

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Centers for Medicare & Medicaid Services



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### Updating Beneficiary Information with the Benefits Coordination & Recovery Center (formerly known as the Coordination of Benefits Contractor)

**Note: This article replaces article SE1205. There are no changes to the processes that were described in SE1205. The key change is that the Coordination of Benefits Contractor (COBC) is now known as the Benefits Coordination and Recovery Center (BCRC) and there is new contact, address, and Web address information at the end of this article that is associated with this process and the BCRC.**

### Provider Types Affected

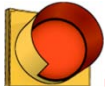
This MLN Matters® Special Edition Article is intended for physicians, other providers, and suppliers who provide products or services to Medicare beneficiaries with insurance in addition to Medicare. It updates MLN Matters® Article SE1205 to provide information regarding the Benefits Coordination & Recovery Center (BCRC), which has replaced the former Coordination of Benefits Contractor.

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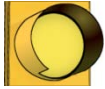
## Provider Action Needed

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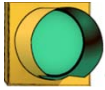
### **STOP – Impact to You**

A new Medicare Secondary Payer (MSP) initiative will affect how you may update beneficiary information to the BCRC.



### **CAUTION – What You Need to Know**

This article describes initiatives that both the Centers for Medicare & Medicaid Services (CMS) and the BCRC are undertaking to maintain the most up-to-date and accurate beneficiary MSP information on Medicare's Common Working File (CWF).



### **GO – What You Need to Do**

You should make sure that your appropriate staffs are aware of these options for updating a beneficiary's MSP information and that they are aware of new contact information at the end of this article for the BCRC.

## Background

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There has been considerable discussion about the accuracy of beneficiary Medicare Secondary Payer (MSP) information on the CWF and who is responsible for keeping that information updated. Further, providers have stated that the update is not accepted when they attempt to update beneficiary information with the BCRC by phone. Therefore (as noted below), CMS and the BCRC are both undertaking initiatives to resolve the issue and maintain the most up-to-date and accurate beneficiary information with regard to MSP.

### *CMS Initiatives*

In compliance with Section 111 of the Medicare, Medicaid, and State Children's Health Insurance Program (SCHIP) Extension Act of 2007 (known as Section 111 of the MMSEA), CMS has implemented a process through which private insurers (both Group Health Plans (GHP) and Non Group Health Plans (NGHP)) submit coverage information to the BCRC when they also provide coverage to a Medicare beneficiary. A private GHP insurer reporting under Section 111 is known as a Responsible Reporting Entity (RRE), and the BCRC receives Section 111 data input files from approximately 1,500 GHP insurers, and each file can include large numbers of individual coverage records. This information permits CMS to more accurately determine who (either the private insurer or Medicare) has primary, or secondary, claims coverage responsibility.

Occasionally, information submitted to the BCRC from any number of sources, including GHP RREs, service providers, and beneficiaries themselves can conflict with MSP information previously reported to the BCRC. To reduce such conflicts in the future, CMS has developed and implemented a data management “Reporting Hierarchy” process, which

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the BCRC administers (effective April 1, 2011). An explanation of the Hierarchy rules can be found within the MMSEA Section 111 GHP User Guide available at <http://go.cms.gov/MIRGHPUserGuide> on the CMS website.

### ***BCRC Initiatives***

The BCRC works closely with GHP RREs and other reporters in order to reduce “hierarchy” conflicts in future reporting. The following steps are in place to help providers update MSP records:

- **Provider attempting update with the beneficiary in the office:**

The first time a call is made to update the record after April 4, 2011, it will be updated via the telephone call. For any subsequent calls made to update the record after April 4, 2011, no update will be made on the call, but two options are available: 1) Proof of information can be faxed or mailed on the insurer or employer’s company letterhead, and the update will be made in 10-15 business days; or 2) You can contact the insurer or employer organization that last updated the record.

- **Provider attempting update when the beneficiary is not in the office:**

No update will be made from a telephone call. The provider has three options to have the record updated:

- 1) Have the Beneficiary contact BCRC;
- 2) Contact the Beneficiary’s insurer to resolve the issue; or
- 3) Fax or mail proof of information on the insurer or employer’s company letterhead and the update will be made in 10-15 business days.

- **Provider with new information:**

The BCRC will take new information for a Beneficiary, but if the new information requires changes to an existing record, two options are available:

- 1) The Beneficiary will need to call to close out the record; or
- 2) Fax or mail proof of information on the insurer or employer’s company letterhead and the update will be made in 10-15 business days.

- **Provider update for deceased beneficiary:**

A SINGLE update can be made by ONE provider for a Deceased Beneficiary, once the date of death has been confirmed. Any subsequent updates would need to be handled by a family member with the appropriate documentation, including a death certificate.

## **Additional Information**

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An explanation of the GHP RRE Hierarchy rules can be found within the MMSEA Section 111 GHP User Guide at <http://go.cms.gov/MIRGHPUserGuide> on the CMS website.

General information about GHP Mandatory Insurer Reporting is available at <http://go.cms.gov/mirghp> on the CMS website.

The BCRC’s contact information is:

**Telephone:** 1-855-798-2627 (8 AM to 8 PM Eastern Time)

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**Fax:** 1-405-869-3307 (address the fax to Medicare- MSP General Correspondence)

**Mailing address:**

Medicare – MSP General Correspondence

P.O. Box 138897

Oklahoma City, OK 73113-8897

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