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## Commercial Repayment Center (CRC) Non-Group Health Plan (NGHP) Recovery Town Hall Questions and Answers

Below are answers to commonly asked questions from the CRC NGHP Recovery Town Hall held on January 14, 2020. The presentation from the town hall can be found on CMS.gov here:

<https://www.cms.gov/files/document/commercial-repayment-center-crc-non-group-health-plan-nghp-recovery-town-hall-presentation.pdf>.

**Question 1:** Where do I find information about the CMS NGHP recovery process?

**Answer 1:** Information about the NGHP recovery process can be found here:

<https://www.cms.gov/Medicare/Coordination-of-Benefits-and-Recovery/Coordination-of-Benefits-and-Recovery-Overview/Non-Group-Health-Plan-Recovery/Non-Group-Health-Plan-Recovery>.

Additionally, insurer-related information can be found here:

<https://www.cms.gov/Medicare/Coordination-of-Benefits-and-Recovery/InsurerServices/Insurer-NGHP-Recovery>.

**Question 2:** Where can I find guidance on authorizing another party to work a case on my behalf?

**Answer 2:** The Recovery Agent Authorization Model Language document can be found on the Insurer Services page on CMS.gov here: <https://www.cms.gov/index.php/Medicare/Coordination-of-Benefits-and-Recovery/InsurerServices/Insurer-NGHP-Recovery>. The document displays the elements that must be included when requesting that another party be authorized to work on a recovery case on behalf of the liability insurer (including self-insured), no-fault insurer, or workers' compensation entity (collectively referred to as "applicable plans"). A timeframe for the authority must be noted, but as specified in the model language, it can be for the duration of the case.

**Question 3:** When there is a settlement, what happens with the CRC Ongoing Responsibility for Medicals (ORM) debt?

**Answer 3:** When settlement occurs, any CRC ORM debt will remain open until resolved. Any additional claims identified will be recovered via the Benefits Coordination and Recovery Center (BCRC).

**Question 4:** How will a Conditional Payment Letter (CPL) or Conditional Payment Notice (CPN) become a demand?

**Answer 4:** There are different requirements for CPLs and CPNs and how they result in demands.

A CPL will become a demand upon request or if conditional payments remain after a dispute.

A demand will be issued if the CRC does not receive a response to a CPN after the 35th day from the date of the CPN or conditional payments remain after a dispute.

**Question 5:** Why do the same claim lines that are found on the CPN sometimes re-appear on the demand after a dispute is submitted?

**Answer 5:** If the CRC disagrees with your dispute or if the dispute was received after issuance of the demand, those claims will be included in the demand. If you have any further questions, please contact the CRC Contact Center at (855) 798-2627 (TTY/TDD: (855) 797-2627 for the hearing and speech impaired). After selecting your language preference, select “4” to reach the CRC.

**Question 6:** What is the timeline for appeal and referral to the Department of Treasury once a demand is sent?

**Answer 6:** You have 120 days from the date of the demand to submit an appeal. The Intent to Refer letter (ITR) is automatically issued 110 days from the date of the demand and reflects any existing balance.

**Question 7:** Why would the Department of Treasury have a different address on file for us than the one the CRC has?

**Answer 7:** In most cases, the Department of Treasury will use the address that is provided by the insurer to CMS via the Medicare, Medicaid, and S-CHIP Extension Act (MMSEA) Section 111 reporting. However, in some instances the Department of Treasury will use other addresses it deems appropriate to contact the debtor.

**Question 8:** What check information needs to be included with the appeal, if I included payment with the redetermination request?

**Answer 8:** If remitting payment with your appeal, the CRC Case ID and/or Medicare ID needs to be included on the check or check stub. The following information should also be included within the appeal: check number, check date, and check amount.

**Question 9:** How do we ensure that the Department of Treasury is using the correct Tax Identification Number (TIN)?

**Answer 9:** The TIN used by the Department of Treasury will be the one reported by the insurer to CMS via MMSEA Section 111 reporting.

**Question 10:** How do I make a payment for a CRC NGHP debt?

**Answer 10:** Registered Medicare Secondary Payer Recovery Portal (MSPRP) users can submit electronic payment via the MSPRP. Further information about the electronic payment option can be found in the MSPRP User Guide (Section 14.1.1.1 - Payment Information Tab) here:

<https://www.cob.cms.hhs.gov/MSPRP/assets/msprp/userManual/MSPRPUserManual.pdf>.

You may also submit payment by mail. Be sure to include the CRC Case ID and/or Medicare ID and send your check to the remittance address listed on the demand letter.

**Question 11:** Where can I find more information about the Open Debt Report available on the MSPRP?

**Answer 11:** Information about the Open Debt Report can be found in the MSPRP User Guide (Section 12.3 - View Open Debt Report) here:

<https://www.cob.cms.hhs.gov/MSPRP/assets/msprp/userManual/MSPRPUserManual.pdf>.

**Question 12:** Is there a statute of limitations on Medicare Secondary Payer (MSP) collections?

**Answer 12:** There is a statute of limitations for CMS's ability to bring a legal action against a debtor for Medicare Secondary Payer debts; three (3) years from the date of notice of a settlement, judgment, award or payment, pursuant to Section 205 of the SMART Act of 2012, which, in part, amended Section 1862(b)(2)(B)(iii) of the Social Security Act. This statute of limitations does not prevent CMS from utilizing administrative or other non-judicial methods of collecting on or requesting payment for a debt, short of filing suit or otherwise bringing an action in state or federal courts.

**Question 13:** If I have a case specific question, who should I contact?

**Answer 13:** You can contact the CRC Contact Center at (855) 798-2627 (TTY/TDD: 1-855-797-2627 for the hearing and speech impaired). After selecting your language preference, select "4" to reach the CRC. You can also use the Medicare Secondary Payer Recovery Portal (MSPRP) to find out the status of a case.

**Question 14:** Who should I contact with questions regarding use of the MSPRP?

**Answer 14:** Please contact the BCRC Electronic Data Interchange (EDI) Department at (646) 458-6740 or by email at [COBVA@GHIMedicare.com](mailto:COBVA@GHIMedicare.com).

**Question 15:** Who should I contact if I have a question/problem with information I've reported through Section 111?

**Answer 15:** Please contact the BCRC EDI Department at (646) 458-6740 or by email at [COBVA@GHIMedicare.com](mailto:COBVA@GHIMedicare.com).