Web page under the What's New tab at http://go.cms.gov/mirnghp.
- Free Computer Based Training (CBT) Courses—CMS has made available a curriculum of computer-based training (CBT) courses to Section 111 RREs. These courses are offered free of charge and provide in-depth training on Section 111 registration, reporting requirements, the Section 111 COBSW, file transmission, file formats, file processing, DDE and general MSP topics. These courses are all available on the Mandatory Insurer Reporting (NGHP) Training Material page at http://www.cms.gov/Medicare/Coordination-of-Benefits-and-Recovery/Mandatory-Insurer-Reporting-For-Non-Group-Health-Plans/NGHP-Training-Material/NGHP-CBTs.html on the CMS web site.
- *All updated* Section 111 policy guidance published in the form of an Alert can be found on the CMS Web page (http://go.cms.gov/mirnghp). Any Alert posted after the date of the currently published User Guide supersedes the applicable language in the User Guide. All Alerts will be incorporated into the next version of the User Guide. Until such time, RREs must refer to the current User Guide and any subsequently dated Alerts for complete information on Section 111 reporting requirements. The NGHP User Guide Appendices Chapter (Appendix K) contains a list of all the applicable NGHP Alerts posted prior to the publication of this version of the User Guide.

Note: The Section 111 User Guides and instructions do not and are not intended to cover all aspects of the MSP program. Although these materials may provide high level overviews of MSP in general, any individual/entity which has responsibility as a primary payer to Medicare is responsible for his/her/its obligations under the law. The statutory provisions for MSP can be found at 42 U.S.C. 1395y(b); the applicable regulations can be found at 42 C.F.R. Part 411. Supplemental guidance regarding the MSP provisions can be

found at the following web pages http://www.cms.gov/Medicare/Coordination-of-Benefits-and-Recovery/Coordination-of-Benefits-and-Recovery-Overview/Medicare-Secondary-Payer/Medicare-Secondary-Payer.html, http://go.cms.gov/wcmsa and http://www.cms.gov/manuals/IOM. The MSP Manual is CMS Publication 100-05.

Chapter 9: Checklist—Summary of Steps to Register, Test and Submit Production Files

The following summarizes the steps needed to participate in the reporting process for Section 111. Reference the Technical Information and Policy Guidance sections for more detailed instruction.

1. **Before you begin, determine the following:**
   - Individuals who will be the RRE's Authorized Representative, Account Manager and Account Designees.
   - Whether reporting agents will be used.
   - How claim files will be submitted – one file for the RRE or separate files based on line of business, agent, subsidiaries, claim systems, data centers, etc. which will require more than one RRE ID.
   - Which file transmission method you will use or if you qualify for DDE. If you choose HTTPS, you will transmit files via the Section 111 COBSW application. If you choose SFTP, you will transmit files to and from the Section 111 SFTP server. If you choose Connect:Direct, contact your EDI Representative for information on how to establish a connection to the BCRC via the CMS Extranet and CMSNet, and create transmission jobs and datasets.
2. **Register and set up your account:**
   - Complete your New Registration and Account Setup for each RRE ID needed, including file transmission information, on the Section 111 COBSW.
   - Receive your profile report via e-mail (within 10 business days after registration is complete) indicating your registration and account setup were accepted by the BCRC.

   Once you successfully register:

   - The RRE's Authorized Representative must approve the account setup, by physically signing the profile report, which includes the Data Use Agreement, and returning it to the BCRC within 30 days. If the BCRC has not received this signed report within 60 days, the RRE ID will be placed in "Discontinued" status. Note: It is recommended that RREs return their signed profile via e-mail to their assigned EDI Representative. Do not return signed profile reports to the COBVA e-mail address from which it had initially been received. When returning this via e-mail, ensure that the profile report is a scanned copy of the document with a wet signature (i.e., an original signature is included on the profile report).
   - Review file specifications, develop software to produce Section 111 files, and schedule your internal quarterly submission process.

- Test each Section 111 file type you will be exchanging with the BCRC.
- Submit your initial TIN Reference and Claim Input File by your assigned production live date.
- Submit your Query File as needed but no more than once per calendar month (ongoing).
- Confirm via e-mail that the information on the annual profile report is correct. Failure to confirm this information may result in deactivation of the RRE ID.

3. Submit your quarterly Claim Input File during your assigned submission periods (ongoing):

- Monitor file processing and statistics on the Section 111 COBSW on a regular basis.
- Update Passwords used for the Section 111 COBSW and SFTP on a regular basis. The system requires you to change your Password every 60 days.
- Monitor automated e-mails generated by the system regarding file processing status. These e-mails are sent to the Account Manager for the RRE ID, who should forward these e-mails to Account Designees and reporting agents as necessary.
- Contact your EDI Representative when issues are encountered or assistance is needed.
- Notify your EDI Representative of issues that will prevent you from timely file submission.