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Medicare Secondary Payer Recovery Portal (MSRP) Conditional Payments

Version 3.6, 01/03/2017
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: <http://go.cms.gov/msrp>.

Slide notes

Welcome to the Medicare Secondary Payer Recovery Portal (MSRP) Conditional Payments course.

As a reminder, you may view the slide number you are on by clicking on the moving cursor.

Additionally, you can view the narration by clicking the [CC] button in the lower right hand corner of the screen.

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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:

<http://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.

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Course Overview

- How claims are selected for a case
- How and why to request
 - Update to the conditional payment amount
 - Conditional Payment letter
- How to initiate the demand letter

**Slide notes**

This course will provide background information on how claims are selected for a case.

It will clarify how and why a user would request an update to the conditional payment amount and/or request a copy of the Conditional Payment letter.


It will also show how to initiate the demand letter early for cases where the Conditional Payment Notice has been issued.

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Case Recovery

Rights and Responsibilities Letter

- Sent to beneficiary when Medicare first learns of a case
- Confirms that an MSP recovery case has been established
- Needed to access/retrieve cases on the MSPRP
 - Includes Case ID

**Slide notes**

When Medicare first learns of a case, the Rights and Responsibilities letter is sent to the beneficiary.

The letter confirms that a Medicare Secondary Payer (MSP) recovery case has been established and educates the recipient about Medicare's right of recovery.

Note: To access/retrieve cases on the MSPRP, you will need the Case ID.

The Case ID is a 15 digit number located on any case specific correspondence received from Medicare such as the Rights and Responsibilities Letter or Conditional Payment Letter.

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Case Recovery

Identify the conditional payments paid by Medicare that are being claimed and/or released with respect to the



from the date of incident through the date of settlement, judgment, award, or other payment

Conditional payments are identified based on a number of criteria including ICD-9 or ICD-10 Diagnosis Codes and Dates of Service

Slide notes

Once Medicare has information concerning a potential recovery situation, it will identify the conditional payments paid by Medicare that are being claimed

and/or released with respect to the accident, illness, or other incident from the date of incident through the date of settlement, judgment, award, or other payment.

These conditional payments are identified based on a number of criteria including ICD-9 or ICD-10 (International Classification of Diseases, 9th or 10th revisions) Diagnosis Codes and Dates of Service.

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Conditional Payments

Payment made by Medicare for services on behalf of a beneficiary when the primary plan does not pay promptly



Must be repaid to Medicare when a settlement, judgment, award, or other payment is secured



Slide notes

A conditional payment is a payment made by Medicare for services on behalf of a Medicare beneficiary when there is evidence that the primary plan does not pay promptly.

These payments are referred to as conditional payments because the money must be repaid to Medicare when a settlement, judgment, award, or other payment is secured.

Note: The MSPRP permits authorized users to notify CMS that a specific case is approaching settlement and request that the case be a part of the Final Conditional Payment process.

To automate the redetermination process the debtor and their authorized representatives can now submit a redetermination request (first level appeal) on the MSPRP for BCRC or CRC cases.

For CRC cases, authorized users may request an update to the conditional payment amount.

After a conditional payment notice (CPN) or a conditional payment letter (CPL) has been issued, users may submit unlimited disputes any time prior to the case being demanded.

Further information on these processes can be found in Chapter 14 and 15 of the MSPRP User Guide.

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Conditional Payment Letter

- Sent 65 days after the Rights and Responsibilities letter
- Sent to authorized parties
- Identifies the Current Conditional Payment Amount
- Includes Payment Summary Form

Slide notes

Sixty-five days after the Rights and Responsibilities letter is sent, the Conditional Payment letter will be sent to all authorized parties on the case.

This letter identifies the conditional payments that Medicare has made to date that are related to what is being claimed and/or released with respect to the accident, illness, injury, or other incident.

It also identifies the total Current Conditional Payment Amount and includes a Payment Summary Form.

Note: When a case is in the Final CP process and you request a conditional payment letter, electronic or mailed, you will receive either the Notice of Anticipated Settlement Letter or the Final Conditional Payment Letter, depending on the status of your Final CP case.

For CRC cases, users may request an electronic conditional payment letter (eCPL) or a mailed copy of the conditional payment letter.

Additionally, if requested, users will also receive an electronic or mailed version of the “no claims paid” letter for CRC cases where the overpayment amount equals zero.

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Payment Summary Form

Oct 30, 2015 12:27 PM

Report Number:

Beneficiary Name: Last, First	Case Type: D - AUTO NO-FAULT
Beneficiary HICN: #####A	Date of Incident: Oct 20, 2009
Case ID: #####	

TOS	ICN	Line	Processing Contractor	Provider Name	ICD Indicator	Diagnosis Codes	From Date	To Date	Total Charges	Reimbursed Amount	Conditional Payment	
40	#####	0	320	Medical Center	ICD-9	V5417	01/27/2010	01/27/2010	\$239.00	\$37.86	\$37.86	
71	#####	1	320	Medical Center	ICD-10	80502	01/27/2010	01/27/2010	\$145.00	\$50.97	\$50.97	
71	#####	1	320	Medical Center	ICD-10	80502	01/27/2010	01/27/2010	\$35.00	\$8.78	\$8.78	
Sum of Total Charges							\$419.00					
Total Conditional Payments							\$97.61					

<<<< Confidential >>>>

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Slide notes

The Payment Summary form lists all of the claims that are included in the Current Conditional Payment Amount. Specific information, such as dates of service and conditional payment amounts will be displayed for each claim listed.

The sum of the amounts included in the conditional payment amount column is the Total Conditional Payments Amount.

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The slide features a light blue and white background with a decorative blue wave pattern in the top left corner. The main title, "Current Conditional Payment Amount", is centered in a large, black, sans-serif font. Below the title are two orange rectangular boxes with white text. The first box contains the text "Interim amount". The second box contains the text "Medicare may continue to make conditional payments for items and/or services related to the case while the case is pending".

Slide notes

The Current Conditional Payment Amount is an interim amount.

Medicare may continue to make conditional payments for items and/or services related to the case while the case is pending.

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When to Request an Updated Conditional Payment Amount

When the case has settled and you are ready to submit settlement information

- Conditional payment amount must be updated within 10 calendar days of Submitting Notice of Settlement information

Slide notes

You must request an update to the conditional payment amount when the case has settled and you are ready to submit settlement information.

The conditional payment amount must be updated within 10 calendar days of submitting Notice of Settlement information through the MSPRP.

Note: For cases that are in the Final CP process, notice of settlement information must be submitted within 30 calendar days of requesting the Final CP amount.

Authorized users can view read-only settlement information after it has been provided, and update settlement information when they initiate a demand letter.

For more information on the Final Conditional Payment process, as it pertains to Notice of Settlement, see Chapter 14 in the MSPRP User Guide.

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Home About This Site CMS Links How To... Reference Materials Contact Us Sign off	
<h3>Case Information</h3> <div style="float: right;"> Print this page </div> <div style="float: right; border: 1px solid black; padding: 2px;"> Quick Help : Help About This Page </div>	
Case ID: ##### Case Type: Liability Insurance Case Status: Demand Issued What is this?	Rights and Responsibilities Letter Mail Date: 06/01/2010 Date of Incident: 09/15/2009 Industry Date of Incident: 09/15/2009 What is this?
Beneficiary Medicare Number: ****6789A Beneficiary DOB: MM/DD/YYYY Beneficiary Last Name: Last Name Authorization Level: Beneficiary Proof of Representation Authorization Status: Verified	Conditional Payment Letter Mail Date: 06/01/2011 Current Conditional Payment Amount: \$2800.00 Conditional Payment Amount was updated on: 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	Demand letter Mail Date: 06/01/2011 Demand Amount: \$3754.00 Balance Amount: \$1234.56 Refund Data Balance as of Date: 06/30/2011
Final Conditional Payment Process	
Final Conditional Payment Status: Final Conditional Payment Status Date: Final Conditional Payment Process Initiated: Request Final Conditional Payment by:	Final Conditional Payment Requested: Final Conditional Payment Amount: 120 days' Notice of Anticipated Settlement Mail Date:
Redetermination Information	
Redetermination Received: 05/01/2012 Redetermination Decision: Unfavorable Redetermination Decision Date: 06/01/2012	

Slide notes

To view the Current Conditional Payment Amount and the Conditional Payment Amount Updated on date, view the Case Information page on the MSPRP. A section for Redetermination Information is also now provided on this page.

The MSPRP provides you the ability to retrieve all new, related medical claims that have been paid subsequent to the date indicated in the Conditional Payment Amount Updated on field and calculate a revised Current Conditional Payment Amount.

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Final Conditional Payment Status: Final Conditional Payment Status Date:	Final Conditional Payment Requested: Final Conditional Payment Amount:
Final Conditional Payment Process Initiated: Request Final Conditional Payment by:	120 days' Notice of Anticipated Settlement Mail Date:

Redetermination Information

Redetermination Received: 05/01/2012
 Redetermination Decision: Unfavorable
 Redetermination Decision Date: 06/01/2012

Please select an action from the following list, if the option is disabled 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?](#)

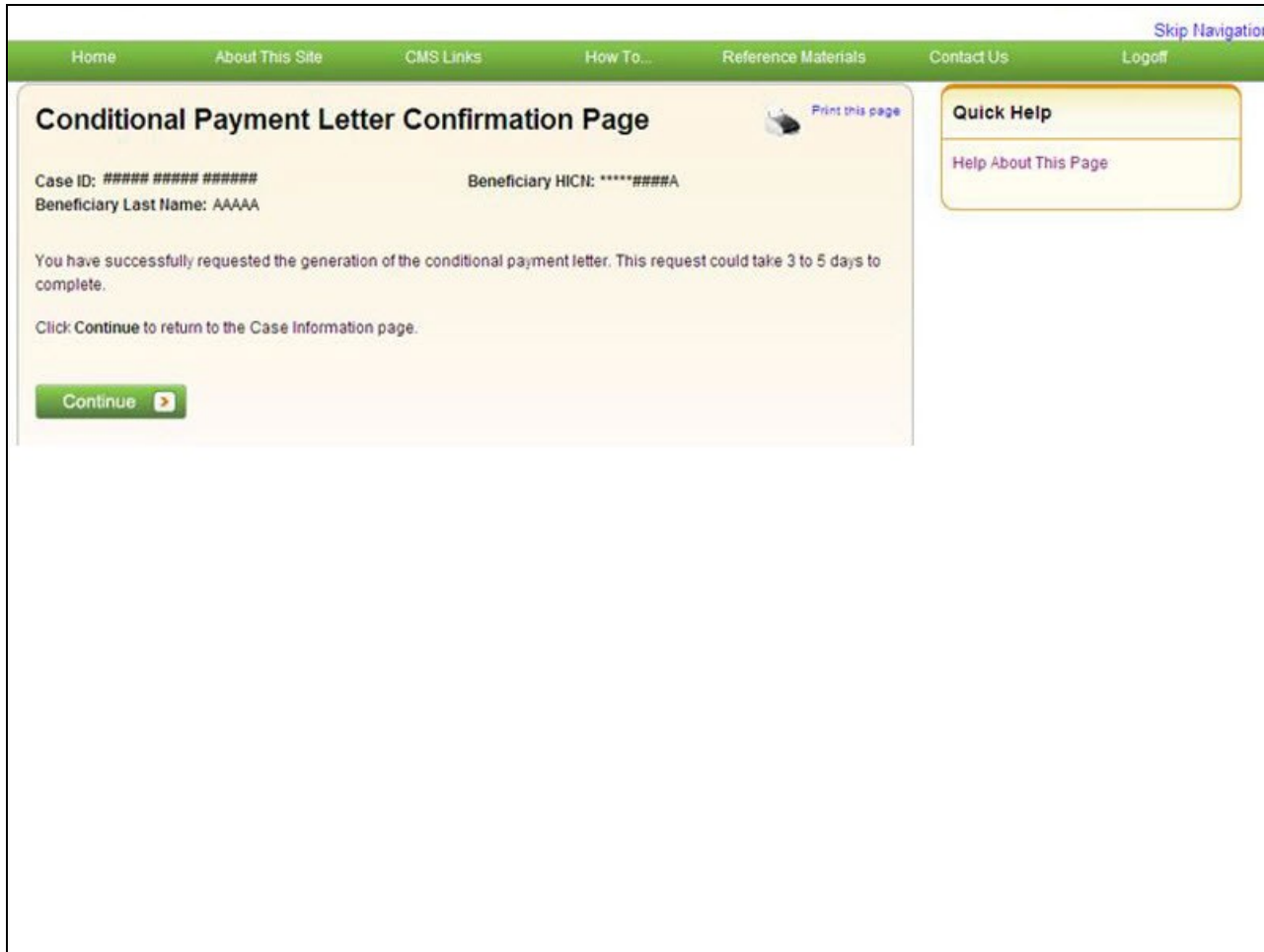
Continue Cancel

Slide notes

To do this, select the Request an update to the conditional payment amount action.

Note: This action may only be requested when the Case Status is Open.

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Slide notes

When the Request an update to the conditional payment amount action has been selected, the Conditional Payment Letter Confirmation Page displays.

This page confirms that you have successfully submitted a request for an updated conditional payment amount. The Case ID, Beneficiary Last Name, and Beneficiary HICN (Health Insurance Claim Number) for the case are displayed at the top of the page.

The Beneficiary HICN will be partially masked. The MSPRP will process the request within 3-5 days. Click [Continue] to return to the Case Information page.

Note: If this action is selected for a case in the Final Conditional Payment (Final CP) process with a Final Conditional Payment Status set to Active, a mailed copy of the Notice of Anticipated Settlement letter and Payment Summary Form will be created instead.

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Update Conditional Payment Amount No New Paid Claims

Case Information Page Updates	
Field	Value
Case Status	No change, remain as <i>Open</i>
Current Conditional Payment Amount	No change
Conditional Payment Amount Updated on	Date the request for the updated Conditional Payment Amount was made

Slide notes

While the request is being processed, the MSPRP Case Information page will be updated in different ways depending on if there are/are not new paid claims.

These updates will not occur immediately.

If there are no new paid claims, the Case Information page will be updated as follows:

- Case Status will remain Open (no change);
- Current Conditional Payment Amount will not change; and
- Conditional Payment Amount Updated on is revised to reflect the date the request for the updated Conditional Payment Amount was made.

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Update Conditional Payment Amount New Paid Claims

- During the claim retrieval/review process

Case Information Page Updates

Field	Value
Case Status	<i>Claims Retrieval</i>
Current Conditional Payment Amount	May fluctuate (true value not displayed until the Case Status is <i>Open</i>)
Conditional Payment Amount Updated on	May fluctuate (true value not displayed until the Case Status is <i>Open</i>)

Slide notes

If there are new paid claims, Medicare will review them to determine if they are related to the case.

During the claim retrieval/review process, the Case Status on the Case Information page is changed to Claims Retrieval.

The Current Conditional Payment Amount and Conditional Payment Amount Updated on may fluctuate.

The true updated values will not be displayed until the Case Status has changed back to Open.

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Update Conditional Payment Amount New Paid Claims

- After the claim retrieval/review process is complete

Case Information Page Updates

Field	Value
Case Status	<i>Open</i>
Current Conditional Payment Amount	Includes all new, related conditional payment amounts through the date reflected in the Conditional Payment Amount Updated on field
Conditional Payment Amount Updated on	Reflects the date the Current Conditional Payment Amount was updated

- Note: A hardcopy letter will not be automatically generated

Slide notes

After the retrieval and review process is complete, the Case Information page will be updated as follows:

- Case Status is changed to Open;
- Current Conditional Payment Amount is revised to include all new, related conditional payment amounts through the date reflected in the Conditional Payment Amount Updated on field; and
- Conditional Payment Amount Updated on is revised to reflect the date the Current Conditional Payment Amount was updated.

Note: A hardcopy letter will not be automatically generated after the conditional payment amount is updated.

If you require a hardcopy letter with the updated conditional payment information,

select the Request a copy of the conditional payment letter action on the Case Information page after the Current Conditional Payment Amount has been updated.

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When to Request a Copy of the Conditional Payment Letter

Request when a written report is required that includes

- Current Conditional Payment Amount
- A listing of claims that comprise that amount



[Print this page](#)

Slide notes

The Conditional Payment letter may be requested when there is a need for a written report that includes the Current Conditional Payment Amount and/or a listing of claims that comprise that amount.

Please note that a printed copy of the Current Conditional Payment Amount and Conditional Payment Amount Updated on date may be obtained by selecting Print this page on the Case Information page.

Additionally, a printed copy of the claims included in the Current Conditional Payment Amount may be obtained by selecting Print this page on the Claims Listing page.

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Request Conditional Payment Letter with Current Conditional Payment Amount

Allows you to generate a Conditional Payment letter with Medicare's current conditional payment amount

Will not update the Current Conditional Payment Amount prior to the letter being generated

Slide notes

The Request a mailed copy of the conditional payment letter action allows you to generate a Conditional Payment letter.

This letter identifies Medicare's Current Conditional Payment Amount as of the date reflected in the Current Conditional Payment Updated on field. This request will not update the Current Conditional Payment Amount.

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Request Conditional Payment Letter with Current Conditional Payment Amount

Request can only be performed when

- Case Status is *Open*
- Current Conditional Payment Amount is greater than zero
- No claims on the Case Listing page are in dispute

Slide notes

The Request a mailed copy of the conditional payment letter action can only be performed when:

- Case Status on the Case Information page is Open;
- Current Conditional Payment Amount on the Case Information page is greater than zero; and
- No claims on the Case Listing page are in dispute.

Note: You cannot request a mailed conditional payment letter once a conditional payment notice has been issued (i.e. unless the CPN was issued in error).

A conditional payment notice is issued on a case when settlement information has been received with Medicare and a conditional payment letter has not been issued previously.

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Final Conditional Payment Status: Final Conditional Payment Status Date:	Final Conditional Payment Requested: Final Conditional Payment Amount:
Final Conditional Payment Process Initiated: Request Final Conditional Payment by:	120 days' Notice of Anticipated Settlement Mail Date:

Redetermination Information

Redetermination Received: 05/01/2012
 Redetermination Decision: Unfavorable
 Redetermination Decision Date: 06/01/2012

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

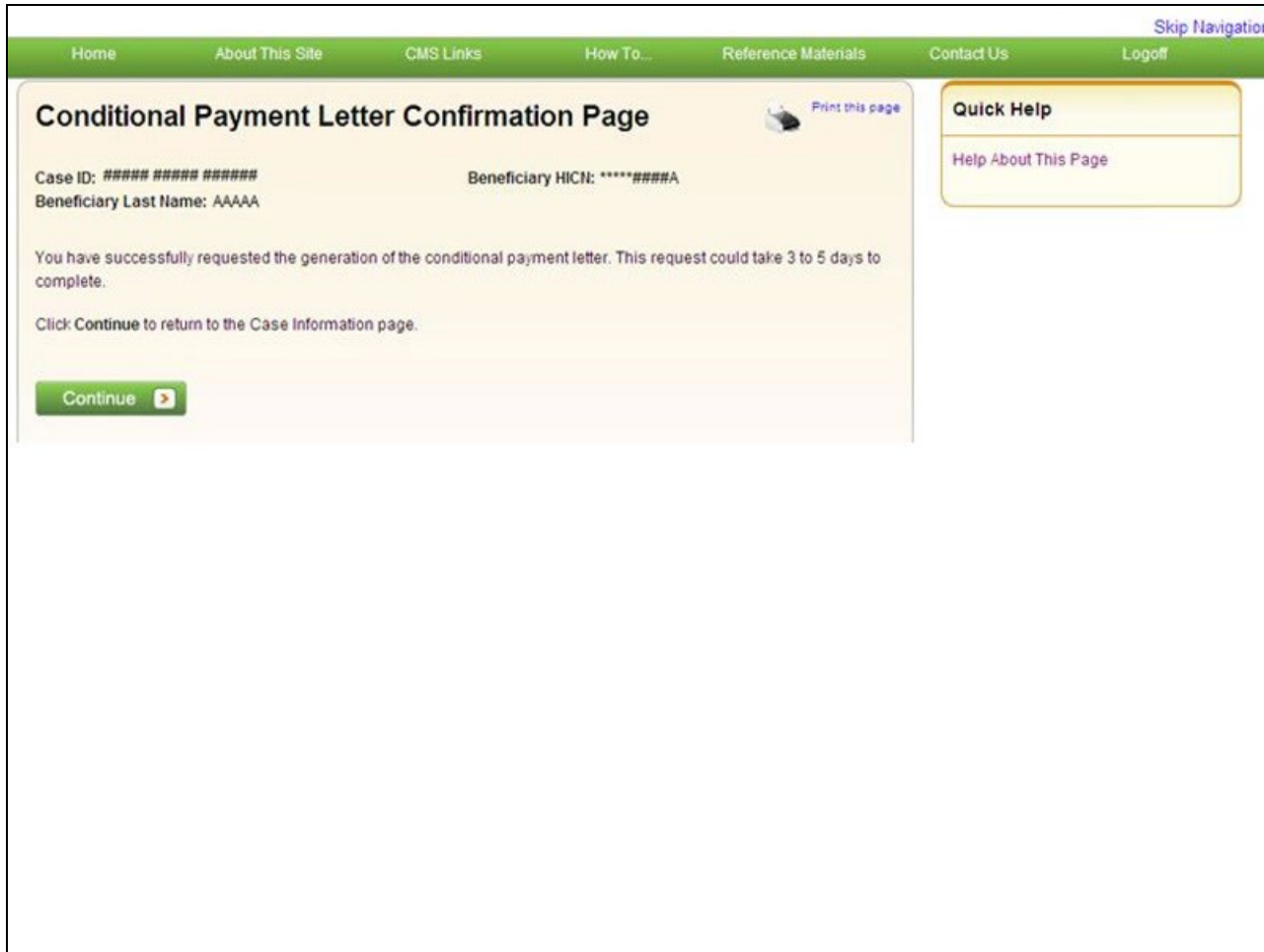
- View/Request Authorizations
- Request an update to the conditional payment amount [What is this?](#)
- Request an electronic conditional payment letter with Current Conditional Payment Amount [What is this?](#)
- Request a mailed copy of the conditional payment letter [What is this?](#)
- Begin Final 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?](#)

Continue Cancel

Slide notes

To request a mailed copy of the conditional payment letter, go to the Case Information page on the MSPRP for the case and select the Request a mailed copy of the conditional payment letter action.

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Slide notes

The Conditional Payment Letter Confirmation page displays.

This page confirms that you have successfully submitted a request for a Conditional Payment letter.

The Case ID, Beneficiary Last Name and Beneficiary HICN (Health Insurance Claim Number) for the case are displayed at the top of the page.

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

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Conditional Payment Letter

Sent to each authorized individual/entity

- Beneficiary
- Insurer (if the insurer is the debtor)
- Each individual/entity with a Verified Proof of Representation or Consent to Release for the case



Allow 3-5 days for system processing and additional time for postal delivery



Slide notes

The letter will be mailed to each authorized individual/entity

(i.e., the beneficiary, the insurer if the insurer is the debtor, and each individual/entity with a Verified Proof of Representation or Consent to Release on file for the case).

Please allow 3-5 days for the system to process this request and additional time for postal delivery.

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Conditional Payment Letter

Case Information Page Updates	
Field	Value
Case Status	No change, remain as <i>Open</i>
Current Conditional Payment Amount	No change
Conditional Payment Amount Updated on	No Change
Conditional Payment Letter Mail Date	Date the letter was requested

Slide notes

The following updates will be made to the Case Information page:

- Case Status - No change, will remain as Open;
- Current Conditional Payment Amount - No change;
- Conditional Payment Amount Updated on - No change; and
- Conditional Payment Letter Mail Date is revised to the date the letter was requested.

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Final Conditional Payment Status: Final Conditional Payment Status Date:	Final Conditional Payment Requested: Final Conditional Payment Amount:
Final Conditional Payment Process Initiated: Request Final Conditional Payment by:	120 days' Notice of Anticipated Settlement Mail Date:

Redetermination Information

Redetermination Received: 05/01/2012
 Redetermination Decision: Unfavorable
 Redetermination Decision Date: 06/01/2012

Please select an action from the following list, if the option is disabled 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?](#)
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- 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?](#)



Continue
Cancel

Slide notes

As previously noted, when the Request a mailed copy of the conditional payment letter action is selected, the MSPRP will NOT automatically update the Current Conditional Payment Amount.

To obtain an updated Conditional Payment letter that reflects an updated Conditional Payment Amount, select the Request an update to the conditional payment amount action first.

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Home About This Site CMS Links How To... Reference Materials Contact Us Sign off	
<h3>Case Information</h3> <div style="text-align: right;">  Print this page </div> <div style="float: right; border: 1px solid orange; padding: 2px;"> Quick Help : Help About This Page </div>	
Case ID: ##### Case Type: Liability Insurance Case Status: Demand Issued What is this?	Rights and Responsibilities Letter Mail Date: 06/01/2010 Date of Incident: 09/15/2009 Industry Date of Incident: 09/15/2009 What is this?
Beneficiary Medicare Number: *****6789A Beneficiary DOB: MM/DD/YYYY Beneficiary Last Name: Last Name	Conditional Payment Letter Mail Date: 06/01/2011 Current Conditional Payment Amount: \$2800.00 Conditional Payment Amount was updated on: 06/01/2011
Authorization Level: Beneficiary Proof of Representation Authorization Status: Verified	
Conditional Payment Notice Amount: \$500.00  Conditional Payment Notice Mail Date: 06/18/2011 Conditional Payment Notice Response Due Date: 07/31/2011	Demand letter Mail Date: 06/01/2011 Demand Amount: \$3754.00 Balance Amount: \$1234.56 Refund Data Balance as of Date: 06/30/2011
Final Conditional Payment Request Final Conditional Payment Request by:	<input type="radio"/> Request an update to the conditional payment amount What is this? <input type="radio"/> Request an electronic conditional payment letter with Current Conditional Payment Amount What is this? <input type="radio"/> Request a mailed copy of the conditional payment letter What is this?
Final Conditional Payment Process Initiated: Request Final Conditional Payment by:	120 days' Notice of Anticipated Settlement Mail Date:
Redetermination Information	
Redetermination Received: 05/01/2012 Redetermination Decision: Unfavorable Redetermination Decision Date: 06/01/2012	

Slide notes

Wait until the Current Conditional Payment Amount on the Case Information page has been updated (generally 3-5 days).

Return to the Case Information page. When the Case Status has changed from Claim Retrieval back to Open, select Request a copy of the conditional payment letter.

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Request Conditional Payment Letter when Conditional Payment is Zero

If you need a copy of the Conditional Payment letter and the conditional payment amount is zero, mail, fax, or phone your request



Liability Insurance, No-Fault
Insurance, Workers'
Compensation: NGHP
PO Box 138832
Oklahoma City, OK 73113



(405) 869-3309



(855) 798-2627

Slide notes

If you need a copy of the Conditional Payment letter and the conditional payment amount is zero, you must mail, fax, or phone your request to the following address/fax/phone:

Liability Insurance, No-Fault Insurance, Workers' Compensation: NGHP, PO Box 138832, Oklahoma City, OK 73113.

The Fax Number is (405) 869-3309 and the Phone Number is (855) 798-2627.

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Conditional Payment Notice

If you receive a CPN, you have 30 calendar days to respond

If you agree with the Conditional Payment Amount on the CPN, you can initiate the demand letter early

Slide notes

The beneficiary will receive a Conditional Payment Notice (CPN) instead of a CPL when a settlement, judgment, award, or other payment has already occurred when the beneficiary first reports the case.

A CPN will also be issued to the beneficiary when the BCRC is notified of settlement, judgement, award or other payment through an insurer/workers' compensation entity's Medicare, Medicaid, and SCHIP Extension Act (MMSEA) Section 111 report.

The insurer will receive a CPN when the insurer has notified CMS that it has primary payment responsibility for certain care and Medicare has made conditional payments.

This notification may be through MMSEA Section 111 Reporting or other notification made to the BCRC (i.e., telephone call or written correspondence).

The CPN provides conditional payment information and advises what actions must be taken. After the CPN has been issued, the debtor has 30 days to respond before the demand will be issued.

However, if you receive a CPN and agree with the Conditional Payment Amount listed in the letter, you have the option to initiate the demand process early.

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Final Conditional Payment Status: Final Conditional Payment Status Date:	Final Conditional Payment Requested: Final Conditional Payment Amount:
Final Conditional Payment Process Initiated: Request Final Conditional Payment by:	120 days' Notice of Anticipated Settlement Mail Date:

Redetermination Information

Redetermination Received: 05/01/2012
 Redetermination Decision: Unfavorable
 Redetermination Decision Date: 06/01/2012

Please select an action from the following list, if the option is disabled 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?](#)

Continue
Cancel

Slide notes

Click the Initiate Demand Letter action on the Case Information page and click [Continue].

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Initiate Demand Letter Confirmation

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

Case ID: 2011 #####

Beneficiary Last Name: Smith

Beneficiary HICN: ****4321A

You have requested that Medicare send your Demand now. Once you confirm this action, the Demand Letter will be mailed within 7-12 business days and no further actions will be allowed on this case on the MSPRP.

Click **Continue** to proceed. To cancel this action, click **Previous**

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



Slide notes

The Initiate Demand Letter Confirmation page displays. Click [Continue] to submit the request. The demand letter will be mailed to each authorized entity.

If the CPN was issued by the Benefits Coordination & Recovery Center (BCRC), please allow 7-12 business days for the system to process this request.

If the CPN was issued by the Commercial Repayment Center (CRC), please allow 10-15 business days for the system to process this request.

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You have completed the MSPRP Conditional Payments 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 Conditional Payments 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>.

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The slide features a light blue background with a white curved graphic on the left side. In the top left corner is the CMS logo (Centers for Medicare & Medicaid Services). In the top right corner is the COB&R logo (Coordination of Benefits and Recovery). The main text in the center reads: "If you have any questions or feedback on this material, please go to the following URL: <http://www.surveymonkey.com/s/MSPRPTraining>."

Slide notes

If you have any questions or feedback on this material, please go to the following URL:
<http://www.surveymonkey.com/s/MSPRPTraining>.