## MMSEA Section 111 Liability Insurance (Including Self-Insurance), No-Fault Insurance, Workers' Compensation Claim Input File Detail Record – 2220 bytes

| Field | Name       | Size | Start<br>Pos. | End<br>Pos. | Data Type | Description   |
|-------|------------|------|---------------|-------------|-----------|---|
| 37    | MSA Amount | 11   | 302           | 312         | Numeric   | Medicare Set-Aside (MSA)<br>amount: Dollar amount of the<br>MSA.  |
|       |            |      |               |             |           | For WC settlements without an MSA, enter all zeros.   |
|       |            |      |               |             |           | Note: The last two positions reflect cents. Specify dollars and cents with an implied decimal and no formatting symbols such as "\$" or ".". For example, an amount of \$20,500.55 must be submitted as "00002050055".  |
|       |            |      |               |             |           | If there is a structured settlement funding the WCMSA, the MSA Amount must be calculated using the total payout amount. If a settlement provides for the purchase of an annuity, it is the total payout from the annuity. For annuities, base the total amount upon the time period used in calculating the purchase price of the annuity or the minimum payout amount (if there is a minimum payout), whichever calculation results in the larger amount.  Required if WC TPOC amount > \$0. |
| 38    | MSA Period | 2    | 313           | 314         | Numeric   | Enter the amount of time in years that the MSA is expected to cover the beneficiary.  Required. If MSA Amount is \$0 enter 0.   |

| Field | Name   | Size | Start<br>Pos. | End<br>Pos. | Data Type  | Description  |
|-------|--|------|---------------|-------------|------------|--|
| 39    | Lump Sum or<br>Structured/<br>Annuity<br>Payout<br>Indicator | 1    | 315           | 315         | Alphabetic | Valid values:  S = Structured/Annuity  L = Lump Sum  Required. If WCMSA is a combination of Lump Sum and Structured/Annuity, enter S.  If MSA Amount is \$0, enter a space.  |
| 40    | Initial Deposit<br>Amount                                    | 11   | 316           | 326         | Numeric    | Note: The last two positions reflect cents. Specify dollars and cents with an implied decimal and no formatting symbols such as "\$" or ".". For example, an amount of \$20,500.55 must be submitted as "00002050055".  Zero is an allowable value—enter all 0s.  When an WCMSA is a Lump Sum and Structured Annuity Funding combination, the Lump Sum amount should be included in the Initial Deposit Amount.  Required. If Lump/Structured Payout Indicator (Field 39) is L or blank, enter all 0s. |
| 41    | Anniversary (Annual) Deposit Amount                          | 11   | 327           | 337         | Numeric    | Note: The last two positions reflect cents. Specify dollars and cents with an implied decimal and no formatting symbols such as "\$" or ".". For example, an amount of \$20,500.55 must be submitted as "00002050055".  Required. If Lump/Structured Payout Indicator (Field 39) is S, enter an amount greater than 0. If Lump/Structured Payout Indicator (Field 39) is L or blank, enter all 0s.   |

| Field | Name                                 | Size | Start<br>Pos. | End<br>Pos. | Data Type         | Description  |
|-------|--------------------------------------|------|---------------|-------------|-------------------|--|
| 42    | Case Control<br>Number               | 15   | 338           | 352         | Alpha-<br>Numeric | Case ID for WMCSAs submitted for voluntary review presettlement or for non-CMS approved WCMSAs submitted post-settlement.  If unknown, enter spaces.   |
| 43    | Professional<br>Administrator<br>EIN | 9    | 353           | 361         | Numeric           | EIN of Professional Administrator, if applicable. Case administrator will default to the beneficiary if no EIN is entered in this field, or if the EIN submitted does not match a registered administrator account in the WCMSAP.  If unknown, enter all 0s. |

While there will be a change to the Claim Input File layout, there will be no change to the Claim Response File layout. Errors pertaining to the new WCMSA information will be returned as new "CW" errors on the Claim Response File according to current processing standards. The new error codes will be as follows:

## **New Error Codes**

| Error Code | Error Description   | Relates to Field |
|------------|---|------------------|
| CW01       | Non-Numeric MSA Amount  | 37               |
| CW02       | Non-Numeric MSA Period  | 38               |
| CW03       | MSA Period is required when MSA Amount is > \$0                       | 38               |
| CW04       | Invalid WCMSA Payout Indicator  | 39               |
| CW05       | Non-Numeric Initial Deposit Amount                                    | 40               |
| CW06       | Non-Numeric Anniversary Deposit                                       | 41               |
| CW07       | Zero Anniversary Deposit Invalid when<br>Structured/Annuity Indicated | 41               |
| CW08       | CCN Not Found   | 42               |
| CW09       | EIN Not Found   | 43               |
| CW10       | MSA Amount = \$0 but WCMSA Detail Information provided                | 38-41            |