

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-05 Medicare Secondary Payer	Centers for Medicare & Medicaid Services (CMS)
Transmittal 10243	Date: July 31, 2020
	Change Request 11771

SUBJECT: Updating the Common Working File (CWF) to allow for a Medicare Secondary Payer (MSP) Termination Date Greater than the Current Date Plus Six Months for non-Group Health Plan (NGHP) MSP Auxiliary Records

I. SUMMARY OF CHANGES: Through this instruction, the Centers for Medicare & Medicaid Services (CMS) is updating CWF MSP requirements for NGHP MSP records, specific to liability (including self-insurance), no-fault insurance, and workers' compensation, to allow for an MSP termination date greater than the current date plus six months.

EFFECTIVE DATE: January 1, 2021

**Unless otherwise specified, the effective date is the date of service.*

IMPLEMENTATION DATE: January 4, 2021

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-*Only One Per Row.*

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
R	6/30/3/3/Other Effective Date and Termination Date Coverage Edits

III. FUNDING:

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

**Business Requirements
Manual Instruction**

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	H H H		F I S S	M C S	V M S	C W F	
	termination date field and allow for termination dates greater than the current date plus six months for liability insurance (including self-insurance), no-fault insurance, or workers' compensation MSP records only.									
11771.2	The Benefits Coordination & Recovery Center (BCRC) and the MSP Systems Contractor (MSPSC) shall accept and allow for liability insurance (including self-insurance), no-fault insurance, or workers' compensation MSP termination dates greater than the current date plus six months.								BCRC, MSPSC	
11771.3	The A/B MACs, DME MACs, FISS, MCS and VMS shall accept and allow NGHP MSP termination dates greater than the current date plus six months.	X	X	X	X					

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		A	B	H H H		
	None					

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Richard Mazur, 410-786-1418 or richard.mazur2@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

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ATTACHMENTS: 0

30.3.3 - Other Effective Date and Termination Date Coverage Edits

(Rev. 10243; Issued: 07-31-20; Effective: 01-01-21; Implementation: 01-04-21)

If MSP Code:	Effective Date Must Be Greater Than
A - Working Aged	January 1, 1983 (830101)
A - Working Aged	Calculated Date beneficiary turned 65 (first day of month).
B - ESRD	October 1, 1981
D - No Fault	December 1, 1980
E - Workers' Compensation	July 1, 1966
F - Federal/Public Health	July 1, 1966
H - Black Lung	July 1, 1973
I - Veterans' Administration	July 1, 1966
G - Disabled (43)	January 1, 1987
G - Disabled	Prior to the first day of the month the Beneficiary turns 65.
L - Liability	December 1, 1980

Other Termination date coverage edits are:

- If contractor number is that of the IRS/SSA/CMS data match project ("77777"), the term date may be equal to or greater than the effective date,
- *For Group Health Plan (GHP) records the termination date cannot be greater than the current date plus six months, except for MSP code = B, and*
- *For GHP records the termination date cannot be greater than the first day the beneficiary turned 65 if the MSP code is B or G.*

Note: For Non-GHP records the termination date edits identified above do not apply as the termination date may be more than 6-months from the MSP effective date.