

## Medicare Section 111 User Guide

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*MMSEA Section 111 MSP Mandatory Reporting GHP User  
Guide Version 5.5 Rev. 2019/ 14 June COBR-Q2-2019-v5.5*

*MMSEA Section 111 MSP Mandatory Reporting GHP User  
Guide ...*

NGHP User Guide. Information and instructions for the Medicare Secondary Payer (MSP) Non-Group Health Plan (NGHP) reporting requirements mandated by Section 111 of the Medicare, Medicaid and SCHIP Extension Act of 2007 (MMSEA) (P.L. 110-173) are documented in the MMSEA Section 111 Medicare Secondary Payer Mandatory Reporting Liability Insurance (Including Self-Insurance), No-Fault Insurance, and Workers' Compensation User Guide (NGHP User Guide).

*NGHP User Guide | CMS*

Entities (RREs). The five chapters of the User Guide—referred to collectively as the “Section 111 NGHP User Guide”—provide information and instructions for the Medicare

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Secondary Payer (MSP) NGHP reporting requirements mandated by Section 111 of the Medicare, Medicaid and SCHIP Extension Act of 2007 (MMSEA) (P.L. 110-173). This

## *MMSEA Section 111 Medicare Secondary Payer Mandatory*

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The full Section 111 NGHP User Guide is available under the Downloads Box found at: <https://www.cms.gov/Medicare/Coordination-of-Benefits-and-Recovery/Mandatory-Insurer-Reporting-For-Non-Group-Health-Plans/NGHP-User-Guide/NGHP-User-Guide>.

## *Section 111 NGHP User Guide Version 6.0: What is Included*

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The Centers for Medicare and Medicaid Services (CMS) has released an updated Section 111 NGHP User Guide (Version 6.1, November 10, 2020) regarding non-group health plans (liability, no-fault, and workers' compensation). This updated guide replaces Version 6.0 (October 5, 2020).

## *CMS releases new NGHP Section 111 User Guide (Version 6.1 ...*

An updated MMSEA Section 111 NGHP User Guide version 5.9 has been posted to the NGHP User Guide page on CMS.gov with minor updates. Each chapter section has a summary of updates. For convenience the updates are listed below: Updates to the Policy Guidance Chapter Version 5.9 of the NGHP User Guide. • A reminder has been added that while the threshold for physical trauma-based liability insurance settlements remains at \$750, this threshold does not apply to non-trauma liability reporting ...

## *Updated MMSEA Section 111 User Guide Issued*

Posted by Shannon Flynn. Recently, the Centers for

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Medicare & Medicaid Services (CMS) released Version 6.1 of their NGHP MMSEA Section 111 User Guide as well as a corresponding Technical Alert, which highlights the functional impact of these changes. CMS explained that effective April 5, 2021, thirty-seven (37) existing error codes will no longer result in the rejection of a Claim Input File, but rather, will be accepted with the requirement that the Responsible Reporting Entity (RRE ...

## *NGHP MMSEA Section 111 User Guide Version 6.1 Released*

MMSEA Section 111 User Guide, Version 5.6, July 1, 2019 Chapter II (Registration Procedures), Section 4.2.2: CMS has added clarification that Responsible Reporting Entities (RRE) should submit one Claim Input file per quarter. However, also noted in the guide, is mention that CMS will still accept multiple Claim Input Files per quarter.

## *CMS Issues Updated Section 111 User Guide and Updated*

...

GHP User Guide. Information and instructions for the Medicare Secondary Payer (MSP) Group Health Plan (GHP) reporting requirements mandated by Section 111 of the Medicare, Medicaid and SCHIP Extension Act of 2007 (MMSEA) (P.L. 110-173) are documented in the MMSEA Section 111 MSP Mandatory Reporting GHP User Guide (GHP User Guide).

## *GHP User Guide | CMS*

Section 111 of the Medicare, Medicaid, and SCHIP Extension Act of 2007 (MMSEA) added mandatory reporting requirements with respect to Medicare beneficiaries who have coverage under group health plan (GHP) arrangements as well as for Medicare beneficiaries who receive settlements,

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judgments, awards or other payment from liability insurance (including self-insurance), no-fault insurance, or workers' compensation, collectively referred to as Non-Group Health Plan (NGHP) or NGHP insurance.

## *Mandatory Insurer Reporting (NGHP) | CMS*

Pursuant to Section 111 of the Medicare, Medicaid, and SCHIP Extension Act of 2007 (MMSEA Section 111), the new mandatory reporting requirements apply to Group Health Plans that provide coverage to Medicare beneficiaries, as well as to liability insurance providers (including self-insurance), no-fault insurance, and workers' compensation plans that pay settlements, judgments, awards or other payments to Medicare beneficiaries.

## *MEDICARE'S SECTION 111 MANDATORY REPORTING PROGRAM*

The Responsible Reporting Entity (RRE) and its duly authorized agent for this Section 111 reporting, if any, shall establish appropriate administrative, technical, procedural, and physical safeguards to protect the confidentiality of the data and to prevent unauthorized access to the data provided by CMS.

## *Login Warning Page*

Oct 6, 2020 By Heather Sanderson, Mike Gibbon and Jeremy Farquhar The Centers for Medicare and Medicaid Services (CMS) has released an updated Section 111 NGHP User Guide (Version 6.0, October 5, 2020) regarding non-group health plans (liability, no-fault, and workers'... CLM Magazine Article: Clock Nears Midnight for Civil Monetary Penalties

## *Medicare Reporting Section 111 | Franco Signor*

"Section 111 reporting" facilitates the Centers for Medicare &

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Medicaid Services' (CMS) recovery of past medical expenses (what are called "conditional payments" in MSP regulations), or its refusal to pay future medical costs, of Medicare beneficiaries who receive NGHP or GHP payments for the same bodily injuries or emotional distress.

## *Insurance Law | Section 111: MSP (Medicare) Reporting ...*

The Centers for Medicare and Medicaid Services (CMS) has released an updated Section 111 NGHP User Guide (Version 6.0, October 5, 2020) regarding non-group health plans (liability, no-fault, and workers' compensation). This updated guide replaces Version 5.9 (June 29, 2020).

## *CMS releases new NGHP Section 111 User Guide ... - Verisk*

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## *Medicare Section 111 User Guide | carecard.andymohr*

The Medicare Secondary Payer Act (MSPA) provides for civil monetary penalties to be assessed for noncompliance with the Section 111 Mandatory Insurer Reporting requirements. Specifically, 42 USC 1395y (b) (8) provides that a civil monetary penalty (CMP) of \$1,000 per day per claim shall be assessed for noncompliance.