

# Section 111 Workers' Compensation Reporting Webinar



April 15, 2026

# Presentation Overview



Background



Review of Section 111 Reporting and  
WCMSAs



Issues Encountered Post  
Implementation



Best Practices



Questions & Answers

## Background

- Protecting the Medicare Trust Funds means that CMS must make every effort to ensure that it does not pay for items and services that certain health insurance or coverage is primarily responsible for paying.
- 42 CFR 411.46 indicates that Medicare should not be a primary payer for future medical services related to a Workers' Compensation (WC) injury as specified in the WC settlement.
- CMS is authorized to collect this data under 1395y(b)(8)(ii), which indicates that Medicare (via the Secretary) can specify information needed to make an appropriate determination concerning coordination of benefits.

## Background, continued

- CMS historically had limited/ incomplete information on MSAs. In some circumstances, it's possible to tie a voluntary Workers' Compensation Medicare Set-Aside (WCMSA) submission to a Section 111 record, but entities may choose to not use the voluntary WCMSA amounts. Parties may also decide to use an "Evidence-Based" MSA (EBMSA) or other non-CMS-approved MSA.
- Consequently, CMS has expanded the Total Payment Obligation to Claimant (TPOC) to include WCMSA information to ensure Medicare pays claims appropriately where a WCMSA has been established by a settlement.

## When should WCMSA data elements be reported?

- You must report WCMSA information if all of the following are true:
  - A TPOC (settlement, judgment, award, or other payment) has occurred, with all necessary approvals completed, and
  - Some portion of that TPOC is designated as a WCMSA, and
  - The TPOC date is on or after April 4, 2025\*.
- WCMSA reporting does not alter CMS's direction to only report after there has been a TPOC settlement, judgment, award, or other payment and/or after ORM has been assumed.

\*As previously announced, enforcement of CMPs related to WCMSAs will be limited to TPOC dates on or after 8/1/2025.

# Review of WCMSA Data Fields

Field	Name	Definition
37	MSA Amount	<ul style="list-style-type: none"> <li>When a case has settled, this is the dollar amount set aside for future medical care/items/services for the work-related injury.</li> <li>Can be zero (no WCMSA) or an amount equal or less than the total TPOC amount.</li> </ul>
38	MSA Period	<ul style="list-style-type: none"> <li>The length of time the WCMSA is expected to last, in years.</li> </ul>
39	Lump Sum or Structured/Annuity Payout Indicator	<ul style="list-style-type: none"> <li>Method by which the MSA will be funded, and denoted by a (S) for a structured/annuity or a (L) for a lump sum.</li> <li>Structured MSA: Funded over a specific number of years.</li> <li>Lump Sum MSA: Funded, in its entirety, all at once.</li> </ul>
40	Initial Deposit Amount	<ul style="list-style-type: none"> <li>Initial “seed money” amount when the WCMSA is established as a structured settlement/annuity. Should be zero if a lump sum is reported in the preceding field.</li> </ul>

# Review of WCMSA Data Fields, continued

Field	Name	Use
41	Anniversary (Annual) Deposit Amount	<ul style="list-style-type: none"> <li>• Amount made available annually after initial establishment</li> <li>• Only used when the WCMSA is established as a structured settlement/ annuity.</li> </ul>
42	Case Control Number (CCN)	<ul style="list-style-type: none"> <li>• Identifies related WCMSA submission (voluntary or Section 111).</li> <li>• NOTE: Failure to provide this information can cause multiple cases to be established.</li> </ul>
43	Professional Administrator EIN	<ul style="list-style-type: none"> <li>• Identifies the professional administrator for a WCMSA, if applicable.</li> <li>• NOTE: Failure to provide a previously identified professional administrator risks removal of the professional administrator from CMS's records.</li> </ul>

## What does CMS do with the WCMSA data reported via Section 111?

- CMS uses reported data to create a Common Working File (CWF) record to prevent the payment of medical claims related to the treatment of the reported injury or condition.
- The beneficiary is contacted by CMS with information about the WCMSA attestation and exhaustion processes.
- In-process voluntary WCMSAs (those where settlement has not yet been reported) are updated to reflect that the WCMSA has been completed.
- An RRE reporting settlement has occurred will remove a case from the voluntary WCMSA review workflow.

# Reporting Examples

The following slides are intended to illustrate examples of settlements with WCMSAs and how those would be reported to CMS.

# Reporting Example # 1

- Jane Doe and ABC Company reached an agreement to close Jane’s workers’ compensation claim with a lump sum payment of \$13,725.00.
- The addendum further indicated that \$1,318.00 would be used to establish a professionally administered account with \$689.00 payable each year for 18 years.

Field #	Field Title	Appropriate Data
37	MSA Amount	00001372500
38	MSA Period	18
39	Lump Sum/Structured Annuity	S
40	Initial Deposit Amount	00000131800
41	Anniversary ( Annual Deposit Amount)	00000068900
42	Case Control Number	‘ ‘
43	Professional Administrator EIN	111111111

## Reporting Example # 2

- In this agreement, Jon Doe agrees to accept \$20,000 to settle all claims for head/arms and any/all known/unknown injuries in addition to a \$69,348.52 CMS-approved Self-Administered MSA.

Field #	Field Title	Appropriate Data
37	MSA Amount	00006934852
38	MSA Period	22
39	Lump Sum/Structured Annuity	L
40	Initial Deposit Amount	00000000000
41	Anniversary ( Annual Deposit Amount)	00000000000
42	Case Control Number	‘ ‘
43	Professional Administrator EIN	000000000
81	TPOC Amount 1	00008934852

## Reporting Example # 3

- A case settled on April 17, 2025, and includes a TPOC of \$50,000.75. There is no WCMSA included in the settlement.

Field #	Field Title	Appropriate Data
37	MSA Amount	000000000000
38	MSA Period	00
39	Lump Sum/Structured Annuity	‘ ‘
40	Initial Deposit Amount	000000000000
41	Anniversary ( Annual Deposit Amount)	000000000000
42	Case Control Number	‘ ‘
43	Professional Administrator EIN	0000000000
81	TPOC Amount 1	00005000075

## Reporting Example # 4

### Snapshot of RRE Section 111 MSA Data Transmission

MSA Amount	MSA Period	MSA Payout Method	Initial Deposit Amount	Anniversary (Annual) Deposit Amount	Case Control Number	Professional Administrator EIN
\$39,952.17	12	Lump Sum	\$0.00	\$0.00		0

- Final settlement included a MSA in the amount of \$39,952.17 (Field 37).
- The MSA is projected to last 12 years (Field 38).
- The MSA and was funded as a lump sum (Field 39).
- No evidence of a corresponding voluntary WCMSA proposal being submitted to CMS prior to this RRE's report. ( Field 42 is blank).
- MSA will be self-administered (Field 43 = 0).

**All data is presumed to be validated by the RRE before reporting.**

## Reporting Issue:

Section 111  
MSA values do  
not match  
voluntary  
process values

Data Source	MSA Amount Reported
WCMSA (Voluntary)	\$ 11,978.34
Section 111 Record	\$ 11,978.00
WCMSA (Voluntary)	\$ 30,179.00
Section 111 Record	\$ 30,000.00

- The submitted WCMSA case was converted to “non-approved,” identified as completed, and a “Notice Of Settlement” (NOS) letter was mailed.
- CMS has adjusted system logic to not include cents and a value tolerance to mitigate consequences of exact matching programming, but RREs must validate all data and check field requirements before reporting.

## Reporting Issue: Professional Administrator EIN

- The Professional Administrator EIN is described as not mandatory because it is appropriate to not populate this field in many cases (e.g., where there is no professional administrator or no WCMSA to report).
- This field must be treated as required if there is a professional administrator. CMS is adjusting systems logic and the User Guide to mitigate the issue. But CMS cannot convert the field to required without other adverse impacts on the RRE community.
- **Note:** Records with “zero” values in the field were overwritten the professional administrator information in CMS’s systems, switching cases to “self-administered,” (beneficiary would be responsible for administering the set-aside account).

## Reporting Issue:

## Settlements with multiple dates of incident (DOI)

- The following Section 111 example resulted in the creation of 23 individual cases, and complications with the records established to coordinate benefits.

Data Source	Date of Incident
WCMSA (Voluntary Submission)	23 incidents resolved with 1 settlement ( 1 record)
Section 111 record	1 record for each DOI (23 reports submitted)

- Where multiple incidents are resolved with one agreement/ settlement/ other payment on one date, CMS recommends reporting:
  - one TPOC and one WCMSA, with
  - the earliest DOI,
  - a complete list of diagnosis codes released on that date, and
  - the total TPOC and WCMSA amounts.
- This guidance can be found in the Section 111 NGHP User Guide.

## Reporting Issue:

## Voluntary WCMSA case removed from the review process

- As CMS has stated since 2024, if a report of a TPOC with a WCMSA is received, CMS presumes the settlement and the WCMSA was finalized regardless of the voluntary case's status.
- The Workers' Compensation Review Contractor (WCRC) will take no further action with the submission.
- RREs must coordinate with all parties prior to reporting the TPOC and WCMSA data.

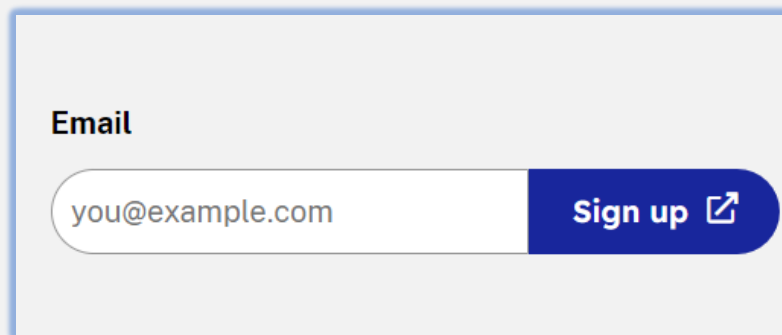
# Section 111 WCMSA Reporting Best Practices

MSA data reported as part of the Section 111 process will have an impact on CMS systems, process and potentially the beneficiary.

- All parties are expected to cooperate to ensure information reported to CMS is accurate and complete.
- Report MSA data only when a settlement has occurred. CMS has never changed its direction that pending settlement data should never be reported.
- Confirm the accuracy of the data to be reported, including agreement between any WCMSA proposals reviewed and approved by CMS.
- Populate all fields if applicable. Fields may be considered “optional” for the purposes of receiving a file submission, but failure to appropriately populate those fields will lead to errors in CMS’s systems that will impact the beneficiary and other parties.

## Additional Resources

- Please submit questions to [S111WCMSA@cms.hhs.gov](mailto:S111WCMSA@cms.hhs.gov)
- [NGHP User Guide](#)
- To sign up for notifications use the e-mail updates box at the bottom of any CMS.gov page.



The image shows a sign-up form for email updates. It consists of a light gray rounded rectangle containing the word "Email" in bold black text. Below this is a white input field with rounded corners containing the placeholder text "you@example.com". To the right of the input field is a dark blue button with rounded corners, containing the text "Sign up" in white, followed by a white square icon with a diagonal arrow pointing up and to the right.

# Questions & Answers

