Medicare Secondary Payer Compliance Quick Reference Guide

MMSEA Section 111

Report all Medicare Beneficiaries to CMS Conditional Payment Resolution

Required at Time of Settlement

Medicare Secondary Payer (MSP) Compliance

Medicare Set Aside (MSA)
Workers Compensation
Liability, Auto & No-Fault

CMS Submission of MSA for review & approval

AND/ OR

Post Settlement Account Administration / Support

CMS MSA Review Threshold Closing Future Medicals?

Class 1

Is a Medicare Beneficiary

AND

Total Settlement Amount > \$25K

CMS Will Review

Class 2

Is Eligible, has applied, been denied and/or appealing SSDI Benefits

AND

Total Settlement Amount is > \$250K

CMS Will Review

Class 3

Is a Medicare
Beneficiary or eligible/
applied for SSDI
Benefits

EXCEPT

If Total Settlement
Amount less than Class
1 or Class 2, CMS Will
NOT review, do NOT
submit to CMS, Use
Analytic-Powered®
MSA!

When to Consider Medicare Secondary Payer(MSP) Compliance

Are you Closing Future Medicals?

Is the claimant age 62.5 years or older?

Is Disability Status Permanently and Totally Disabled (PTD)?

Has Claimant Applied, been approved/denied, is appealing or has re-applied for Social Security Disability Income (SSDI) Benefits?

Does the claim involve a Catastrophic injury such as spinal cord injury, severe head injury, amputation, severe exposure, chemical or thermal burns or multiple trauma?

Was the medical spend greater than \$50,000 in the first year following the date of injury?

Has the claimant been out of work two years or more?

If you answered yes to any of these questions, you may have a claim involving a Medicare Beneficiary or a claimant with a reasonable expectation of becoming a Medicare Beneficiary within 24 months, and Medicare's Interests must be considered at the time of settlement. Check Medicare Benefit eligibility with CareBridgeInc