

Registration Process

For Section 111 Responsible Reporting Entities

Overview and Description

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)&(b)(8))

Section 111 of the Medicare, Medicaid, and SCHIP Extension Act of 2007 (MMSEA) (P.L. 110-173), adds new mandatory reporting requirements for group health plan (GHP) arrangements and for liability insurance (including self-insurance), no-fault insurance, and workers' compensation. See 42 U.S.C. 1395y(b)(7) & (b)(8). This document provides information on how entities responsible for complying with these reporting requirements will go about registering with the Medicare Coordination of Benefits Contractor (COBC) for mandatory reporting. **NOTE:** See "Attachment A – Definitions and Reporting Responsibilities" to the Supporting Statement for the Paperwork Reduction Act Notice published in the Federal Register on August 1, 2008. Both the Notice and the Supporting Statement are available as downloads at www.cms.hhs.gov/MandatoryInsRep. Attachment A provides details on definitions and exactly which entities must report. We also remind the reader that the Centers for Medicare and Medicaid Services (CMS) uses the term "responsible reporting entity" (RRE) to refer to those responsible for complying with the Section 111 reporting requirements.

Purpose of the Registration Process

Through the registration process, Responsible Reporting Entities (RREs) will provide notification to the COBC of their intent to report data in compliance with the requirements of Section 111 of the MMSEA. Registration *by the RRE* must be completed before testing between the RRE (or its agent) and the COBC can begin.

Although an RRE may use an agent for reporting purposes, the RRE itself must complete the registration process directly.

Through this registration process, the COBC will obtain the information needed to

- Certify the registrant is a valid RRE for Section 111
- Assign a Section 111 Reporter ID to each RRE
- Develop a Section 111 reporting profile for each RRE, including estimates of the volume and type of data to be exchanged for planning purposes
- Assign a production live date and file submission timeframe to each RRE
- Establish the necessary file transfer mechanisms, and
- Assign a COBC Electronic Data Interchange Representative (EDI Rep) to each RRE to assist with ongoing communication.

Registration Timeframes

1. GHP RREs that currently have a Voluntary Data Sharing Agreement (VDSA) or Voluntary Data Exchange Agreement (VDEA) in place with CMS must complete the *paper* MMSEA Section 111 GHP Registration Attachment and return it to the COBC during the period October 1, 2008 through October 31, 2008. This registration attachment along with its detailed instructions is on the CMS Section 111 Web page at www.cms.hhs.gov/MandatoryInsRep , as a separate downloadable file.
2. GHP RREs that do not currently exchange data with the COBC under the VDSA/VDEA process will register *on the COB Secure Web site (COBSW)* from April 1, 2009 through April 30, 2009 using a new application designed for this purpose. Details on how to complete the Section 111 registration process on the COBSW will be posted at a future date on the CMS Section 111 Web page at www.cms.hhs.gov/MandatoryInsRep .
3. Responsible Reporting Entities for liability insurance (including self-insurance), no-fault insurance, and workers' compensation, will register on the COBSW from May 1, 2009 through June 30, 2009. Details on how to complete the Section 111 registration process on the COBSW will be posted at a future date on the CMS Section 111 Web page at www.cms.hhs.gov/MandatoryInsRep .

Overview of the Registration Process

Current GHP VDSA and VDEA Partners

Current GHP VDSA/VDEA partners that are RREs will complete and deliver their paper registration attachment to the COBC. Note that insurer or third party administrator (TPA) partners are routinely responsible reporting entities; a limited number of employer partners may also be responsible reporting entities. In April 2009 the COBC will implement an Internet-based Section 111 application on the COBSW. At that time, GHP VDSA/VDEA partners who are Section 111 RREs will be asked to confirm their registration, set up online accounts and register individual users for the site. This new application will provide additional options for submitting files to the COBC and allow users to monitor the status of test and production file processing for Section 111.

All Other Responsible Reporting Entities

All other entities responsible for complying with the Section 111 reporting requirements will register on the COBSW. An authorized representative will complete and submit the registration for the RRE using a new Internet-based application on the COBSW. When a registration application is submitted, the information provided will be validated by the COBC. Once this is completed, the RRE will be instructed to assign an Account Manager, who will return to the COBSW to complete account set up and obtain Login IDs for individual users associated with that account. The Account Manager will be the administrative contact for the RRE and will control the overall account profile. All users

associated with the RRE’s account will be able to submit test and production files, maintain account information and monitor the status of file processing using the COBSW.

The Information Needed to Register

Each RRE must complete the registration process regardless of whether an agent will be submitting files on that entity’s behalf. An agent may not complete the registration for a Responsible Reporting Entity. Again, for definitions and exactly which entities must report see “Attachment A – Definitions and Reporting Responsibilities” to the Supporting Statement for the Paperwork Reduction Act Notice published in the Federal Register on August 1, 2008 (available as a download at www.cms.hhs.gov/MandatoryInsRep).

Each RRE’s registration will reflect the basic decisions it makes about the number and types of files it will submit as it complies with the Section 111 requirements. For example, if an RRE is a company comprised of three subsidiaries with separate Group Health Plan (GHP) enrollment systems for which it intends to submit three separate files, then it must complete three separate sets of information related to the file transfers. The RRE will receive three separate Section 111 Reporter IDs. Alternatively, if that same company will be submitting one file that includes data for all three subsidiaries, then it must complete only one set of information related to file transfer and it will receive only one Section 111 Reporter ID. A separate set of information must be submitted for each file transmission set-up.

Information that will be collected during the registration process includes the data elements described below. Note that the Section 111 registration process that will be accessible on the COBSW will guide the user through each step as it collects this information at different points in the registration and account set up process.

NOTE: The following is only a general description of the registration information CMS will collect. **This is not the actual registration document itself.**

Responsible Reporting Entity Information	
Field	Description
Responsible Reporting Entity Name	The company or organization name associated with this Section 111 registration. For validation purposes, it must match the name on record with the Internal Revenue Service (IRS) that is associated with the TIN or EIN supplied.
Responsible Reporting Entity Address	The corporate or organization address associated with the TIN or EIN supplied.

Responsible Reporting Entity Information	
Field	Description
Federal Tax Identification Number (TIN) or Employer Identification Number (EIN)	The IRS-assigned tax ID associated with the company or organization reflected under this Section 111 registration. If you have more than one EIN, you may submit this registration with any one of those EINs. Additional EINs can be provided in fields that follow.
NAIC Company Code	The company code assigned to your company by the National Association of Insurance Commissioners (NAIC). If you are not registered with the NAIC, then state "None". If you have more than one NAIC Company Code, you may submit this registration with any one of those NAIC Company Codes. Additional NAIC Company Codes can be provided in the fields that follow.
Responsible Reporting Entity Telephone	Telephone number of your corporate/organization office.
Responsible Reporting Entity Fax	Facsimile number of your corporate/organization office.
Insurer Lines of Business	Coverage provided by the policies reflected in your file submission. Check all that apply.
Parent Company Name	Name of your parent company if different than the Responsible Reporting Entity Name provided.
Parent Company NAIC Group Code and EIN	Group number assigned to your parent/primary organization by the National Association of Insurance Commissioners (NAIC) if applicable. If you are not registered with the NAIC or do not have a NAIC-assigned Group Code, state "None". Also supply the EIN/TIN that corresponds to your parent company if different from the Company TIN/EIN supplied above.
Subsidiary Company Name(s)	Supply the names of all the subsidiary companies reflected in this registration for which data will be submitted

Responsible Reporting Entity Information	
Field	Description
Subsidiary Company NAIC Company Code(s) and EIN(s)	Company Codes assigned to each subsidiary organization by the National Association of Insurance Commissioners. If the subsidiary is not registered with the NAIC, state "None". Also supply the corresponding TIN/EIN for each subsidiary company listed.
Current VDSA/VDEA Partner?	Check either the Yes or No box. Check the Yes box if you have signed a Voluntary Data Sharing Agreement (VDSA) or Voluntary Data Exchange Agreement (VDEA) with CMS in order to exchange Other Health Insurance data with the Medicare COBC. Otherwise, check No.
VDSA/VDEA Plan Number(s)	Complete this section only if you checked the Yes box above. Supply the 4 digit plan number(s) assigned to you by the COBC under your VDSA or VDEA.
Current COBA Trading Partner?	Check either the Yes or No box. Check the Yes box if you currently receive Medicare paid claims data from the Medicare COB Contractor under a Coordination of Benefits Agreement (COBA) with CMS. Otherwise, check No.
COBA ID(s)	Complete the section only if you checked the Yes box above. Supply the COBA ID numbers assigned to you by the COBC under your COBA.

Authorized Representative Information	
Field	Description
First Name	First name of the individual who has the legal authority to bind your organization to the terms of MMSEA Section 111 requirements and processing. <i>Note that your Authorized Representative must be an employee or director of your organization and not an agent. Agent information is collected in a later section.</i>

Authorized Representative Information	
Field	Description
Last Name	Last name of the individual who has the legal authority to bind your organization to the terms of MMSEA Section 111 requirements and processing.
Title	Job title of your authorized representative named above.
Authorized Representative Address	Company or work mailing address of your authorized representative named above.
Authorized Representative Telephone	Company or work telephone number where your authorized representative can be reached.
Authorized Representative Fax	Company or work facsimile number used by your authorized representative.
Authorized Representative E-mail Address	Electronic mail address used by your authorized representative for work-related e-mail.

Technical Contact Information	
Field	Description
First Name	First name of the contact person for technical or other implementation coordination issues for Section 111 Reporting. Your Technical Contact is the point of contact for any technical questions that may arise and is responsible for successful data exchange and file submission. <i>Note that your Technical Contact must be an employee or director of your organization and not an agent. If you are using an agent to report data, your Technical Contact should be the person who is managing your organization's relationship or contract with that agent. Agent information is collected in a later section.</i>
Last Name	Last name of the contact person described above.
Title	Job title of your technical contact named above
Technical Contact Address	Company or work mailing address of your technical contact named above.
Technical Contact Telephone	Company or work telephone number where your technical contact can be reached.

Technical Contact Information	
Field	Description
Technical Contact Fax	Company or work facsimile number used by your technical contact.
Technical Contact E-Mail Address	Electronic mail address used by your technical contact for work-related e-mail.

Section 111 File Submission Profile Information	
Field	Description
Estimated Number of Covered Individuals	<p><i>For GHP responsible reporting entities only.</i></p> <p>An estimate of the current number of individuals, including subscribers and dependents, covered by your GHPs reflected in this Section 111 submission profile.</p>
Estimated Number of Covered Individuals Age 45 and Older	<p><i>For GHP responsible reporting entities only.</i></p> <p>An estimate of the current number of individuals, including subscribers and dependents, covered by your GHPs reflected in this Section 111 submission profile that are currently age 45 or older.</p>
Non-GHP Estimated Number of Paid Claims (Cases) Resulting in an Insurance Payout	<p><i>For liability insurance (including self-insurance), no-fault insurance, and workers' compensation responsible reporting entities only.</i></p> <p>An approximate number of reported claims during the last calendar year for the lines of business reflected in this registration which resulted in an actual payment to a claimant.</p>

Section 111 File Submission Profile Information	
Field	Description
GHP Reporting Level	<p><i>For GHP responsible reporting entities only.</i></p> <p>Check either the Basic or Expanded option.</p> <p>Exchange of prescription drug coverage information with the Expanded option is the major difference between the two options.</p> <p>The Basic Option includes submission of the Medicare Secondary Payer (MSP) file for medical and hospital coverage and, optionally, the ANSI 270/271 Entitlement Query file. The COBC will only provide entitlement/enrollment information for Medicare Parts A, B and C with this option.</p> <p>The Expanded Option is similar to the VDSA/VDEA process and includes submission of the MSP file for medical, hospital and prescription drug coverage, the Non-MSP file with query, Retiree Drug Subsidy (RDS) and supplemental prescription drug coverage records as well as the optional ANSI 270/271 Entitlement Query file. The COBC will provide entitlement/enrollment information for Medicare Parts A, B, C and D with this option.</p> <p>NOTE: Most current VDSA/VDEA partners are already processing under the Expanded option.</p>

Section 111 File Submission Profile Information	
Field	Description
Do you offer network prescription drug coverage to your Active Covered Individuals that may be primary to Medicare Part D?	<p><i>For GHP responsible reporting entities only.</i></p> <p><i>Answer this question only if you selected the Expanded Reporting option above.</i></p> <p>Refer to the MMSEA Section 111 GHP User Guide that will be posted on www.cms.hhs.gov/MandatoryInsRep for the definition of Active Covered Individuals.</p> <p>Check either the Yes or No box.</p> <p>If you check Yes, provide your primary RxBIN and PCN for this network coverage.</p>
Do you offer network prescription drug coverage to your Inactive Covered Individuals that may be secondary to Medicare Part D?	<p><i>For GHP responsible reporting entities only.</i></p> <p><i>Answer this question only if you selected the Expanded Reporting option above.</i></p> <p>Refer to the MMSEA Section 111 GHP User Guide that will be posted on www.cms.hhs.gov/MandatoryInsRep for the definition of Inactive Covered Individuals.</p> <p>If you check Yes, provide your supplemental or secondary TrOOP RxBIN and PCN for this network coverage.</p>
If you provide network prescription drug coverage for Inactive Covered Individuals, how will you submit this information to the COBC?	<p><i>For GHP responsible reporting entities only.</i></p> <p><i>Answer this question only if you selected the Expanded Reporting option above.</i></p> <p>If you are a COBC Trading Partner and will use the E02 process, check the COBA E02 box.</p> <p>If you will send supplemental drug coverage information on D records in your Non-MSP file, then check the Non-MSP File box.</p>

Section 111 File Submission Profile Information	
Field	Description
Will you submit RDS Retiree File records on your Non-MSP File?	<p><i>For GHP responsible reporting entities only.</i></p> <p><i>Answer this question only if you selected the Expanded Reporting option above.</i></p> <p>Check the Yes box if you intend to use the Non-MSP file to provide files of retirees to the Retiree Drug Subsidy (RDS) Contractor for your employer customers that are participating in the RDS program.</p> <p>Otherwise, check the No box.</p>
How often will you submit your Non-MSP File?	<p><i>For GHP responsible reporting entities only.</i></p> <p><i>Answer this question only if you selected the Expanded Reporting option above.</i></p> <p>Check the appropriate box to indicate whether you will submit your Non-MSP File on a monthly or quarterly basis.</p>
File Transmission Method	<p><i>All registrants.</i></p> <p>Indicate the way in which you will transmit files to the COBC and receive response files in return.</p> <p>Most VDSA/VDEA partners will continue to transmit as they do now using either Connect:Direct or HTTPS/SFTP options already in place.</p> <p>Beginning in April 2009, HTTPS and SFTP file transfer options will be available on the COBSW.</p> <p>Complete information on the file transmission methods available will be included in the MMSEA Section 111 User Guides that will be posted on www.cms.hhs.gov/MandatoryInsRep.</p>

Section 111 File Submission Profile Information	
Field	Description
CMS HTTPS/SFTP Mailbox Name/IACS Organization Number	<p><i>Current VDSA/VDEA Partners only.</i></p> <p>If you currently use HTTPS/SFTP for data transmission and will continue to do so for Section 111, enter the name of your mailbox. This is also referred to as your IACS organization number. It is the letter 'V' followed by your 4-digit VDSA/VDEA Plan Number.</p>
Do you plan to exchange Query-Only Files in ANSI 270/271?	<p><i>For GHP responsible reporting entities only.</i></p> <p>Select either Yes or No.</p> <p>The submission of the Query-Only file is optional. However, for Basic Option RREs it is the only means to query the COBC about a particular individual's Medicare entitlement. Reporters using the Expanded option may submit query records using the Non-MSP input file.</p> <p>Note that the MSP response files sent back by the COBC for Basic Option RREs will include Medicare Parts A and B entitlement/enrollment information. The COBC will provide entitlement/enrollment information for Medicare Parts A, B, C and D with the Expanded Option.</p>
If so, will you use the HIPAA Eligibility Wrapper (HEW) Software supplied by the COBC?	<p><i>For GHP responsible reporting entities only.</i></p> <p>Answer only if you answered Yes to the question above.</p> <p>Select either Yes or No.</p> <p>Check Yes to indicate whether you will use the HEW software to format your ANSI 270/271 files. The COBC will follow up to provide this software.</p> <p>Check No to indicate you will use your own software.</p>

Section 111 File Submission Profile Information	
Field	Description
If so, do you need the COBC to send you the mainframe or PC-based HEW Software?	<p><i>For GHP responsible reporting entities only.</i></p> <p>Answer only if you answered Yes to the question above.</p> <p>Select either Mainframe or PC depending on where you will run the HEW software. The COBC will send you the HEW software for the processing environment selected.</p>
Will an agent report data on your behalf?	<p><i>All registrants.</i></p> <p>Answer Yes if another entity (consulting company, data services company, etc.) will actually establish the connectivity and transmit MMSEA Section 111 files to the COBC for you.</p>

Agent Information	
Complete this section only if an agent will be submitting data files for you.	
Field	Description
Agent Company Name	Name of the company which will be submitting Section 111 data to the COBC on your behalf.
Agent Contact First Name	First name of the technical contact for your agent company.
Agent Contact Last Name	Last name of the technical contact for your agent company.
Agent Company Address	Company or work mailing address for the technical contact at your agent company.
Agent Contact Telephone	Company or work telephone number where your agent technical contact can be reached.
Agent Contact Fax	Company or work facsimile number used by your agent technical contact.
Agent Contact E-Mail Address	Electronic mail address used by your agent technical contact for work-related e-mail.

Data Use Agreement	
<p>The Data Use Agreement will be signed and dated by your Authorized Representative named above. Its purpose is to insure that the data exchanged between CMS and the Responsible Reporting Entity (insurer, TPA, self-insured) for the MMSEA Section 111 reporting process are secured and used only for the purposes of this exchange in compliance with Medicare Secondary Payer Mandatory Reporting Provisions in Section 111 of the Medicare, Medicaid and SCHIP Extension Act (MMSEA) of 2007.</p>	