



**Office of Financial Management/Financial Services Group**

---

February 14, 2011

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 March 1, 2011 to **July 11, 2011**.

During the last few months, the Centers for Medicare & Medicaid Services (CMS) and the Coordination of Benefits Contractor (COBC) have worked diligently to resolve the technical issues that arose during the "Testing" phase of the DDE system. To ensure a quality product for end-users, a limited number of RREs were selected to participate in a Pilot Test of the completed DDE system. As a result of input received from Pilot Testers, and in the interest of building an effective and efficient DDE system, CMS has decided to extend the Pilot Test and move the DDE implementation date to July 11, 2011.

Moving the DDE implementation date to July 11, 2011 will allow additional time to implement some of the enhancements recommend by the Pilot Testers. The additional time will also allow for more extensive Pilot Testing of the DDE system, including the Pilot Tester recommended enhancements.

Claims that are not initially reported until July 11, 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 September 30, 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.