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# Program Memorandum

## Intermediaries/Carriers

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Department of Health and  
Human Services (DHHS)  
HEALTH CARE FINANCING  
ADMINISTRATION (HCFA)

Transmittal AB-00-12

Date: MARCH 2000

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### CHANGE REQUEST 1126

**SUBJECT: CORRECTION to Coordination of Benefits (COB) Contractor Numbers**

Nonpayment/payment denial code "D" (from Chart 2 of CR 952) is currently in use. This Program Memorandum (PM) instructs intermediaries and carriers to use code "K" instead of code "D." Chart 2 below reflects this change in bold print. There are no other changes. The implementation of the Coordination of Benefits (COB) Contractor requires the creation of contractor numbers to (1) identify the COB Contractor and (2) to identify the activities of this contractor. Corresponding source codes, non-payment/payment-denial codes, and CROWD-Special Project Numbers are created by this change request. Upon implementation, intermediaries and carriers will include in their monthly MSP savings reports savings data which are attributable to COB Contractor Numbers listed below in CHART 2. This will be in addition to the current savings data already being reported.

CHART 1 below shows the association between current CWF source codes, current MSP Contractor Numbers, current CWF non-payment/payment-denial codes, and current CROWD-Special Project Numbers. CHART 2 below shows the association between the new CWF source codes, the new COB Contractor Numbers, the new CWF non-payment/payment-denial codes, and the new CROWD-Special Project Numbers.

#### CHART 1

| <u>CWF Source Codes</u> | <u>MSP Contractor Numbers</u>                                 | <u>*Non-payment/<br/>Payment-<br/>denial Codes</u> | <u>CROWD-<br/>Special Project<br/>Numbers</u> |
|-------------------------|---|--|---|
|                         | 33333 = Litigation Settlement                                 | V  | 4000  |
| P                       | 55555 = HMO Rate Cell Adjustment                              | U  | 3000  |
| B,D,T,<br>U,V, or W     | 77777 = IRS/SSA/HCFA Data Match<br>(I, II, III, IV, V, or VI) | Y  | 1000  |
| Q                       | 88888 = Voluntary Agreements                                  | Q  | 5000  |
| O                       | 99999 = Initial Enrollment Questionnaire                      | T  | 2000  |

#### CHART 2

| <u>CWF Source Codes</u> | <u>COB Contractor Numbers</u>            | <u>*Non-payment/<br/>Payment-<br/>denial Codes</u> | <u>CROWD-<br/>Special Project<br/>Numbers</u> |
|-------------------------|--|--|---|
| 1                       | 11101 = Initial Enrollment Questionnaire | <b>K</b>   | 6010  |
| 2                       | 11102 = IRS/SSA/HCFA Data Match          | E  | 6020  |
| 3                       | 11103 = HMO Rate Cell                    | F  | 6030  |
| 4                       | 11104 = Litigation Settlement            | G  | 6040  |
| 5                       | 11105 = Employer Voluntary Reporting     | H  | 6050  |
| 6                       | 11106 = Insurer Voluntary Reporting      | J  | 6060  |

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**NOTE:** Intermediaries use the term non-payment codes , which is associated with file names HUIP and HUOP. Carriers and DMERCs use the term payment/denial codes , which is associated with file names HUBC and HUDC.

No change transactions will be permitted to records established with contractor number "11101-11106", except for the addition of a termination date.

**The *effective date* for this Program Memorandum (PM) is April 1, 2000.**

**The *implementation date* for this PM is April 1, 2000.**

**These instructions should be implemented within your current operating budget.**

**This PM may be discarded after July 1, 2000.**

**If you have any questions, contact Thomas Bouchat at 410-786-4621 or E-mail TBouchat@HCFA.gov.**