

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-20 One-Time Notification</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
<b>Transmittal 971</b>	<b>Date: October 26, 2011</b>
	<b>Change Request 7519</b>

**SUBJECT: Instructions for the Fiscal Intermediary Shared System (FISS) to modify the Workers Compensation Set Aside (WCSA) Claims Process to Capture the Amount Medicare would have paid when the Claim is returned by CWF. This change request also updates the MSP Savings Report to add Special Project Savings Total on the Savings Report to include totals from all Special Projects.**

**I. SUMMARY OF CHANGES:** CMS instructs FISS to modify the WCSA claims process to capture the amount Medicare would have paid when the claim is returned by CWF as WCSA. CMS is also modifying the MSP Savings report to add a Special Project Savings Total on the Savings Report to include totals from all Special Projects.

**EFFECTIVE DATE: April 1, 2012**

**IMPLEMENTATION DATE: April 2, 2012**

*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/revise 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.*

<b>R/N/D</b>	<b>CHAPTER / SECTION / SUBSECTION / TITLE</b>
N/A	

**III. FUNDING:**

**For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs) and/or Carriers:**

No additional funding will be provided by CMS; Contractor activities are to be carried out within their operating budgets.

**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:**

##### **One-Time Notification**

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

# Attachment – One-Time Notification

Pub. 100-20	Transmittal: 971	Date: October 26, 2011	Change Request: 7519
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**SUBJECT: Instructions for the Fiscal Intermediary Shared System (FISS) to modify the Workers’ Compensation Set Aside (WCSA) Claims Process to Capture the Amount Medicare would have paid when the Claim is returned by CWF. This change request also updates the Medicare Secondary Payer (MSP) Savings Report to add Special Project Savings Total in the MSP Savings Report to include totals from all Special Projects.**

**Effective Date: April 1, 2012**

**Implementation Date: April 2, 2012**

**I. GENERAL INFORMATION**

**A. Background:** Change Request 5371 was released in 2009 which outlined claims processing rules for the WCSA arrangements. The Change Request stated that pursuant to 42 U.S.C. §1395y(b)(2) and § 1862(b)(2)(A)(ii) of the Social Security Act, Medicare is precluded from making payment when payment “has been made or can reasonably be expected to be made under a workers’ compensation plan, an automobile or liability insurance policy or plan (including a self-insured plan), or under no-fault insurance.” Consequently, Medicare should not make payment for future medical expenses associated with a settlement, judgment or award because payments “has been made” for such items or services. A CMS determination regarding a proposed WCMSA amount is a determination regarding the amount of future medicals associated with a particular WC settlement, judgment or award and is to be used in making claims payment determinations once there has been a settlement, judgment or award. The Medicare Contractors shall pay primary on claims or services that are not related to the diagnosis codes on CWF Auxiliary records with an MSP code “W”, assuming that no other MSP record exists on CWF. FISS must also capture the MSP savings for the WCSA special project 7019 when such claims are received and Medicare makes a zero payment.

This CR instructs FISS to modify the WCSA claims process to capture the amount Medicare would have paid when the claim is returned by CWF as WCSA. This CR is also modifying the MSP Savings report to add a Special Project Savings Total in the MSP Savings Report to include totals from all Special Projects except for SAVE. SAVE totals will continue to be reported in the SAVE special project.

**B. Policy:** The FISS standard system shall modify the WCSA claims process to capture the amount Medicare would have paid when the claim is returned by CWF as WCSA, prior to assigning 34378 to reject the claim for Special Project 7019 of the MSP Savings Report. This modification shall allow savings to be correctly displayed on the 09A and 09Z MSP Savings Detail Reports.

**II. BUSINESS REQUIREMENTS TABLE**

Number	Requirement	Responsibility (place an “X” in each applicable column)						
		A / B  M A	D M E  M A	F I    	C A    	R H R I  	Shared- System Maintainers	OTHER

		C	C		R		F	M	V	C	
							I	C	M	W	
							S	S	S	F	
							S				
7519.1	The FISS standard system shall modify the WCSA claims process to capture the amount Medicare would have paid when the claim is returned by CWF as WCSA, prior to assigning 34378 to reject the claim for Special Project 7019 of the MSP Savings Report.						X				
7519.1.2	FISS shall ensure that the savings captured in the form of the amount Medicare would paid are correctly displayed on the 09A and 09Z MSP Savings Detail Reports.						X				
7519.2	CMS and FISS shall implement a MSP Special Project Savings Total on the MSP Savings Report to include totals from all Special Projects except for SAVE and TOT.						X				CMS CROW D
7519.3	All Part A Contractors shall total each respective MSP Special Project Savings, except for SAVE and TOT, and place these totals in the MSP Special Project Savings Total in the CROWD MSP Savings Report.	X		X		X	X				CROW D
7519.3.1	CROWD, Contractors and Shared Systems shall continue to identify the SAVE totals in the SAVE special project.										CROW D
7519.3.2	CROWD, FISS and Part A contractors shall review and implement the format found in the attachment as described in 7519.2 and 7519.3.	X		X		X	X				CROW D

## II. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A	D	F	C	R	Shared-System Maintainers				OTHER
		B	M	I	A	H	F	M	V	C	
		M	M		I	I	I	C	M	W	
		A	A		E	S	S	S	S	F	
		C	C		R	S					
	None.										

## III. SUPPORTING INFORMATION

**Section A: For any recommendations and supporting information associated with listed requirements, use the box below: N/A**

X-Ref Requirement Number	Recommendations or other supporting information:

**Section B: For all other recommendations and supporting information, use this space: N/A**

## V. CONTACTS

**Pre-Implementation Contact(s):** Richard Mazur, [Richard.Mazur2@cms.hhs.gov](mailto:Richard.Mazur2@cms.hhs.gov), (410) 786-1418.

**Post-Implementation Contact(s):** Contact your Contracting Officer's Technical Representative (COTR) or Contractor Manager, as applicable.

## VI. FUNDING

**Section A: For *Fiscal Intermediaries (FIs)*, *Regional Home Health Intermediaries (RHHIs)*, and/or *Carriers*, use only one of the following statements:**

No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.

**Section B: For *Medicare Administrative Contractors (MACs)*, include the following statement:**

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.









