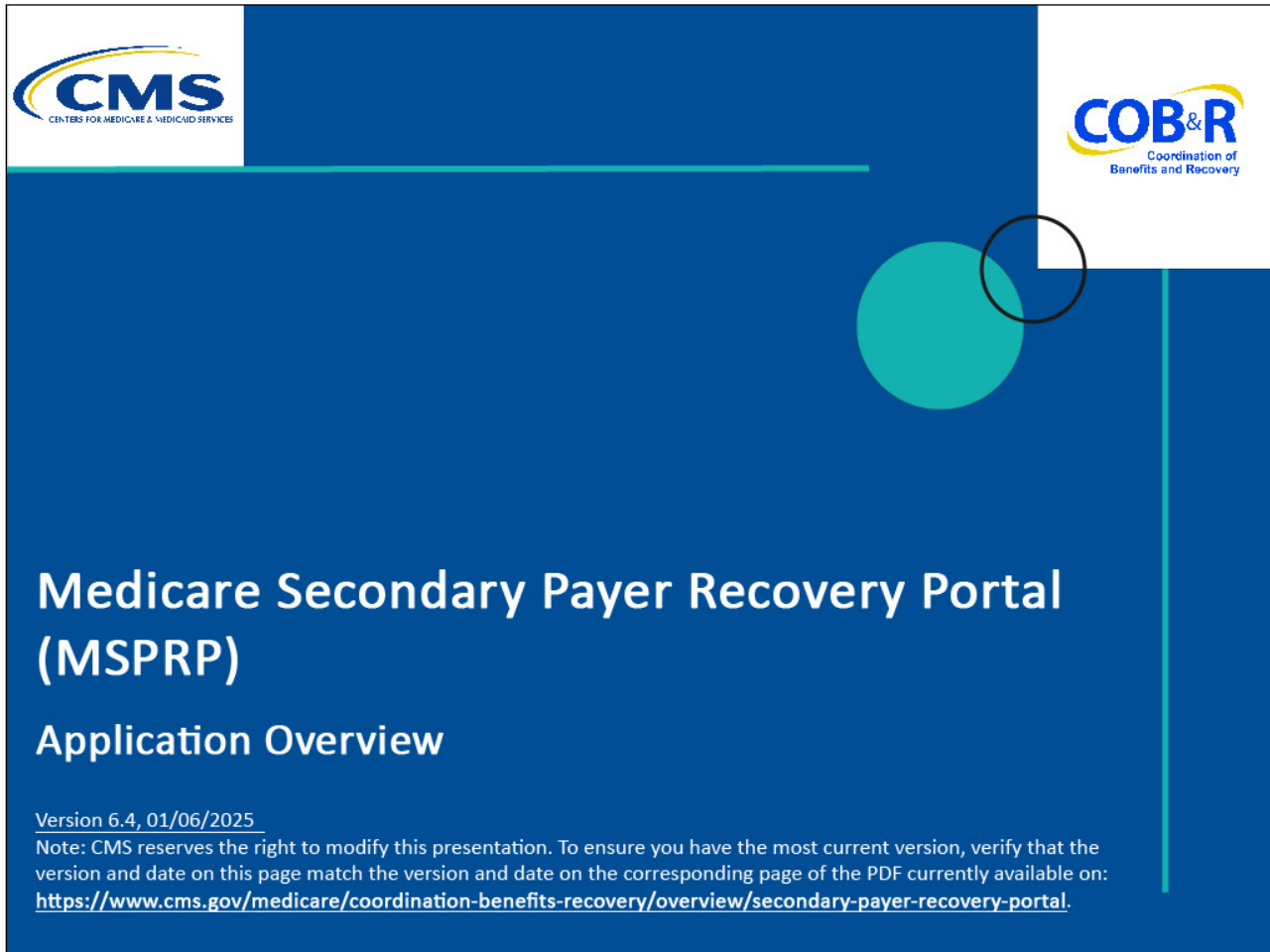


Application Overview Introduction

Slide 1 of 57 - Application Overview Introduction



The slide features a dark blue background with a light blue circle and a black circle on the right side. The CMS logo is in the top left, and the COB&R logo is in the top right. The main title is 'Medicare Secondary Payer Recovery Portal (MSPRP)' and the subtitle is 'Application Overview'. Below the subtitle, there is a version number and a note about the right to modify the presentation, followed by a URL.

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

COB&R
Coordination of
Benefits and Recovery

Medicare Secondary Payer Recovery Portal (MSPRP)

Application Overview

Version 6.4, 01/06/2025

Note: CMS reserves the right to modify this presentation. To ensure you have the most current version, verify that the version and date on this page match the version and date on the corresponding page of the PDF currently available on:
<https://www.cms.gov/medicare/coordination-benefits-recovery/overview/secondary-payer-recovery-portal>.

Slide notes

Welcome to the Medicare Secondary Payer Recovery Portal (MSPRP) Application Overview course.

Slide 2 of 57 - Disclaimer

Disclaimer

While all information in this document is believed to be correct at the time of writing, this Computer Based Training (CBT) is for educational purposes only and does not constitute official Centers for Medicare & Medicaid Services (CMS) instructions. All affected entities are responsible for following the instructions found in the MSPRP User Manual found at the following link:

<https://www.cob.cms.hhs.gov/MSPRP/>.

Slide notes


While all information in this document is believed to be correct at the time of writing, this Computer Based Training (CBT) is for educational purposes only and does not constitute official Centers for Medicare & Medicaid Services (CMS) instructions.

All affected entities are responsible for following the instructions found in the MSPRP User Manual found at the following link: <https://www.cob.cms.hhs.gov/MSPRP/>.

Slide 3 of 57 - Course Overview

Course Overview

- Navigation guidelines
- Search for a case
- Case Information page



Slide notes

This course will provide an overview of the MSPRP including general navigation guidelines. It will also include information on how to search for a case and the Case Information page.

Slide 4 of 57 - MSPRP

MSPRP

- Provides a quick and efficient way to request and access case information
- Provides information to assist in resolving Medicare's recovery claim
- Allows you to
 - Submit a valid authorization
 - Request a copy of a conditional payment letter
 - Obtain final conditional payment information
 - Dispute claims
 - Submit settlement information
 - Initiate the demand letter
 - View/Submit redetermination (First Level Appeal)
 - View/Submit a waiver request or compromise request (beneficiary debtor cases only)
 - Make electronic payments
 - Open Debt Report

Slide notes

The MSPRP provides a quick and efficient way to request and access case information and provide information to assist in resolving Medicare's recovery claim.

With the use of this portal, you may submit a valid authorization, request a copy of the conditional payment letter, obtain final conditional payment information, dispute claims, submit settlement information, initiate the demand letter, view/submit redetermination (First Level Appeal), View/Submit waiver request or compromise request, make electronic payments, and view the Open Debt Report.

Note: Only those actions that are applicable to the case will be available. For example, waiver and compromise requests can only be submitted for beneficiary debtor cases.

Slide 5 of 57- Getting Started

Getting Started

- MSPRP users must register and be associated to a registered account
- Before a new user can register, the corporate or representative entity must complete the initial registration process for the MSPRP account
 - Determine MSPRP Account Type
 - Identify MSPRP Users
 - Register on the MSPRP
 - Complete Account Setup on the MSPRP
 - Return signed Profile Report

Slide notes

All users of the MSPRP, except for Medicare beneficiaries, must register and be associated to a registered account.

Before a new user can register, the corporate or representative entity must complete the initial registration process for the MSPRP account which involves the following steps:

- Determine MSPRP Account Type (Representative or Corporate),
- Identify MSPRP users,
- Register on the MSPRP,
- Complete Account Setup on the MSPRP, and
- Return Signed Profile Report.

Slide 6 of 57 - Determine MSPRP Account Type

Determine MSPRP Account Type

- Representative Account
 - Intended for a non-corporate, single representative of a beneficiary without a corporate Employer Identification Number (EIN)
 - Requires entry of a personal Social Security Number (SSN)
- Corporate Account
 - Intended for an organization under which multiple people will work on multiple cases related to multiple Medicare beneficiaries
 - Requires entry of an EIN or Tax Identification

**Slide notes**

There are two types of MSPRP accounts, Representative and Corporate. Account types are mutually exclusive; you can only select one account type.

A representative account is intended for a non-corporate, single representative of a beneficiary without a corporate Employer Identification Number (EIN). This type of account allows you to work on multiple cases for multiple different beneficiaries.

You must provide your personal Social Security Number (SSN) to register for a representative account. Examples of a representative account include an attorney who is not part of a law firm or a member of the beneficiary's family.

A corporate account is intended for an organization under which multiple people will work on multiple cases related to multiple Medicare beneficiaries.

You must provide an EIN or Tax Identification Number (TIN) assigned to your organization by the Internal Revenue Service (IRS) to register for a corporate account.

Examples of a corporate account include a law firm with attorneys that represent beneficiaries, an insurer or self-insured entity, or a recovery agent that represents insurers or provides services to beneficiaries and/or their attorneys.

Note: Recovery agents may often wish to be invited as Account Designees under their clients' accounts, rather than or in addition to creating their own corporate account, depending on the circumstances.

The information you are required to submit during MSPRP registration and the way your account is validated depend on the type of account you choose.

Slide 7 of 57 - Identify MSPRP Users

Identify MSPRP Users

- Account Representative
 - Legal authority to bind the organization to a contract and the terms of MSPRP
 - Information provided on the MSPRP during Registration
- Account Manager
 - Manages account recovery case workload
 - Manages Account Designees access to cases
 - Information provided on the MSPRP during Account Setup
- Account Designees
 - Assists the Account Manager with the case recovery process
 - Invited to register by the Account Manager

Slide notes

The MSPRP permits multiple users per account. Each user is defined by one of three possible roles: Account Representative, Account Manager, and Account Designee.

The Account Representative is the individual in the organization who has the legal authority to bind the organization to a contract and the terms of MSPRP requirements.

The Account Representative information will be provided on the MSPRP during Registration. Each MSPRP account can only have one Account Representative.

The Account Manager manages your account recovery case workload and Account Designees access to those cases. The Account Manager information will be provided on the MSPRP during Account Setup. Each MSPRP account can only have one Account Manager.

Account Designees assist the Account Manager with the case recovery process. Your Account Manager may, but is not required to, invite individuals to register as an Account Designee and become users of the MSPRP associated with your account.

The Account Designee information is provided by the Account Manager. Each MSPRP account may have up to 200 Account Designees per corporate account.

Slide 8 of 57 - Registration and Account Setup

Registration and Account Setup

- Corporate Entity
 - Corporate Registration CBT
 - Corporate Account Setup CBT
- Representative Entity
 - Representative Registration CBT
 - Representative Account Setup CBT
- Once Registration and Account Setup is complete and the Profile Report has been signed, the Account Manager may login and invite Account Designees
- Once the Profile Report has been marked as received and your account has been activated by your EDI Representative, users may begin working on cases on the MSPRP
 - To access the MSPRP, enter the following URL into your browser:
<https://www.cob.cms.hhs.gov/MSPRP/>

Slide notes

If you plan to register as a corporate entity, see the Corporate Registration and Corporate Account Setup CBTs for additional information.

If you plan to register as a representative entity, review the Representative Registration and Representative Account Setup CBTs for additional information.


Once Registration and Account Setup have been completed and the Profile Report has been signed and returned to your Electronic Interchange Department (EDI) Representative, the Account Manager may login and invite Account Designees.

Once your Profile Report has been marked as received and your account has been activated by your EDI Representative, you may begin working on cases using the MSPRP.

To access the MSPRP, enter the following URL into your web browser: CMS MSPRP Website. Note: To limit the number of cases submitted in error, beneficiaries, insurers, and authorized representatives now have the ability to close and permanently remove a case from their account that was reported in error.

Slide 9 of 57- Login Warning Page

Login Warning

 [Print this page](#)

UNAUTHORIZED ACCESS TO THIS COMPUTER SYSTEM IS PROHIBITED BY LAW

This warning banner provides privacy and security notices consistent with applicable federal laws, directives, and other federal guidance for accessing this Government system, which includes (1) this computer network, (2) all computers connected to this network, and (3) all devices and storage media attached to this network or to a computer on this network.

This system is provided for Government authorized use only.

Unauthorized or improper use of this system is prohibited and may result in disciplinary action and/or civil and criminal penalties.

Personal use of social media and networking sites on this system is limited as to not interfere with official work duties and is subject to monitoring.

By using this system, you understand and consent to the following:

The Government may monitor, record, and audit your system usage, including usage of personal devices and email systems for official duties or to conduct HHS business. Therefore, you have no reasonable expectation of privacy regarding any communication or data transiting or stored on this system. At any time, and for any lawful Government purpose, the government may monitor, intercept, and search and seize any communication or data transiting or stored on this system.

Any communication or data transiting or stored on this system may be disclosed or used for any lawful Government purpose.

Privacy Act Statement

The collection of this information is authorized by Section 1862(b) of the Social Security Act (codified at 42 U.S.C 1395y(b)) (see also 42, C.F.R. 411.24). The information collected will be used to identify and recover past conditional and mistaken Medicare primary payments and to prevent Medicare from making mistaken payments in the future for those Medicare Secondary Payer situations that continue to exist. The Privacy Act (5 U.S.C. 552a(b)), as amended, prohibits the disclosure of information maintained by the Centers for Medicare & Medicaid Services (CMS) in a system of records to third parties, unless the beneficiary provides a written request or explicit written consent/authorization for a party to receive such information. Where the beneficiary provides written consent/proof of representation, CMS will permit authorized parties to access requisite information.

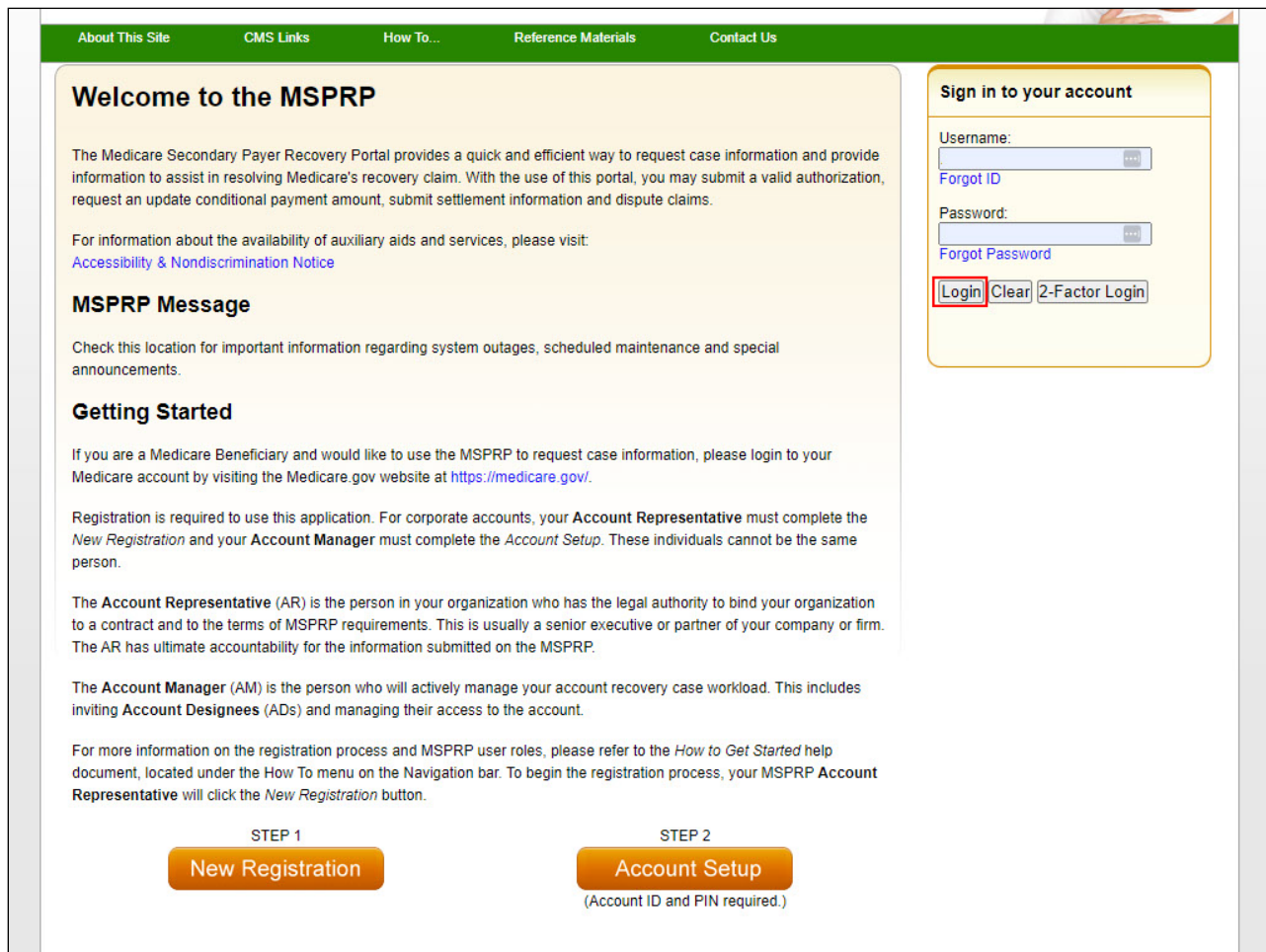
Attestation of Information

The information provided is complete, truthful, accurate, and meets all requirements set forth to use this process.

LOG OFF IMMEDIATELY if you do not agree to the conditions stated in this warning.

Slide notes

Each time you enter the MSPRP, the Login Warning page will appear. After reviewing the information, click I Accept to continue to the Welcome/Login page.

Slide 10 of 57- Welcome to the MSPRP/Login Page

The screenshot shows the MSPRP (Medicare Secondary Payer Recovery Portal) login page. The page has a green navigation bar at the top with links: About This Site, CMS Links, How To..., Reference Materials, and Contact Us. The main content area is divided into two columns. The left column is titled 'Welcome to the MSPRP' and contains a paragraph about the portal's purpose, a link to 'Accessibility & Nondiscrimination Notice', a section titled 'MSPRP Message' with information about system outages, a 'Getting Started' section with instructions for Medicare Beneficiaries and corporate accounts, and two buttons at the bottom: 'New Registration' (labeled STEP 1) and 'Account Setup' (labeled STEP 2, with a note '(Account ID and PIN required)'). The right column is titled 'Sign in to your account' and contains a login form with fields for 'Username' and 'Password', links for 'Forgot ID' and 'Forgot Password', and three buttons: 'Login' (highlighted with a red box), 'Clear', and '2-Factor Login'.

Slide notes

If you have previously used the MSPRP, select login to access the cases you need to review.


Registration is required to use this application. For corporate accounts, your Account Representative must complete Step 1: New Registration (PIN Request), and your Account Manager must complete Step 2: Account Setup. These individuals cannot be the same person.

The Account Representative (AR) is the person in your organization who has the legal authority to bind your organization to a contract and to the terms of MSPRP requirements. This is usually a senior executive or partner of your company or firm. The AR has ultimate accountability for the information submitted on the MSPRP.

The Account Manager (AM) is the person who will actively manage your account recovery case workload. This includes inviting Account Designees (ADs) and managing their access to the account.

For more information on the registration process and MSPRP user roles, please refer to the How to Get Started help document, located under the How To menu on the Navigation bar. To begin the registration process, your MSPRP Account Representative will click the New Registration button.


Slide 11 of 57- Account List Page

 [Print this page](#)

Account List

Click the desired link to access the associated account. Accounts with a green leaf (🌿) include an address that has opted to "Go Paperless" via the MMSEA Section 111 Reporting process. These accounts receive letter notification e-mails instead of mailed letters for the "Go Paperless" addresses. You are responsible for viewing all "Go Paperless" correspondence on the MSPRP. **Note:** To obtain information on the account's paperless addresses, please contact your Section 111 file submitter/reporting agent.

You may update your personal information or change your current password by clicking the appropriate link under the Account Settings List.



Multi-Factor Authentication

MSPRP users may request access to view unmasked claims data that was previously only accessible to the beneficiary. Individuals requesting this access must complete the ID Proofing and Multi-Factor Authentication (MFA) process. The status of your request will display as a link under the Multi-Factor Authentication box. You will click this link to progress through the required steps. Once you have successfully completed the process your status will be changed to Complete.

During the ID Proofing process, you will be asked to provide current personal information to confirm your identity with Experian Credit Services (an outside entity). This information will not be stored on the MSPRP. This process will not impact your credit score.

To use MFA services, you will be required to register a Factor as a method of receiving a security token/push notification to access the MSPRP application. Certain Factors will require you to download and install a specific app onto the mobile device you will use to receive your security token. After the Factor registration, you will activate the factor for your login ID on the MSPRP. You may have only one Active Factor per Factor Type.

You will be able to activate the factor after the Next Step link has changed to **Factor Required**. To begin the ID Proofing process, click the Next Step: **Getting Started** link.

Associated Account IDs:

- 30401 ABC Corporation 🌿
- 30324 Smith Associates

Quick Help

[Help About This Page](#)

Account Settings

[Update Personal Information](#)[Change Password](#)

Multi-Factor Authentication

Status: **Initial Process**
Next Step: **Getting Started**

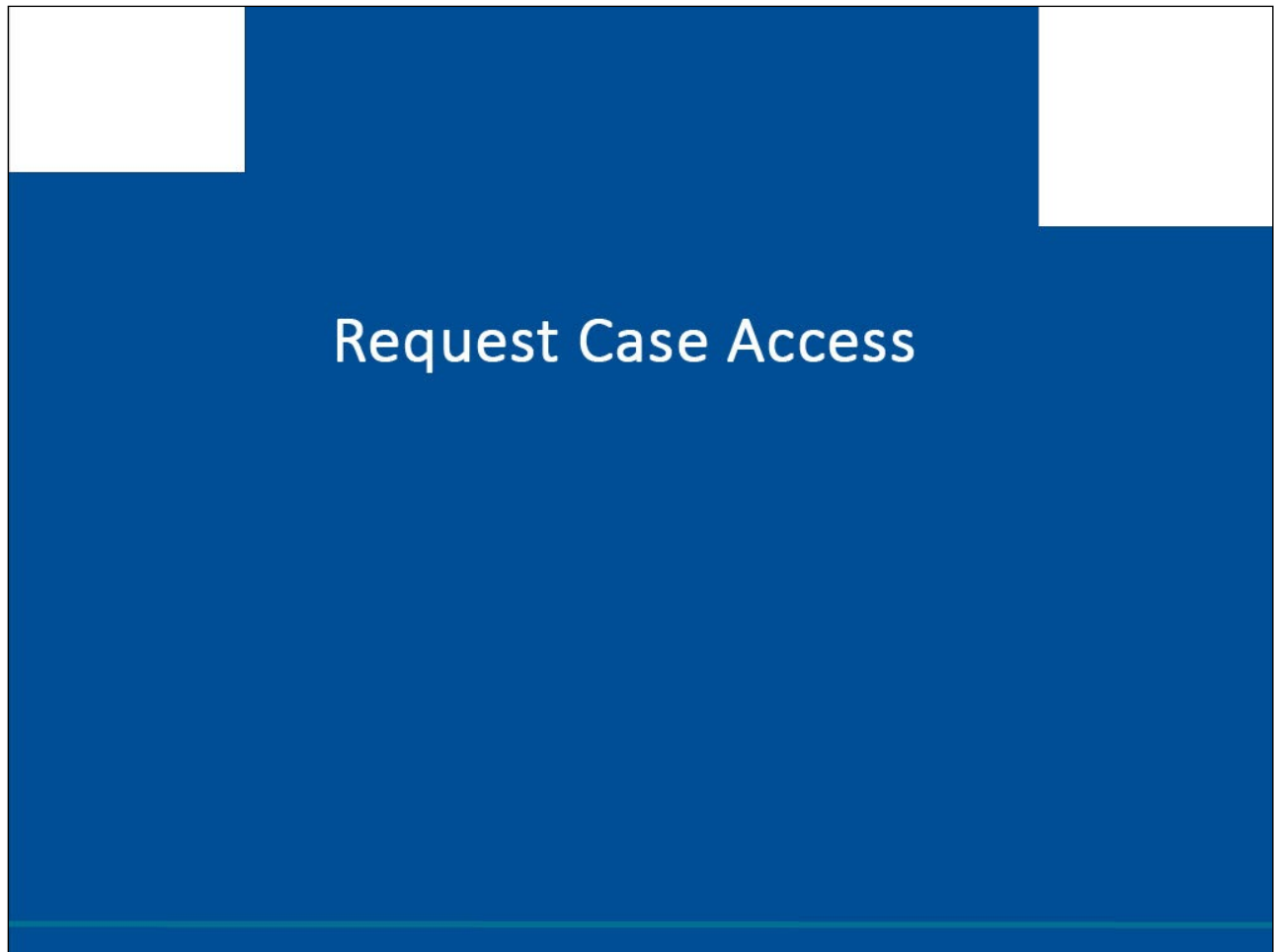
Slide notes

To access an MSPRP account, the Account Manager must first successfully login to the MSPRP application. After a successful login, the Account List page will appear. Click the desired link to access the associated account.

Note: A green leaf (Go Paperless icon) will appear next to the account name on the Account List and Welcome pages. This icon will also appear next to the account ID on the Open Debt Report and Case Listing pages. Additionally, this icon appears next to the case ID on the Case Information page if the MSPRP account is currently receiving letter notification emails instead of mailed letters for the case.

Additionally, MSPRP users who are registered for both the MSPRP and CRCP systems can now initiate the ID proofing process on one application and then continue the process on the other. Once ID proofing is completed in one, users are automatically ID proofed in the other. Additionally, now that both applications support MFA and ID proofing, related references associated with only MSPRP have been changed to the more generic reference COBSW.

Slide 12 of 57 - Request Case Access



Slide notes

The following section will explain how to Request Case Access.

Slide 13 of 57- Welcome! Page

Welcome!

Account: 30401 ABC Corporation

The Medicare Secondary Payer Recovery Portal provides a quick and efficient way to request case information and provide information to assist in resolving Medicare's recovery claim.

With the use of this portal, you may submit a valid authorization, request an update conditional payment amount, submit settlement information and dispute claims.

You may view the account activity by clicking the appropriate link under the Account Settings.

To request information regarding a case you have not already associated to your account, click the Request Case Access link below.

To see cases that you have previously associated to your account, click the Case Listing link below.

To submit a case, click the Report A Case link below.

To request an Open Debt Report, click the Open Debt Report link below.

To view/print "Paperless" letter notification e-mails and letters, click the Go Paperless Letter Notifications link below.

Note: You will not be able to use the links below until your Profile Report has been returned.

[Request Case Access](#)

[Case Listing](#)

[Report A Case](#)

[Open Debt Report](#)

[Go Paperless Letter Notifications](#)

Previous

Slide notes

Once the MSPRP Welcome! page appears, you will see the following links: Request Case Access, Case Listing, and Report A Case. Account Managers will also have access to the Open Debt Report and Go Paperless Letter Notifications links.

Request Case Access is used to associate a case to the MSPRP account.

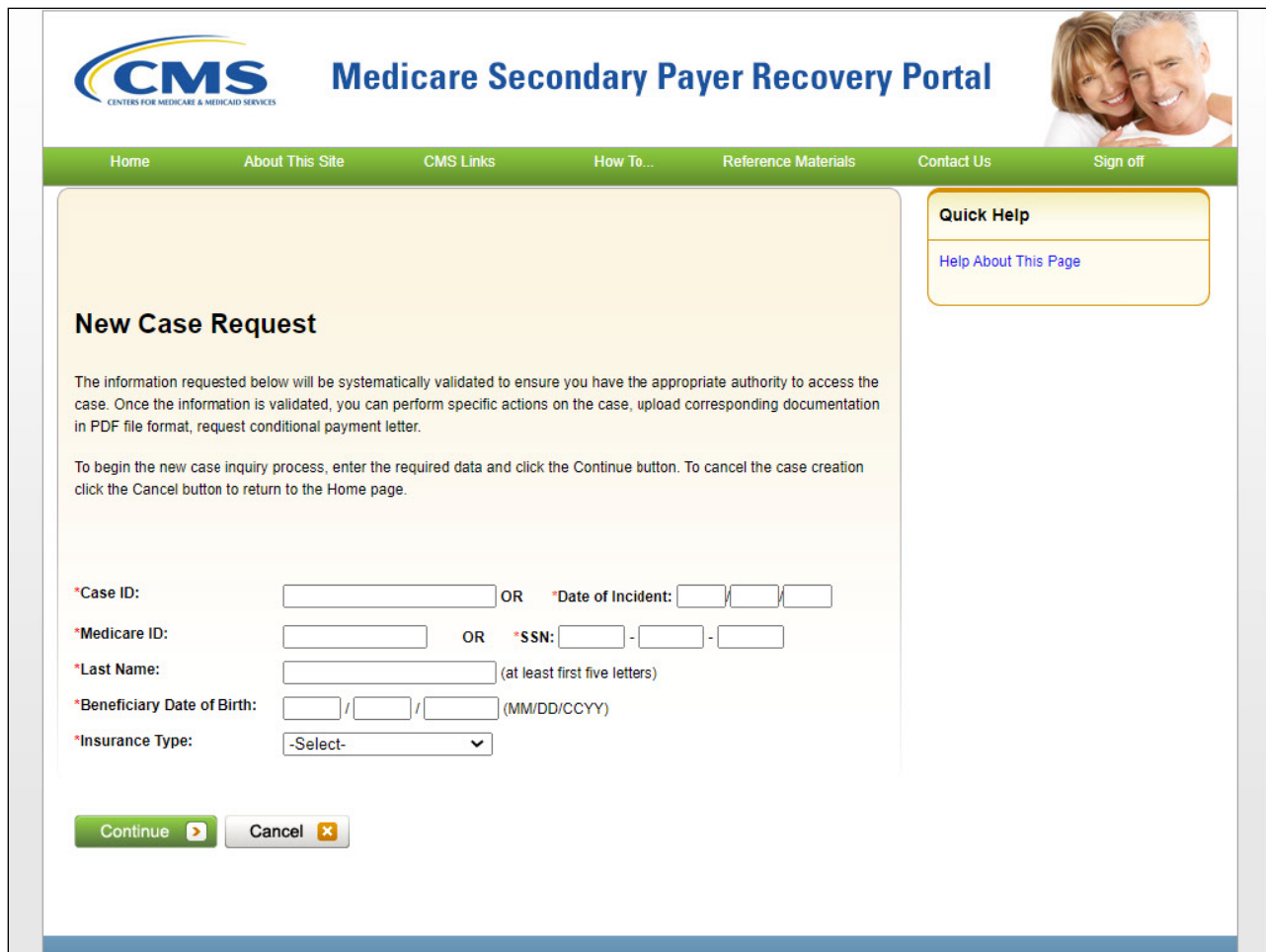
You must always perform this step to link a case to your MSPRP account for the first time. Case Listing is used to view all cases that have been previously associated/linked to your

MSPRP account. If you are approaching settlement on a case that is not yet available on the MSPRP and you wish to initiate the Final Conditional Payment process, you can add this case using the Report a Case link found on this page.

The Open Debt Report page displays a nightly-refreshed, on-demand report showing the status for open debts for Non-Group Health Plans (NGHP) insurer-debtor cases. This report is only available to Account Managers.

The Go Paperless Letter Notifications page allows Account Managers (AMs) and Account Designees (ADs) to easily see when an account is associated with at least one address that has opted in to Go

Paperless (i.e., opted to receive letter notifications electronically instead of by mail); view letter notification emails and letters for Go Paperless, and update the email distribution list for Go Paperless (AMs only).

Slide 14 of 57 - New Case Request Page


The screenshot shows the Medicare Secondary Payer Recovery Portal. The header includes the CMS logo and the title "Medicare Secondary Payer Recovery Portal". A navigation bar contains links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. A "Quick Help" box on the right contains a link "Help About This Page".

New Case Request

The information requested below will be systematically validated to ensure you have the appropriate authority to access the case. Once the information is validated, you can perform specific actions on the case, upload corresponding documentation in PDF file format, request conditional payment letter.

To begin the new case inquiry process, enter the required data and click the Continue button. To cancel the case creation click the Cancel button to return to the Home page.

*Case ID: OR *Date of Incident: / /

*Medicare ID: OR *SSN: - -

*Last Name: (at least first five letters)

*Beneficiary Date of Birth: / / (MM/DD/CCYY)

*Insurance Type:

Slide notes

When the Request Case Access link is selected, the New Case Request page will appear. Fields noted with a red asterisk are required.

MSPRP pages may include the following buttons: [Continue] and [Cancel].

The [Continue] button will advance you to the next page if there are no errors on the current page. Cancel will return you to the Home page. When [Cancel] is clicked, the information entered will not be saved.

To request case access, enter the Case ID (Case Identification), the Beneficiary's Medicare ID, the Beneficiary's Last Name, and the Beneficiary's Date of Birth.

If the Beneficiary's Medicare ID is not known, the Beneficiary's Social Security Number (SSN) may be entered instead of the Medicare ID.

After entering this information, click [Continue].

If the case is not located, a message stating, 'No Matching Case Record Found based upon the information provided' will appear. Note: The following cases will not be available on the MSPRP:

- Cases referred to CMS
- Cases referred to Department of Justice
- Cases involving Workers' Compensation Medicare Set-Aside Amount (WCMSA).

WCMSA cases are only accessible on the Workers' Compensation Medicare Set-Aside Portal (WCMSAP).

For information on the WCMSAP, see the link shown here: <http://go.cms.gov/wcmsa>.

Slide 15 of 57 - Case Results Page

The screenshot shows the Medicare Secondary Payer Recovery Portal. At the top, there is a CMS logo and the title "Medicare Secondary Payer Recovery Portal" next to a photo of a smiling couple. Below this is a green navigation bar with links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. A status bar indicates "Env: QUA Time Stamp: Wed Oct 14 12:58:03 EDT 2015 Skip Navigation".

The main content area is titled "Case Results". It includes a "Print this page" icon and a "Quick Help : Help About This Page" button. Below the title, a message states: "To view case detail information, click the case number." A table displays two cases:

Case ID	Bene Last Name	Medicare ID	Bene DOB	DOI	Industry DOI	Insurance Type	Case Status	Contractor
201200309000018	NELSON	*****3057A	02/08/1949	02/03/2008	02/03/2008	D	In development	BCRC
301104609001830	NELSON	*****3057A	02/08/1949	02/03/2008		L	Open	CRC

Below the table are "Previous" and "Cancel" buttons. At the bottom of the page, a blue footer contains links for "CMS/HHS Vulnerability Disclosure Policy", "Privacy Policy", "User Agreement", and "Adobe Reader".

Slide notes

When results are found in the system, they will appear on the Case Results page. To view case specific information, click the case ID link.

Slide 16 of 57 - Case Information Page

Case Information

Print this page Quick Help : [Help About This Page](#)

Case ID: 201117409000150	Medicare ID: 987654321A
Case Type: Liability Insurance	Beneficiary DOB: 02/08/1940
Case Status: Demand What is this?	Beneficiary Last Name: Smith
Current Status of Debt: Intent to Refer Letter Sent	Treasury Account Number: 12345678
	Treasury Referral Date: 01/01/2016
RRE Name: Sample Name	
Date of Incident: 09/15/2009	Authorization Level: Proof of Representation
Industry Date of Incident: 09/15/2009 What is this?	Authorization Status: Verified What is this?
ORM: Yes	ORM Termination Date: 01/01/2016

Payment Information Electronic Payment History Refund Information Correspondence Activity Waiver/Redetermination/Appeal/Compromise Final Conditional Payment Process

***Current Conditional Payment Amount: \$2,800.00**

**Note: Claims are retrieved daily. This amount is current as of: 07/23/2016. Please be advised that the claims associated to this case are currently being evaluated for relevance. This typically takes 3-5 business days. The conditional payment amount will be automatically updated once this process is complete. Please contact the BCRC or CRC at (855) 798-2627 if immediate assistance with this amount is required.*

Rights and Responsibilities Letter Mail Date: 06/10/2010	Section 111 No-Fault Policy Limit Reported: \$32456.76
Conditional Payment Letter Amount: \$496.06	Conditional Payment Notice Amount: \$500.00
Conditional Payment Letter Mail Date: 06/01/2011	Conditional Payment Notice Mail Date: 06/18/2011
Conditional Payment Amount Update Requested: 06/01/2011	Conditional Payment Notice Response Due Date: 07/31/2011

Slide notes

The Case Information page will appear.

The top-half of this page allows you to view information related to the case, such as:

Case ID,

Case Type (type of insurance coverage provided by the plan for the case (liability, workers' compensation, or no-fault)),

Case Status (In Development, Open, Claim Retrieval, Demand, Bill Issued, or Closed),

Current Status of Incident,

Date of Incident, and

Industry Date of Incident.

The beneficiary's Medicare ID, Date of Birth, and Last Name will display. Treasury Account Number, Treasury Referral Date, the Authorization Level (i.e., Beneficiary Proof of Representation, Beneficiary

Consent to Release, or Recovery Agent Authorization) and the Authorization Status (Verified, Unverified, or Invalid) are also displayed.

Note: The field, Treasury Account Number (i.e., the unique Department of Treasury Federal Agency ID assigned to a debt), was added to the Case Information page to assist Non-Group Health Plan (NGHP) debtors when they discuss their debt with Treasury.

Slide 17 of 57 - Case Information - Payment Information Tab

Payment Information	Electronic Payment History	Refund Information	Correspondence Activity	Waiver/Redetermination/ Appeal/ Compromise	Final Conditional Payment Process
----------------------------	--	------------------------------------	---	--	---

***Current Conditional Payment Amount:** \$2,800.00
**Note: Claims are retrieved daily. This amount is current as of: 07/23/2018. Please be advised that the claims associated to this case are currently being evaluated for relevance. This typically takes 3-5 business days. The conditional payment amount will be automatically updated once this process is complete. Please contact the BCRC or CRC at (855) 798-2627 if immediate assistance with this amount is required.*

Rights and Responsibilities Letter Mail Date: 06/10/2010 **Section 111 No-Fault Policy Limit Reported:** \$32456.76

Conditional Payment Letter Amount: \$496.06
Conditional Payment Letter Mail Date: 06/01/2011
Conditional Payment Amount Update Requested: 06/01/2011

Demand Letter Mail Date: 06/01/2011
Demand Amount: \$3,754.00
Interest Rate: 10%
Last Interest Accrual Date: 06/08/2018
Total Interest Accrued: \$145.79

Balance Amount: \$1,234.56
Balance as of Date: 06/30/2011
Remaining Principal Balance Amount: \$1,234.56
Principal Activity Amount: \$8,971.40
Remaining Interest Balance Amount: \$1,234.56
Interest Activity Amount: \$145.79

[Make a Payment](#) [What is this?](#)

Note: Remaining balance amounts may not reflect recent payments.

Please select an action from the following list, if the option is disabled (grayed out) it may not be available for the case at this time:

☐ [View / Request Authorizations](#)

☐ [Request an update to the conditional payment amount](#) [What is this?](#)

Slide notes

On the middle portion of the Case Information page, several tabs appear. The Payment Information tab is the default and will display each time the Case Information page is accessed. The Payment Information tab will display.

When there is a balance, the Balance Amount and Balance as of Date as well as the Remaining Principal Balance Amount and Remaining Interest Balance Amount. You also have the ability to make an electronic payment. These payments can occur when selecting the “Make A Payment” button. The accepted payment of methods is Automated Clearing House- ACH (or banking information), debit card, and PayPal accounts (linked to a banking accounts). Credit card payments are not currently accepted.

Slide 18 of 57 - Case Information - Electronic Payment History Tab

Payment Information	Electronic Payment History	Refund Information	Correspondence Activity	Waiver/Redetermination/Appeal/Compromise	Final Conditional Payment Process
---------------------	----------------------------	--------------------	-------------------------	--	-----------------------------------

Demand Letter Mail Date: 04/15/2020
Demand Amount: \$3,500.00

Remaining Principal Balance Amount: \$2,500.00
Remaining Interest Balance Amount: \$0.00
Total Remaining Balance Amount: \$2,500.00

When the payment process at Pay.gov has finalized and the Pay.gov Status is **Accepted**, your payment will be processed by the BCRC/CRC and applied to the remaining balance. The remaining balance amounts will not reflect your payment until the Demand Balance Status is **Complete**.

Payment Date	Payment Method	Account Holder Name	Payment Amount	Pay.gov Payment Status	Pay.gov Confirmation Number	Demand Balance Status	Demand Balance Update Date
06/10/2019	ACH	John Dorsett	\$2,500.00	Accepted	34786590	In Process	
05/01/2019	PayPal	John Dorsett	\$1,000.00	Accepted	43578796	Complete	5/7/2019
05/01/2019	Debit Card	John Dorsett	\$1,000.00	Pending	34535478		
05/01/2019	Unknown	John Dorsett	\$1,000.00	Declined	99999999		

Note: Only payments made electronically will display on this page. To verify if a paper check was received, please click on the Correspondence Activity tab and select 'Correspondence Received'.

Please select an action from the following list, if the option is disabled (grayed out) it may not be available for the case at this time:

- ☐ View / Request Authorizations
- ☐ Request an update to the conditional payment amount [What is this?](#)
- ☐ Request an electronic conditional payment letter with Current Conditional Payment Amount [What is this?](#)
- ☐ Request a mailed copy of the conditional payment letter [What is this?](#)
- ☐ Begin Final Conditional Payment Process and Provide 120 Days' Notice of Anticipated Settlement [What is this?](#)

Slide notes

The Electronic Payment History tab lists payment history detail for electronic payments submitted through the MSPRP on Pay.gov. It only displays when there is electronic payment data for the case.

Slide 19 of 57 -Case Information - Refund Information Tab

Payment Information	Electronic Payment History	Refund Information	Correspondence Activity	Waiver/Redetermination/ Appeal/ Compromise	Final Conditional Payment Process
-------------------------------------	--	---------------------------	---	--	---

Demand Letter Mail Date: 06/01/2011
Demand Amount: \$3754.00
Balance Amount: \$1234.56
Balance as of Date: 06/30/2011

Please select an action from the following list, if the option is disabled (grayed out) it may not be available for the case at this time:

- ☐ View / Request Authorizations
- ☐ Request an update to the conditional payment amount [What is this?](#)
- ☐ Request an electronic conditional payment letter with Current Conditional Payment Amount [What is this?](#)
- ☐ Request a mailed copy of the conditional payment letter [What is this?](#)
- ☐ Begin Final Conditional Payment Process and Provide 120 Days' Notice of Anticipated Settlement [What is this?](#)
- ☐ Calculate Final Conditional Payment Amount [What is this?](#)
- ☐ Request an electronic Dispute Denial for Final Conditional Payment Case Letter with Current Conditional Payment Amount [What is this?](#)
- ☐ View / Dispute Claims Listing [What is this?](#)
- ☐ View/Provide the Notice of Settlement Information [What is this?](#)
- ☐ Initiate Demand Letter [What is this?](#)
- ☐ View / Submit Redetermination (First Level Appeal) [What is this?](#)
- ☐ Submit Waiver Request [What is this?](#)

Slide notes

If there is a refund on the case, the Demand Letter Mail Date, Demand Amount, Balance Amount, and Balance as of Date can be viewed on the “Refund Information” tab.

Slide 20 of 57 - Case Information - Letter Activity Tab

[Payment Information](#)[Electronic Payment History](#)[Refund Information](#)

[Correspondence Activity](#)

[Waiver/Redetermination/Appeal/Compromise](#)[Final Conditional Payment Process](#)

Select the correspondence option you wish to view:

☒ All Correspondence Received and All Letters sent ☐ Correspondence Received ☐ Letters Sent

Correspondence Type	Uploaded Document Name	Date Received	Date Sent	Status	Status Date
Redetermination testing with long descriptions to see if it will wrap or not.	Document1	03/01/2015		Open	03/01/2015
Notice of Settlement Information	Document2	03/01/2001		Closed	03/01/2001
1st Level Appeal Request				Open	03/01/2017
Special Project Case Correspondence				Open	03/01/2017

Please select an action from the following list, if the option is disabled (grayed out) it may not be available for the case at this time:

☐ View / Request Authorizations

☐ Rec

☐ Rec

☐ Request a mailed copy of the conditional payment letter. [What is this?](#)

Slide notes

The Correspondence Activity tab displays a listing of all correspondence that has been sent or received for the case.

To view outgoing letters on the Correspondence Activity tab, users must have logged in with multi-factor authentication (MFA) and have a verified authorization, which has been either a beneficiary Proof of Representation (POR) or a Recovery Agent Authorization. With this release, the list of allowed authorizations now includes Consent to Release (CTR) authorizations.

Slide 21 of 57 - Case Information - Waiver/ Redetermination/Compromise Tab

[Payment Information](#)
[Electronic Payment History](#)
[Refund Information](#)
[Correspondence Activity](#)

Waiver/
Redetermination/
Appeal/
Compromise

[Final Conditional Payment Process](#)

Received	Decision	Decision Date
04/01/2017	Pending Review	
10/30/2016	Dismissal	12/31/2016

Received	Decision	Decision Date
04/01/2017	Pending Review	

Received	Decision	Decision Date
04/01/2017	Pending Review	

Received	Decision	Decision Date
04/01/2017	Pending Review	

Received	Decision	Decision Date
04/01/2017	Pending Review	

Please select an action from the following list, if the option is disabled (grayed out) it may not be available for the case at this time:

- ☐ View / Request Authorizations
- ☐ Request an update to the conditional payment amount [What is this?](#)
- ☐ Request an electronic conditional payment letter with Current Conditional Payment Amount [What is this?](#)
- ☐ Request a mailed copy of the conditional payment letter [What is this?](#)
- ☐ Begin Final Conditional Payment Process and Provide 120 Days' Notice of Anticipated Settlement [What is this?](#)
- ☐ Calculate Final Conditional Payment Amount [What is this?](#)

Slide notes

The “Waiver/Redetermination/Appeal/Compromise” tab displays the received date, decision, and decision date for submitted waivers, redeterminations, and compromise requests.

Note: A new section has been added to display QIC or ALJ Appeal Information. The new section will display similar to the existing Redetermination Information content and will include fields to provide data for the following QIC or ALJ information:

Determination Received,
Determination Decision, and
Determination Decision Date.

Slide 22 of 57 - Case Information - Final Conditional Payment Tab

Payment Information	Electronic Payment History	Refund Information	Correspondence Activity	Waiver/Redetermination/Appeal/Compromise	Final Conditional Payment Process
-------------------------------------	--	------------------------------------	---	--	--

Final Conditional Payment Status: Complete	Final Conditional Payment Requested: 05/01/2017
Final Conditional Payment Status Date 07/01/2017	Final Conditional Payment Amount: \$4528.00
Final Conditional Payment Process Initiated: 06/05/2017	120 days' Notice of Anticipated Settlement Mail Date: 04/01/2017
Request Final Conditional Payment by: 08/01/2017	

Please select an action from the following list, if the option is disabled (grayed out) it may not be available for the case at this time:

- ☐ View / Request Authorizations
- ☐ Request an update to the conditional payment amount [What is this?](#)
- ☐ Request an electronic conditional payment letter with Current Conditional Payment Amount [What is this?](#)
- ☐ Request a mailed copy of the conditional payment letter [What is this?](#)
- ☐ Begin Final Conditional Payment Process and Provide 120 Days' Notice of Anticipated Settlement [What is this?](#)
- ☐ Calculate Final Conditional Payment Amount [What is this?](#)
- ☐ Request an electronic Dispute Denial for Final Conditional Payment Case Letter with Current Conditional Payment Amount [What is this?](#)
- ☐ View / Dispute Claims Listing [What is this?](#)
- ☐ View/Provide the Notice of Settlement Information [What is this?](#)
- ☐ Initiate Demand Letter [What is this?](#)
- ☐ View / Submit Redetermination (First Level Appeal) [What is this?](#)

Slide notes

If the case is in the Final Conditional Payment Process, details can be viewed on the “Final Conditional Payment Process” tab.

Slide 23 of 57 - Case Information - Case Actions

Interest Activity Amount: \$149.79

[Make a Payment](#) [What is this?](#) *Note: Remaining balance amounts may not reflect recent payments.*

Please select an action from the following list, if the option is disabled (grayed out) it may not be available for the case at this time:

- ☐ View / Request Authorizations
- ☐ Request an update to the conditional payment amount [What is this?](#)
- ☐ Request an electronic conditional payment letter with Current Conditional Payment Amount [What is this?](#)
- ☐ Request a mailed copy of the conditional payment letter [What is this?](#)
- ☐ Begin Final Conditional Payment Process and Provide 120 Days' Notice of Anticipated Settlement [What is this?](#)
- ☐ Calculate Final Conditional Payment Amount [What is this?](#)
- ☐ Request an electronic Dispute Denial for Final Conditional Payment Case Letter with Current Conditional Payment Amount [What is this?](#)
- ☐ View / Dispute Claims Listing [What is this?](#)
- ☐ View/Provide the Notice of Settlement Information [What is this?](#)
- ☐ Initiate Demand Letter [What is this?](#)
- ☐ View / Submit Redetermination (First Level Appeal) [What is this?](#)
- ☐ Submit Waiver Request [What is this?](#)
- ☐ Submit Compromise Request [What is this?](#)
- ☐ Submit Case Documentation [What is this?](#)

[Previous](#) [Continue](#) [Cancel](#)

Slide notes

The bottom portion of the Case Information page identifies various actions that can be taken on a case. Note: Only actions that are applicable to the case will appear.

For example, a recovery case initiated by the Commercial Repayment Center (CRC) based on an insurer's or workers' compensation entity's ongoing responsibility for medicals (ORM) will not involve a settlement.

For these cases, the request a copy of the conditional payment letter (CPL) and provide notice of settlement information actions will not appear.

The View/Request Authorization (Beneficiary Proof of Representation (POR), or Beneficiary Consent to Release (CTR) or Recovery Agent Authorization) action is used to view authorizations already associated with the case or to submit new authorization requests.

The Request an electronic conditional payment letter with Current Conditional Payment Amount action allows you to make a request for an electronic conditional payment letter (eCPL) through the MSPRP.

The Request a mailed copy of the conditional payment letter action is used to request a CPL via mail.

This letter identifies Medicare's current conditional payment amount for the case and includes a Payment Summary Form that lists each payment made by Medicare that was related to the case. It is sent to each authorized individual/entity associated to the case.

The Begin Final Conditional Payment Process and Provide 120 Days' Notice of Anticipated Settlement;
Calculate Final Conditional Payment Amount;

and the Request an Electronic Dispute Denial for Final Conditional Payment Case Letter with Current Conditional Payment Amount actions are used to carry out Final Conditional Payment processes, if applicable.

The View/Dispute Claims Listing action is used to view and/or dispute the claims included in the conditional payment amount. When this action is selected, the MSPRP will display all claim information that is included in the conditional payment amount.

If you identify claims that are not related to the case, you can select them for dispute. Medicare will then review the disputed claims and make a determination as to whether the claims are/are not associated to the case.

The conditional payment amount will be adjusted accordingly. The Provide the Notice of Settlement Information action is used to submit Notice of Settlement information.

It will also be used to elect the Fixed Percentage Option (when applicable).

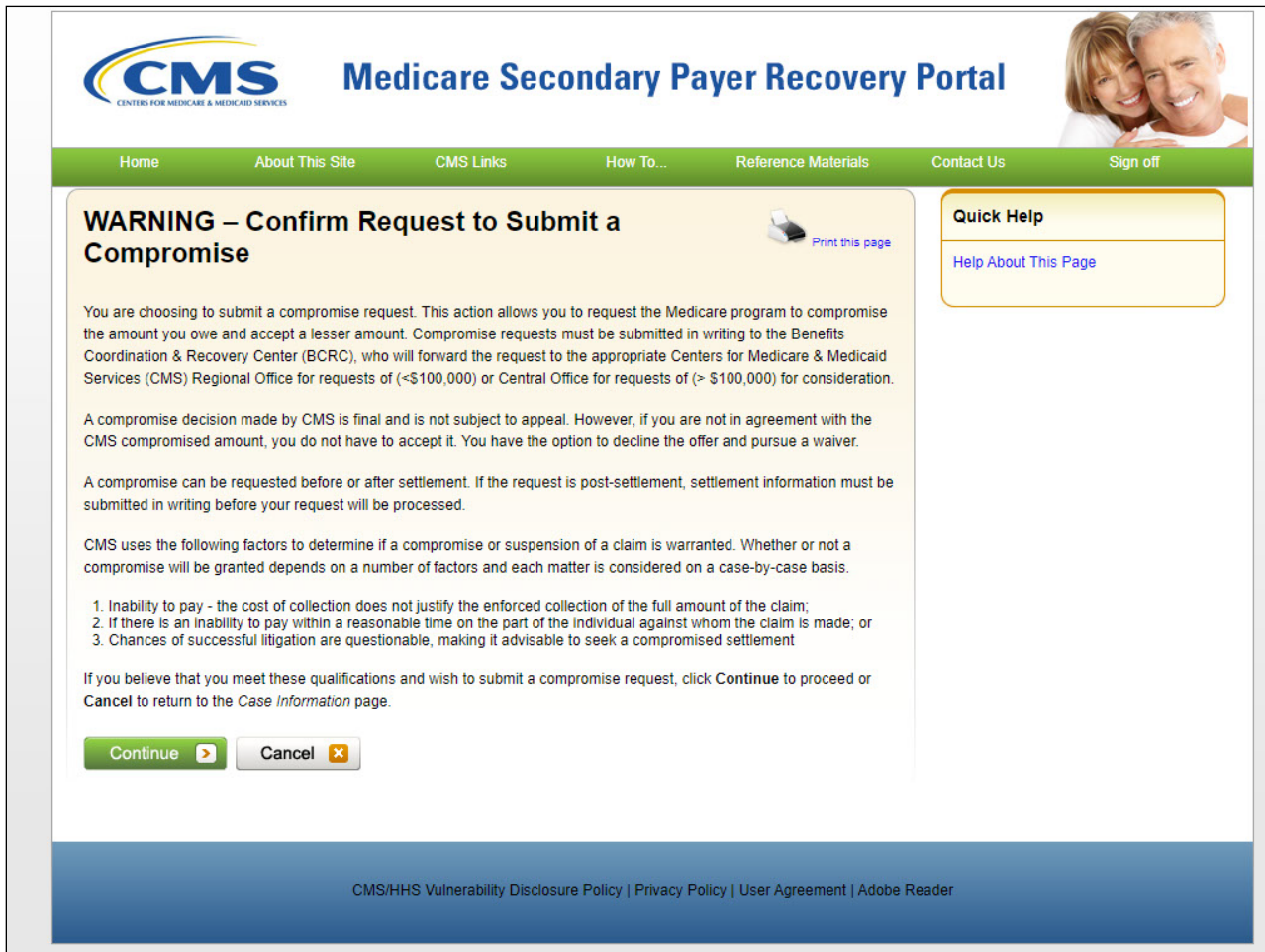
This page also contains a previous button, the user does not have to return to the Account List page or restart your search a new search.

Note: To prevent users from taking any action on BCRC or CRC NGHP ORM (Ongoing Responsibility for Medicals) cases related to a deleted Section 111 lead, the following Case Information page actions will be disabled for cases with deleted S111 leads:

View/Request Authorizations,

Request an update to the conditional payment amount, and

Request a mailed copy of the conditional payment letter.

Slide 24 of 57 - Warning - Confirm Request to Submit a Compromise Page

The screenshot displays the Medicare Secondary Payer Recovery Portal. At the top, the CMS logo is on the left, the title "Medicare Secondary Payer Recovery Portal" is in the center, and a photo of a smiling couple is on the right. Below the header is a green navigation bar with links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. The main content area has a yellow background and is titled "WARNING – Confirm Request to Submit a Compromise". To the right of the title is a "Print this page" icon. The text explains that the user is choosing to submit a compromise request, which allows them to request the Medicare program to compromise the amount owed and accept a lesser amount. It states that compromise requests must be submitted in writing to the Benefits Coordination & Recovery Center (BCRC), who will forward the request to the appropriate Centers for Medicare & Medicaid Services (CMS) Regional Office for requests of (<\$100,000) or Central Office for requests of (> \$100,000) for consideration. It also notes that a compromise decision made by CMS is final and is not subject to appeal. However, if you are not in agreement with the CMS compromised amount, you do not have to accept it. You have the option to decline the offer and pursue a waiver. A compromise can be requested before or after settlement. If the request is post-settlement, settlement information must be submitted in writing before your request will be processed. CMS uses the following factors to determine if a compromise or suspension of a claim is warranted. Whether or not a compromise will be granted depends on a number of factors and each matter is considered on a case-by-case basis. The factors listed are: 1. Inability to pay - the cost of collection does not justify the enforced collection of the full amount of the claim; 2. If there is an inability to pay within a reasonable time on the part of the individual against whom the claim is made; or 3. Chances of successful litigation are questionable, making it advisable to seek a compromised settlement. If you believe that you meet these qualifications and wish to submit a compromise request, click **Continue** to proceed or **Cancel** to return to the *Case Information* page. At the bottom of the main content area are two buttons: "Continue" (green) and "Cancel" (gray). To the right of the main content area is a "Quick Help" box with a link "Help About This Page". At the bottom of the page is a blue footer bar with the text "CMS/HHS Vulnerability Disclosure Policy | Privacy Policy | User Agreement | Adobe Reader".

WARNING – Confirm Request to Submit a Compromise

You are choosing to submit a compromise request. This action allows you to request the Medicare program to compromise the amount you owe and accept a lesser amount. Compromise requests must be submitted in writing to the Benefits Coordination & Recovery Center (BCRC), who will forward the request to the appropriate Centers for Medicare & Medicaid Services (CMS) Regional Office for requests of (<\$100,000) or Central Office for requests of (> \$100,000) for consideration.

A compromise decision made by CMS is final and is not subject to appeal. However, if you are not in agreement with the CMS compromised amount, you do not have to accept it. You have the option to decline the offer and pursue a waiver.

A compromise can be requested before or after settlement. If the request is post-settlement, settlement information must be submitted in writing before your request will be processed.

CMS uses the following factors to determine if a compromise or suspension of a claim is warranted. Whether or not a compromise will be granted depends on a number of factors and each matter is considered on a case-by-case basis.

1. Inability to pay - the cost of collection does not justify the enforced collection of the full amount of the claim;
2. If there is an inability to pay within a reasonable time on the part of the individual against whom the claim is made; or
3. Chances of successful litigation are questionable, making it advisable to seek a compromised settlement

If you believe that you meet these qualifications and wish to submit a compromise request, click **Continue** to proceed or **Cancel** to return to the *Case Information* page.

Continue **Cancel**

Quick Help
[Help About This Page](#)

CMS/HHS Vulnerability Disclosure Policy | Privacy Policy | User Agreement | Adobe Reader

Slide notes

The Submit Compromise Request action allows you to submit an offer for Medicare to accept less than the amount Medicare is owed. When Submitting Compromise Request, from the case information page, a warning page will appear to confirm submitting a compromise request is the action you want to complete.

You can request a compromise before a demand letter is issued (called a pre-settlement compromise), or


after the case settles and funds have been paid (called a post-settlement compromise).

If you believe that you meet the qualifications for this compromise request, click Continue to proceed.

Slide 25 of 57- Compromise Request Page

[Home](#) [About This Site](#) [CMS Links](#) [How To...](#) [Reference Materials](#) [Contact Us](#) [Sign off](#)

Compromise Request

 [Print this page](#)

The Centers for Medicare & Medicaid Services (CMS) is given authority to consider the compromise of Medicare's claim under the Federal Claims Collection Act (FCCA) at 31 USC, 3711 et seq. and 42 CFR 401.613. When submitting your compromise request, you must state the reason why you believe a compromise should be granted and include any supporting notes or documentation.

Beneficiary Last Name: Smith Case ID: 201117409000111

An asterisk (*) indicates a required field.

*Proposed/Negotiated Settlement Amount: . (0.01 - 999,999,999.99)

Attorney Fees [What are Attorney Fees?](#)

Attorney Fees: . (0.00 - 999,999,999.99)
Attorney Expenses/Procurement Costs: . (0.00 - 999,999,999.99)

Fax Number: (Decision letters can be faxed when a fax number is provided)

*Compromise Amount: . (0.01 - 999,999,999.99)

Reason for Compromise: [What is this?](#)

You must enter an explanation to justify your compromise request or upload at least one document to ensure proper review. It is in your best interest to provide complete and accurate supporting documentation. You may use the following text box for this purpose.

For compromise requests that require additional information, please upload supporting documentation. (Additional information is needed if your reason(s) for requesting a compromise of the amount owed includes any assertion(s) that is not fully supported by the information provided in the field above. Additional information may include (but is not limited to) evidence of mitigating factors such as additional expenses or other hardship related to the underlying incident or illness, or agreements to reduce attorney fees or other procurement costs.) Failure to appropriately document your compromise request may result in delays or even denial of the request.

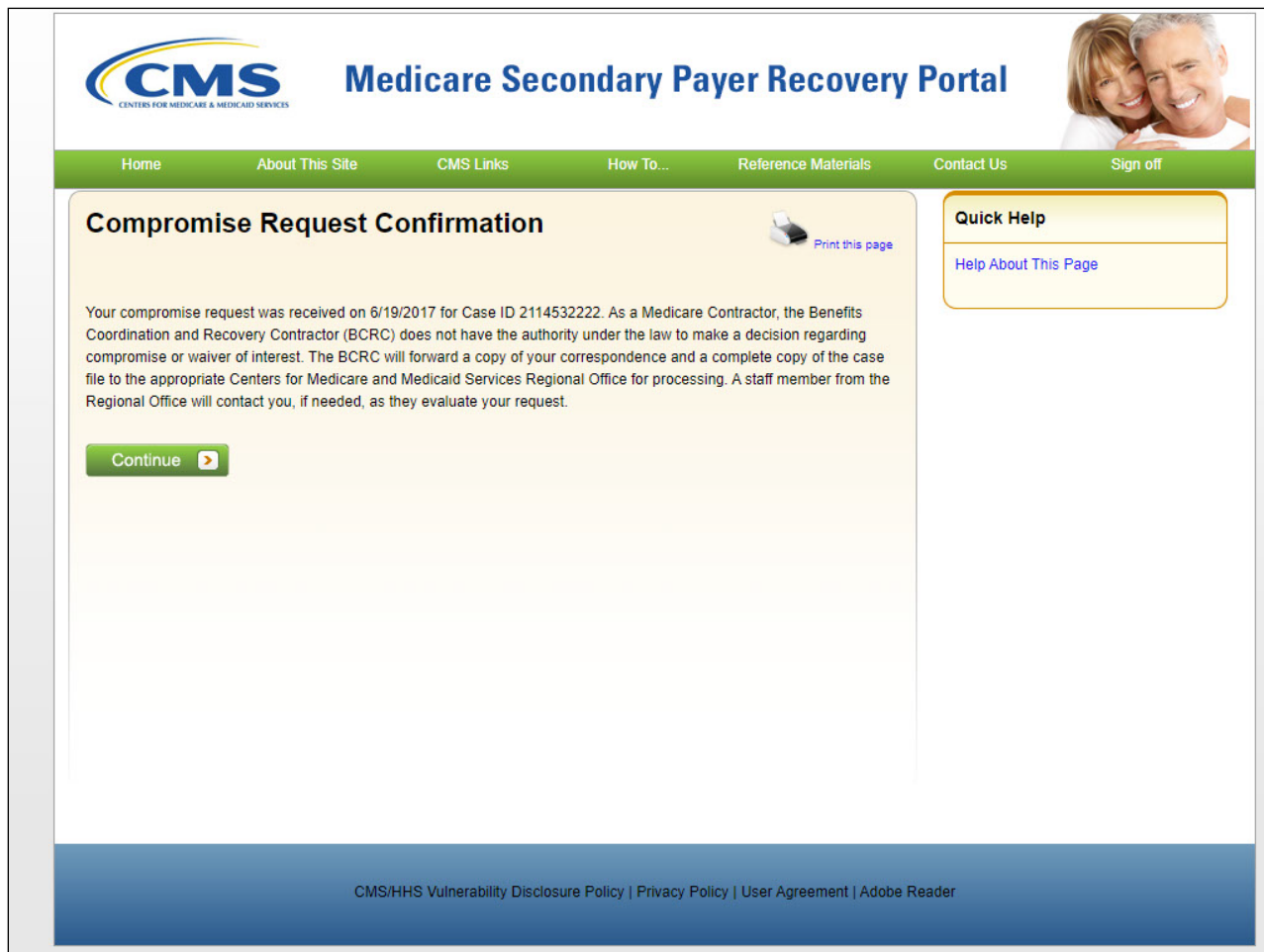
Supporting documentation may be uploaded using the following link: [Upload Documentation](#) Select Continue to submit the file to CMS. Select Cancel to return to the Case Information page without submitting your file.

Quick Help

[Help About This Page](#)

Slide notes

The Compromise Request page will appear. The user must complete the required fields. If this is a Post Demand Compromise Request, a different page will appear.

Slide 26 of 57 - Compromise Request Confirmation Page

The screenshot displays the Medicare Secondary Payer Recovery Portal. At the top, the CMS logo is on the left, and the title "Medicare Secondary Payer Recovery Portal" is in the center. To the right is a photo of a smiling couple. Below the title is a green navigation bar with links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. The main content area has a yellow background and is titled "Compromise Request Confirmation". It includes a "Print this page" icon and a paragraph explaining that the request was received on 6/19/2017 for Case ID 2114532222 and that the BCRC will forward the correspondence to the appropriate Regional Office. A green "Continue" button with a right arrow is at the bottom left of the main content area. On the right side, there is a "Quick Help" box with a link to "Help About This Page". The footer contains links to "CMS/HHS Vulnerability Disclosure Policy", "Privacy Policy", "User Agreement", and "Adobe Reader".

Slide notes

The Compromise Request Confirmation page will appear. Select continue to return to the Case Information page. From the Case Information Page, scroll down to the Case Action Section to select the next action.

Slide 27 of 57- Case Action - View/Submit Redetermination

Interest Activity Amount: \$149.79

[Make a Payment](#) [What is this?](#) *Note: Remaining balance amounts may not reflect recent payments.*

Please select an action from the following list, if the option is disabled (grayed out) it may not be available for the case at this time:

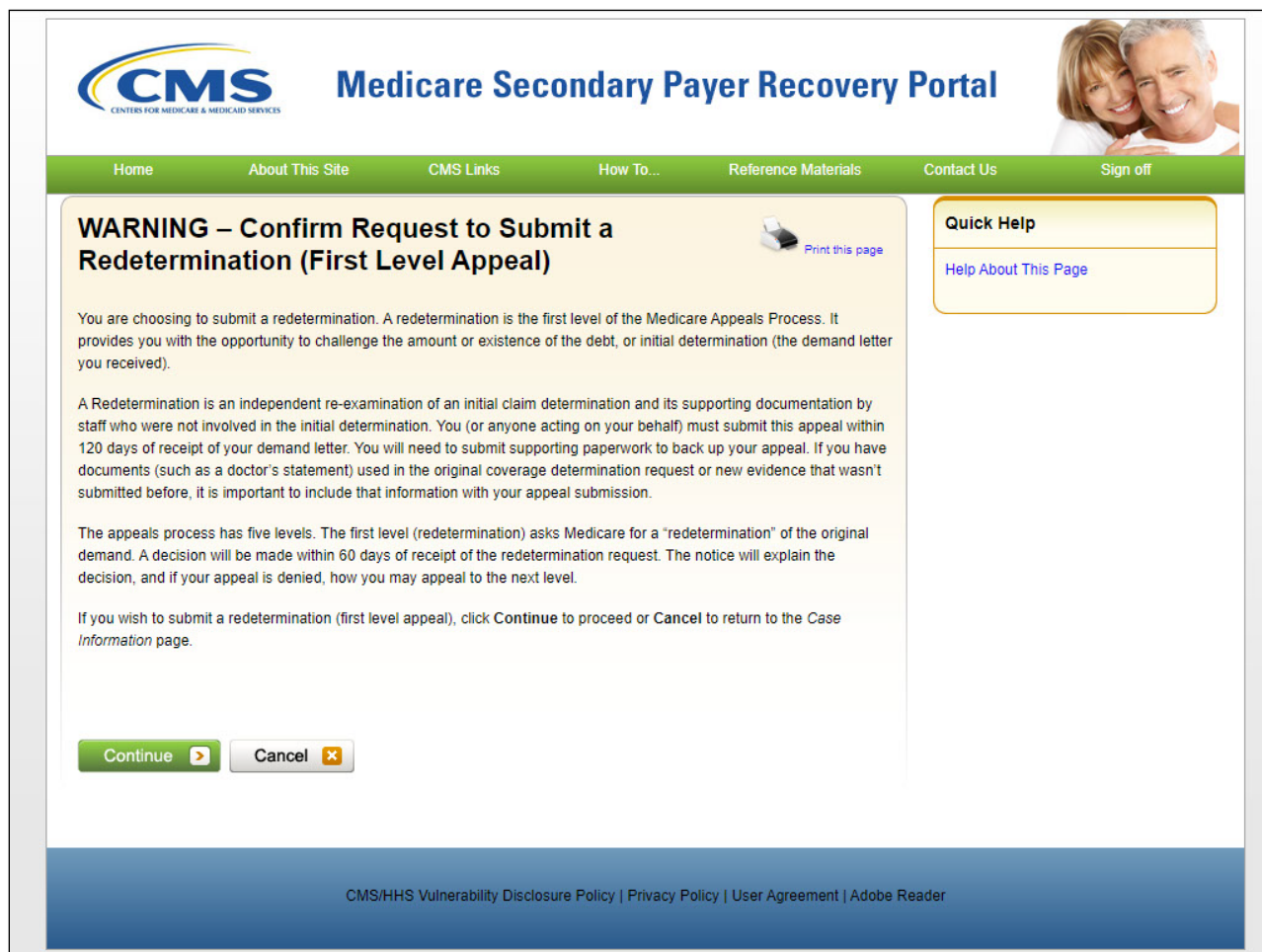
- ☐ View / Request Authorizations
- ☐ Request an update to the conditional payment amount [What is this?](#)
- ☐ Request an electronic conditional payment letter with Current Conditional Payment Amount [What is this?](#)
- ☐ Request a mailed copy of the conditional payment letter [What is this?](#)
- ☐ Begin Final Conditional Payment Process and Provide 120 Days' Notice of Anticipated Settlement [What is this?](#)
- ☐ Calculate Final Conditional Payment Amount [What is this?](#)
- ☐ Request an electronic Dispute Denial for Final Conditional Payment Case Letter with Current Conditional Payment Amount [What is this?](#)
- ☐ View / Dispute Claims Listing [What is this?](#)
- ☐ View/Provide the Notice of Settlement Information [What is this?](#)
- ☐ Initiate Demand Letter [What is this?](#)
- ☐ **View / Submit Redetermination (First Level Appeal) [What is this?](#)**
- ☐ Submit Waiver Request [What is this?](#)
- ☐ Submit Compromise Request [What is this?](#)
- ☐ Submit Case Documentation [What is this?](#)

[Previous](#) [Continue](#) [Cancel](#)

Slide notes

The View/Submit Redetermination case action is used to identify claims that you believe are not related

to this case and include them in the request.

Slide 28 of 57 - Warning - Confirm Request to Submit a Redetermination Page

The screenshot displays the Medicare Secondary Payer Recovery Portal. At the top, the CMS logo is on the left, and the title "Medicare Secondary Payer Recovery Portal" is in the center. To the right is a photo of a smiling couple. Below the title is a green navigation bar with links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off.

The main content area has a yellow background and is titled "WARNING – Confirm Request to Submit a Redetermination (First Level Appeal)". To the right of the title is a "Print this page" icon. Below the title, there is a paragraph explaining the redetermination process: "You are choosing to submit a redetermination. A redetermination is the first level of the Medicare Appeals Process. It provides you with the opportunity to challenge the amount or existence of the debt, or initial determination (the demand letter you received)."

Below this is another paragraph: "A Redetermination is an independent re-examination of an initial claim determination and its supporting documentation by staff who were not involved in the initial determination. You (or anyone acting on your behalf) must submit this appeal within 120 days of receipt of your demand letter. You will need to submit supporting paperwork to back up your appeal. If you have documents (such as a doctor's statement) used in the original coverage determination request or new evidence that wasn't submitted before, it is important to include that information with your appeal submission."

Next is a paragraph: "The appeals process has five levels. The first level (redetermination) asks Medicare for a 'redetermination' of the original demand. A decision will be made within 60 days of receipt of the redetermination request. The notice will explain the decision, and if your appeal is denied, how you may appeal to the next level."

Finally, a paragraph states: "If you wish to submit a redetermination (first level appeal), click **Continue** to proceed or **Cancel** to return to the Case Information page."

At the bottom of the main content area are two buttons: a green "Continue" button with a right arrow and a grey "Cancel" button with a red X.

On the right side of the page, there is a "Quick Help" section with a link "Help About This Page".

At the very bottom of the page, there is a blue footer bar with the text: "CMS/HHS Vulnerability Disclosure Policy | Privacy Policy | User Agreement | Adobe Reader".

Slide notes


When a redetermination request is being processed at any level of review, no collection action will be taken. When attempting to submit a redetermination, a warning page will appear to confirm Redetermination is the action you want to complete.

When a redetermination request is being processed at any level of review, no collection action will be taken.

Slide 29 of 57 - Redetermination Submission Page

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Redetermination (First Level Appeal) Submission

 [Print this page](#)

[Quick Help : Help About This Page](#)

An asterisk (*) indicates a required field.

The Claims listed on this page were included in the demand letter and are currently associated to Case ID: 123456124324
Demand Amount: \$10,523.86 Demand Letter Date: 10/01/2015

To request a redetermination, select the applicable claims and apply the relevant redetermination reason to those claims. A claim/line item can only be submitted for redetermination one time. If you previously submitted a redetermination and it was resolved in your favor, that claim is no longer associated to your case. Click Continue to proceed. The screen that displays next will allow you to verify the selected claims and provide any supporting documentation. Click Cancel to return to the Case Information page without submitting your redetermination. Click Clear to remove any sorting or filtering and restore the default display of claims information.

[Clear](#) [Export](#)

* Claims:

Select for Redeterm.	Select for Reason	Claim Control ID (ICN) ▾	Line #	Redeterm. Reason ▾	Redeterm. Received	Total Charges ▾	Reimbursement Amount	Conditional Payment Amount
		<input type="text" value="Search"/>		<input type="text" value=""/>		<input type="text" value="Search"/>		
Select All	Select All							
Deselect All	Deselect All							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999992	1		Mail/Fax	\$9.27	\$9.27	\$9.27
<input type="checkbox"/>	<input type="checkbox"/>	*****99999993	1			\$36.14	\$36.14	\$36.14
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999991	3	Relatedness	MSPRP 07/25/2019	\$51.98	\$51.98	\$51.98
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999991	2		Mail/Fax	\$105.20	\$105.20	\$105.20
<input type="checkbox"/>	<input type="checkbox"/>	*****99999992	2			\$131.50	\$131.50	\$131.50
<input type="checkbox"/>	<input type="checkbox"/>	*****99999994	1			\$798.00	\$798.00	\$798.00
<input type="checkbox"/>	<input type="checkbox"/>	*****99999994	1			\$798.00	\$798.00	\$798.00
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999991	1	Duplicate Primary Payment	MSPRP 07/25/2019	\$5,296.23	\$5,296.23	\$5,296.23

Select a Redetermination Reason to apply to the selected claims: [Apply](#) [Remove Reason](#)

[Continue](#) [Cancel](#)

Slide notes

The Redetermination (First Level Appeal) Submission page appears. The details shown for each of the listed claims depends on your authorization level. All claims appear in the same order in the PSF.

Select the check boxes to select one or more claims from the list to include with the redetermination request.

Slide 30 of 57 - Redetermination Submission Page

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Redetermination (First Level Appeal) Submission

[Print this page](#) [Quick Help : Help About This Page](#)

An asterisk (*) indicates a required field.

The Claims listed on this page were included in the demand letter and are currently associated to Case ID: 123456124324
Demand Amount: \$10,523.86 Demand Letter Date: 10/01/2015

To request a redetermination, select the applicable claims and apply the relevant redetermination reason to those claims. A claim/line item can only be submitted for redetermination one time. If you previously submitted a redetermination and it was resolved in your favor, that claim is no longer associated to your case. Click Continue to proceed. The screen that displays next will allow you to verify the selected claims and provide any supporting documentation. Click Cancel to return to the Case Information page without submitting your redetermination. Click Clear to remove any sorting or filtering and restore the default display of claims information.

Clear [Export](#)

*** Claims:**

Select for Redeterm.	Select for Reason	Claim Control ID (ICN) ▾	Line #	Redeterm. Reason ▾	Redeterm. Received	Total Charges ▾	Reimbursement Amount	Conditional Payment Amount
		<input type="text" value="Search"/>		<input type="text" value=""/>		<input type="text" value="Search"/>		
Select All Deselect All	Select All Deselect All							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999992	1		Mail/Fax	\$9.27	\$9.27	\$9.27
<input type="checkbox"/>	<input type="checkbox"/>	*****99999993	1			\$36.14	\$36.14	\$36.14
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999991	3	Relatedness	MSPRP 07/25/2019	\$51.98	\$51.98	\$51.98
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999991	2		Mail/Fax	\$105.20	\$105.20	\$105.20
<input type="checkbox"/>	<input type="checkbox"/>	*****99999992	2			\$131.50	\$131.50	\$131.50
<input type="checkbox"/>	<input type="checkbox"/>	*****99999994	1			\$798.00	\$798.00	\$798.00
<input type="checkbox"/>	<input type="checkbox"/>	*****99999994	1			\$798.00	\$798.00	\$798.00
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999991	1	Duplicate Primary Payment	MSPRP 07/25/2019	\$5,296.23	\$5,296.23	\$5,296.23

Select a Redetermination Reason to apply to the selected claims: [Apply](#) [Remove Reason](#)

[Continue](#) [Cancel](#)


Slide notes

Clicking Select All selects (and deselects) all the claims. As the Account Manager (AM), when a claim is selected, the information can be exported so the AM to review.

Slide 31 of 57- Redetermination Verification Page

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Redetermination (First Level Appeal) Submission

 [Print this page](#)

Quick Help : [Help About This Page](#)

An asterisk (*) indicates a required field.

The Claims listed on this page were included in the demand letter and are currently associated to Case ID: 123456124324
Demand Amount: \$10,523.86 Demand Letter Date: 10/01/2015

To request a redetermination, select the applicable claims and apply the relevant redetermination reason to those claims. A claim/line item can only be submitted for redetermination one time. If you previously submitted a redetermination and it was resolved in your favor, that claim is no longer associated to your case. Click Continue to proceed. The screen that displays next will allow you to verify the selected claims and provide any supporting documentation. Click Cancel to return to the Case Information page without submitting your redetermination. Click Clear to remove any sorting or filtering and restore the default display of claims information.

[Clear](#)
[Export](#)

*** Claims:**

Select for Redeterm.	Select for Reason	Claim Control ID (ICN) ▾	Line #	Redeterm. Reason ▾	Redeterm. Received	Total Charges ▾	Reimbursement Amount	Conditional Payment Amount
		<input type="text" value="Search"/>		<input type="text" value=""/>		<input type="text" value="Search"/>		
Select All Deselect All	Select All Deselect All							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999992	1		Mail/Fax	\$9.27	\$9.27	\$9.27
<input type="checkbox"/>	<input type="checkbox"/>	*****99999993	1			\$36.14	\$36.14	\$36.14
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999991	3	Relatedness	MSPRP 07/25/2019	\$51.98	\$51.98	\$51.98
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999991	2		Mail/Fax	\$105.20	\$105.20	\$105.20
<input type="checkbox"/>	<input type="checkbox"/>	*****99999992	2			\$131.50	\$131.50	\$131.50
<input type="checkbox"/>	<input type="checkbox"/>	*****99999994	1			\$798.00	\$798.00	\$798.00
<input type="checkbox"/>	<input type="checkbox"/>	*****99999994	1			\$798.00	\$798.00	\$798.00
<input checked="" type="checkbox"/>	<input type="checkbox"/>	*****99999991	1	Duplicate Primary Payment	MSPRP 07/25/2019	\$5,296.23	\$5,296.23	\$5,296.23

Select a Redetermination Reason to apply to the selected claims: [Apply](#) [Remove Reason](#)

[Continue](#)
[Cancel](#)

Slide notes


Clicking continue to proceed will direct you to the verification page where you can verify the selected claims and submit supporting documentation.

Note: Users should not upload documents with formats larger than 8.5 x 11 inches.

Slide 32 of 57 -Redetermination Verification Page

[Home](#) [About This Site](#) [CMS Links](#) [How To...](#) [Reference Materials](#) [Contact Us](#) [Sign off](#)

Redetermination (First Level Appeal) Verification

 [Print this page](#)

Below is the list of claims associated to Case ID: 123456124324 that you have selected for redetermination. Please review for accuracy. To revise your selection, click [Previous](#).


Claims included in the redetermination request:

TOS	Claim Control ID (ICN)	Line #	Redeterm. Reason	Total Charges	Reimbursement Amount	Conditional Payment Amount
1	9999999999991	1	Other	\$5,296.23	\$5,296.23	\$5,296.23
2	9999999999991	2	Previous Payment to CMS/Treasury/BCRC	\$105.20	\$105.20	\$105.20
3	9999999999991	3	Previous Payment to CMS/Treasury/BCRC	\$51.98	\$51.98	\$51.98
4	9999999999992	1	Previous Payment to CMS/Treasury/BCRC	\$9.27	\$9.27	\$9.27


Supporting Information & Documentation: [What is this?](#)

You are required to enter an explanation or upload at least one document if you did not supply a Redetermination Reason for each claim included with your request or supplied a reason of 'Other' for any claim. It is in your best interest to provide complete and accurate supporting documentation to ensure proper review of the redetermination. Once the redetermination is submitted, you will not have the option to submit additional documentation on the MSPRP for this request. You may use the following text box for this purpose.

For redeterminations that require additional information, please upload supporting documentation. (Examples of when supporting documentation should be uploaded include: providing clarification of injuries related to the date of incident or establishing incident end date of treatment).

To upload supporting documentation, please click here [Upload Documentation](#) 

Click [Continue](#) to confirm submission of the redetermination and to submit any uploaded documents. Click [Previous](#) to return to the Redetermination (First Level Appeal) Submission page. Click [Cancel](#) to return to the Case Information page without submitting your redetermination.

[Previous](#) [Continue](#) [Cancel](#) 

Slide notes

To upload supporting documents, you can click the link "Upload Documentation". To continue to the confirmation page, click Continue.

Slide 33 of 57 -Redetermination Submission Confirmation Page

If you need to submit any additional documentation, you may upload it on the MSPRP using the **Submit Case Documentation** action found on the Case Information page or alternatively, mail it to the Commercial Repayment Center at the following address:

Commercial Repayment Center (CRC)
PO Box 1610
Lathrop, CA 95330

Click **Continue** return to the Case Information page.

Claims submitted with the redetermination request:

Type Of Service (TOS)	Claim Control ID (ICN)	Line #	Redeterm. Reason	Total Charges	Reimbursement Amount	Conditional Payment Amount
1	99999999999991	1	Other	\$5,296.23	\$5,296.23	\$5,296.23
2	99999999999991	2	Previous Payment to CMS/Treasury/BCRC	\$105.20	\$105.20	\$105.20
3	99999999999991	3	Previous Payment to CMS/Treasury/BCRC	\$51.98	\$51.98	\$51.98
4	99999999999992	1	Previous Payment to CMS/Treasury/BCRC	\$9.27	\$9.27	\$9.27

Notes submitted with the redetermination request:

This claim is not related to the treatment.

Documents submitted with the redetermination request:

- Redetermination1.pdf
- Redetermination2.pdf

Click **Continue** to return to the Case Information page.

Continue ➤

Slide notes

To upload supporting documents, you can click the link "Upload Documentation". To continue to the confirmation page, click Continue.

Slide 34 of 57- Case Action - Submit Waiver Request

Interest Activity Amount: \$149.79

Make a Payment

What is this?

Note: Remaining balance amounts may not reflect recent payments.

Please select an action from the following list, if the option is disabled (grayed out) it may not be available for the case at this time:

- ☐ View / Request Authorizations
- ☐ Request an update to the conditional payment amount [What is this?](#)
- ☐ Request an electronic conditional payment letter with Current Conditional Payment Amount [What is this?](#)
- ☐ Request a mailed copy of the conditional payment letter [What is this?](#)
- ☐ Begin Final Conditional Payment Process and Provide 120 Days' Notice of Anticipated Settlement [What is this?](#)
- ☐ Calculate Final Conditional Payment Amount [What is this?](#)
- ☐ Request an electronic Dispute Denial for Final Conditional Payment Case Letter with Current Conditional Payment Amount [What is this?](#)
- ☐ View / Dispute Claims Listing [What is this?](#)
- ☐ View/Provide the Notice of Settlement Information [What is this?](#)
- ☐ Initiate Demand Letter [What is this?](#)
- ☐ View / Submit Redetermination (First Level Appeal) [What is this?](#)
- ☐ **Submit Waiver Request** [What is this?](#)
- ☐ Submit Compromise Request [What is this?](#)
- ☐ Submit Case Documentation [What is this?](#)

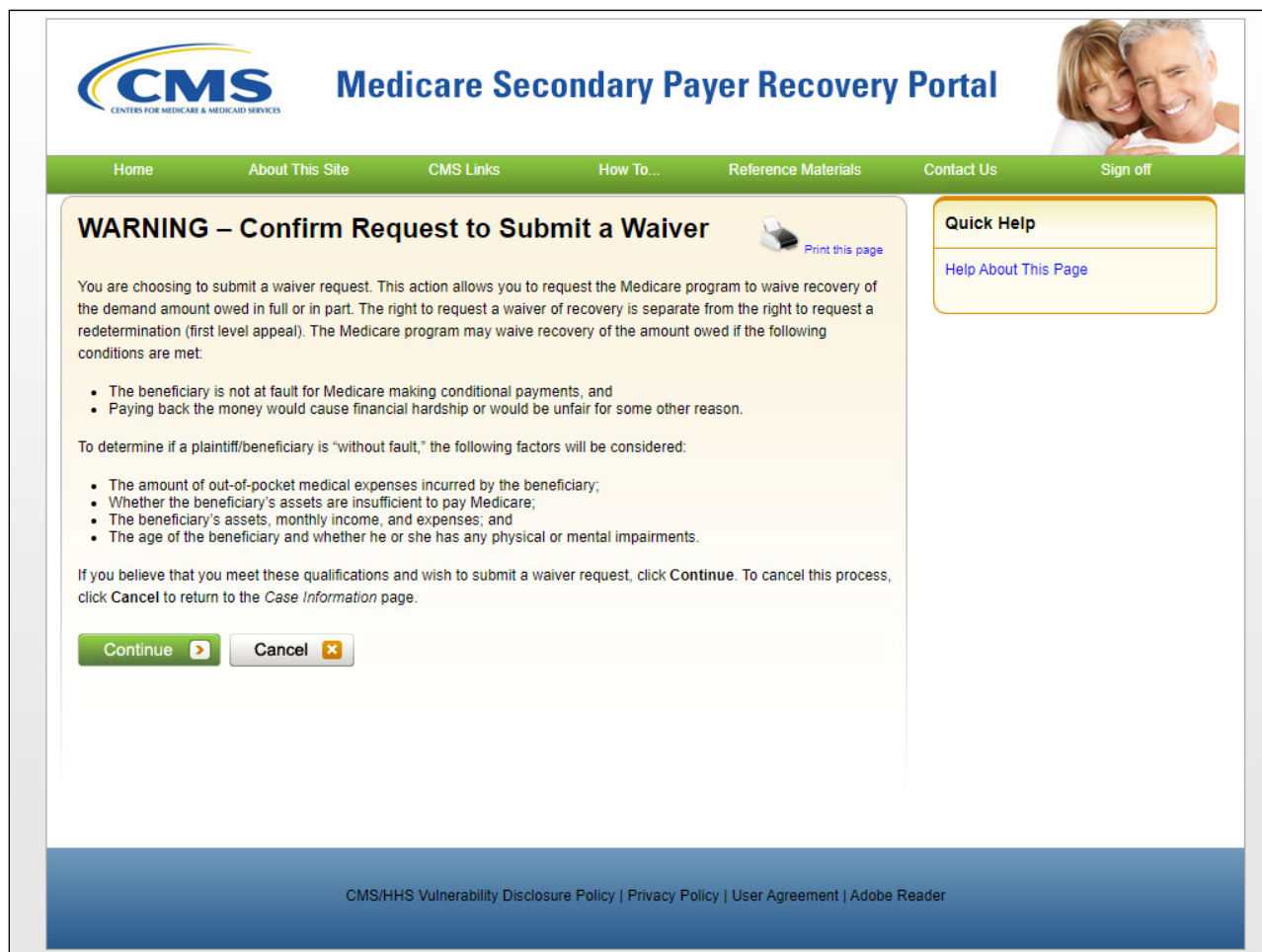
Previous

Continue

Cancel

Slide notes

The Submit Waiver Request action is used to submit a request for a waiver.

Slide 35 of 57 - Warning - Confirm Request to Submit a Waiver Page

The screenshot displays the Medicare Secondary Payer Recovery Portal. At the top, the CMS logo is on the left, and the title "Medicare Secondary Payer Recovery Portal" is in the center. To the right is a photo of a smiling couple. Below the title is a green navigation bar with links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off.

The main content area has a yellow background and is titled "WARNING – Confirm Request to Submit a Waiver". To the right of the title is a "Print this page" link. The text explains that the user is choosing to submit a waiver request, which allows them to request the Medicare program to waive recovery of the demand amount owed in full or in part. It states that the right to request a waiver of recovery is separate from the right to request a redetermination (first level appeal). The Medicare program may waive recovery of the amount owed if the following conditions are met:

- The beneficiary is not at fault for Medicare making conditional payments, and
- Paying back the money would cause financial hardship or would be unfair for some other reason.

To determine if a plaintiff/beneficiary is "without fault," the following factors will be considered:

- The amount of out-of-pocket medical expenses incurred by the beneficiary;
- Whether the beneficiary's assets are insufficient to pay Medicare;
- The beneficiary's assets, monthly income, and expenses; and
- The age of the beneficiary and whether he or she has any physical or mental impairments.

If you believe that you meet these qualifications and wish to submit a waiver request, click **Continue**. To cancel this process, click **Cancel** to return to the *Case Information* page.

At the bottom of the main content area are two buttons: "Continue" with a right arrow icon and "Cancel" with a close icon.

On the right side of the page is a "Quick Help" section with a link "Help About This Page".

At the bottom of the page is a blue footer bar with the text: CMS/HHS Vulnerability Disclosure Policy | Privacy Policy | User Agreement | Adobe Reader.

Slide notes

A waiver is when all, or part of, the demand amount owed to Medicare is dismissed. When submitting a Waiver Request from the case information page, a warning page will appear. Select continue to advance.

Slide 36 of 57 - Wavier Submission Page

The screenshot shows the Medicare Secondary Payer Recovery Portal. The header includes the CMS logo and the title "Medicare Secondary Payer Recovery Portal". A navigation bar contains links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. The main content area is titled "Waiver Submission" and includes a "Print this page" icon. It states: "An asterisk (*) indicates a required field." Below this, it displays case information: "Case ID: 123456124324 Demand Amount: \$10,523.86 Demand Letter Mail Date: 10/01/2015". The text explains that the waiver submission requires completing and submitting the SSA 632 Request for Waiver form, which requests specific information about the beneficiary's income, assets, expenses, and the reasons why waiver of recovery should be granted. A link is provided: "SSA 632 Request for Waiver". It also states that once a decision has been made, the user will receive a letter explaining the reason(s) for the decision and the steps to be followed to appeal that decision if it is less than fully favorable. The user is instructed to click "Continue" to proceed and "Cancel" to return to the Case Information page. At the bottom, there are "Continue" and "Cancel" buttons. A "Quick Help" sidebar on the right contains a link: "Help About This Page". The footer contains links: "CMS/HHS Vulnerability Disclosure Policy | Privacy Policy | User Agreement | Adobe Reader".


Slide notes

The Submit Waiver Request action is used to submit a request for a waiver.

A waiver is when all or part of the demand amount owed to Medicare is dismissed. When submitting a Waiver Request from the case information page, a warning page will appear, and waiver submission page will appear. Click Continue to process with Waiver Submission.

Slide 37 of 57 - Waiver Verification Page

The screenshot shows the Medicare Secondary Payer Recovery Portal. At the top, there is a CMS logo and the title "Medicare Secondary Payer Recovery Portal" next to a photo of a smiling couple. A green navigation bar contains links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. The main content area is titled "Waiver Verification" and includes a "Print this page" icon. The text states: "You have elected to submit a waiver request for the following Case ID: 123456124324." It then explains that supporting documentation is required for Medicare to determine if a waiver is applicable. A link "What is this?" is provided for more information. Below this, it says: "You must enter an explanation to justify your waiver request or upload at least one document in order to ensure proper review. It is in your best interest to provide complete and accurate supporting documentation at this time. You may use the following text box for this purpose." A large text input box is provided. Below the box, it says: "For waivers that require additional information, please upload supporting documentation (Examples of when supporting documentation should be uploaded include: the completed SSA 632 Request for Waiver form if the beneficiary is claiming financial hardship)." A link "Upload Documentation" with a paper icon is provided. At the bottom, it says: "Click Continue to confirm submission of the waiver and to submit any uploaded documents. Click Cancel to return to the Case Information page without submitting your waiver." Three buttons are at the bottom: "Previous", "Continue", and "Cancel".

Waiver Verification  [Print this page](#)


You have elected to submit a waiver request for the following
Case ID: 123456124324.

In order for Medicare to determine if waiver of recovery from the beneficiary is applicable, you must submit supporting documentation with your request. Note that if you are claiming financial hardship, you are required to supply the information requested on the SSA-632 form. This form is not required if you can justify the waiver request in detail using the free form text box on this page. If you are not prepared to submit this information at this time or if you need to obtain the SSA 632 Request for Waiver form, click [Previous](#)


Supporting Information & Documentation: [What is this?](#)

You must enter an explanation to justify your waiver request or upload at least one document in order to ensure proper review. It is in your best interest to provide complete and accurate supporting documentation at this time. You may use the following text box for this purpose

For waivers that require additional information, please upload supporting documentation (Examples of when supporting documentation should be uploaded include: the completed SSA 632 Request for Waiver form if the beneficiary is claiming financial hardship).

To upload supporting documentation, please click here [Upload Documentation](#) 

Click **Continue** to confirm submission of the waiver and to submit any uploaded documents. Click **Cancel** to return to the Case Information page without submitting your waiver.

[Previous](#) [Continue](#) [Cancel](#) 

Slide notes

The Waiver Verification page will appear to verify the detail of the waiver. To upload any supporting documents, use the Upload Documentation link.

Note: Users should not upload documents with formats larger than 8.5 x 11 inches.

Slide 38 of 57 - Waiver Submission Confirmation

The screenshot shows the Medicare Secondary Payer Recovery Portal. At the top, there is a CMS logo and the title "Medicare Secondary Payer Recovery Portal" next to a photo of a smiling couple. Below the title is a green navigation bar with links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. The main content area is titled "Waiver Submission Confirmation" and includes a "Print this page" icon. The text states: "You have successfully submitted a waiver for Case ID: 123456124324. The following information has been included in this submission. If you need to submit any additional documentation, you may upload it on the MSPRP using the **Submit Case Documentation** action found on the Case Information page or alternatively, mail it to the Benefits Coordination & Recovery Center (BCRC) at the following address:"

Medicare
NGHP
PO Box 138832
Oklahoma City, OK 73113

Notes submitted with the waiver request:

Notes submitted with the waiver request

Documents submitted with the waiver request:

- Waiver1.pdf
- Waiver2.pdf

Click **Continue** to return to the *Case Information* page.

Continue >

Quick Help
[Help About This Page](#)

CMS/HHS Vulnerability Disclosure Policy | Privacy Policy | User Agreement | Adobe Reader

Slide notes

The Waiver Submission Confirmation Page will appear to verify the detail of the waiver. Any documents uploaded will display on this page (under document submitted area).

Slide 39 of 57 - Case Listing



Slide notes

The section following will talk about more case specific information including the Case Listing and the actions that follow.

Slide 40 of 57 - Welcome! Page

The screenshot shows the 'Welcome!' page of the Medicare Secondary Payer Recovery Portal. The page has a light yellow background with a white sidebar on the right. The sidebar contains a section titled 'Account Settings' with four links: 'Update Account Information', 'Designee Maintenance', 'View Account Activity', and 'Update Paperless E-mail Distribution'. The main content area has a 'Welcome!' heading followed by the account information: 'Account: 30401 ABC Corporation'. Below this, there are several paragraphs of text explaining the portal's purpose and how to use it. A list of links is provided at the bottom, with 'Case Listing' highlighted by a red box. A 'Previous' button is located at the bottom left of the main content area.

Welcome!

Account: 30401 ABC Corporation

The Medicare Secondary Payer Recovery Portal provides a quick and efficient way to request case information and provide information to assist in resolving Medicare's recovery claim.

With the use of this portal, you may submit a valid authorization, request an update conditional payment amount, submit settlement information and dispute claims.

You may view the account activity by clicking the appropriate link under the Account Settings.

To request information regarding a case you have not already associated to your account, click the Request Case Access link below.

To see cases that you have previously associated to your account, click the Case Listing link below.

To submit a case, click the Report A Case link below.

To request an Open Debt Report, click the Open Debt Report link below.

To view/print "Paperless" letter notification e-mails and letters, click the Go Paperless Letter Notifications link below.

Note: You will not be able to use the links below until your Profile Report has been returned.

[Request Case Access](#)

[Case Listing](#)

[Report A Case](#)

[Open Debt Report](#)


[Go Paperless Letter Notifications](#)

[Previous](#)


Slide notes

As mentioned previously, Case Listing is used to view cases that have been previously associated to the MSPRP account. When the Case Listing link is selected, the Case Listing page will appear.

Slide 41 of 57 - Case Listing Page

 [Print this page](#)

Case Listing

The following are the case reports associated to Account ID: **30401** .

To view case detail information, click the case number. To manage Designee access to the case, click on the Manage Access link. To perform a search, enter any search criteria and click the **Search** button.

If you are approaching settlement on a case that is not yet available on the MSPRP and you wish to initiate the Final Conditional Payment process, you can add this case using the Report A Case link found on the MSPRP Welcome page.

To remove a case from displaying on your Case Listing page, select the case(s) you wish to remove and click the **Remove Case(s)** button. This action will only remove the cases from displaying on this page. The selected cases will still be associated to your account.

To close a case on your account, select the case(s) you wish to close and click the **Close Case(s)** button. Only cases that have been reported via the MSPRP "Report A Case" process that are not yet demanded can be closed. Please note: A case should only be closed if it was reported in error as the case will be closed and recovery will cease.

Case ID: [Search Hint](#)

Medicare ID:

Beneficiary SSN: - -

Beneficiary Last Name: [Search Hint](#)

Quick Help

[Help About This Page](#)

Cases

*Case IDs denoted with an asterisk were reported via the MSPRP Report A Case process.

Select	Case ID	Bene Last Name	Medicare ID	Bene Date of Birth	Case Status	Authorization Level	Authorization Status	Case Access
--------	---------	----------------	-------------	--------------------	-------------	---------------------	----------------------	-------------

Slide notes

The cases that have been previously associated to the MSPRP account appear at the bottom of this page.

The Case ID, Beneficiary Last Name, Medicare ID/SSN, Date of Birth, Case Status, Authorization Level, and Authorization Status are noted for each case. You may click [Print this page] to print the case listing for record keeping purposes.

Note: The page displayed is one that the Account Manager would view. If the User is an Account Designee, the Manage Access Column on the right would not appear.

The Manage Access links under the Manage Access column allows the Account Manager to assign cases to an Account Designee.

The case listing is displayed in ascending order by Case ID. To change the sort order to descending, click the arrow next to the Case ID. Click the arrow again to return to ascending order.

To sort the case listing by beneficiary last name, click the arrow next to the Bene Last Name column heading. The case listing will be sorted in descending order. Click the arrow again to sort in ascending order.

Slide 42 of 57 - Remove Cases

To remove a case from displaying on your Case Listing page, select the case(s) you wish to remove and click the **Remove Case(s)** button. This action will only remove the cases from displaying on this page. The selected cases will still be associated to your account.

To close a case on your account, select the case(s) you wish to close and click the **Close Case(s)** button. Only cases that have been reported via the MSPRP "Report A Case" process that are not yet demanded can be closed. Please note: A case should only be closed if it was reported in error as the case will be closed and recovery will cease.

Case ID: [Search Hint](#)

Medicare ID:

Beneficiary SSN: - -

Beneficiary Last Name: [Search Hint](#)

Cases

*Case IDs denoted with an asterisk were reported via the MSPRP Report A Case process.

Select	Case ID	Bene Last Name	Medicare ID	Bene Date of Birth	Case Status	Authorization Level	Authorization Status	Case Access
<input type="checkbox"/>	201117409000150	Smith	****9999A	09/01/1940	Demand	Beneficiary Proof of Representation	Verified	Manage Access
<input type="checkbox"/>	201117409000151	Jones	****8888B	04/19/1945	Closed			Manage Access
<input type="checkbox"/>	201117409000152 *	Williams	****7777B	08/20/1939	DEMAND IN PROGRESS	Beneficiary Consent to Release	Verified	Manage Access
<input type="checkbox"/>	201117409000153	Ryan	***-**-1234	10/14/1941	Open	Case Debtor		Manage Access

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Slide notes

You may remove cases from displaying on your case listing. You may choose to remove a case when there are no more actions you can take on it and you no longer wish to see it on this page. Some reasons for removing a case are:

- Case has been closed,
- Case had the Demand Letter issued,
- Case has been approved for the Fixed Percentage Option, and
- Case has been approved for the Self-Calculated Conditional Payment Amount.

To remove a case(s), select the checkbox next to the case(s). Click [Remove Cases] to remove the selected case(s) from the Claims Listing page.

Note: When an Account Designee removes a case, it will be removed from their Case Listing page but will still be visible and available on the Account Manager's Case Listing page.

When an Account Manager removes a case, it will be removed from the Case Listing page of both the Account Manager and the Account Designee.

Click [Continue] to return to the Case Listing page.

Note: To limit the number of cases submitted in error, beneficiaries, insurers, and authorized representatives now have the ability to close and permanently remove a case from their account that was reported in error

Slide 43 of 57 - Remove Cases Verification Page

The screenshot shows the 'Remove Cases Verification' page of the Medicare Secondary Payer Recovery Portal. The page has a green header with the CMS logo and navigation links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. A photo of a smiling couple is in the top right corner. The main content area is titled 'Remove Cases Verification' and includes a 'Print this page' icon. Below the title, a message states: 'Below is a list of cases you have selected for removal from the Case Listing screen, please review for accuracy. To cancel or revise your selection, click the Previous button.' A table titled 'Cases Removed' displays one case with the following details:

Case ID	Bene Last Name	Medicare ID	Bene Date of Birth
201117409000150	Smith	*****9999A	09/01/1940

Below the table, a message states: 'Selecting Continue will remove the cases from the Case Listing screen.' At the bottom of the main content area are two buttons: 'Previous' and 'Continue'. A 'Quick Help' sidebar on the right contains a 'Help About This Page' link. The footer of the page contains links to 'CMS/HHS Vulnerability Disclosure Policy', 'Privacy Policy', 'User Agreement', and 'Adobe Reader'.

Slide notes

The Remove Cases Verification page will display the list of cases selected for removal. Verify this list to ensure that it only includes cases you wish to remove from your Case Listing page.

To revise the list, click the [Previous] button to return to the Case Listing page. After you have verified that the only cases listed are those cases you wish to remove, click [Continue].

Slide 44 of 57 - Case Listing Page

Case Listing

The following are the case reports associated to Account ID: 30401.

To view case detail information, click the case number. To manage Designee access to the case, click on the Manage Access link. To perform a search, enter any search criteria and click the **Search** button.

If you are approaching settlement on a case that is not yet available on the MSPRP and you wish to initiate the Final Conditional Payment process, you can add this case using the Report A Case link found on the MSPRP Welcome page.

To remove a case from displaying on your Case Listing page, select the case(s) you wish to remove and click the **Remove Case(s)** button. This action will only remove the cases from displaying on this page. The selected cases will still be associated to your account.

To close a case on your account, select the case(s) you wish to close and click the **Close Case(s)** button. Only cases that have been reported via the MSPRP "Report A Case" process that are not yet demanded can be closed. Please note: A case should only be closed if it was reported in error as the case will be closed and recovery will cease.

Case ID: [Search Hint](#)
Medicare ID:
Beneficiary SSN: - -
Beneficiary Last Name: [Search Hint](#)

Cases

*Case IDs denoted with an asterisk were reported via the MSPRP Report A Case process.

Select	Case ID	Bene Last Name	Medicare ID	Bene Date of Birth	Case Status	Authorization Level	Authorization Status	Case Access
<input type="checkbox"/>	201117409000150	Smith	*****9999A	09/01/1940	Demand	Beneficiary Proof of Representation	Verified	Manage Access
<input type="checkbox"/>	201117409000151	Jones	*****8888B	04/19/1945	Closed			Manage Access
<input type="checkbox"/>	201117409000152 *	Williams	*****7777B	08/20/1939	DEMAND IN PROGRESS	Beneficiary Consent to Release	Verified	Manage Access

Slide notes

The Case Listing page also allows you to search for a case that has been previously associated to the MSPRP account by entering the Case ID, the beneficiary's Medicare ID, the beneficiary's SSN or the beneficiary's last name and then clicking [Search].

Once [Search] is clicked, the case or cases that met the search criteria will display at the bottom of the page.

To make your search more effective, you can search for variations of the Case ID and the Beneficiary Last Name using the percent sign (%) as a wildcard symbol. The wildcard symbol can only be used in these two fields.

When used, the percent sign (%) replaces one (or more than one) number(s) at the end of the Case ID. Only one percent sign (%) can be used and a minimum of 5 characters must be entered (4 numbers plus the percent sign).

For example, to locate all recovery cases where the Case ID begins with the numbers 2011, enter 2011% in the Case ID field and click [Search].

The MSPRP will retrieve all recovery case records associated to your Account ID with a Case ID that begins with 2011.





When using the wildcard symbol in the Beneficiary Last Name field, the percent sign (%) replaces one (or more than one) character(s) at the end of the Beneficiary Last Name.

Only one percent sign (%) can be used and a minimum of 2 characters must be entered (one character plus the percent sign). For example, to locate all recovery cases where the Beneficiary Last Name begins with SM

(such as Smith, Smithson, Small), enter SM% in the Beneficiary Last Name field and click [Search]. The MSPRP will retrieve all recovery case records associated to your Account ID with a Beneficiary Last Name that begins with SM.

To view case information on a specific case, you will click the Case ID link that appears in the list of cases.

Slide 45 of 57 - Case Information Page

Home	About This Site	CMS Links	How To...	Reference Materials	Contact Us	Sign off								
<h2>Case Information</h2> <div>  Print this page Quick Help : Help About This Page </div>														
<table border="1"> <tr> <td> Case ID: 201117409000150  </td> <td> Medicare ID: 987654321A Beneficiary DOB: 02/08/1940 Beneficiary Last Name: Smith Treasury Account Number: 12345678 </td> </tr> <tr> <td> Case Type: Liability Insurance Case Status: Demand What is this? Current Status of Debt: Intent to Refer Letter Sent </td> <td> Treasury Referral Date: 01/01/2016 </td> </tr> <tr> <td colspan="2"> RRE Name: Sample Name </td> </tr> <tr> <td> Date of Incident: 09/15/2009 Industry Date of Incident: 09/15/2009 What is this? ORM: Yes </td> <td> Authorization Level: Proof of Representation Authorization Status: Verified What is this? ORM Termination Date: 01/01/2016 </td> </tr> </table>							Case ID: 201117409000150 	Medicare ID: 987654321A Beneficiary DOB: 02/08/1940 Beneficiary Last Name: Smith Treasury Account Number: 12345678	Case Type: Liability Insurance Case Status: Demand What is this? Current Status of Debt: Intent to Refer Letter Sent	Treasury Referral Date: 01/01/2016	RRE Name: Sample Name		Date of Incident: 09/15/2009 Industry Date of Incident: 09/15/2009 What is this? ORM: Yes	Authorization Level: Proof of Representation Authorization Status: Verified What is this? ORM Termination Date: 01/01/2016
Case ID: 201117409000150 	Medicare ID: 987654321A Beneficiary DOB: 02/08/1940 Beneficiary Last Name: Smith Treasury Account Number: 12345678													
Case Type: Liability Insurance Case Status: Demand What is this? Current Status of Debt: Intent to Refer Letter Sent	Treasury Referral Date: 01/01/2016													
RRE Name: Sample Name														
Date of Incident: 09/15/2009 Industry Date of Incident: 09/15/2009 What is this? ORM: Yes	Authorization Level: Proof of Representation Authorization Status: Verified What is this? ORM Termination Date: 01/01/2016													
<table border="1"> <tr> <td>Payment Information</td> <td>Electronic Payment History</td> <td>Refund Information</td> <td>Correspondence Activity</td> <td>Waiver/Redetermination/Appeal/Compromise</td> <td>Final Conditional Payment Process</td> </tr> </table>							Payment Information	Electronic Payment History	Refund Information	Correspondence Activity	Waiver/Redetermination/Appeal/Compromise	Final Conditional Payment Process		
Payment Information	Electronic Payment History	Refund Information	Correspondence Activity	Waiver/Redetermination/Appeal/Compromise	Final Conditional Payment Process									
<p>*Current Conditional Payment Amount: \$2,800.00</p> <p><i>*Note: Claims are retrieved daily. This amount is current as of: 07/23/2016. Please be advised that the claims associated to this case are currently being evaluated for relevance. This typically takes 3-5 business days. The conditional payment amount will be automatically updated once this process is complete. Please contact the BCRC or CRC at (855) 798-2627 if immediate assistance with this amount is required.</i></p>														
<table border="1"> <tr> <td>Rights and Responsibilities Letter Mail Date: 06/10/2010</td> <td>Section 111 No-Fault Policy Limit Reported: \$32456.76</td> </tr> </table>							Rights and Responsibilities Letter Mail Date: 06/10/2010	Section 111 No-Fault Policy Limit Reported: \$32456.76						
Rights and Responsibilities Letter Mail Date: 06/10/2010	Section 111 No-Fault Policy Limit Reported: \$32456.76													
<table border="1"> <tr> <td> Conditional Payment Letter Amount: \$496.06 Conditional Payment Letter Mail Date: 06/01/2011 Conditional Payment Amount Update Requested: 06/01/2011 </td> <td> Conditional Payment Notice Amount: \$500.00 Conditional Payment Notice Mail Date: 06/18/2011 Conditional Payment Notice Response Due Date: 07/31/2011 </td> </tr> </table>							Conditional Payment Letter Amount: \$496.06 Conditional Payment Letter Mail Date: 06/01/2011 Conditional Payment Amount Update Requested: 06/01/2011	Conditional Payment Notice Amount: \$500.00 Conditional Payment Notice Mail Date: 06/18/2011 Conditional Payment Notice Response Due Date: 07/31/2011						
Conditional Payment Letter Amount: \$496.06 Conditional Payment Letter Mail Date: 06/01/2011 Conditional Payment Amount Update Requested: 06/01/2011	Conditional Payment Notice Amount: \$500.00 Conditional Payment Notice Mail Date: 06/18/2011 Conditional Payment Notice Response Due Date: 07/31/2011													

Slide notes

When a Case ID link is selected on the Case Listing page, the Case Information page will appear.

Again, the top-half of this page allows you to view information related to the case and the bottom-half of this page allows you to perform a specific action on the case.

Slide 46 of 57 - Welcome! Page

The screenshot shows the 'Welcome!' page of the Medicare Secondary Payer Recovery Portal. The page has a light yellow background. On the right side, there is a yellow box titled 'Account Settings' containing four links: 'Update Account Information', 'Designee Maintenance', 'View Account Activity' (which is highlighted with a red rectangle), and 'Update Paperless E-mail Distribution'. The main content area on the left contains the following text:

Welcome!

Account: 30401 ABC Corporation 🟢

The Medicare Secondary Payer Recovery Portal provides a quick and efficient way to request case information and provide information to assist in resolving Medicare's recovery claim.

With the use of this portal, you may submit a valid authorization, request an update conditional payment amount, submit settlement information and dispute claims.

You may view the account activity by clicking the appropriate link under the Account Settings.

To request information regarding a case you have not already associated to your account, click the Request Case Access link below.

To see cases that you have previously associated to your account, click the Case Listing link below.

To submit a case, click the Report A Case link below.

To request an Open Debt Report, click the Open Debt Report link below.

To view/print "Paperless" letter notification e-mails and letters, click the Go Paperless Letter Notifications link below.

Note: You will not be able to use the links below until your Profile Report has been returned.

[Request Case Access](#)

[Case Listing](#)

[Report A Case](#)

[Open Debt Report](#)

[Go Paperless Letter Notifications](#)

[Previous](#)


Slide notes

From the Welcome! page, Account Designees can also access the View Account Activity link. This link is used to view which users performed which activity on this MSPRP account, such as when account registration was completed and who performed this step. Account Managers will be able to update account information and perform designee maintenance from their Welcome! page.

They can use the Update Account Information link to update the case processing mailing address. The Designee Maintenance link may be used to add and delete Account Designees.

Additionally, if an invited Account Designee has not yet registered, this link is used to update the Account Designee's personal information and to regenerate the invitation email (if necessary).


Slide 47 of 57 - Account List Page

 [Print this page](#)

Account List

Click the desired link to access the associated account. Accounts with a green leaf (🌿) include an address that has opted to "Go Paperless" via the MMSEA Section 111 Reporting process. These accounts receive letter notification e-mails instead of mailed letters for the "Go Paperless" addresses. You are responsible for viewing all "Go Paperless" correspondence on the MSPRP. **Note:** To obtain information on the account's paperless addresses, please contact your Section 111 file submitter/reporting agent.

You may update your personal information or change your current password by clicking the appropriate link under the Account Settings List.



Multi-Factor Authentication

MSPRP users may request access to view unmasked claims data that was previously only accessible to the beneficiary. Individuals requesting this access must complete the ID Proofing and Multi-Factor Authentication (MFA) process. The status of your request will display as a link under the Multi-Factor Authentication box. You will click this link to progress through the required steps. Once you have successfully completed the process your status will be changed to Complete.

During the ID Proofing process, you will be asked to provide current personal information to confirm your identity with Experian Credit Services (an outside entity). This information will not be stored on the MSPRP. This process will not impact your credit score.

To use MFA services, you will be required to register a Factor as a method of receiving a security token/push notification to access the MSPRP application. Certain Factors will require you to download and install a specific app onto the mobile device you will use to receive your security token. After the Factor registration, you will activate the factor for your login ID on the MSPRP. You may have only one Active Factor per Factor Type.

You will be able to activate the factor after the Next Step link has changed to **Factor Required**. To begin the ID Proofing process, click the Next Step: **Getting Started** link.

Associated Account IDs:

- 30401 ABC Corporation 🌿
- 30324 Smith Associates

Quick Help

[Help About This Page](#)

Account Settings

[Update Personal Information](#)

[Change Password](#)

Multi-Factor Authentication

Status: **Initial Process**

Next Step: **Getting Started**

Slide notes

Additional Account Settings are available from the Account Designee's and Account Manager's Home page, the Account List page. The Account List page contains the following links:

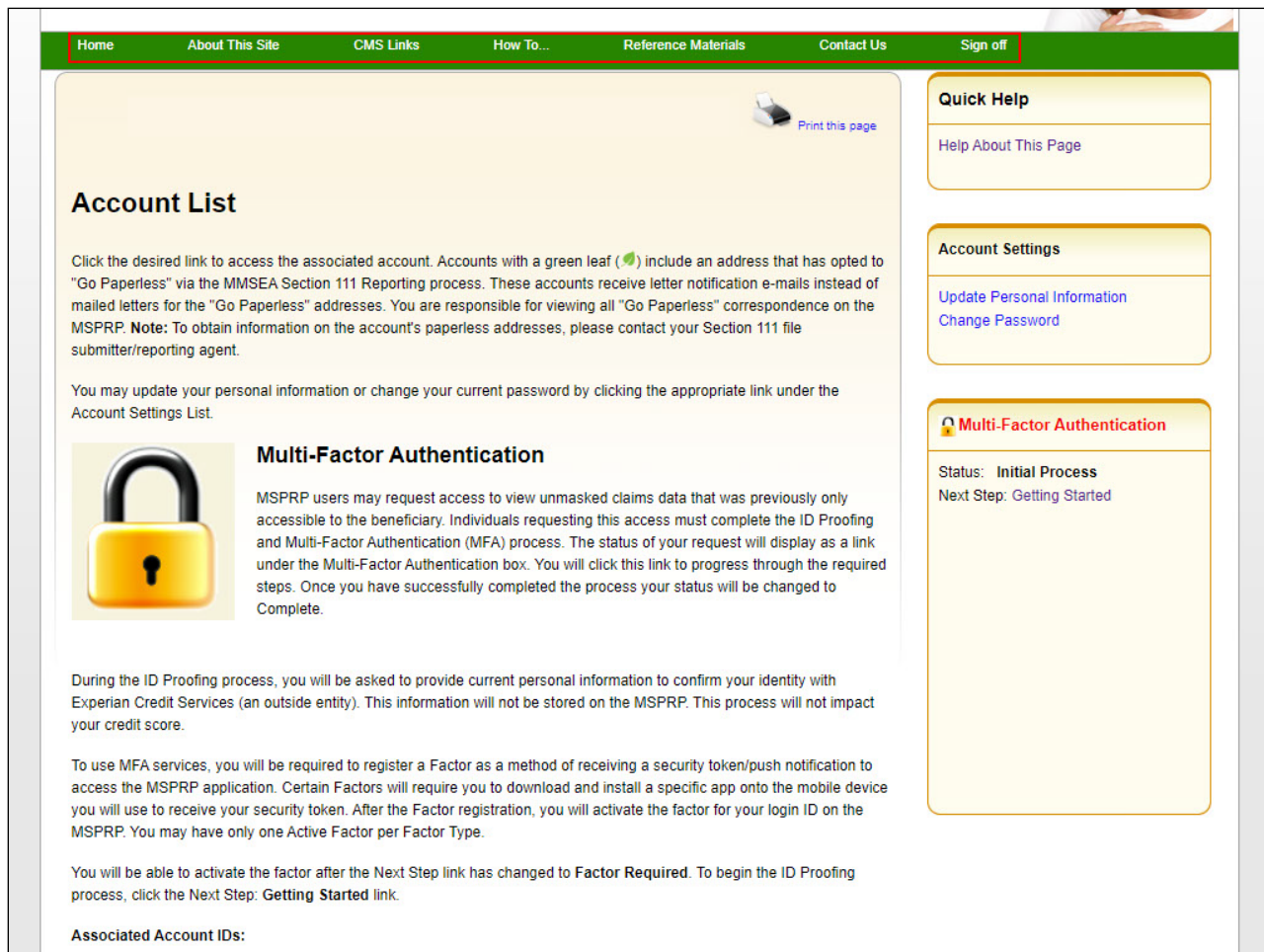
Update Personal Information - Used to update your contact information, such as e-mail address and phone number.

Change Password - Used to change your Password, whether it has expired, has been compromised, or you have been issued a temporary Password.

From this page, users can also request to use Multi-Factor Authentication (MFA) services to view unmasked claims data that was previously only accessible to the beneficiary.

Individuals requesting this access must complete the ID Proofing and MFA verification process. See the Multi-Factor Authentication Process CBT for more information.

Note: MSPRP users who are registered for both the MSPRP and CRCP systems can now initiate the ID proofing process on one application and then continue the process on the other. Once ID proofing is completed in one, users are automatically ID proofed in the other.

Slide 48 of 57 - Navigation Menu

The screenshot displays the MSPRP application interface. At the top is a green navigation bar with links: Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. The main content area is titled "Account List" and includes a "Print this page" icon. It contains instructions on how to access accounts, a note about "Go Paperless" addresses, and a link to update personal information or change passwords. Below this is a section for "Multi-Factor Authentication" featuring a padlock icon and detailed instructions on the ID Proofing process. On the right side, there are three yellow boxes: "Quick Help" with a link to "Help About This Page", "Account Settings" with links for "Update Personal Information" and "Change Password", and "Multi-Factor Authentication" showing the status as "Initial Process" and the next step as "Getting Started".

Account List

Click the desired link to access the associated account. Accounts with a green leaf (🌿) include an address that has opted to "Go Paperless" via the MMSEA Section 111 Reporting process. These accounts receive letter notification e-mails instead of mailed letters for the "Go Paperless" addresses. You are responsible for viewing all "Go Paperless" correspondence on the MSPRP. **Note:** To obtain information on the account's paperless addresses, please contact your Section 111 file submitter/reporting agent.

You may update your personal information or change your current password by clicking the appropriate link under the Account Settings List.

Multi-Factor Authentication

MSPRP users may request access to view unmasked claims data that was previously only accessible to the beneficiary. Individuals requesting this access must complete the ID Proofing and Multi-Factor Authentication (MFA) process. The status of your request will display as a link under the Multi-Factor Authentication box. You will click this link to progress through the required steps. Once you have successfully completed the process your status will be changed to Complete.

During the ID Proofing process, you will be asked to provide current personal information to confirm your identity with Experian Credit Services (an outside entity). This information will not be stored on the MSPRP. This process will not impact your credit score.

To use MFA services, you will be required to register a Factor as a method of receiving a security token/push notification to access the MSPRP application. Certain Factors will require you to download and install a specific app onto the mobile device you will use to receive your security token. After the Factor registration, you will activate the factor for your login ID on the MSPRP. You may have only one Active Factor per Factor Type.

You will be able to activate the factor after the Next Step link has changed to **Factor Required**. To begin the ID Proofing process, click the Next Step: **Getting Started** link.

Associated Account IDs:

Quick Help

[Help About This Page](#)

Account Settings

[Update Personal Information](#)
[Change Password](#)

Multi-Factor Authentication

Status: **Initial Process**
Next Step: **Getting Started**

Slide notes

The navigation menu at the top of the Home page (and each page in the portal) provides access to various parts of the MSPRP to facilitate using the application.

The following menu options are available: Home, About This Site; CMS Links; How To; Reference Materials; and Contact Us.

Slide 49 of 57 - About This Site



CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

Medicare Secondary Payer Recovery Portal

Home About This Site CMS Links How To... Reference Materials Contact Us Sign off

How To Use This Site

 [Print this page](#)

Account List

Click the desired link to access the associated account. Accounts with a green leaf (🌿) include an address that has opted to "Go Paperless" via the MMSEA Section 111 Reporting process. These accounts receive letter notification e-mails instead of mailed letters for the "Go Paperless" addresses. You are responsible for viewing all "Go Paperless" correspondence on the MSPRP. **Note:** To obtain information on the account's paperless addresses, please contact your Section 111 file submitter/reporting agent.

You may update your personal information or change your current password by clicking the appropriate link under the Account Settings List.

Multi-Factor Authentication



MSPRP users may request access to view unmasked claims data that was previously only accessible to the beneficiary. Individuals requesting this access must complete the ID Proofing and Multi-Factor Authentication (MFA) process. The status of your request will display as a link under the Multi-Factor Authentication box. You will click this link to progress through the required steps. Once you have successfully completed the process your status will be changed to Complete.

During the ID Proofing process, you will be asked to provide current personal information to confirm your identity with Experian Credit Services (an outside entity). This information will not be stored on the MSPRP. This process will not impact your credit score.

Quick Help

[Help About This Page](#)

Account Settings

[Update Personal Information](#)
[Change Password](#)

Multi-Factor Authentication

Status: **Initial Process**
Next Step: [Getting Started](#)

Slide notes

About This Site navigates to the How to Use This Site link, offering general information on how to use the MSPRP application.

Slide 50 of 57 - CMS Links



CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

Medicare Secondary Payer Recovery Portal

Home About This Site **CMS Links** How To... Reference Materials Contact Us Sign off

CMS.gov
General Medicare

[Print this page](#)

Account List

Click the desired link to access the associated account. Accounts with a green leaf (🌿) include an address that has opted to "Go Paperless" via the MMSEA Section 111 Reporting process. These accounts receive letter notification e-mails instead of mailed letters for the "Go Paperless" addresses. You are responsible for viewing all "Go Paperless" correspondence on the MSPRP. **Note:** To obtain information on the account's paperless addresses, please contact your Section 111 file submitter/reporting agent.

You may update your personal information or change your current password by clicking the appropriate link under the Account Settings List.

Multi-Factor Authentication

MSPRP users may request access to view unmasked claims data that was previously only accessible to the beneficiary. Individuals requesting this access must complete the ID Proofing and Multi-Factor Authentication (MFA) process. The status of your request will display as a link under the Multi-Factor Authentication box. You will click this link to progress through the required steps. Once you have successfully completed the process your status will be changed to Complete.

During the ID Proofing process, you will be asked to provide current personal information to confirm your identity with Experian Credit Services (an outside entity). This information will not be stored on the MSPRP. This process will not impact your credit score.

Quick Help

[Help About This Page](#)

Account Settings

[Update Personal Information](#)
[Change Password](#)

Multi-Factor Authentication

Status: **Initial Process**
Next Step: [Getting Started](#)

Slide notes

CMS Links provides links to other Centers for Medicare & Medicaid Services (CMS) Medicare and Medicare Secondary Payer website and General Medicare.

Slide 51 of 57 - How To...

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

Medicare Secondary Payer Recovery Portal

Home About This Site CMS Links **How To...** Reference Materials Contact Us Sign off

Account List

Click the desired link to access the associated account. Accounts that have opted to "Go Paperless" via the MMSEA Section 111 Reporting process will receive future correspondence e-mails instead of mailed letters for the "Go Paperless" addresses. You are responsible for viewing all "Go Paperless" correspondence on the MSPRP. **Note:** To obtain information on the account's paperless addresses, please contact your Section 111 file submitter/reporting agent.

You may update your personal information or change your current password by clicking the appropriate link under the Account Settings List.

Multi-Factor Authentication

MSPRP users may request access to view unmasked claims data that was previously only accessible to the beneficiary. Individuals requesting this access must complete the ID Proofing and Multi-Factor Authentication (MFA) process. The status of your request will display as a link under the Multi-Factor Authentication box. You will click this link to progress through the required steps. Once you have successfully completed the process your status will be changed to Complete.

During the ID Proofing process, you will be asked to provide current personal information to confirm your identity with Experian Credit Services (an outside entity). This information will not be stored on the MSPRP. This process will not impact your credit score.

Quick Help

[Help About This Page](#)

Account Settings

[Update Personal Information](#)
[Change Password](#)

Multi-Factor Authentication

Status: **Initial Process**
Next Step: [Getting Started](#)

Slide notes

The How To section provides detailed information on performing the following functions: 'Getting Started'; 'Requesting your Login ID'; 'Requesting your Password'; 'Changing your Password'; 'Resetting your PIN'; 'Changing your Authorized Representative'; 'Changing Your Account Manager; and 'Inviting Account Designees'.

Slide 52 of 57 - Reference Materials

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

Medicare Secondary Payer Recovery Portal

Home About This Site CMS Links How To... **Reference Materials** Contact Us Sign off

[MSPRP Site User Manual\(.pdf\)](#)
[About Remote Identity Proofing\(.pdf\)](#)
[Print this page](#)

Account List

Click the desired link to access the associated account. Accounts with a green leaf (🍃) include an address that has opted to "Go Paperless" via the MMSEA Section 111 Reporting process. These accounts receive letter notification e-mails instead of mailed letters for the "Go Paperless" addresses. You are responsible for viewing all "Go Paperless" correspondence on the MSPRP. **Note:** To obtain information on the account's paperless addresses, please contact your Section 111 file submitter/reporting agent.

You may update your personal information or change your current password by clicking the appropriate link under the Account Settings List.

Multi-Factor Authentication

MSPRP users may request access to view unmasked claims data that was previously only accessible to the beneficiary. Individuals requesting this access must complete the ID Proofing and Multi-Factor Authentication (MFA) process. The status of your request will display as a link under the Multi-Factor Authentication box. You will click this link to progress through the required steps. Once you have successfully completed the process your status will be changed to Complete.

During the ID Proofing process, you will be asked to provide current personal information to confirm your identity with Experian Credit Services (an outside entity). This information will not be stored on the MSPRP. This process will not impact your credit score.

Quick Help

[Help About This Page](#)

Account Settings

[Update Personal Information](#)
[Change Password](#)

Multi-Factor Authentication

Status: **Initial Process**
Next Step: [Getting Started](#)

Slide notes

Reference Materials provides a link to the MSPRP User Manual and About Remote Identity Proofing.

Slide 53 of 57 - Contact Us

The screenshot shows the 'Contact Us' page of the Medicare Secondary Payer Recovery Portal. At the top left is the CMS logo (Centers for Medicare & Medicaid Services). To its right is the page title 'Medicare Secondary Payer Recovery Portal'. In the top right corner is a small photo of a smiling couple. Below the CMS logo are links for 'Print this page' and 'Close'. The 'Contact Us' link is highlighted with a red box. The main content area contains the following text:

If you have a program or technical problem involving your MSPRP submission, contact the EDI Help Desk Department. EDI Representatives can help you find solutions for any questions, issues, or problems you have.

Call the BCRC EDI Help Desk Department at (646) 458-6740 for assistance.

If you have a case specific question, please contact the Benefits Coordination & Recovery Center (BCRC) at (855) 798-2627. If you have general MSP recovery related questions, tools and resources can be found on <http://go.cms.gov/cobro>

Slide notes

Contact Us displays information on where to go for assistance with program or technical problems, case-specific questions, or MSP recovery-related questions.

You can select the Help About This Page link in the Quick Help box to obtain access to online help documentation for each page in the portal.

To log off, select Sign Off.

Slide 54 of 57- Sign Off Successful

The screenshot displays the Medicare Secondary Payer Recovery Portal (MSPRP) after a successful sign-off. The page features the CMS logo and the portal title at the top. A green navigation bar contains links for Home, About This Site, CMS Links, How To..., Reference Materials, Contact Us, and Sign off. The main content area has a yellow background with the heading "Sign off successful". It informs the user that they have successfully signed off and provides details about the portal's purpose. A "Quick Help" sidebar on the right offers a link to "Help About This Page". The footer includes links to the CMS/HHS Vulnerability Disclosure Policy, Privacy Policy, User Agreement, and Adobe Reader.

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

Medicare Secondary Payer Recovery Portal

Home About This Site CMS Links How To... Reference Materials Contact Us Sign off

Sign off successful

You have successfully signed off the Medicare Secondary Payer Recovery Portal system.

The Medicare Secondary Payer Recovery Portal provides a quick and efficient way to request case information and provide information to assist in resolving Medicare's recovery claim.

With the use of this portal, you may submit a valid authorization, request an update conditional payment amount, submit settlement information and dispute claims.

If you would like to login to the MSPRP system again, please click the link below:

- [Login to MSPRP](#)
- If you are a Medicare Beneficiary and would like to use the MSPRP to request case information, please login to your Medicare account by visiting the Medicare.gov website at <https://medicare.gov/>.

Quick Help

[Help About This Page](#)

CMS/HHS Vulnerability Disclosure Policy | Privacy Policy | User Agreement | Adobe Reader

Slide notes

The Sign off successful page will appear.

Slide 55 of 57 - Course Summary



Course Summary

- Navigation guidelines
- Search for a case
- Case Information page



Slide notes

This course provided an overview of the MSPRP including general navigation guidelines. It also included information on how to search for a case and the Case Information page.

Slide 56 of 57 - Conclusion

You have completed the MSPRP Application Overview course.
Information in this course can be referenced by using the
MSPRP User Manual found at the following link:
<https://www.cob.cms.hhs.gov/MSPRP/>.

For general information on Medicare Secondary Payer Recovery,
go to this URL:
<http://go.cms.gov/cobro>.

Slide notes

You have completed the MSPRP Application Overview course. Information in this course can be referenced by using the MSPRP User Manual found at the following link:

<https://www.cob.cms.hhs.gov/MSPRP/>.

For general information on general Medicare Secondary Payer Recovery, go to this URL:

<http://go.cms.gov/cobro>.

Slide 57 of 57 - MSPRP Training Survey



If you have any questions or feedback on this material,
please go the following URL:
[https://www.surveymonkey.com/s/MSPRPTraining.](https://www.surveymonkey.com/s/MSPRPTraining)

Slide notes

If you have any questions or feedback on this material, please go the following URL:
[https://www.surveymonkey.com/s/MSPRPTraining.](https://www.surveymonkey.com/s/MSPRPTraining)