

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-06 Medicare Financial Management	Centers for Medicare & Medicaid Services (CMS)
Transmittal 114	Date: JANUARY 26, 2007
	Change Request 5444

SUBJECT: Reporting Requirements for Crossover Claims Transmitted to the Coordination of Benefits Contractor (COBC) under the Coordination of Benefits Agreement (COBA) Process

I. SUMMARY OF CHANGES: This CR is being written to inform contractors of the proper way to report complementary credits received through the COBA process, and all other claim crossover functions performed by the Medicare contractor. This CR is being written to enhance the requirements of CR 4016, not replace it.

NEW / REVISED MATERIAL

EFFECTIVE DATE: *February 26, 2007

IMPLEMENTATION DATE: February 26, 2007

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-*Only One Per Row.*

R/N/D	Chapter / Section / Subsection / Title
R	1/190.1/Completing the Certification Form

III. FUNDING:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2007 operating budgets.

IV. ATTACHMENTS:

**Business Requirements
Manual Instruction**

**Unless otherwise specified, the effective date is the date of service.*

Attachment - Business Requirements

Pub. 100-06	Transmittal: 114	Date: January 26, 2007	Change Request: 5444
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SUBJECT: Reporting Requirements for Crossover Claims Transmitted to the Coordination of Benefits Contractor (COBC) under the Coordination of Benefits Agreement (COBA) Process

Effective Date: February 26, 2007

Implementation Date: February 26, 2007

I. GENERAL INFORMATION

A. Background: This CR is being written to inform contractors of the proper way to report complementary credits received through the COBA process, and all other claim crossover functions performed by the Medicare contractor. This CR is being written to enhance the requirements of CR 4016, not replace it.

B. Policy: Medicare contractors are required on its Interim Expenditure Report (IER) and its Final Accounting Cost Proposal (FACP) to report the complementary credits received from all crossover claims. This instruction does not apply to Medicare Administrative Contractors (MACs).

II. BUSINESS REQUIREMENTS TABLE

Use "Shall" to denote a mandatory requirement

Number	Requirement	Responsibility (place an "X" in each applicable column)											
		A / B M A C	D M M A C	F I I E R	C A R R I E R	D M R I C	R E H R I	Shared-System Maintainers				OTHER	
							F I S S	M C S	V M S	C W F			
5444.1	Contractors shall report their accruals and their complementary credits received from the COBC or directly from trading partners on their IER and FACP reports for each fiscal year (FY) in which the cash was earned and the accrual/account receivable was established.			X	X	X	X						
5444.2	On the "Complementary Credit" line, contractors shall report cash received from trading partners through the direct crossover process. NOTE: This line may not be applicable in FY 2007 and beyond, unless the contractor receives late payment from a transitioned COBA trading partner.			X	X	X	X						
5444.3	On the "Medigap" line, contractors shall report all complementary credits received from trading partners as a result of crossing				X	X							

IV. SUPPORTING INFORMATION

A. For any recommendations and supporting information associated with listed requirements, use the box below:

Use "Should" to denote a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
	None

V. CONTACTS

Pre-Implementation Contact(s): Brian Johnson (410) 786-7601 or brian.johnson@cms.hhs.gov

Post-Implementation Contact(s): Brian Johnson (410) 786-7601 or brian.johnson@cms.hhs.gov

VI. FUNDING

No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2007 operating budgets.

190.1 - Completing the Certification Form

(Rev.114, Issued: 01-26-07, Effective: 02-26-07, Implementation: 02-26-07)

A. General

There are four sections that are utilized by the user to generate the PM certification. They are: Credit, Activity Summary by Function, Administrative Funds Drawn and Certification Screen. For MIP, there are three sections. They are: Activity Summary by Function, Administrative Funds Drawn and Certification Screen.

For PM, the user will enter the COB credits. After the user has entered all COB credit information, the system will sum the data to a "face sheet" amount by Medicare function, for Total Cost and Total Adjusted Cost, including a separate line for COB credits. The contractor will attest to the accuracy of the data included in the report by completing a certification statement.

B. Uses

The form will be used for the BR, SBR, IER, and FACP.

C. Completing the Certification Section

1. Credit Amount

The contractor shall enter the *separate* cumulative *amounts* of cash received for Complementary Credit and Medicaid to equal total credits. The user must also enter the *separate amounts* of accrued credits in total. Accrued credits represent outstanding receivables (invoices that have been billed but payments have not been received as of report date). This section must be completed prior to generation of the Certification Section.

The complementary credits shall be reported in the following manner:

***Complementary Credit** – Not applicable unless the Medicare contractor receives late payment for a transitioned COBA trading partner.*

***Medigap** – the contractor shall report all complementary credits received from trading partners as a result of crossing over claim-based Medigap claims to trading partners. An agreement may be in place for transmission purposes.*

***COB Credits** – the contractor shall report only the cash received from the COBC for claims crossed over in COBA production.*

Accrued Credits – the contractor shall report all receivables due from trading partners that the contractor invoiced for themselves.

Accrued COB Credits – the contractor shall report all receivables due from the COBC for claims transmitted to the COBC for crossover in COBA production (adjusted by reimbursement, error reports, including accepted trading partner disputes that were returned to the contractors, and other adjustments reported on the contractor remittance advice).

2. Activity Summary By Function Section

This is a system-generated area. The system will sum the data to a total face sheet by Medicare function. No input is required by the user; however, the total must tie to subsidiary records.

3. Administrative Funds Drawn Section

This section is completed only for the IER. (See Chapter 2, section 60.6.)

4. Certification Section

The contractor shall enter name of Certifying Official and Title. An authorized official signs and dates the hard copy report and retains a copy in file.

5. Remarks Section

The contractor shall complete this section when appropriate.