

A CMS Medicare Administrative Contractor
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Medicare Secondary Payer Resources for Part A Providers – 11/2023

National Government Services Website

Visit [National Government Services \(NGS\)' website](#) (Sign in as Part A, FQHC/RHC or HH+H provider and select State) for:

- [ASCA Waiver Request Form](#) (Resources > Forms (select form))
- [Claim's Department addresses](#) (Resources > Contact Us > Mailing addresses > Claims (by State))
- [CBTs](#) (Education > Medicare University > MU Course List (CBTs unavailable when being updated)
 - PTA-C-0024 (Fundamentals of Medicare Secondary Payer [MSP]), PTA-C-0035 (Working Aged with EGHP), PTA-C-0039 (Identifying Primary Payers), PTA-C-0042 (Disabled with LGHP), PTA-C-0043 (No-Fault & Liability) and PTA-C-0044 (Other Non-GHPs)
- [Events](#)
- [Medicare University](#) under Education – Must have User ID and Password
- [MSP Instructions](#) (Claims & Appeals > Medicare Secondary Payer)
 - [What is Medicare Secondary Payer?](#)
 - [Identify the Proper Order of Payers for a Beneficiary's Services](#)
 - [Set Up a Beneficiary's MSP Record](#)
 - [Correct a Beneficiary's MSP Record](#)
 - [Prevent an MSP Rejection on a Medicare Primary Claim](#)
 - [Collect and Report Retirement Dates on Medicare Claims](#)
 - [Prepare and Submit an MSP Claim](#)
 - [Prepare and Submit an MSP Conditional Claim](#)
 - [Correct or Adjust a Claim Due to an MSP-Related Issue](#)
 - [Determine if Medicare will Make an MSP Payment](#)
 - [Determine Beneficiary Responsibility on an MSP Claim](#)
- [NGSConnex](#) under Resources – Must have User ID and Password
- [PCC](#) (for inquiries) (Resources > Contact Us > Provider Contact Center (select by State))
- Veteran's Administration (VA) article [Billing Medicare Part A When VA-Eligible Medicare Beneficiaries Receive Services in Non-VA Facilities](#) (Education > Medicare Topics > Billing)

Centers for Medicare & Medicaid Services Website

Visit [Centers for Medicare & Medicaid Services' \(CMS\)' website](#) for:

- Coordination of Benefits and Recovery (COB&R) information including:

- [Attorney Services](#) (Reporting a Case, Proof of Representation and Consent to Release, Conditional Payment Information)
- [Beneficiary Services](#) (Reporting Other Health Insurance, Liability, No-Fault, & Workers' Compensation Reporting, Medicare's Recovery Process, Demand Calculation Options)
- [COB&R Overview](#) ([Medicare Secondary Payer](#), ESRD, [COB](#) [BCRC], GHP Recovery, Non-GHP Recovery, Reimbursing Medicare, Commercial Repayment Center Portal, MSP Recovery Portal, ICD Code Lists, Reports, [Contacts](#))
 - COB&R Entity - Benefits Coordination & Recovery Center (BCRC)
 - Contracted by CMS as of 2/1/2014; replaced COBC and MSPRC
 - Consolidates activities that support collection, management, reporting of other insurance
 - Takes actions to identify health benefits
 - Coordinates payment process to prevent mistaken payments
 - Maintains MSP records in CWF
 - Answers general MSP questions
 - Answers questions about secondary claim development letters
 - Does not process claims or answer claim-related questions
 - BCRC Contact Information:
 - Phone: 855-798-2627 or TTY/TDD: 855-797-2627 (hearing/speech impaired)
 - M-F, 8:00 a.m.–8:00 p.m. ET, except holidays
 - Fax: 405-869-3307
 - MSP – Data Collections, P.O. Box 138897, Oklahoma City, OK 73113-8897
- [Employer Services](#) (COB, Voluntary Data Sharing Agreement, Small Employer Exception)
- [Mandatory Insurer Reporting for GHPs](#)
- [Mandatory Insurer Reporting for Non-GHPs](#)
- [Provider Services](#) (links to [Your Billing Responsibilities](#))
- [Workers' Compensation Medicare Set Aside Arrangements](#)
- [HIPAA Eligibility Transaction System \(HETS\)](#)
- [Internet-Only Manuals \(IOMs\)](#)
 - [Publication 100-02, Medicare Benefit Policy Manual, Chapter 16](#) (Exclusions)
 - [Publication 100-05, Medicare Secondary Payer Manual](#) (Refer to IOM for additional Sections and Sub-Sections)
 - [Chapter 1 – General MSP Overview](#), Sections:
 - 10 = Understanding MSP: Definitions and Important Terminologies
 - 20 = General Provisions
 - 20.1 = Working Aged
 - 20.2 = End-Stage Renal Disease
 - 20.3 = Disabled Beneficiaries Covered Under an LGHP
 - 20.4 = Workers' Compensation
 - 20.5 = No-Fault Insurance
 - 20.6 = Liability Insurance
 - 20.7 = Conditional Primary Medicare Benefits
 - 20.8 = When MSP Benefits Are Payable/Not Payable
 - 20.9 = Multiple Insurers
 - 30 = Overview of Pub. 100-05, the MSP Manual
 - 30.1 = MSP Provisions

- 30.2 = MSP Provider, Physician, Other Supplier Billing Requirements
- 30.3 = A/B MACs and DME MACs Prepayment Processing Requirements
- 30.4 = MSP CWF
- 30.5 = MSP Recovery
- 40 = Referral to Regional Office
- [Chapter 2 – MSP Provisions](#), Sections:
 - 10 = MSP Provisions for Working Aged Individuals
 - 20 = MSP Provisions for ESRD Beneficiaries
 - 30 = MSP Provision for Disabled Beneficiaries
 - 40 = Liability Insurance
 - 50 = Workers' Compensation
 - 60 = No-Fault Insurance
 - 70 = Interested on MSP Recovery Claims
 - 80 = Prohibitions Applicable to Employers Offering GHP Coverage
- [Chapter 3 = MSP Provider Billing Requirements](#), Sections:
 - 10 = General
 - 20 = Obtain Information from Patient or Representative
 - 30 = Provider Billing
 - 40 = Completing Form CMS-1450 in MSP Situations
 - 50 = Summary of MSP Data Elements for Form CMS-1450
- [Chapter 4, COBC Requirements](#) (BCRC; refer to IOM for all Sections)
- [Chapter 5, Contractor Prepayment Processing Requirements](#), Sections:
 - 10 = Coordination with the Benefits Coordination & Recovery Center (BCRC)
 - 20 = Sources That May Identify Other Insurance Coverage
 - 30 = Develop Claims for Medicare Secondary Benefits
 - 40 = Claim Processing Rules
 - 50 = MSP Pay Modules to Calculate Medicare Secondary Payment Amount
 - 60 = MSP Reports
 - 70 = Hospital Review Protocol for Medicare Secondary Payer
- Additional MSP Resources
 - [MSP Hierarchy Rules for GHP RREs](#)
 - [MLN Booklet on MSP](#)
 - [MLN Matters® Articles](#)
 - [MM10863](#): Updating Language to Clarify for Providers Chapter 3, Section 20 and Chapter 5, Section 70 of the Medicare Secondary Payer Manual ([CR10863](#))
 - [MM11945 Revised](#): *Update to the Model Admission Questions for Providers to Ask Medicare Beneficiaries* ([CR11945](#))
 - [MLN Fact Sheet – Medicare Secondary Payer: Don't Deny Services & Bill Correctly](#)
- [Subscribe to MLN News & Updates](#)

Medicare.gov Website

- [Medicare & Other Health Benefits: Your Guide to Who Pays First](#) (for Beneficiaries)