

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-06 Medicare Financial Management	Centers for Medicare & Medicaid Services (CMS)
Transmittal 124	Date: JUNE 29, 2007
	Change Request 5631

SUBJECT: Treasury Collections on Non-Medicare Secondary Payer (Non-MSP) Debts

I. SUMMARY OF CHANGES: Instructions for Non-Medicare Secondary Payer (Non-MSP) debts on posting and reporting collections received from the Department of the Treasury (Treasury) as a result of cross-servicing efforts.

NEW / REVISED MATERIAL

EFFECTIVE DATE: *July 30, 2007

IMPLEMENTATION DATE: July 30, 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
N	4/70/14.3/Collections
N	4/70/14.3.1/Background
N	4/70/14.3.2/Intra-governmental Payment and Collection System (IPAC)
N	4/70/14.3.3/Debt Collection System (DCS)
N	4/70/14.3.4/Collection/Refund Spreadsheet
N	4/70/14.3.5/Financial Reporting for Collection/Refund Spreadsheet
N	4/70/14.3.6/Debt Paid in Full
N	4/70/14.3.7/Extended Repayment Schedule (ERS)
N	4/70/14.3.8/Excess Collections
N	4/70/14.3.8.1/Applying Excess Collections
N	4/70/14.3.8.2/If the Debtor Has Other Outstanding Debt
N	4/70/14.3.8.3/If the Debtor Has No Other Outstanding Debt
N	4/70/15.3/Financial Reporting for Collections Received on Debts from Cross-

	Servicing
N	4/70/Exhibit 3A/Collection/Refund Spreadsheet (Part A)
N	4/70/Exhibit 3B/Collection/Refund Spreadsheet (Part B)
N	4/70/Exhibit 5/Treasury (Debt Management Services) Action Form (TAF)

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: 124	Date: June 29, 2007	Change Request: 5631
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SUBJECT: Treasury Collections for Non-Medicare Secondary Payer (Non-MSP) Debts

Instructions for Non-Medicare Secondary Payer (Non-MSP) debts on posting and reporting collections received from the Department of the Treasury (Treasury) as a result of cross-servicing efforts

EFFECTIVE DATE: July 30, 2007

IMPLEMENTATION DATE: July 30, 2007

I. GENERAL INFORMATION

A. Background: Eligible delinquent debt is referred to Treasury for collection as part of the requirements of the Debt Collection Improvement Act of 1996 (DCIA). These instructions will address the collections Treasury receives on Non-MSP debts. Instructions for posting collections for MSP debts will be provided in separate instructions.

B. Policy: In accordance with the DCIA, CMS is required to refer all eligible delinquent debt to Treasury or a Treasury designated DCC for cross-servicing. This document provides instructions for posting and reporting collections received as a result of Treasury’s collection efforts.

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 C	C A R E R	D M R R I	R E H I	Shared- System Maintainers	F I S S	M C S	V M S	C W F
5631.1	Medicare contractors will receive Treasury collection information via the Collection/Refund Spreadsheet.	X	X	X	X	X	X					HIGLAS
5631.2	Upon receipt of the Collection/Refund Spreadsheet, Medicare contractors shall apply the collection to the principal and interest amounts as indicated.	X	X	X	X	X	X					HIGLAS
5631.3	Medicare contractors shall use the current date as the date of collection to post the Treasury collections to their systems.	X	X	X	X	X	X					HIGLAS
5631.4	For collection of interest only, Medicare contractors shall post the interest as shown on the Collection/Refund Spreadsheet. No interest adjustment is required prior to	X	X	X	X	X	X					HIGLAS

Number	Requirement	Responsibility (place an "X" in each applicable column)										
		A / B	D M E	F I	C A R R I E R	D M R I C	R E H I	Shared-System Maintainers				OTHER
								F I S S	M C S	V M S	C W F	
	posting the collection.											
5631.5	For collection of principal and interest, Medicare contractors shall manually adjust the amount of interest accrued to the amount of interest collected as listed on the spreadsheet. This will make the amount of the accrued interest equal to the amount of interest collected and listed on the Collection/Refund Spreadsheet.	X	X	X	X	X	X					HIGLAS
5631.6	Medicare contractors shall then post the collection.	X	X	X	X	X	X					HIGLAS
5631.7	If a principal balance remains after posting the collection, interest, if appropriate, shall continue to accrue on the remaining principal balance	X	X	X	X	X	X					HIGLAS
5631.8	Medicare contractors shall complete and return the Collection/Refund Spreadsheet to the CMS CO within 15 calendar days of receipt.	X	X	X	X	X	X					HIGLAS
5631.9	For debts that are not yet reclassified to Currently Not Collectible (CNC), Medicare contractors shall report collections posted to the debts listed on the spreadsheet in Section A, Line 4c, Collections deposited at Another Location, and Section C, line 4c, Collections Deposited at Another Location, of Form CMS H 751.	X	X	X	X	X	X					
5631.10	If the debt is in a CNC status, the amounts collected shall be reported in Section A, Line 4a, Re-established as Active A/R, and Section C, Collections on CNC debt of the Form CMS C 751 and in Section A, Line 6b, Transfers In From CNC, and Line 4c, Collections Deposited at Another Location on Forms CMS H 751.	X	X	X	X	X	X					
5631.11	The amount of accrued interest that is adjusted in order to equal the amount of interest collected and posted to the debt shall be reported on Line 5a, Adjusted Amounts, Internal Adjustments, of Form CMS H 751 or Line 4e, Other, of Form CMS C 751 if the debt is in CNC status.	X	X	X	X	X	X					

Number	Requirement	Responsibility (place an "X" in each applicable column)										
		A / B	D M E	F I	C A R R I E R	D M R I C	R E H	Shared-System Maintainers				OTHER
								F I S S	M C S	V M S	C W F	
5631.12	Medicare contractors shall separately track interest adjustment amounts reported on the "Adjusted Amounts" line on Form CMS H 751 or reported on the "Other" line on the Forms CMS C 751.	X	X	X	X	X	X					
5631.13	The interest adjustment amounts shall be reported in the "Remarks" section of the Forms CMS 751.	X	X	X	X	X	X					
5631.14	For Medicare contractors who have transitioned to the Healthcare Integrated General Ledger Accounting System (HIGLAS), collections reported and posted to the debts on the Collection/Refund Spreadsheet shall be reported on the Treasury Report on Receivables and Debt Collection Activities Report (TROR), Part I, Section A, Line 4(D), Collections by Treasury through Offset and Cross-Servicing and in Part II, Section C, Line 1(G), By Treasury/Designated Debt Collection Center Cross-Servicing.											HIGLAS
5631.15	If the debt is in a Currently Not Collectible (CNC) status, the amounts collected shall be reported in Part I, Section on Line 5(A, Line 4 (D), Collections by Treasury Through Offset) Reclassified/Adjusted Amounts and Cross-Servicing, and Line 5 (E), Written-Off Debts Reinstated for Collections. It shall also be reported in Part II, Section C, Line 1(G), By Treasury/Designated Debt Collection Center Cross-Servicing.											HIGLAS
5631.16	If the status code of the debt on the Collection/Refund Spreadsheet indicates that the debt is in a Treasury approved Extended Repayment Schedule (ERS), (status code UR), Medicare contractors shall remove the debt from any internal withhold/recoupment status.	X	X	X	X	X	X					HIGLAS
5631.17	Medicare contractors shall apply each	X	X	X	X	X	X					HIGLAS

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A / B M A C	D M E M A C	F I I E R	C A R I E R	D M R R C	R M H R I	Shared-System Maintainers			
							F I S S	M C S	V M S	C W F	
	payment to principal and interest, based on the breakout as indicated on the spreadsheet and follow instructions as outlined in Section 70.14.3.4.										
5631.18	Medicare contractors shall continue to accrue interest on the remaining outstanding principal balance until notified by CMS CO that the debt is paid in full.	X	X	X	X	X	X				HIGLAS
5631.19	Debts that are in a Treasury approved ERS shall be reported as current on the Forms CMS H 751 unless the debt is already in CNC classification. Debts already in CNC shall remain in CNC and continue to be reported as delinquent on the Forms CMS C 751.	X	X	X	X	X	X				
5631.20	If the principal balance on the Collection/Refund Spreadsheet shows a negative balance, Medicare contractors shall apply the portion of the collection to the debt to bring the principal balance to zero. The Medicare contractor shall then determine if the debtor has any other outstanding debt that the excess collection can be applied to.	X	X	X	X	X	X				HIGLAS
5631.21	If there are no other outstanding debts, the excess portion of the collection, after bringing the debt to a zero balance, shall be refunded. The amount of the refund shall be annotated on the spreadsheet. If the refund cannot be processed within the timeframe allotted for returning the spreadsheet, Medicare contractor shall annotate the spreadsheet as partially complete and return to CMS CO timely. An additional 15 days shall be allowed for processing refunds.	X	X	X	X	X	X				HIGLAS
5631.22	Once the refunds are processed, the completed Collection/Refund Spreadsheet shall be forwarded to CMS. A copy of the	X	X	X	X	X	X				HIGLAS

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A / B M A C	D M E M A C	F I I E R	C A R R E R	D M R R I	R E H I	Shared-System Maintainers			
							F I S S	M C S	V M S	C W F	
	spreadsheet, with the appropriate annotations regarding the refund, shall be kept in the debtor file for audit trail purposes. The contractor shall make appropriate adjustments in DCS, as well as internal systems to reflect the refund activity. The refund information shall be posted to DCS using collection type RF to bring the DCS principal balance to zero. Contractors shall follow instructions for posting the refund as outlined in the DCS User Guide, Exhibit 4 of this section.										
5631.23	If the debtor has other outstanding debt, Medicare contractors shall apply the portion of the collection to the debt in order to bring the balance to zero and close the debt.	X	X	X	X	X	X				HIGLAS
5631.24	The excess collection shall then be applied to the oldest debt first (then next oldest), in accordance with established procedures for applying excess collections against a debtor's overpayments.	X	X	X	X	X	X				HIGLAS
5631.25	The breakout of principal and interest on the Collection/Refund Spreadsheet does not apply when the excess collection is applied to another outstanding debt.	X	X	X	X	X	X				HIGLAS
5631.26	Medicare contractors shall indicate on the spreadsheet the action taken and the way the collection was allocated to principal and interest on the other debt, and return the completed spreadsheet to CMS CO.	X	X	X	X	X	X				HIGLAS
5631.27	If the collection is applied to other debt(s), the Medicare contractors shall first update the DCS with the DCS Collection Type Code of AD to zero the negative balance of the debt where the excess collection is identified.	X	X	X	X	X	X				HIGLAS
5631.28	If the excess collection is applied to another debt currently at Treasury, Medicare contractor shall use AD to post the excess collection to the other debt(s).	X	X	X	X	X	X				HIGLAS

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A / B M A C	D M E M A C	F I I E R	C A R R I E R	D M R R I C	R H R I	Shared-System Maintainers			
						F I S S	M C S	V M S	C W F		
	None.										

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:

B. For all other recommendations and supporting information, use the space below:

V. CONTACTS

Pre-Implementation Contact(s): Deborah Parzynski, Deborah.Parzynski@cms.hhs.gov

Post-Implementation Contact(s): Deborah Parzynski, Deborah.Parzynski@cms.hhs.gov

VI. FUNDING

A. For TITLE XVIII Contractors, use only one of the following statements:

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

B. For Medicare Administrative Contractors (MAC), use only one of the following statements:

The contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the Statement of Work (SOW). The contractor is not obligated to incur costs in excess of the amounts specified in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

Medicare Financial Management

Chapter 4 - Debt Collection

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- 70.14.3.6 Debt Paid in Full*
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70.15.3 Financial Reporting for Collections Received on Debts from Cross Servicing

Exhibit 3A - Collection/Refund Spreadsheet (Part A)

Exhibit 3B - Collection/Refund Spreadsheet (Part B)

Exhibit 5 – Treasury (Debt Management Services) Action Form (TAF)

70.14.3- Collections

(Rev.124, Issued: 06-29-07, Effective: 07-30-07, Implementation: 07-30-07)

70.14.3.1- Background

(Rev.124, Issued: 06-29-07, Effective: 07-30-07, Implementation: 07-30-07)

Collections from the Department of the Treasury (Treasury) as a result of cross servicing efforts are received by CMS central office (CO) through the Intra-governmental Payment and Collection (IPAC) system. Collections may be received as a result of collection efforts by Treasury's Servicing Center or by a Treasury contracted Private Collection Agency (PCA) including installment payments on Treasury approved extended repayment schedules or from offsets from the Treasury Offset Program (TOP). Treasury provides the CMS CO with a collection report generated from the IPAC system through the Program Support Center (PSC) of the Department of Health & Human Service (HHS) on a monthly basis.

70.14.3.2- Intra-governmental Payment and Collection System

(Rev.124, Issued: 06-29-07, Effective: 07-30-07, Implementation: 07-30-07)

The collection report generated from the IPAC system includes a break out of principal and interest collected on individual debts; however, the report does not show the balance and the status of the debt after the collection. Due to system limitations, interest on the CMS debts that have been referred to Treasury and its PCAs does not continue to accrue on Treasury/PCA records during the entire collection process. Therefore, the amount of interest collected by Treasury or its PCAs may not equal the amount of interest shown as accrued by the Medicare contractors.

70.14.3.3- Debt Collection System

(Rev.124, Issued: 06-29-07, Effective: 07-30-07, Implementation: 07-30-07)

The CMS CO shall update the Debt Collection System (DCS) for collection activity received from the IPAC collections reports. The principal balance reported in the DCS should reflect the principal balance being pursued by Treasury and its PCAs and should be the principal balance reflected in Medicare contractors' internal systems after posting the collection.

Note: If the principal balance in Medicare contractors' system does not agree with the principal balance reported in the DCS, Medicare contractors shall research the discrepancy by querying the DCS collection screen to compare collection/adjustment entries to their internal systems/records to determine the difference. Any differences shall be reconciled and the appropriate systems shall be updated.

70.14.3.4- Collection/Refund Spreadsheet

(Rev.124, Issued: 06-29-07, Effective: 07-30-07, Implementation: 07-30-07)

Medicare contractors will receive Treasury collection information from CMS CO via the Collection/Refund Spreadsheet (Exhibits 3A and 3B). The Collection/Refund Spreadsheet, initially prepared by CMS CO, shall be forwarded electronically to Medicare contractors within 15 calendar days of

receipt of the IPAC collections. However, no Collection/Refund Spreadsheet shall be forwarded to Medicare contractors with less than 15 calendar days remaining in the quarter.

For each debt listed on the Collection/Refund Spreadsheet, Medicare contractors shall apply the collection to principal and interest amounts as indicated. For collection of interest only, Medicare contractors shall post the interest as shown on the Collection/Refund Spreadsheet. No interest adjustment is required prior to posting the collection. For collection of principal and interest, Medicare contractors shall manually adjust the amount of interest accrued to the amount of interest collected as listed on the Collection/Refund Spreadsheet. This will make the amount of the accrued interest equal to the amount of interest collected and listed on the Collection/Refund Spreadsheet. Medicare contractors shall then post the collection. If a principal balance remains after posting the collection, interest, if appropriate, shall continue to accrue on the remaining principal balance. Medicare contractors shall use the current date as the date of collection to post the Treasury collections to their systems.

Medicare contractors shall complete and return the Collection/Refund Spreadsheet within 15 calendar days of receipt.

Note: Any principal balance that remains in Medicare contractors' systems, after posting the collection activity, will be carried forward. Medicare contractors shall continue to accrue interest, if applicable, on any outstanding principal balance until notified by CMS CO that the debt is paid in full or compromised.

70.14.3.5- Financial Reporting for Collection/Refund Spreadsheet **(Rev.124, Issued: 06-29-07, Effective: 07-30-07, Implementation: 07-30-07)**

Collections posted to the debts listed on the Collection/Refund Spreadsheet shall be reported in Section A, Line 4C, Collections Deposited at Other Location, and Section C, Line 4C, Collections Deposited at Another Location, of Forms CMS H 751. If the debt is in a Currently Not Collectible (CNC) status, the amounts collected shall be reported in Section A, Line 4A, Re-established as Active A/R, and Section C, Collections on CNC Debt, of the Forms CMS C 751 and in Section A, Line 6B, Transfers In From CNC, and Line 4C, Collections Deposited at Other Location on Forms CMS H 751.

The amount of accrued interest that is adjusted in order to equal the amount of interest collected and posted to the debt shall be reported on Line 5A, Adjusted Amounts, Internal Adjustments, of Forms CMS H 751 or Line 4E, Other, of Forms CMS C 751, if the debt is in CNC status. Medicare contractors shall separately track interest adjustment amounts reported on the "Adjusted Amounts" line on Forms CMS H 751 or reported on the "Other" line on the Forms CMS C 751. The interest adjustment amounts shall be reported in the "Remarks" section of the Forms CMS 751.

For Medicare contractors who have transitioned to the Healthcare Integrated General Ledger Accounting System (HIGLAS), collections reported and posted to the debts on the Collection/Refund Spreadsheet shall be reported on the Treasury Report on Receivables and Debt Collection Activities Report (TROR), Part I, Section A, Line (4)(D), Collections by Treasury through Offset and Cross-Servicing and in Part II, Section C, Line (1)(G), By Treasury/Designated Debt Collection Center Cross-Servicing. If the debt is in a Currently Not Collectible (CNC) status, the amounts collected shall be reported in Part I, Section A, on Line(4) (D), Collections by Treasury Through Offset and Cross-Servicing, and Line (5) (E), Written-Off Debts Reinstated for Collections and also in Part II, Section C, Line (1) (G), By Treasury/Designated Debt Collection Center Cross-Servicing.

70.14.3.6- Debt Paid in Full **(Rev.124, Issued: 06-29-07, Effective: 07-30-07, Implementation: 07-30-07)**

If the principal balance of the debt in DCS after the IPAC collection is posted is zero, the status code of the debt will not be systematically changed to a paid in full status code. Sometimes a debt has been collected by Treasury and the collection received in one IPAC, but a reversal of the collection

occurs in a subsequent IPAC. Medicare contractors shall not initiate any case “close out” activity on the debt when the collection is posted. CMS will provide separate instructions on debts returned by Treasury as paid in full or closed.

Note: If Medicare contractors’ system does not reflect a zero principal balance after posting the collection, Medicare contractors shall research the discrepancy by querying the DCS collection screen to compare collection/adjustment entries to their internal systems/records, and update all the applicable systems to reflect the appropriate adjustment.

70.14.3.7- Extended Repayment Schedule (ERS)
(Rev.124, Issued: 06-29-07, Effective: 07-30-07, Implementation: 07-30-07)

Treasury and its PCAs have authority to approve extended repayment schedules (ERS) up to 60 months without requesting CMS approval. The ERS requests in excess of 60 months shall be referred to CMS CO for consideration.

When Treasury notifies CMS CO of an approved ERS, CMS CO shall update the DCS with the DCS status code of UR. The periodic payments on the approved ERS received by Treasury or its PCAs will be forwarded to CMS CO on an IPAC collections report. When CMS CO receives the IPAC collections on the approved ERS, CMS CO shall indicate the ERS status on the Collection/Refund Spreadsheet to notify Medicare contractors of such status. Upon receipt of the collection on the approved ERS on the Collection/Refund Spreadsheet from CMS CO, Medicare contractors shall remove the debt from any internal withhold/recoupment status.

Medicare contractors shall apply each collection to principal and interest based on the breakout as indicated on the Collection/Refund Spreadsheet and follow Collection/Refund Spreadsheet instructions as outlined in section 70.14.3.4. Medicare contractors shall continue to accrue interest, if applicable, on any outstanding principal balance until notified by CMS CO that the debt is paid in full.

Debts that are in a Treasury approved ERS shall be reported as current on the Form CMS H 751. Debts in CNC classification shall remain in CNC and continue to be reported as delinquent on the Form CMS C 751. For those Medicare contractors who have transitioned to HIGLAS, debts that are in a Treasury approved ERS shall be reported as current unless they are already classified as CNC. Debts in CNC classification shall remain in CNC and continue to be reported as delinquent.

70.14.3.8- Excess Collections
(Rev.124, Issued: 06-29-07, Effective: 07-30-07, Implementation: 07-30-07)

Amounts collected may exceed the amount of the debt that was referred for cross servicing/TOP. As an example, an excess collection may result from Treasury and its PCAs receiving a collection and Medicare contractors recouping the same debt by internal withhold.

Excess collections are identified on the Collection/Refund Spreadsheet by showing a negative principal balance in the DCS Principal Balance column.

70.14.3.8.1- Applying Excess Collections
(Rev.124, Issued: 06-29-07, Effective: 07-30-07, Implementation: 07-30-07)

Medicare contractors shall apply the portion of the collection to the debt listed on the Collection/Refund Spreadsheet in order to bring the balance to zero. Medicare contractors shall then determine if the debtor has any other outstanding debts including interest to which the excess collection may be applied.

***70.14.3.8.2- If the Debtor Has Other Outstanding Debt
(Rev.124, Issued: 06-29-07, Effective: 07-30-07, Implementation: 07-30-07)***

If the debtor has other outstanding debt, the excess collection shall then be applied to the oldest debt first (then next oldest), in accordance with established procedures for applying excess collections against a debtor's overpayments. The breakout of principal and interest on the Collection/Refund Spreadsheet does not apply when the excess collection is applied to another outstanding debt. Medicare contractors shall indicate on the Collection/Refund Spreadsheet the action taken and the way the collection was allocated to principal and interest on the other debt, and return the completed spreadsheet to CMS CO. If the collection is applied to other debts, the Medicare contractors shall first update the DCS with the DCS Collection Type Code of AD to zero the negative balance of the debt where the excess collection is identified. If the excess collection is applied to another debt currently at Treasury, Medicare contractor shall use AD to post the excess collection to the other debts.

***70.14.3.8.3-If the Debtor Has No Other Outstanding Debt
(Rev.124, Issued: 06-29-07, Effective: 07-30-07, Implementation: 07-30-07)***

If there are no other outstanding debts, the excess portion of the collection, after bringing the debt listed on the spreadsheet to a zero balance, shall be refunded. The amount of the refund shall be annotated on the Collection/Refund Spreadsheet. If the refund cannot be processed within the timeframe allotted for returning the Collection/Refund Spreadsheet, Medicare contractor shall annotate the spreadsheet as partially complete and return to CMS CO timely. An additional 15 days shall be allowed for processing refunds. Once the refunds are processed, the completed Collection/Refund Spreadsheet shall be forwarded to CMS. A copy of the spreadsheet, with the appropriate annotations regarding the refund, shall be kept in the debtor file for audit trail purposes. The contractor shall make appropriate adjustments in DCS, as well as internal systems to reflect the refund activity. The DCS shall be updated to reflect the refund and bring the principal balance of the debt to zero. Instructions are found in Exhibit 4, DCS User Guide, of this section.

***70.15.3- Financial Reporting for Collections Received on Debts from Cross Servicing
(Rev.124, Issued: 06-29-07, Effective: 07-30-07, Implementation: 07-30-07)***

Medicare contractors shall follow the instructions outlined in Chapter 5, Section 270. Medicare contractor shall report and post all activities related to these debts according to CMS guidelines and instructions.

Exhibit 3 A – Collection/Refund Spreadsheet (Part A)

(Rev.124, Issued: 06-29-07, Effective: 07-30-07, Implementation: 07-30-07)

[Click here to review Exhibit 3 A – Collection/Refund Spreadsheet \(Part A\)](#)

Exhibit 3 B – Collection/Refund Spreadsheet (Part B)

(Rev.124, Issued: 06-29-07, Effective: 07-30-07, Implementation: 07-30-07)

Click here to review Exhibit 3 B – Collection/Refund Spreadsheet (Part A)

Exhibit 5

Treasury (Debt Management Services) Action Form (TAF)

Treasury Cross-Servicing Dispute Resolution

(Rev.124, Issued: 06-29-07, Effective: 07-30-07, Implementation: 07-30-07)

DMS Request Date:

Total Number of Pages: _____

FedDebt Case ID.:

Principal Amount:

Creditor Agency Debt ID:

PCA Code:

Debtor:

Program:

For CMS Use Only:

Creditor Agency Contact Name:

HIC:

Creditor Agency Contact Phone:

Beneficiary Name:

Creditor Agency Facsimile:

Dispute Number:

Dispute request reason:

Additional comments:

Creditor Agency Must Respond to Dispute via facsimile (205) 912-6374 By:

Return response to Bosch Stanley. If you have any questions, please call 205-912-6317.

Creditor Agency (CA) Dispute Resolution Section:

Please indicate a response by checking one of the following reasons: Please attach supporting documentation.

DAIC ___ CA agrees. Debt amount is incorrect. Requires financial adjustment.

DACC ___ CA disagrees. Debt amount is correct. Continue collection efforts.

MDAA ___ CA agrees. Miscellaneous dispute, stop collection activity.

MDFD ___ CA agrees. Miscellaneous dispute. Requires financial adjustment, continue collection efforts.

MDDD ___ CA disagrees. Miscellaneous dispute. Continue collection efforts.

VDWD ___ CA agrees. Wrong debtor, stop collection activity.

VDRD ___ CA disagrees. This is not the wrong debtor, continue collection efforts.

VDPP ___ CA agrees. Previously paid, stop collection activity.

VDNP ___ CA disagrees. Not previously paid, continue collection efforts.

VDPR ___ CA agrees. Previously resolved, stop collection activity.

VDNR ___ CA disagrees. Not previously resolved, continue collection efforts.

Financial Adjustment Information (To Be Completed By Creditor Agency):

Principal Amount \$ _____

Interest Amount \$ _____

Penalty Amount \$ _____

Admin Cost Amount \$ _____

Total Balance Owed \$ _____

Please check one of the following:

Adjustment reflects the total balance currently owed by the debtor, and has been made by our Agency.

Adjustment has not been made in FedDebt by the Agency, and should be made by DMS.

Creditor Agency Response Date: _____ Creditor Agency Response Contact: _____

Additional Comments By Creditor Agency:
