



Office of Financial Management/Financial Services Group

December 21, 2010

Implementation of Medicare Secondary Payer Mandatory Reporting Provisions in
Section 111 of the Medicare, Medicaid, and SCHIP Extension Act of 2007
(See 42 U.S.C. 1395y(b)(7) & (8))

**ALERT: Revised Implementation Date of Direct Data Entry (DDE) Option for
Liability Insurance (Including Self-Insurance), No-Fault Insurance, and
Workers' Compensation**

The implementation date for the Direct Data Entry (DDE) reporting option that may be used by liability insurance (including self-insurance), no-fault insurance, and workers' compensation (collectively referred to as Non-Group Health Plan or NGHP) responsible reporting entities (RREs) on the Section 111 Coordination of Benefits Secure Website (COBSW) has been changed from January 10, 2011 to **March 1, 2011**.

During the "Testing" phase of the DDE system, a number of issues arose that have proved too difficult to resolve in time for the January 10, 2011 implementation date. In the interest of building an effective and efficient DDE system, the Centers for Medicare & Medicaid Services (CMS) has decided to move the DDE implementation date to March 1, 2011. The additional time will allow for the resolution of open technical issues with the DDE system and will provide RREs with a smoothly functioning system.

Claims that are not initially reported until March 1, 2011 will not be considered late. However, moving the DDE implementation date does not change the retroactive reporting requirements of January 1, 2010 associated with claim reports of ongoing responsibility for medicals (ORM) and October 1, 2010 associated with no-fault insurance and workers' compensation Total Payment Obligation to the Claimant (TPOC) amounts. (Please refer to the NGHP User Guide and the alert "Revised Implementation Timeline for TPOC Liability Insurance..." dated November 9, 2010 for further details on the required claim reporting dates.)

Important Notes:

- This revised implementation date for DDE does not apply to or have any impact on NGHP RREs submitting claim reports via Claim Input Files.
- Despite the change of the implementation date, RREs that use the DDE option have the same responsibility and accountability as any other RRE. These reporters will be required to report the same data elements as those required under the current file submission methods (HTTPS, SFTP, Connect:Direct).

- RREs using the DDE reporting option must complete retroactive reporting by March 31, 2011. This includes reporting of all no-fault insurance and workers' compensation TPOC Amounts with TPOC Dates of October 1, 2010 and subsequent, as well as claim reports for ORM in affect on or after January 1, 2010 for liability insurance (including self-insurance), no-fault insurance and workers' compensation.
- After the DDE application has been implemented and RREs using DDE have completed retroactive reporting:
 - DDE claim record submissions are required within 45 calendar days of the TPOC date or within 45 calendar days of assuming Ongoing Responsibility for Medicals (ORM).
 - ORM termination date submission must be reported via DDE within 45 calendar days of the ORM termination date.

Please continue to monitor the MMSEA Section 111 dedicated website at <http://www.cms.gov/MandatoryInsRep/> for additional information on the DDE process and updates to the User Guide.