

MMSEA Section 111 Medicare Secondary Payer Mandatory Reporting

OVERVIEW

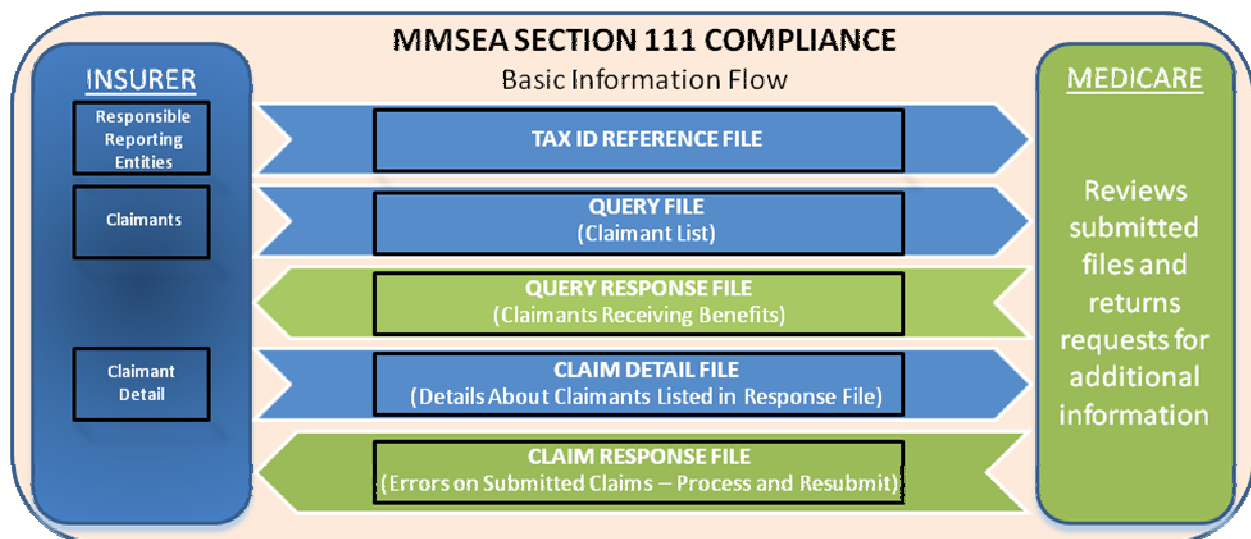
Section 111 of the Medicare, Medicaid, and SCHIP Extension Act of 2007 (MMSEA Section 111) adds mandatory reporting requirements with respect to Medicare beneficiaries who receive settlements, judgments, awards or other payment from liability insurance (including self-insurance), no-fault insurance, and workers' compensation insurance companies. Details can be viewed on the Centers for Medicare and Medicaid Services website at <http://www.cms.hhs.gov/mandatoryinsrep/>.

The clock is ticking – Responsible Reporting Entities (RRE's) must begin submission of live, production data according to their assigned window in the first quarter of 2010 .

Penalties are steep – Entities failing to comply are subject to a civil penalty of \$1,000 for each day of noncompliance for each individual for which the information should have been submitted, in addition to other penalties prescribed by law.

DATASPACE COMPLIANCE SOLUTION

Compliance requires identification of appropriate data and a complex transmission procedure:



Our experienced Insurance Practice can help you:

- Interpret the regulations and define the business processes necessary for compliance,
- Develop the programming logic necessary to implement those business processes,
- Identify data in your source systems, assemble it for transmission, integrate it with data returned by Medicare, test, and roll to production,
- Create input systems to add required data you may not presently be collecting, and
- Host the system for you, if desired.

ABOUT DATASPACE

Since our inception in 1994, we've focused exclusively on building cost-effective reporting solutions that rapidly provide business value. Our work with insurance companies of all sizes is documented on our website, www.dataspace.com.