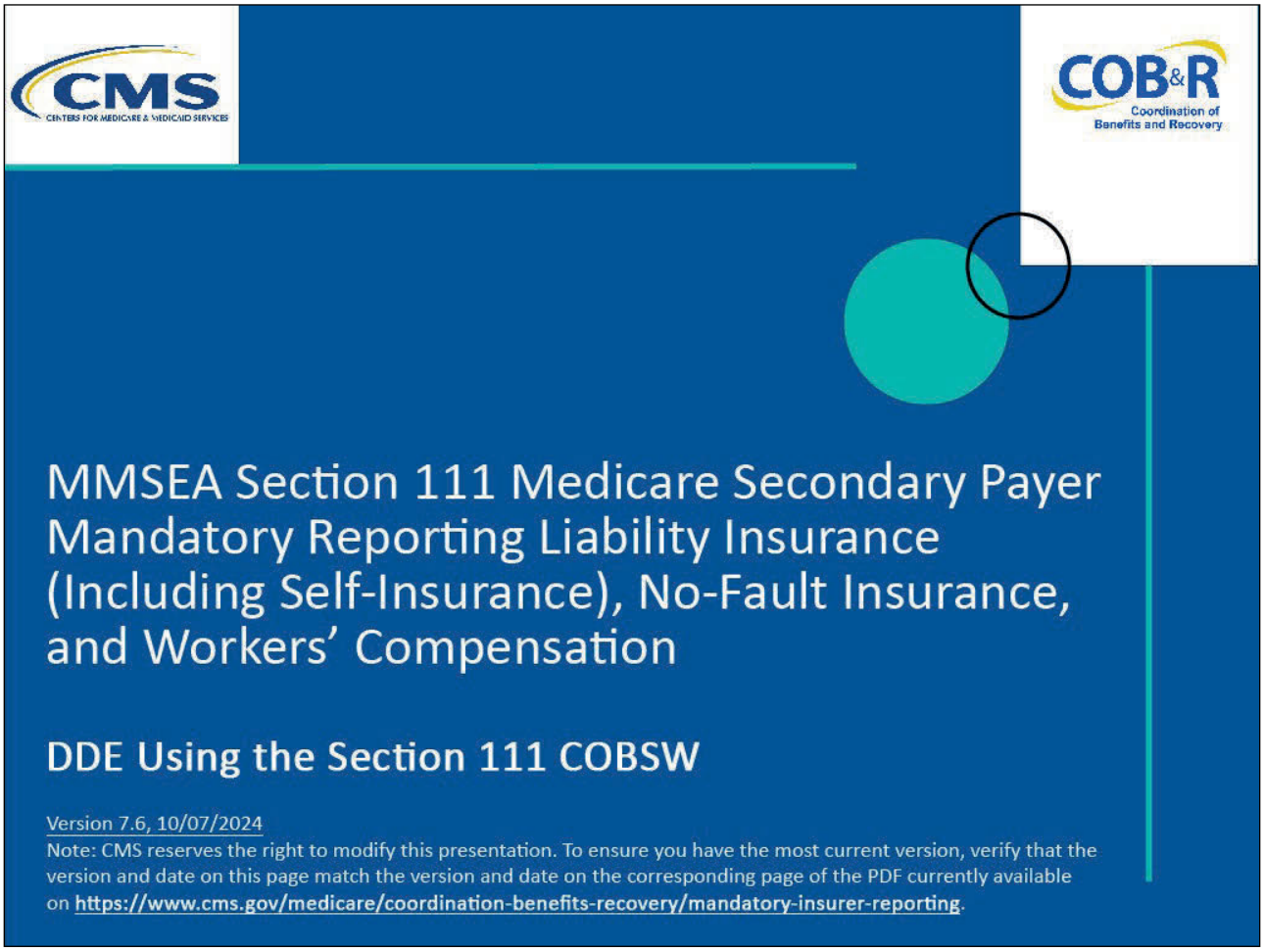
Direct Data Entry (DDE) Using the Section 111 COBSW

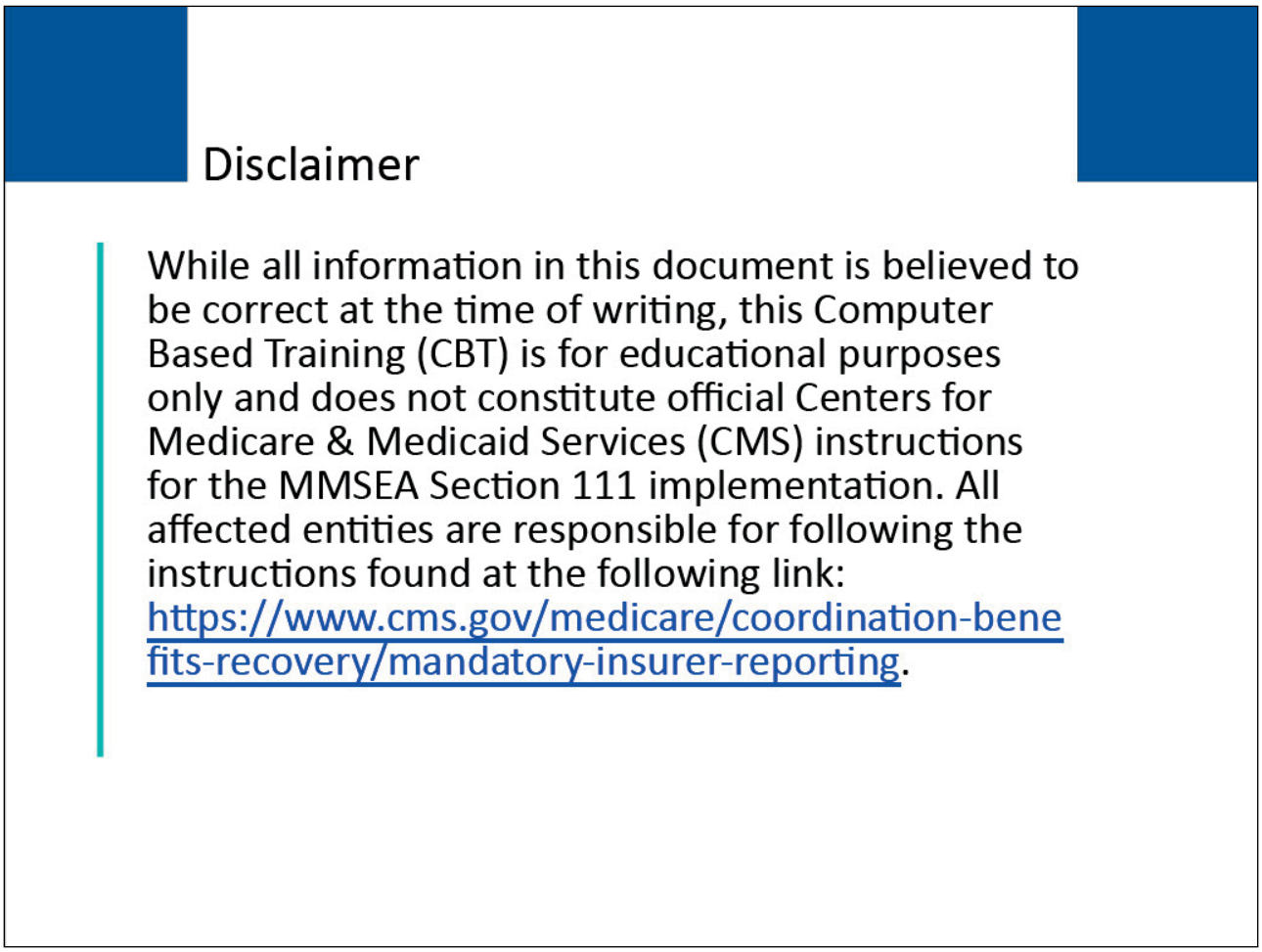
Slide 1 of 19 - Direct Data Entry (DDE) Using the Section 111 COBSW



Slide notes

Welcome to the Direct Data Entry (DDE) Using the Section 111 COBSW course.

Slide 2 of 19 - Disclaimer

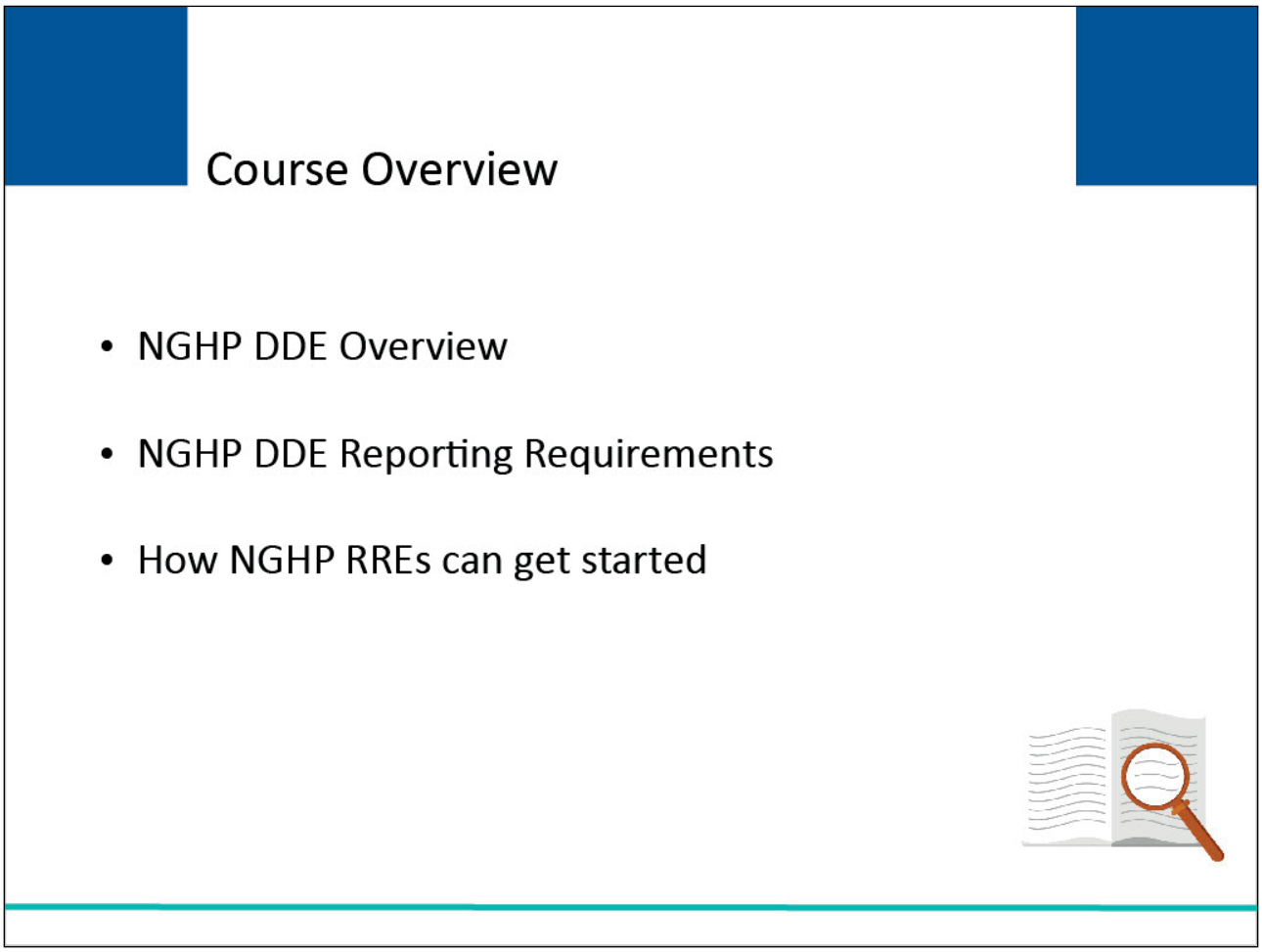


Slide notes

While all information in this document is believed to be correct at the time of writing, this Computer Based Training (CBT) is for educational purposes only and does not constitute official Centers for Medicare & Medicaid Services (CMS) instructions for the MMSEA Section 111 implementation.

All affected entities are responsible for following the instructions found at the following link: CMS NGHP Website.

Slide 3 of 19 - Course Overview



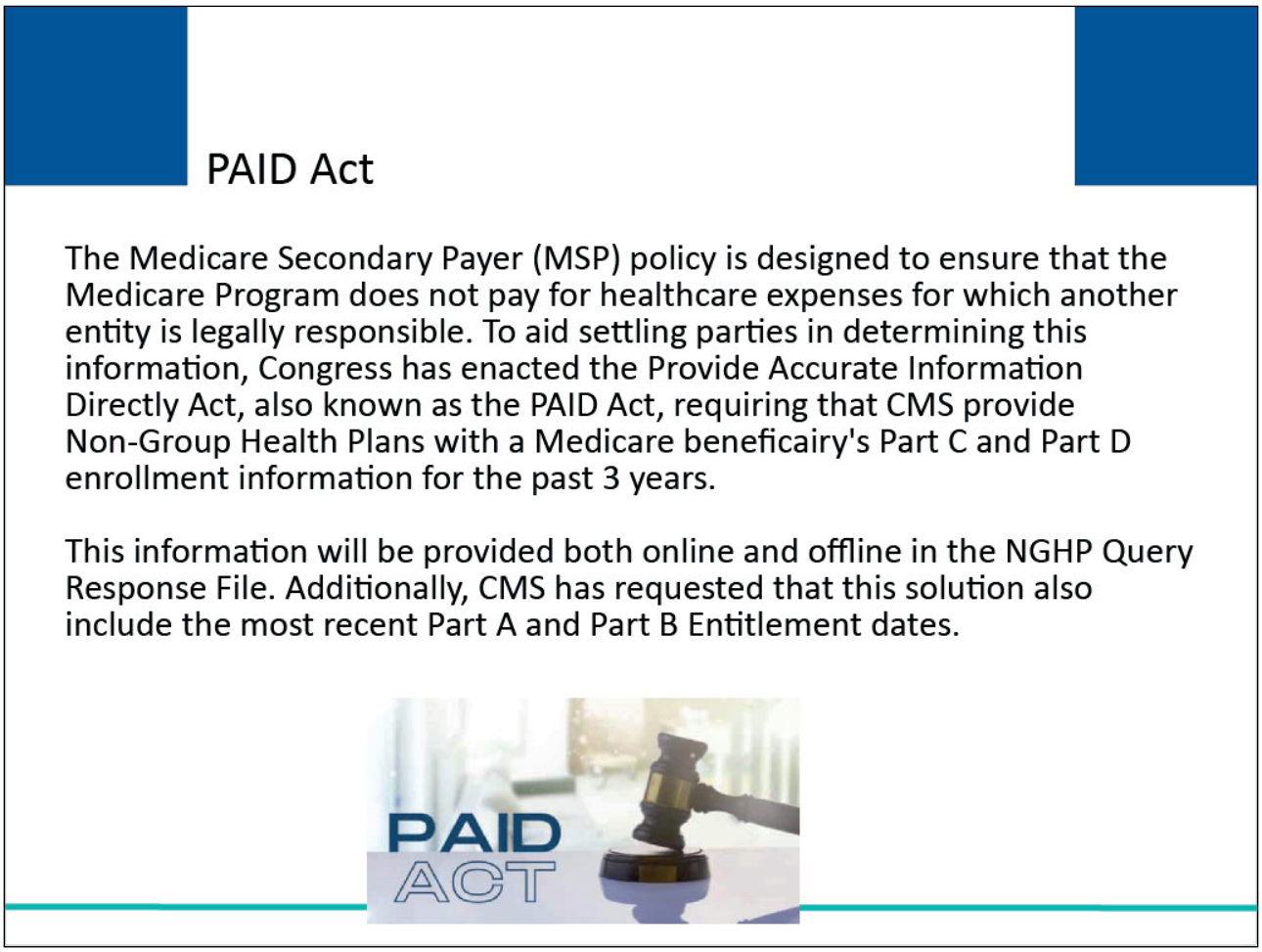
Slide notes

This module provides an overview on NGHP Direct Data Entry (DDE), explains the NGHP DDE reporting requirements, and provides information on how an NGHP Responsible Reporting Entity (RRE) can get started with this reporting method.

NOTE: Liability insurance (including self-insurance), no-fault insurance, and Workers' Compensation are sometimes collectively referred to as "non-group health plan" or "NGHP."

The term NGHP will be used in this CBT for ease of reference.

Slide 4 of 19 - PAID Act



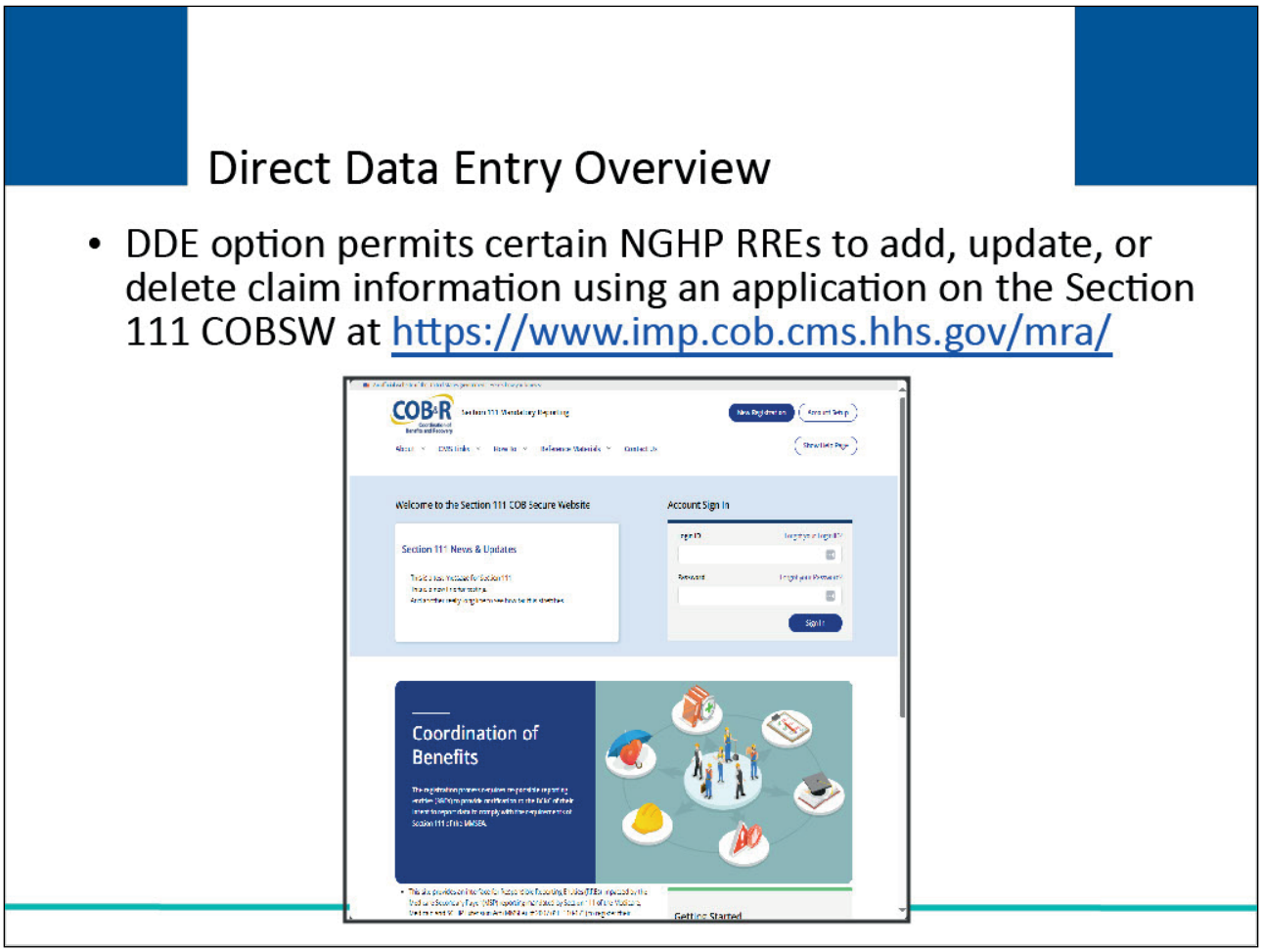
Slide notes

The Medicare Secondary Payer (MSP) policy is designed to ensure that the Medicare Program does not pay for healthcare expenses for which another entity is legally responsible. To aid settling parties in determining this information, Congress has enacted the Provide Accurate Information Directly Act also known as the PAID Act requiring that CMS provide Non-Group Health Plans with a Medicare beneficiary's Part C and Part D enrollment information for the past three years.

This information will be provided both online and offline in the NGHP Query Response File. Additionally, CMS has requested that this solution also include the most recent Part A and Part B Entitlement dates.

Note: To support the PAID Act, the Query Response File will be updated to include Contract Number, Contract Name, Plan Number, Coordination of Benefits (COB) Address, and Entitlement Dates for the last three years (up to 12 instances) of Part C and Part D coverage. The updates will also include the most recent Part A and Part B entitlement dates.

Slide 5 of 19 - Direct Data Entry Overview

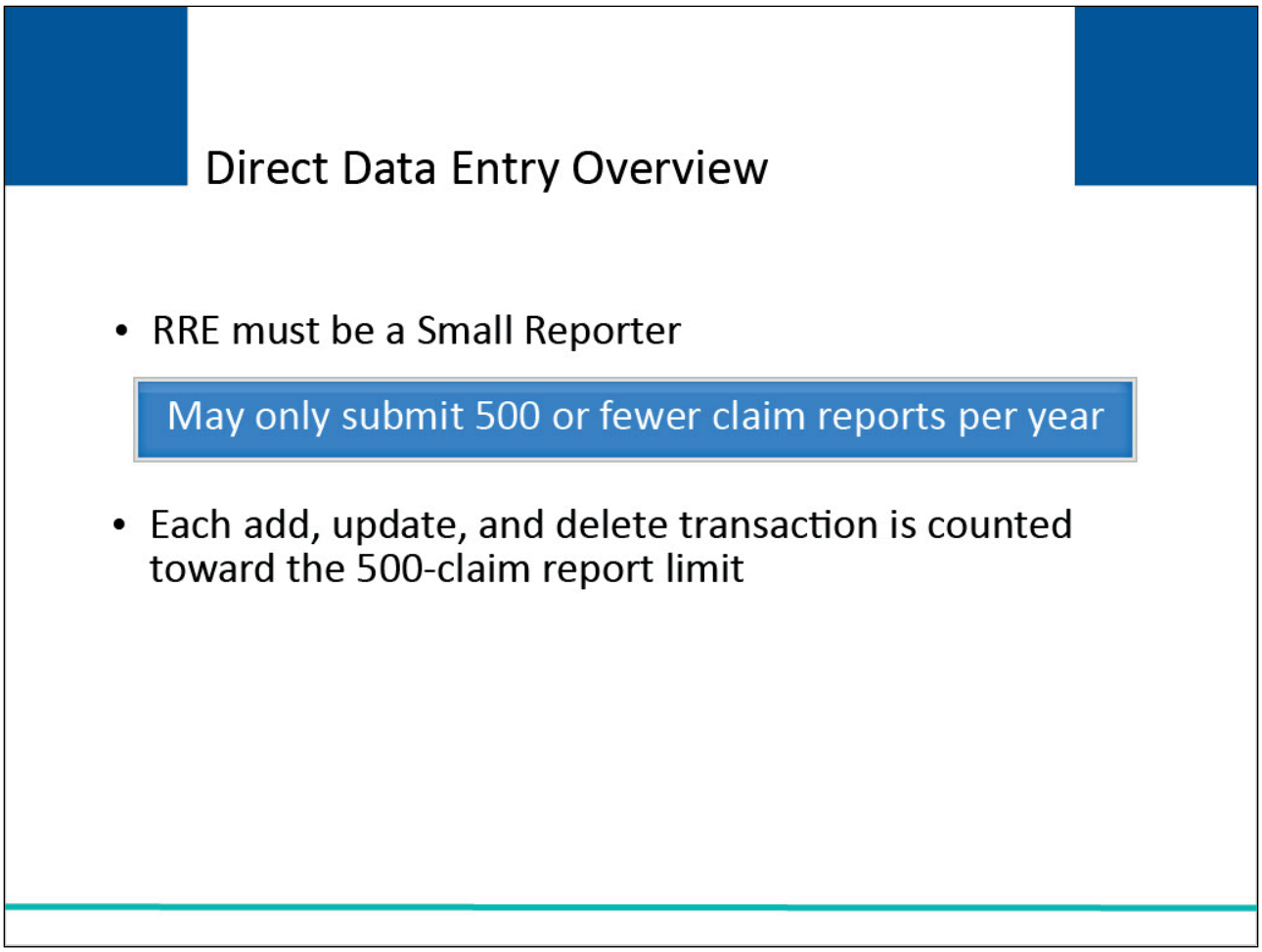


Slide notes

The DDE option for reporting required information relevant to settlements, judgments, awards, and other payments permits certain NGHP RREs to add, update, or delete claim information using an interactive application that will be accessed directly from the Section 111 COB Secure Website (COBSW) found at the following link: Section 111 COBSW.

The screen shown here is provided to show you a sample of one of the DDE screens that DDE submitters will complete.

Slide 6 of 18 - Direct Data Entry Overview

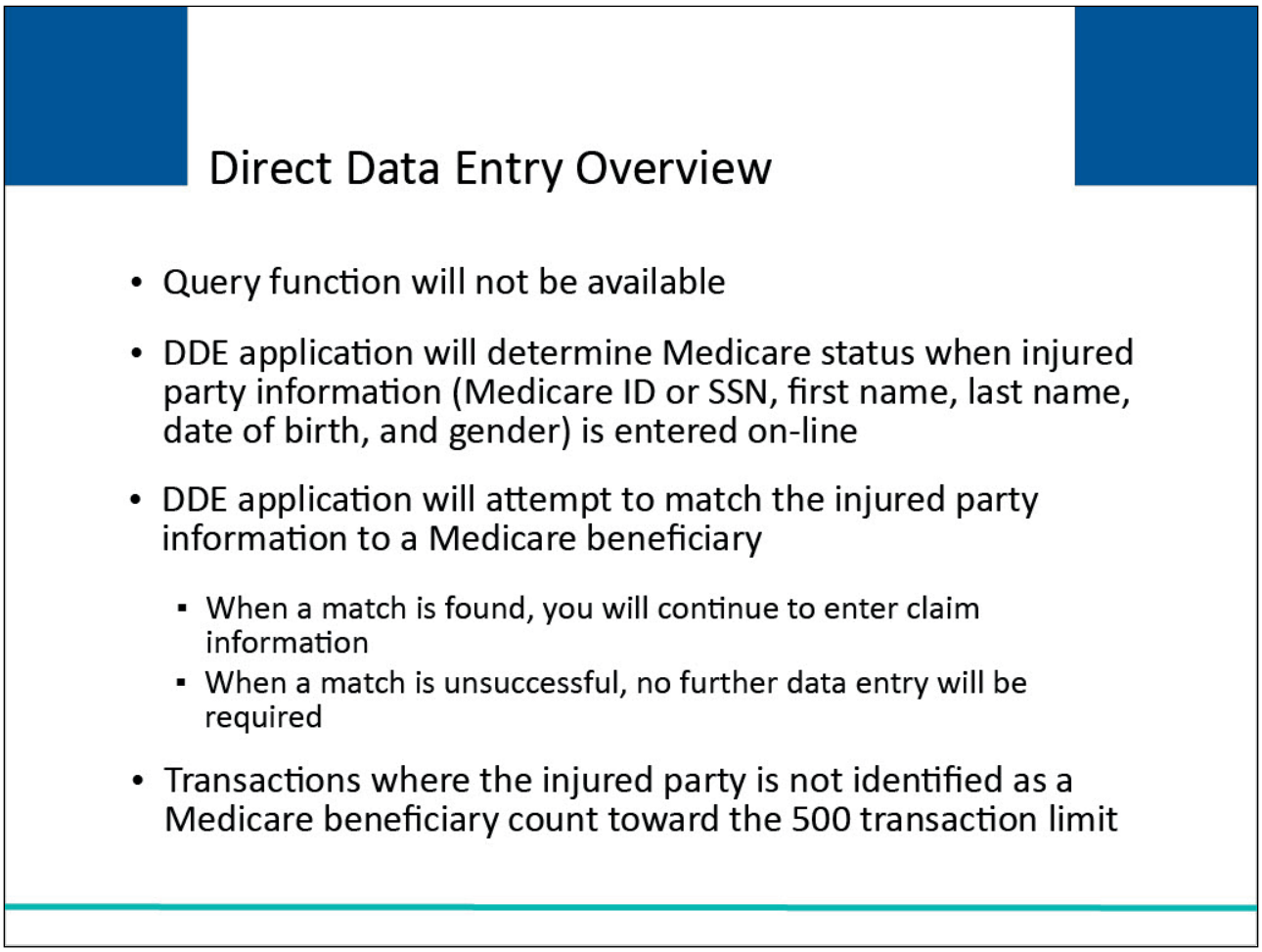


Slide notes

To qualify for the DDE method, the RRE must be a Small Reporter which is defined as an RRE that intends to submit 500 or fewer claim reports per year.

Each add, update, and delete transaction is counted toward the 500-claim report limit.

Slide 7 of 19 - Direct Data Entry Overview



Slide notes

With DDE, the query function will not be available. Instead, the DDE application will determine whether an injured party is a Medicare beneficiary real-time when the injured party information (i.e., Medicare ID or SSN, first name, last name, date of birth, and gender) is entered on-line on the DDE Injured Party Information screen.

Note: RREs may enter a partial SSN on the DDE page. To do this, enter the last five digits of the SSN. Leading spaces are not required.

The DDE application will attempt to match the injured party information to a Medicare beneficiary.

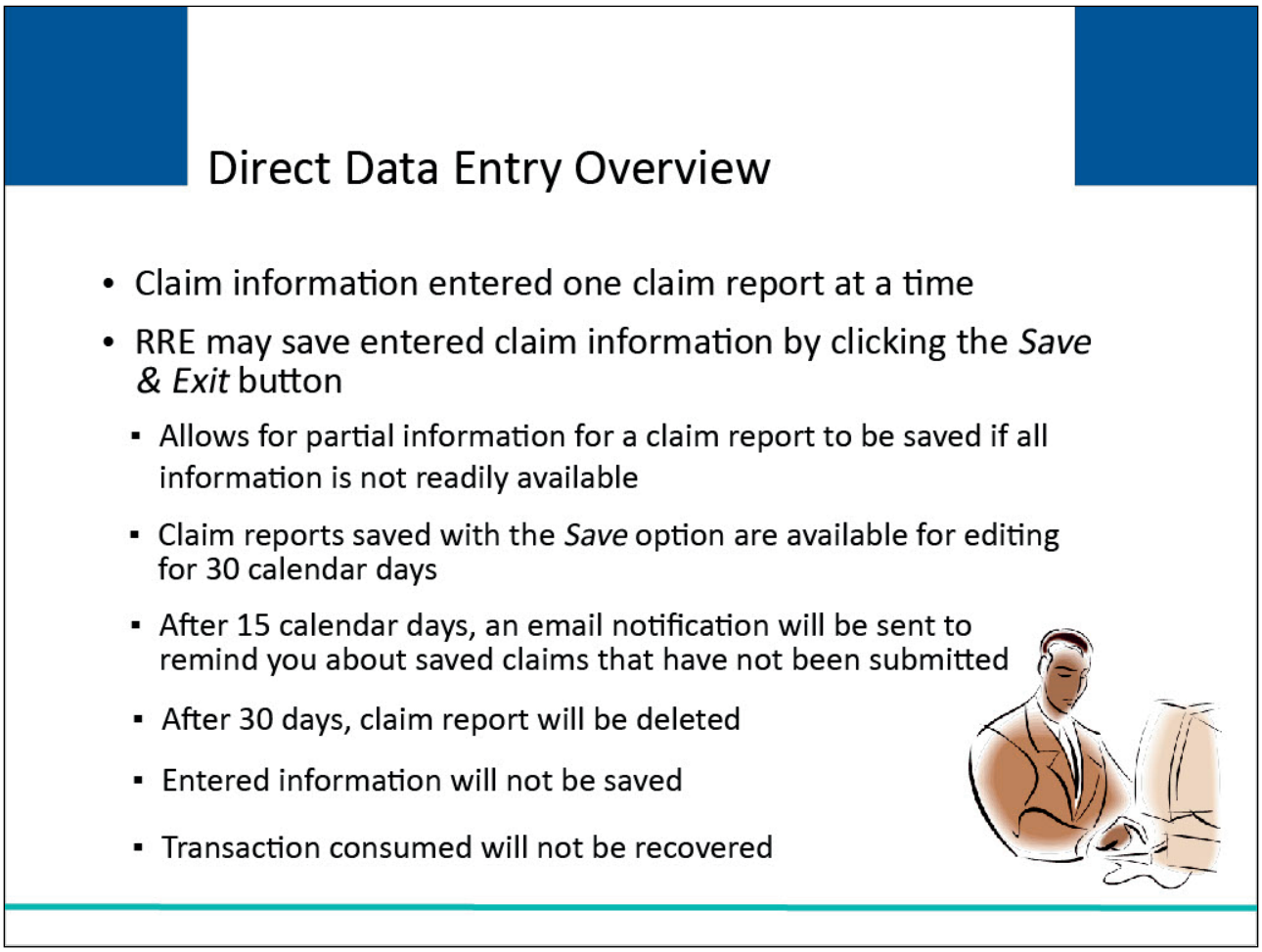
When a match is found, you will continue to enter the claim information.

When a match is unsuccessful, and the user confirms that the information they entered was complete and accurate, no further data entry will be required.

Transactions where the injured party is not identified as a Medicare beneficiary still count toward your 500-transaction limit. Note: DDE RREs accessing certain pages in the COBSW Section 111 will not see the “Transaction Remaining” field as the lookup is not limited for those RREs.

If you plan to or need to use the query function, you should select a submission method other than DDE when you register.

Slide 8 of 19- Direct Data Entry Overview



Slide notes

Claim information will be entered one claim report at a time as soon as the conditions related to the claim require reporting under Section 111.

At any point during the entry of claim information (except from the Injured Party Information screen), an RRE may save the information they have entered by clicking the Save & Exit button.

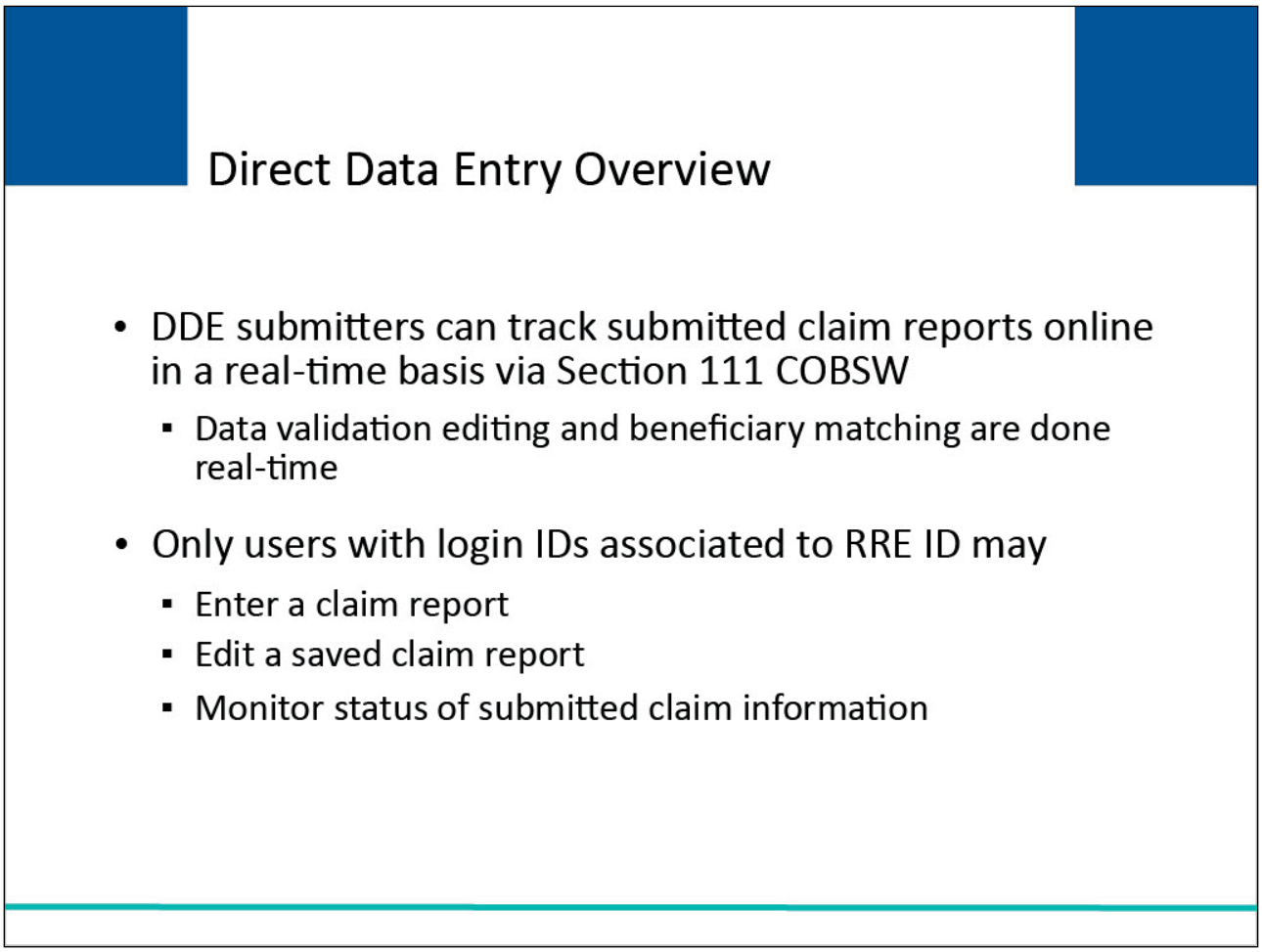
This option allows an RRE to provide and save partial claim information if they do not have all of the information readily available to submit the claim report.

Claim reports saved with this option will be available for editing for 30 calendar days.

After 15 calendar days, an email notification will be sent to you reminding you about claims that have been saved but not submitted.

After 30 days, the claim report will be deleted. The entered information will not be saved, and the transaction consumed as part of claim report creation will not be recovered.

Slide 9 of 19- Direct Data Entry Overview



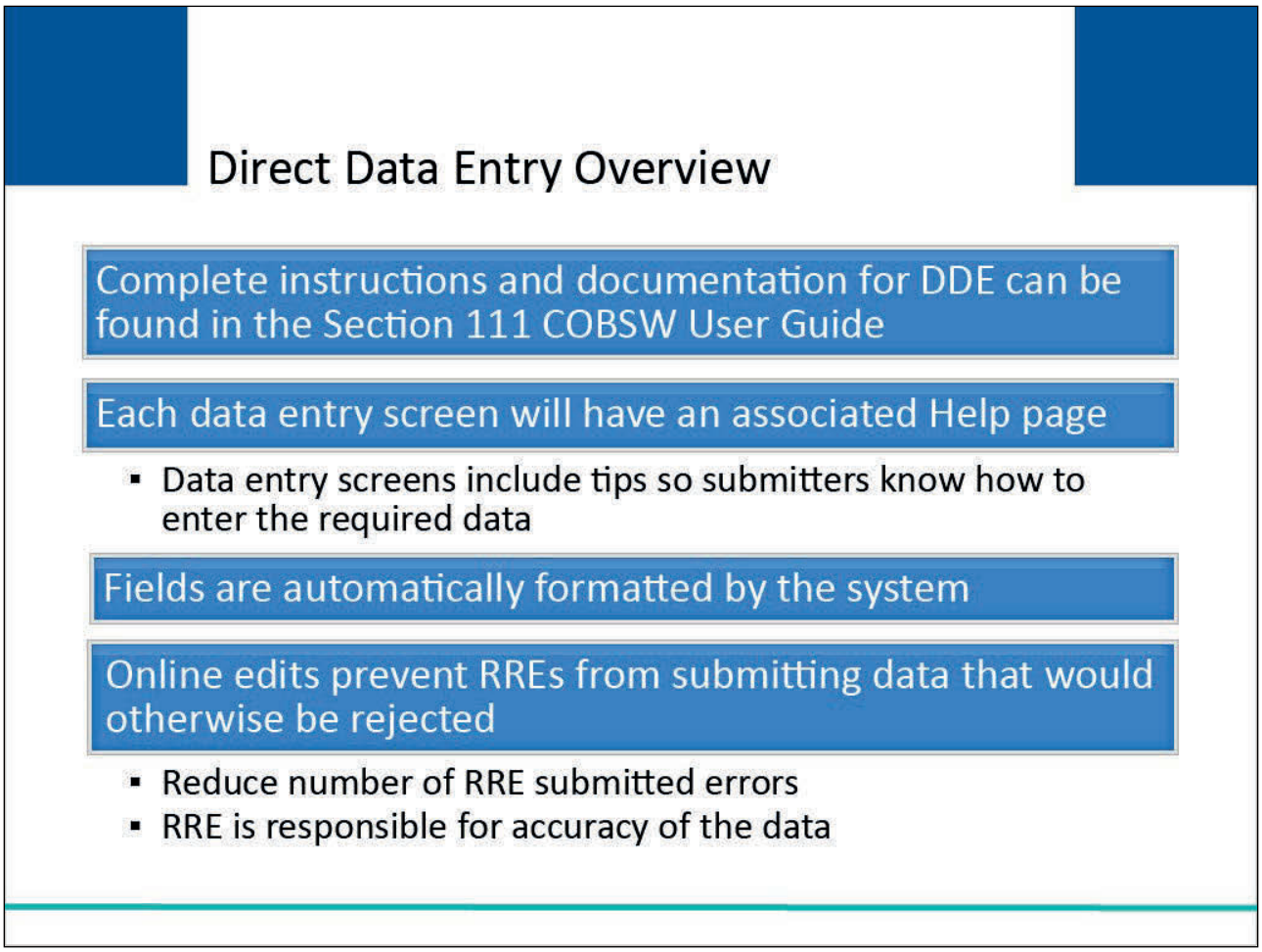
Slide notes

DDE submitters can track their submitted claim reports online in a real-time basis via the Section 111 COBSW.

Since data validation editing and beneficiary matching are done real-time, submitters will be able to see actual errors before the claim report is submitted.

Only users with login IDs associated to the RRE ID may enter a claim report, edit a saved claim report, and monitor the status of submitted claim information on the Section 111 COBSW.

Slide 10 of 19 - Direct Data Entry Overview



Slide notes

Complete instructions and documentation for DDE can be found in the Section 111 COBSW User Guide available on the COB Secure Website.

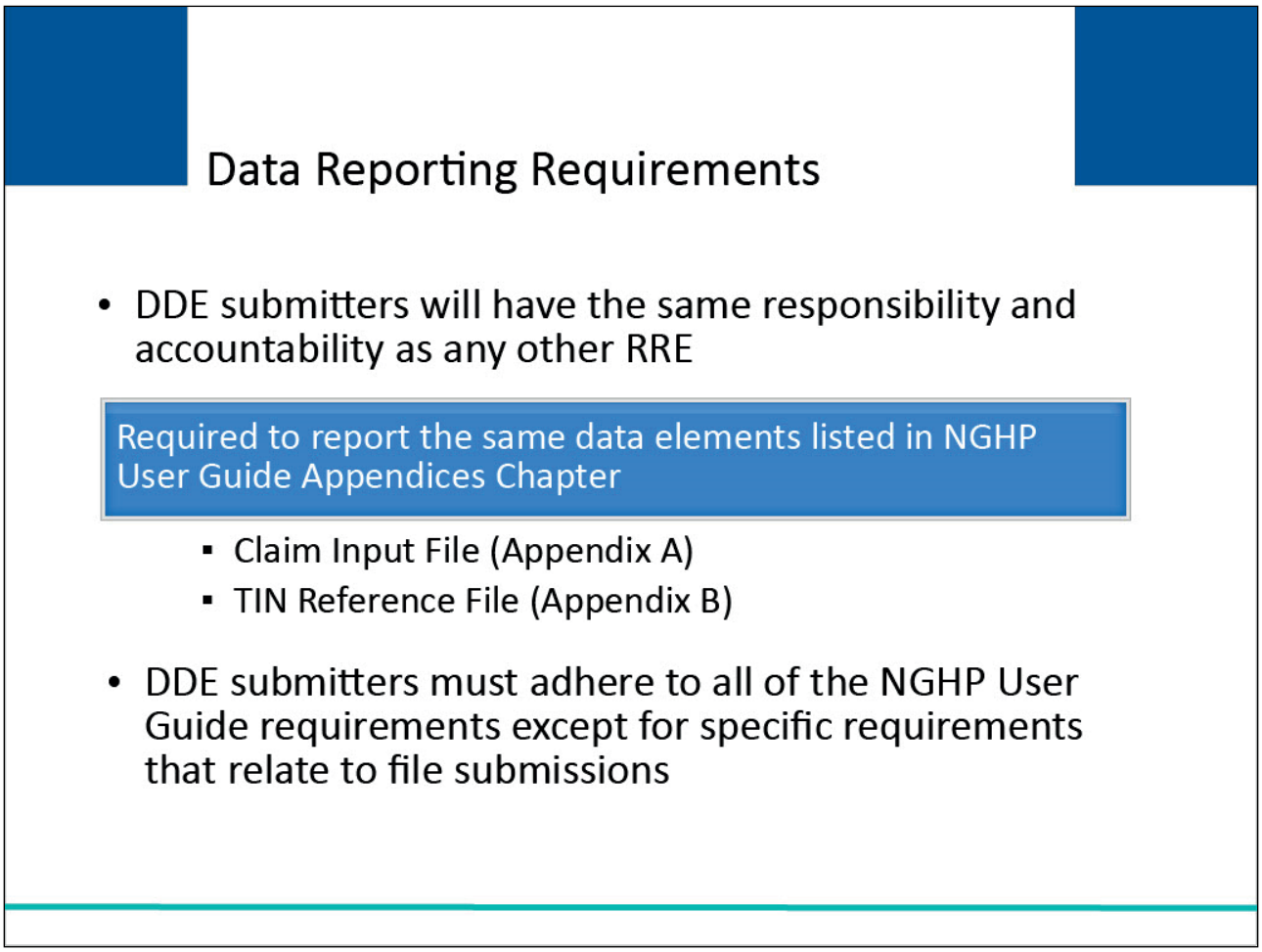
Each data entry screen will have an associated Help page with complete instructions regarding the data reporting requirements for that page.

Data entry screens include helpful tips for most of the field descriptions to assist the submitter in correctly entering the required data. Fields are automatically formatted by the system.

Online edits, including required field edits, data validity checks, and cross-field edits will help prevent an RRE from submitting data that would otherwise be rejected.

This will reduce the number of RRE submitted errors. However, the RRE is still ultimately responsible for the accuracy of the data entered via DDE.

Slide 11 of 19 - Data Reporting Requirements



Slide notes

Small Reporters that use the DDE option will have the same responsibility and accountability as any other RRE.

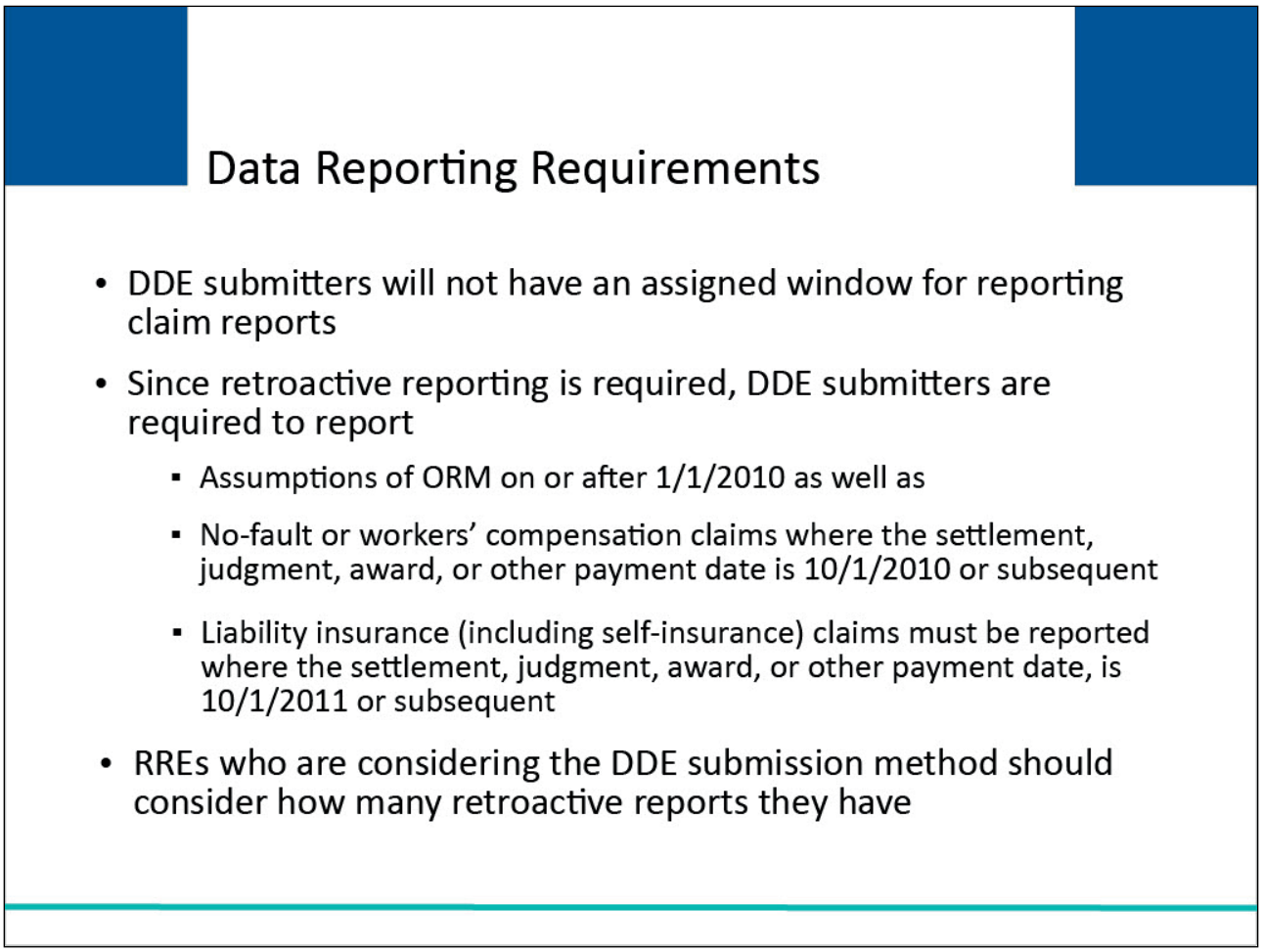
They must report the same required data elements listed in the NGHP User Guide Appendices Chapter (Appendix A (Claim Input File) and Appendix B (TIN Reference File)).

DDE submitters must adhere to all of the requirements in the NGHP User Guide except for the specific requirements that relate to “file” submissions (i.e., file submission timeframes, physical file formats, etc.).

Note: When there is an active Medicare Secondary Payer Recovery Portal (MSPRP) account for the insurer/recovery agent TIN, Section 111 submitters may set Go Paperless options (i.e., choose to receive letters electronically or by mail) for the insurer and recovery agent address using the following new TIN Reference File fields (Appendix B):

- TIN/Office Code Paperless Indicator (Field 23),
- Recovery Agent Paperless Indicator (Field 24), and
- Recovery Agent TIN (Field 25).

Slide 12 of 19 - Data Reporting Requirements



Slide notes

Although DDE submitters will not have an assigned window for reporting claim reports, claim information must still be submitted within 45 calendar days of the TPOC, or assumption, or termination of ORM.

Since retroactive reporting is required, DDE submitters are required to report all liability insurance (including self-insurance), no-fault insurance, and workers' compensation claims involving a Medicare beneficiary as the injured party where ORM payments exist as of January 1, 2010, and subsequent, regardless of the date of an initial acceptance of payment responsibility.

In addition, they must include no-fault insurance or workers' compensation claims where the settlement, judgment, award, or other payment date, separate/apart from ORM, is October 1, 2010, or subsequent, and which meet the reporting thresholds for Section 111. Liability insurance (including self-insurance) claims must be reported where the settlement, judgment, award, or other payment date, separate/apart from ORM, is October 1, 2011, or subsequent.

RREs who are considering the DDE submission method should consider how many retroactive reports they have.

In very rare instances, liability claims can now be reported as a non-injury claim or “NONINJ” (more information is available in NGHP User Guide Chapter IV Section 6.2.5.2).

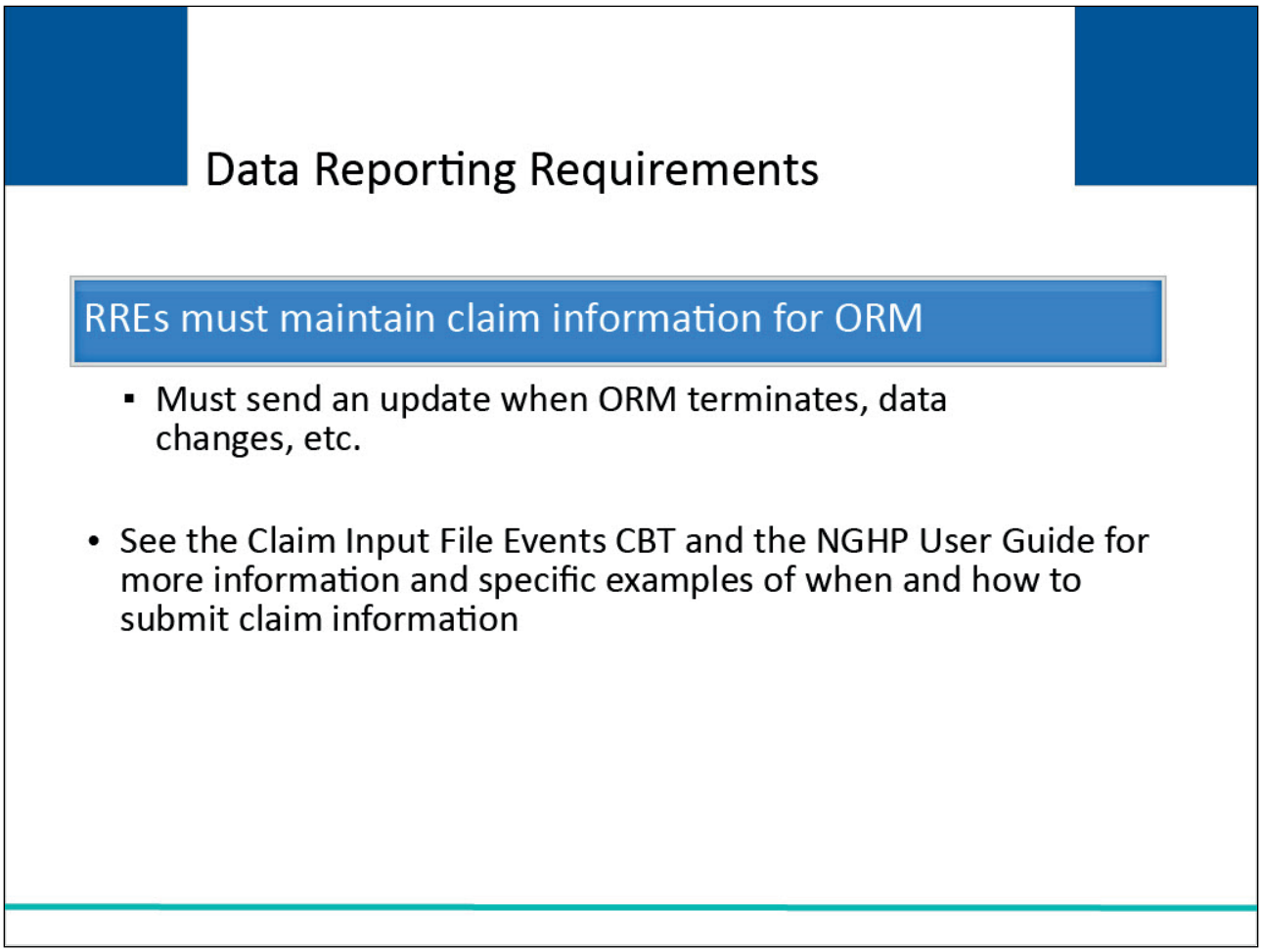
If you have numerous retroactive reports to enter, the manual data entry will be very time consuming during the first quarter you begin reporting via DDE.

In this case, file submission may be a better option for you. The threshold for physical trauma-based liability insurance settlements will remain at $750. CMS will maintain the $750 threshold for no-fault insurance and workers’ compensation settlements, where the no-fault insurer or workers’ compensation entity does not otherwise have ongoing responsibility for medicals (ORM).

Note: In some states, depending on various factors associated with the incident being reported, no-fault policy limits may vary. The reported Policy Limit should reflect the amount that the RRE has accepted responsibility for at the time the record was submitted or updated. Just as importantly, if the Section 111 record needs to be corrected to reflect a new Policy Limit, the RRE should update the record as soon as possible.

Additionally, there is guidance on determining the ORM termination date based on a physician statement has been clarified (NGHP User Guide Chapter III, Section 6.3.2). Additionally, guidance on what triggers the need to report ORM has been clarified (NGHP User Guide Chapter III, Section 6.5.1.1).

Slide 13 of 19 - Data Reporting Requirements

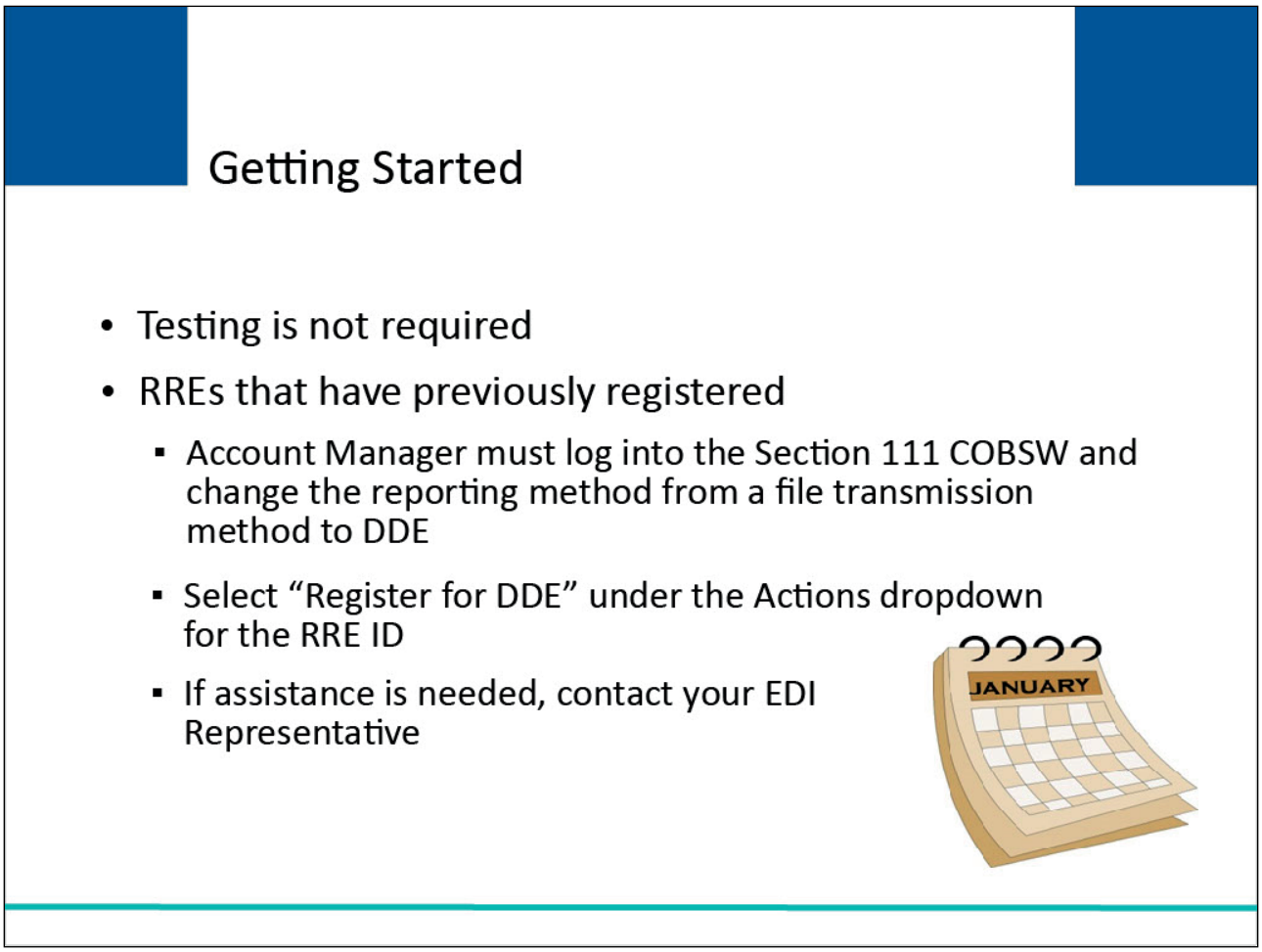


Slide notes

RREs must maintain claim information, particularly for ORM. They must send an update when ORM terminates, data changes, etc.

Please see the Claim Input File Events CBT and the NGHP User Guide for more information and specific examples of when and how to submit claim information.

Slide 14 of 19 - Getting Started



Slide notes

Testing is not required for DDE. RREs that are candidates for DDE and are interested in submitting their Section 111 claim information using DDE may select this data transmission method.

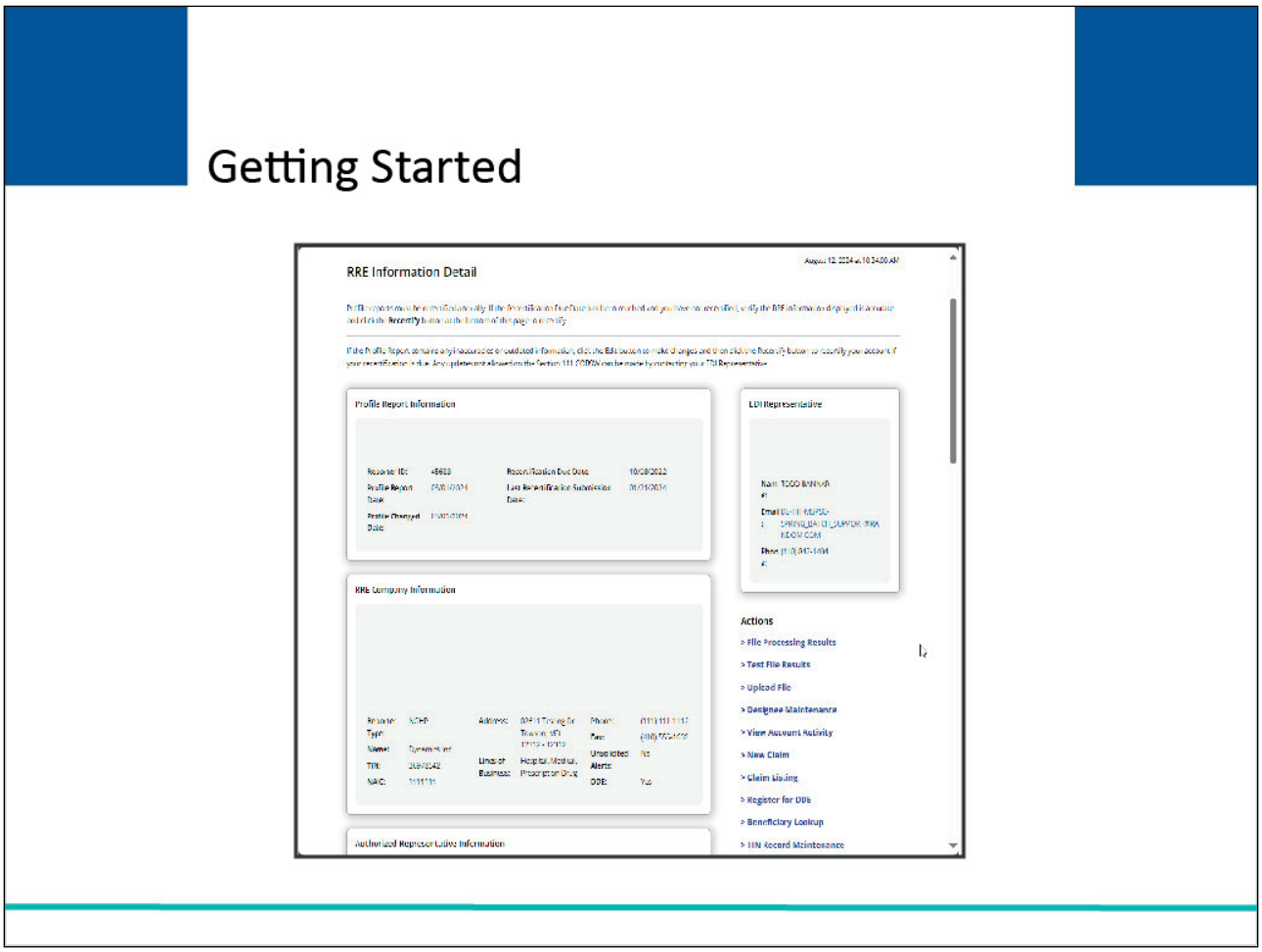
RREs that have previously registered under the current file transmission methods and want to change to the DDE option must have their Account Manager log into the Section 111 COBSW and change the reporting method from a file transmission method to DDE.

Once logged in, the Account Manager will select "Register for DDE" under the Actions dropdown for the RRE ID on the RRE Listing page.

If assistance is needed, the RRE can contact their EDI Representative.

Note: Because file types have been restricted for uploads, RREs using the HTTPS file transmission method can only upload files with the file extension of .txt. Any other file type will generate an Invalid File error message.

Slide 15 of 19 - Getting Started



Slide notes

RREs that have not previously registered must have their Account Manager select DDE during the Account Setup step of the registration process.

The RRE's Account Manager will select a data transmission method on the screen displayed here.

RREs that expect to submit 500 or fewer NGHP claim transactions on a yearly basis, may, but are not required to, select the DDE data transmission method.

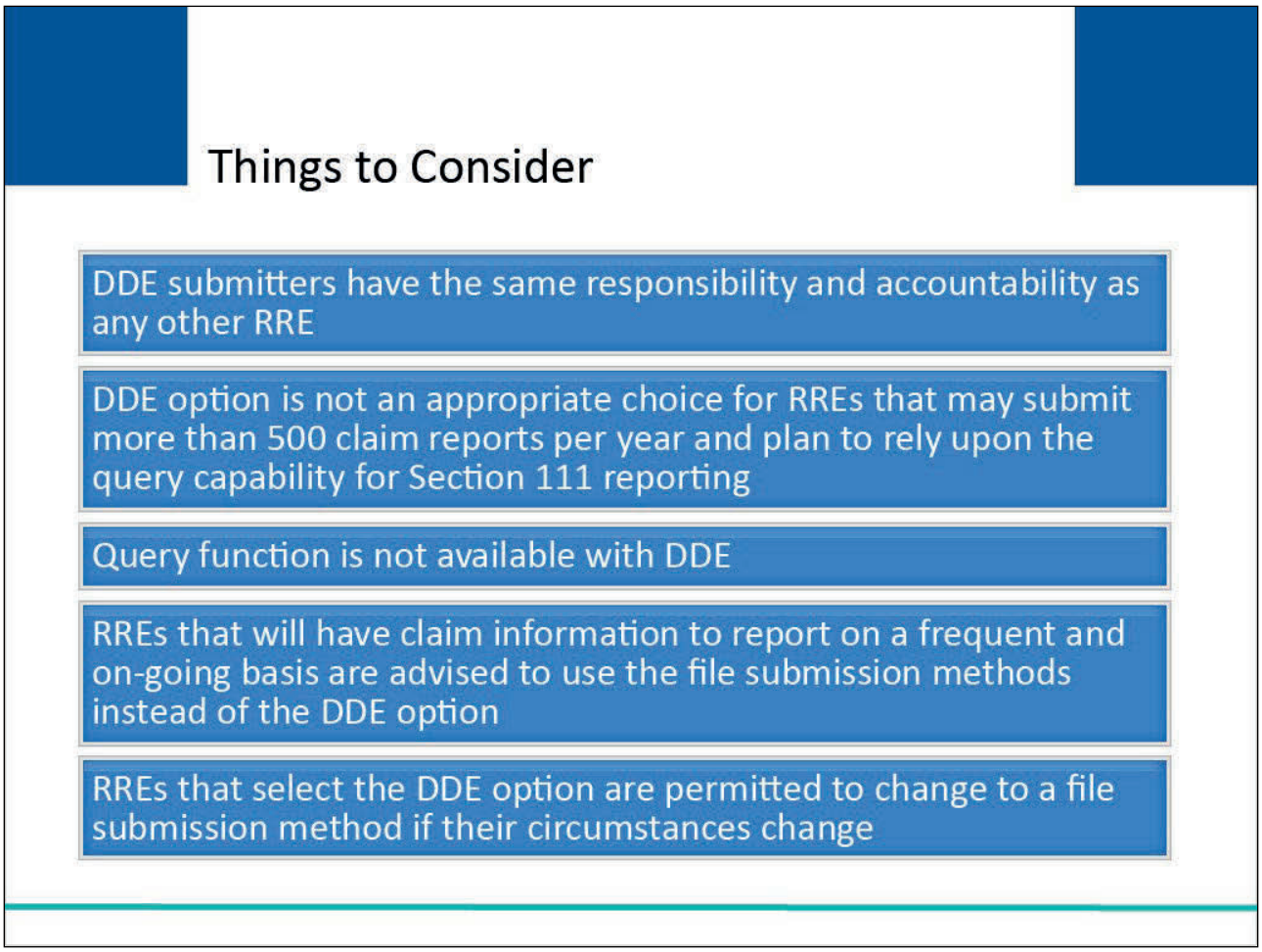
RREs that will report on a regular basis should select a file transmission method:

- Connect:Direct via CMS EFT,
- SFTP, or
- HTTPS.

RREs that select DDE may still use agents to perform their DDE for an RRE ID as long as the agent is set up as the Account Manager or Account Designee for the RRE ID.

To learn more about the Account Setup process, view the COBSW-Step2-Account Setup CBT.

Slide 16 of 19 - Things to Consider



Slide notes

Small Reporters that use the DDE option have the same responsibility and accountability as any other RRE. The DDE New Claim screens were designed to capture all of the required Section 111 data elements.

The DDE option is not an appropriate choice for RREs that may submit more than 500 claim reports per year and plan to rely upon the query capability for Section 111 reporting. With DDE, the query function will not be available.

RREs that will have claim information to report on a frequent and on-going basis are advised to use the file submission methods instead of the DDE option. Due to the number of data elements required, the manual data entry for a single claim report may take a considerable amount of time.

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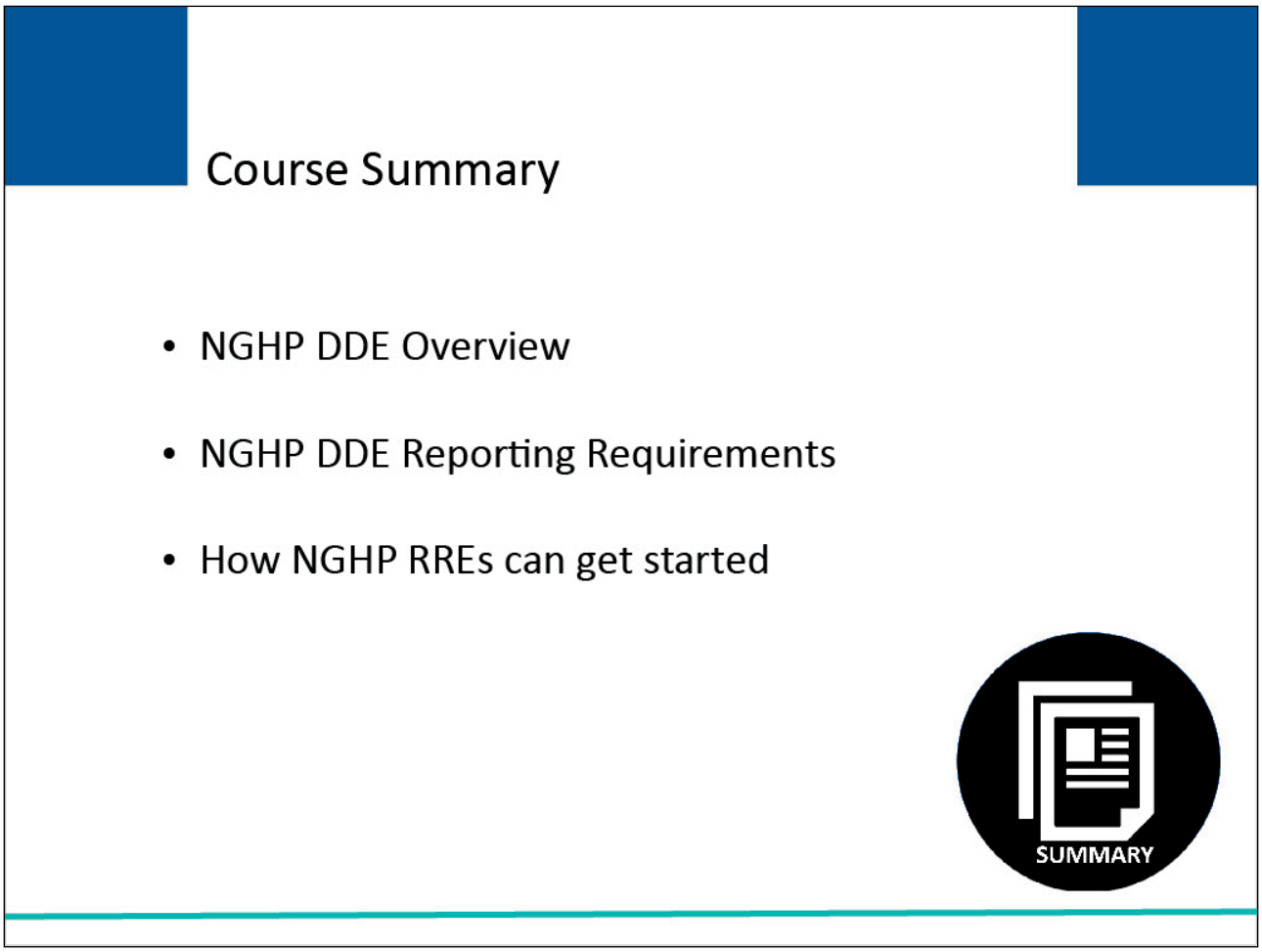
And remember, if you select DDE and your circumstances change, you are permitted to change to a file submission method. Please see the Switching to or From Direct Data Entry CBT for more information.

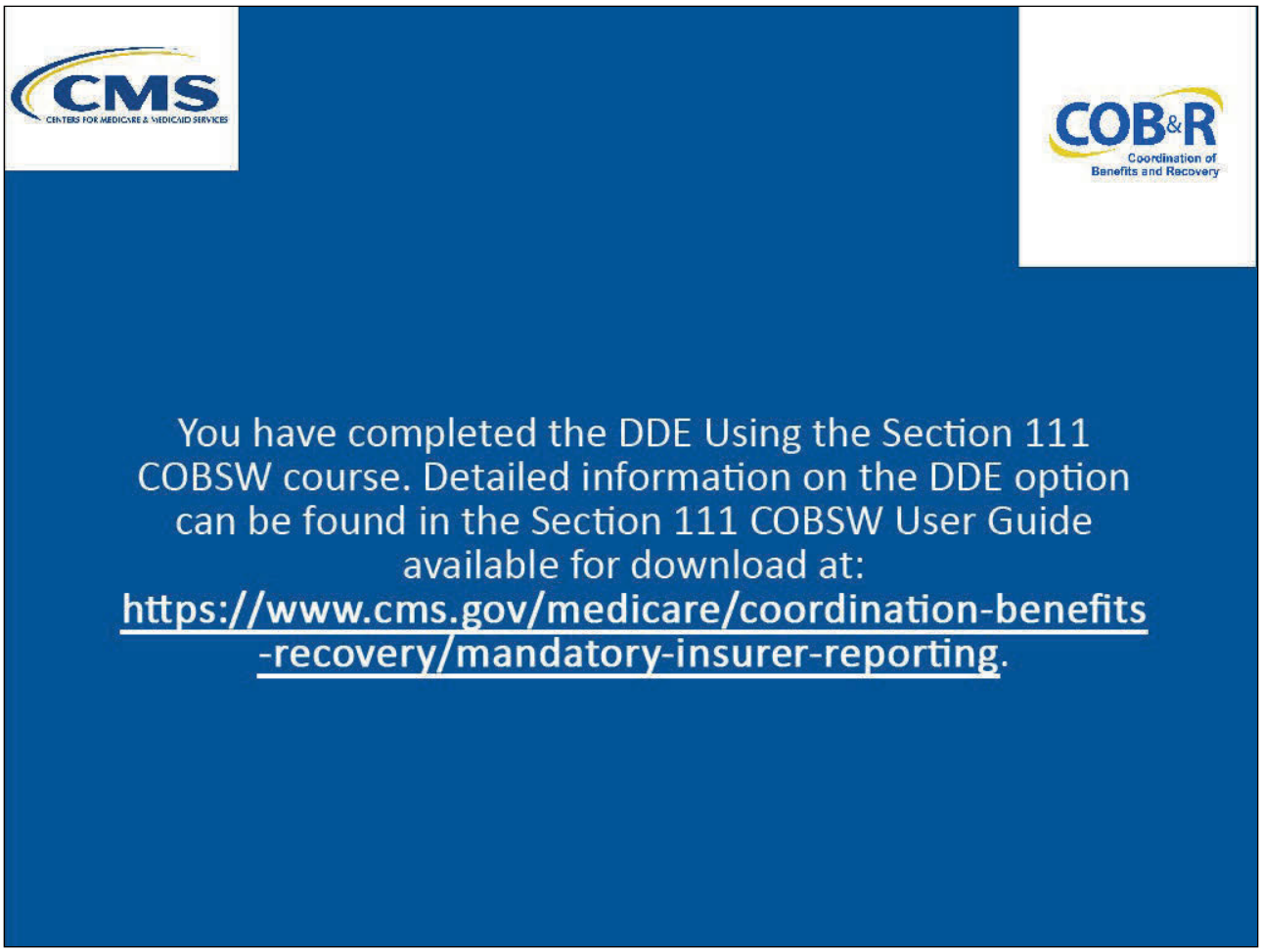
Slide 17 of 19- Course Summary



Slide notes

This module provided an overview on NGHP Direct Data Entry (DDE), explained the NGHP DDE reporting requirements, and provided information on how an NGHP Responsible Reporting Entity (RRE) can get started with this reporting method.

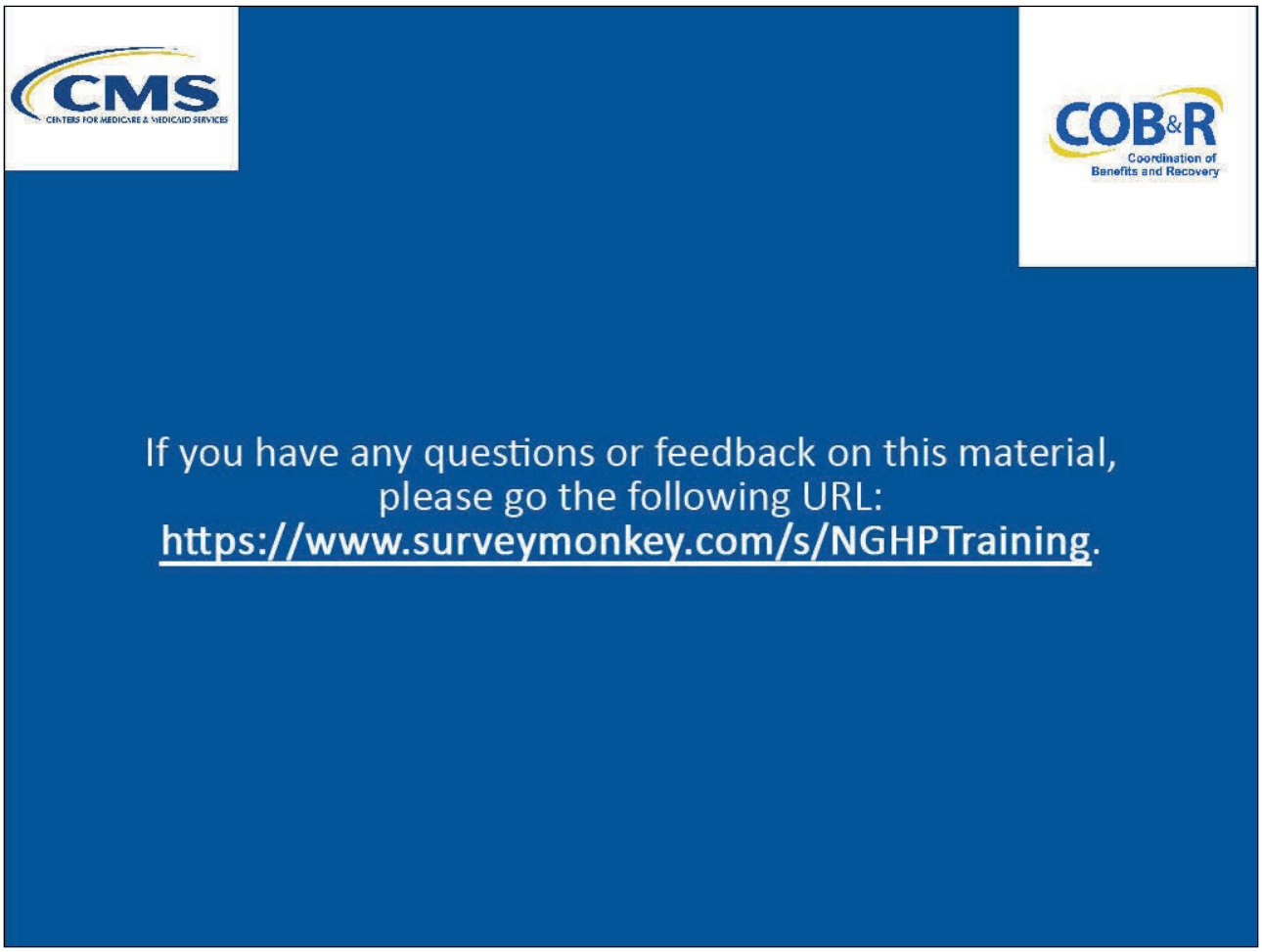
Slide 18 of 19 - Conclusion



Slide notes

You have completed the DDE Using the Section 111 COBSW course. Detailed information on the DDE option can be found in the Section 111 COBSW User Guide available for download at the following link: CMS NGHP Website.

Slide 19 of 19 - NGHP Training Survey



Slide notes

If you have any questions or feedback on this material, please go to the following URL: NGHP Training Survey.