Breaking the Medicare Code: Essential Tools for Risk Navigation

SPEAKERS

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CONNECTING RISKS THAT MATTER

Agenda

- MSP Refresher

- MMSEA Section 111 Overview

- Updates Since October 2024

- Data Clean Up Strategies

- Enhanced Integration for MSP Services

MSP Refresher

CONNECTING RISKS THAT MATTER

Medicare Secondary Payer Refresher

Medicare is the national health insurance program administered by the federal government and providing coverage for:

- People over the age of 65

- Disabled people entitled to SSDI for more than 24 months

- People diagnosed with "End Stage Renal Disease" or "Lou Gehrig's Disease"

"PART"	SERVICE / ORGANIZATION
Part A	Federally paid medical care for inpatient, skilled nursing, hospice
Part B	Federally paid preventive care, outpatient, doc visits
Part C	Privately run Medicare HMO (plus added services)
Part D	Privately administered prescription drug benefit

Medicare Secondary Payer Refresher

The Medicare Secondary Payer Statute ensures that Medicare is not responsible for paying first on a health care claim

- Allows parties to Coordinate Benefits

- Medicare can Recover from anyone

- Avoid Improperly Shifting the Burden to Medicare

Part of MSP	Brief Overview
Conditional Payments	Medicare payments are always "conditioned upon later reimbursement to the Trust Fund"
Section 111	CMS now knows about every open accepted case and every settlement with a Medicare Beneficiary
MSAs	Ensure funds are available to offset future medical expenses

MMSEA Section 111 Overview

MMSEA Section 111 Overview

- Discover Billions in Unresolved Conditional Payments

- Cease Making Payments Where a Primary Payer Exists

- Ensure Settlement Adequately Consider Medicare's Interests
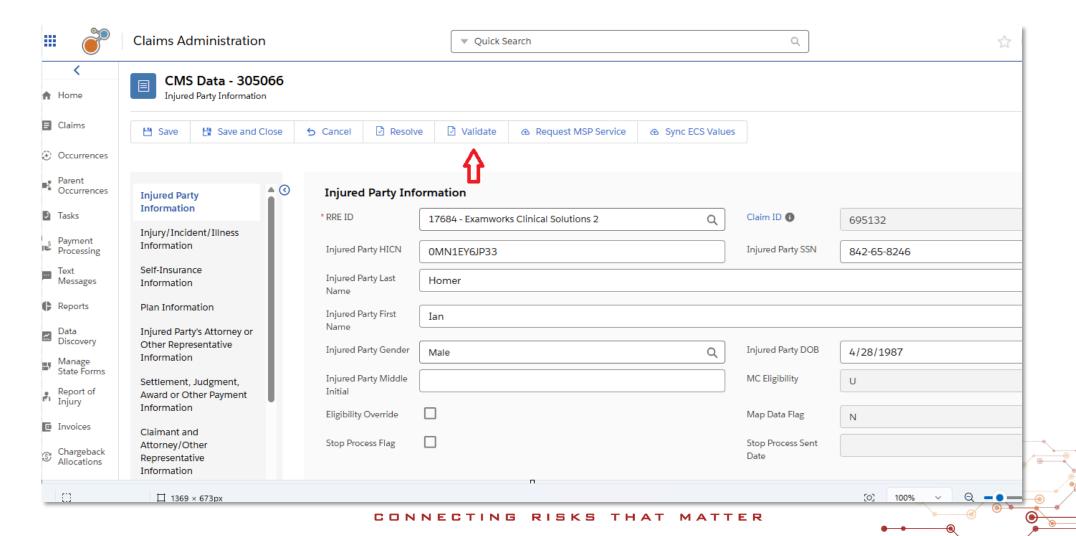
- Generate Billions in Revenue for SCHIP Through Fines

MMSEA Section 111 Overview

RKCS and ECS Data Exchange

- Eligibility File

  - Claim is in this file first, with "Big5 data"

- Claim File

  - Full Section 111 data is provided for Medicare eligible claims

- Depending on Riskonnect platform, files are exchanged biweekly or weekly and ECS returns file on biweekly or weekly basis

MMSEA Section 111 Overview

Validation API Button – real time updates

MMSEA Section 111 Overview

MONTHLY ELIGIBILITY CHECK

- Yes vs. Undetermined

- MAP Data Returned

- Recheck Active Claims Every Month for Updated MAP Data

QUARTERLY CLAIM REPORTING

- Workers' Comp & NoFault
  - Initial Report, followed by updates as claim progresses

- Liability Claims
  - Generally "one-and-done"

Updates Since Last Year

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CONNECTING RISKS THAT MATTER

Mandatory WCMSA Reporting

- What claims must report WCMSA information to CMS?

- All workers compensation settlements involving a Medicare beneficiary that involve a total payment obligation to the claimant (TPOC)

- This includes TPOC settlements

  - That do not meet the CMS threshold to submit for review in the WCMSA process

  - That includes MSAs that are considered evidence-based / "non-submit" MSAs

  - That includes situations where no money was set aside for future medicals
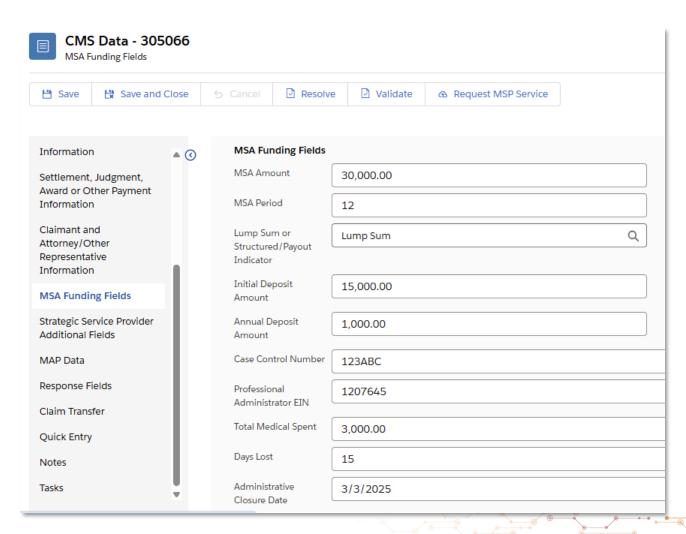
Mandatory WCMSA Reporting

Must Report

- MSA total amount

- MSA period (number of years MSA expected to cover)

- Lump sum or structured payout indicator

- Initial deposit amount

- Anniversary (annual) deposit amount

May Report

- Case control number (WCRC case ID)

- Professional administrator EIN (if applicable)

CMS Data - 305066
MSA Funding Fields

Save | Save and Close | Cancel | Resolve | Validate | Request MSP Service

Information
Settlement, Judgment, Award or Other Payment Information
Claimant and Attorney/Other Representative Information
MSA Funding Fields
Strategic Service Provider Additional Fields
MAP Data
Response Fields
Claim Transfer
Quick Entry
Notes
Tasks

MSA Funding Fields

MSA Amount	30,000.00
MSA Period	12
Lump Sum or Structured/Payout Indicator	Lump Sum
Initial Deposit Amount	15,000.00
Annual Deposit Amount	1,000.00
Case Control Number	123ABC
Professional Administrator EIN	1207645
Total Medical Spent	3,000.00
Days Lost	15
Administrative Closure Date	3/3/2025

Mandatory WCMSA Reporting

Risks associated with failure to report WCMSA Information

- Failure to correctly enter WCMSA information will result in a hard error, meaning the claim will not be accepted by CMS. This could result in civil money penalties if the claim isn't timely reported.

Zero Dollar MSAs

- CMS UPDATED WCMSA REFERENCE GUIDE ON 1/17/2025.

- AS OF 7/17/2025 – CMS WILL NO LONGER REVIEW $0 MSA SUBMISSIONS

If CMS is discontinuing review of $0 MSAs, is it still ok to do a $0 MSA? YES!

CMS acknowledges that a WCMSA is not necessary in certain circumstances. CMS states that if one of the following conditions are true, Medicare's interests are already protected. These conditions are:

- The facts of the case demonstrate that the injured individual is only being compensated for past medical expenses (i.e., for services furnished prior to the settlement); and

- There is no evidence that the individual is attempting to maximize the other aspects of the settlement (e.g., the lost wages and disability portions of the settlement) to Medicare's detriment.

Zero Dollar MSAs

- **Appropriate Legal $0 MSA situations:**

  - The claim is fully denied and no workers' compensation benefits were paid to, or on behalf of, the injured worker. If any benefits were paid on a denied claim, the insurer must be able to show any benefits paid were either:

  - For investigational purposes only, and/or

  - Permitted under a state statute that allows payments-without-prejudice.

  - A workers' compensation court/board/commission finds, based on a ruling on the merits, the employer/insurer is not responsible for future medical benefits.

- **Appropriate Medical $0 MSA:**

  - The injured worker's treating provider (cannot be a med-legal evaluator) has documented, to a reasonable degree, the injured worker will no longer require future medical treatment associated with the workers' compensation injury in question.

Data Clean-Up Strategies

Section 111 Clean-Up Strategies

Make use of the "5 / $25k" Rule to clean-out old claims

- No treatment in 5 years?

- Less than $25,000 in medicals spent?

- Not an exposure / ingestion / implant claim?

If yes to all three questions, then populate:

- **ORM Termination Date as 5 years from last treatment, and be done with them**

- **(repeat every 6-12 months)**

Section 111 Clean-Up Strategies

- Ensure claims are successfully reported to CMS – monitor claims that have an error status preventing transmission to CMS. Make corrections as needed.

- Update Section 111 reporting as needed.

- Champion or SME lead on Section 111 oversight in-house

- Age 65+, but not Medicare eligible. Was all information entered correctly? Could be incorrect DOB or SSN.

- Safe Harbors:

  - Technical or system issue outside the control of the RRE, or the result of an error by CMS or its contractors

  - The "2 and 1 Rule" (2 attempts via mail or email; 3rd attempt via other reasonable method)

Section 111 Clean-Up Strategies – Stop Processing

- **Stop Processing Flag**

- Stops all data exchanges between:

  - ECS – CMS

  - ECS – Client

    - No longer included in status file

    - No longer included in MIR Reports

Request a copy of ExamWorks Stop Process guide for more information of when it is appropriate to Stop Process on a Claim.
*Note: Misuse of the Stop Processing flag may lead to improper claim processing that can result in fines levied by CMS.

Section 111 Clean-Up Strategies- Stop Query Process

WC or No-Fault Claim

- When responsibility to pay for related ongoing medical care is permanently ended, where there will be no further payment or settlement, and the claimant is not yet identified as a Medicare beneficiary.

- Denied Workers Compensation or No Fault Claims that meet the following criteria

  - Claim is denied and ORM indicator is "NO";

  - No settlement has been reached; and

  - Claim status is closed

- When the Injured Party is Medicare eligible, the claim is closed / resolved, and you have received a 03 or 51 Disposition codes on the Quarterly Claim Response File for two consecutive quarters.

Liability

- Liability Claims regardless of whether the injured party is a Medicare beneficiary, and

  - Claims status is closed (for any reason)

  - Claim will not re-open

  - No settlement or other payment has been made, nor is it anticipated that any settlement or payment will be made

- Liability Claims where there has been one query that has already occurred following a settlement, judgment, award, or payment that completely resolves the claim
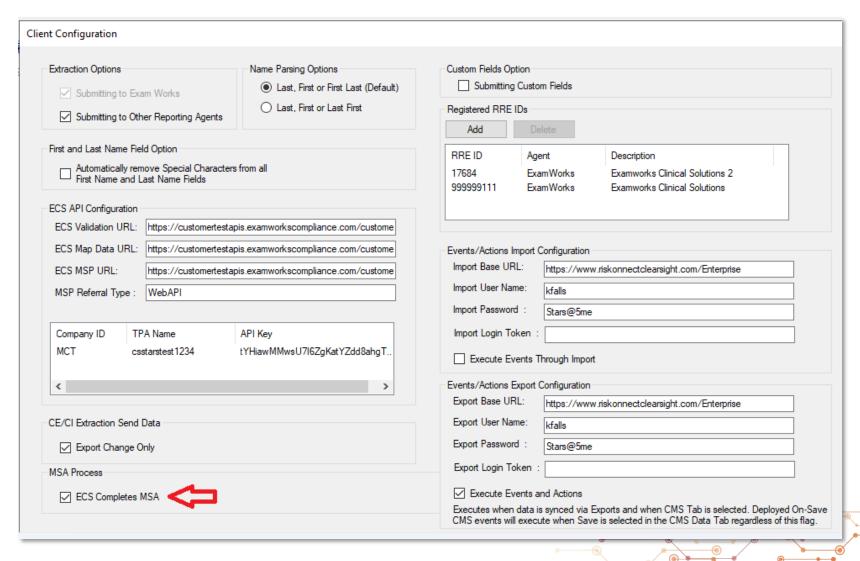
Request a copy of Query Process FAQ's for examples and more descriptive information.
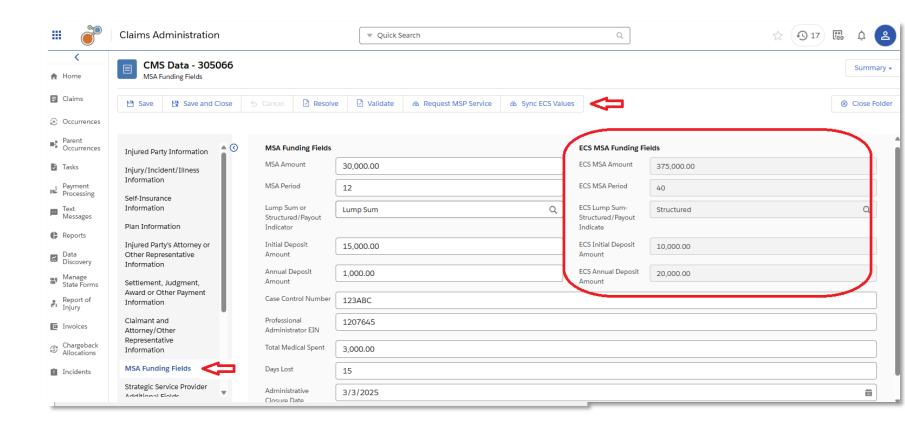
CONNECTING RISKS THAT MATTER

Enhanced Integration for MSP Services

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Enhanced Integration for MSP Services

- Additional functionality when Examworks manages the MSA

- Activate via CMS Admin in ClearSight
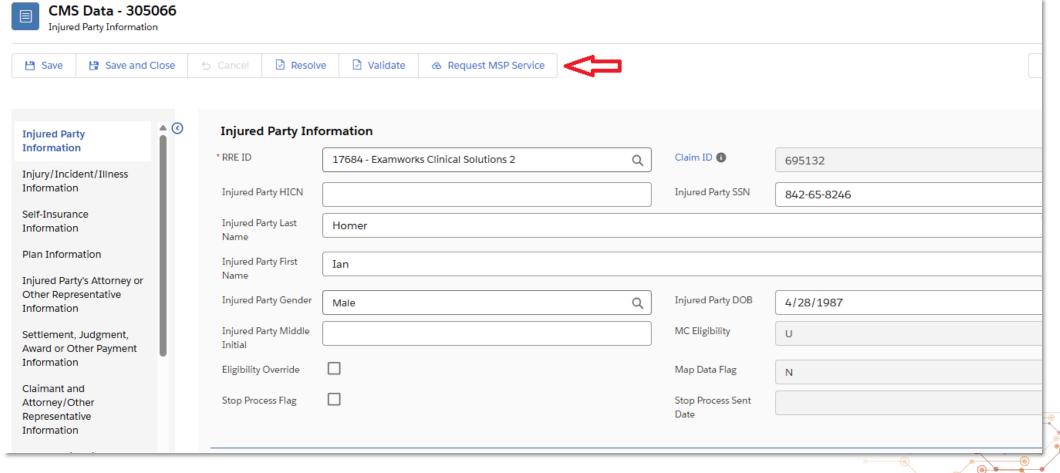
Enhanced Integration for MSP Services

- 5 MSA fields are returned by Examworks in the semi-weekly Claims Status File

- Visible in the MSA Fields tab

- Ability to override the client's MSA Fields with Examworks values via the "Sync ECS Values" button
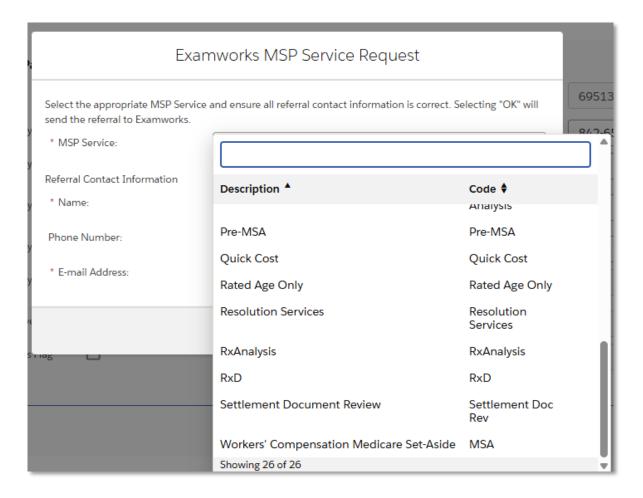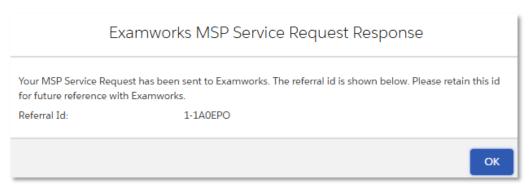

CONNECTING RISKS THAT MATTER

Enhanced Integration for MSP Services

- Referrals via the "Request MSP Services" button

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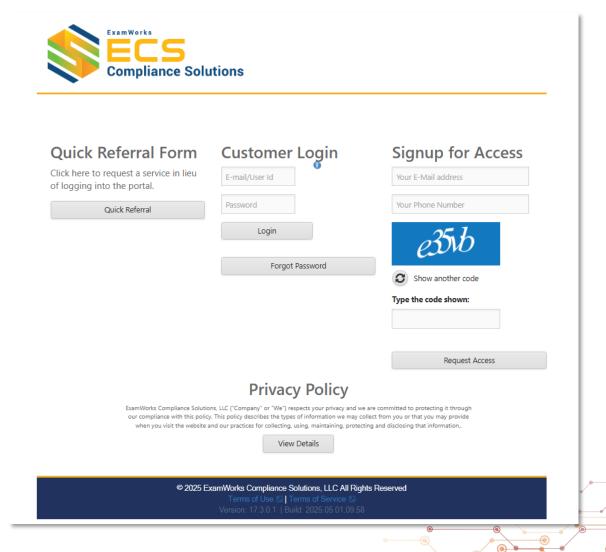
Enhanced Integration for MSP Services: ECS Portal
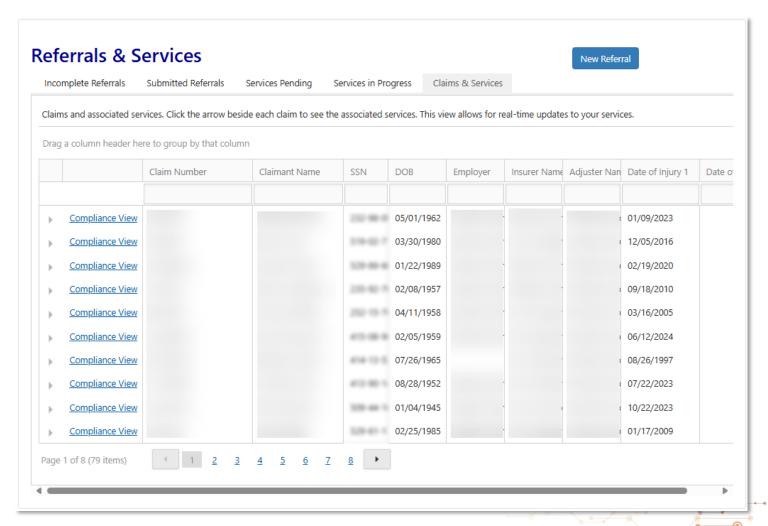
- ECS Portal provides:
  - Realtime updates
  - Full Compliance Review
  - Download Reports
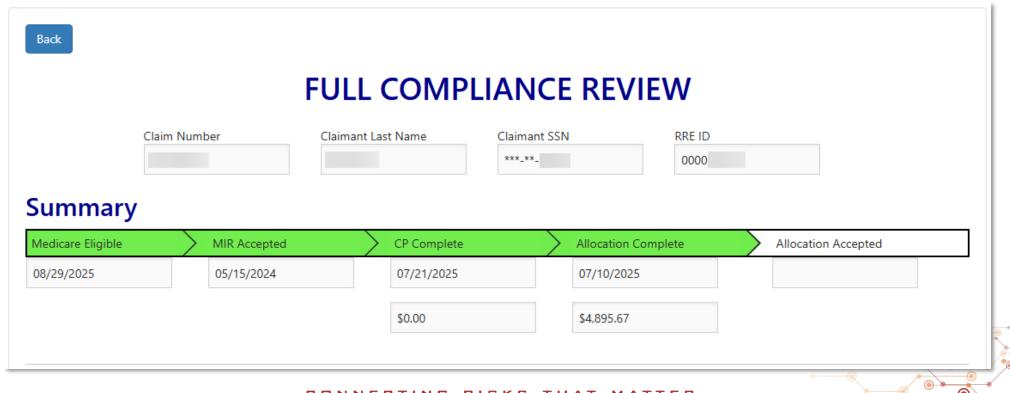
Enhanced Integration for MSP Services: ECS Portal

- See prior referrals
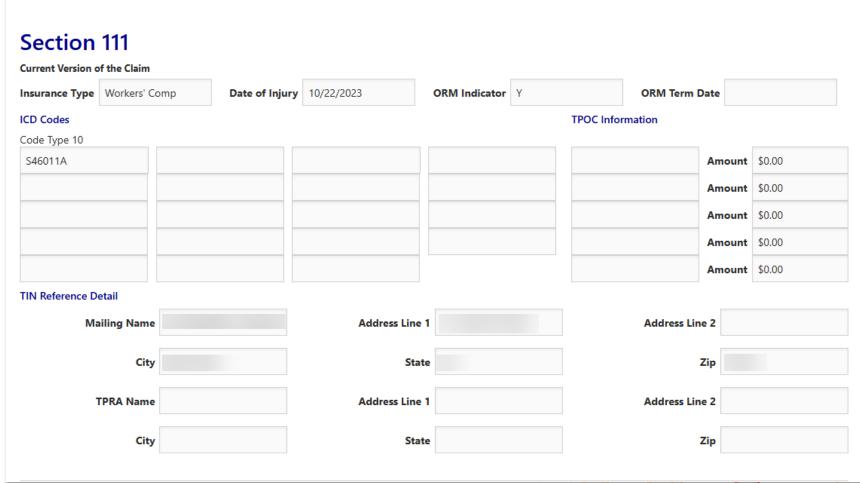
Enhanced Integration for MSP Services: ECS Portal

- Full Compliance Review shows key Section 111 and MSP milestones
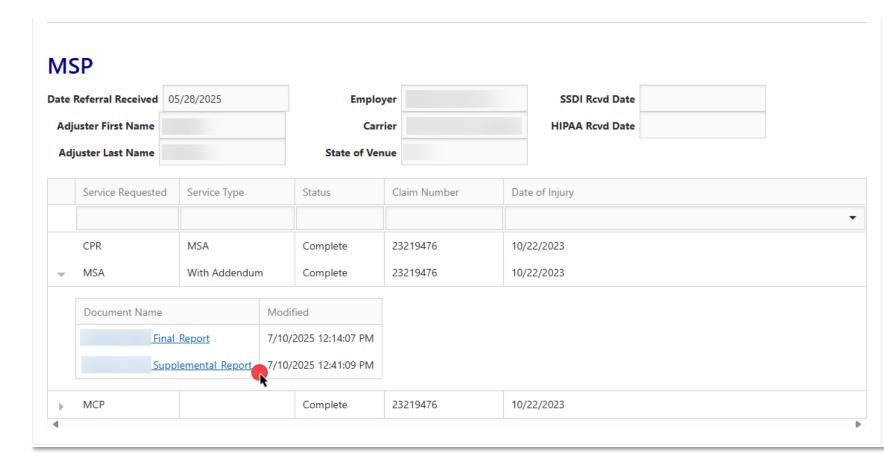- Summary:

Enhanced Integration for MSP Services: ECS Portal

- Key Section 111 data

Section 111

Current Version of the Claim

| **Insurance Type** | Workers' Comp | **Date of Injury** | 10/22/2023 | **ORM Indicator** | Y | **ORM Term Date** | |

ICD Codes   **TPOC Information**

Code Type 10

S46011A					Amount	$0.00
					Amount	$0.00
					Amount	$0.00
					Amount	$0.00
					Amount	$0.00

TIN Reference Detail

Mailing Name		**Address Line 1**		**Address Line 2**	
City		**State**		**Zip**	
TPRA Name		**Address Line 1**		**Address Line 2**	
City		**State**		**Zip**	

Enhanced Integration for MSP Services: ECS Portal

- Key MSP data & download reports

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Questions?

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THE
MATRIX

Thank You!

Connect with us.

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