

# PUBLICATION

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## Mandatory Reporting Requirements: Reporting Delayed

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As we have reported in previous client alerts (see links below), many long term care facilities are required by law to report to the Medicare Program any payments or settlements for liability insurance (including self-insurance), no-fault insurance and workers' compensation benefits made to a Medicare beneficiary.

On February 17, the Centers for Medicare and Medicaid Services (CMS) extended the reporting deadline from April 1, 2010 to January 1, 2011. This extension is a welcome relief to all Responsible Reporting Entities (RREs) which are required to report non-group health plan (NGHP) claims. Many RREs have been reporting significant problems with test files, including reported instances of CMS losing data files transferred.

The statement from CMS reads in part:

" . . . the date for first production NGHP Input Files is changed from April 1, 2010 to January 1, 2011, effective immediately.

- NGHP File data exchange testing will continue. All NGHP RREs should now be registered with the COBC, and either in or preparing for file testing status. NGHP file data exchange testing may continue during 2010, as needed.
- All NGHP file data exchange testing will be completed by December 31, 2010. NGHP RREs that have completed file data exchange testing at any time are encouraged to proceed to production file data exchange status."

On February 25, CMS officials announced they modified the dates for required reporting. Previously, RREs were required to report any total payment obligations for claimants (TPOCs) made after January 1, 2010. The new reporting requirement is for all TPOCs after October 1, 2010. Furthermore, RREs were previously required to report ongoing responsibilities for medicals (ORMs) entered into as of July 1, 2009, but this date has now been extended to January 1, 2010.

CMS published the next version of the "Section 111 NGHP User Guide" and a number of alerts relating to particular NGHP policy issues on February 25. The alerts include a policy change on who must report and are required reading for all long term care facilities, as reporting obligations related to deductibles and self-insured retention have changed.

CMS also posted an alert for NGHP RREs describing the steps those RREs can take to assure their ongoing compliance with the Section 111 reporting requirements. The alert focuses on compliance efforts including (1) ensuring that if you are an RRE that you are registered appropriately, (2) the exchange of test data and (3) the filing of production data.

See below for links to prior alerts:

[New Medicare Mandatory Reporting Imposes Significant Obligations on Long Term Care Facilities](#)

## New Medicare Secondary Payer Mandatory Reporting Imposes Significant Obligations on Insurers and Employers

Mandatory Settlement Reporting Registration Deadline September 30

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