



Employer *Bulletin*

Employer Communication Center 608-266-3285

Toll free: 1-877-533-5020

etf.wi.gov

Medicare Secondary Payer/Data Match: Updated Health Plan Contact List

The Medicare Secondary Payer/Data Match Program requires employers and health plans to provide information about specific former employees covered under the employer health program. The Centers for Medicare and Medicaid Services (CMS) offers information about the reconciliation process on web pages under the title COB&R (Coordination of Benefits and Recovery).

Recently a number of employers have received Primary Payment Notice (PPN) or Demand Letters from CMS/COB&R. In addition, letters have been received from the Department of the Treasury (Treasury). The purpose of this bulletin is to provide you with instructions on how to respond to these inquiries, and an updated health plan contact list for your use (included).

CMS/COB&R may request specific dates of employment for a former employee via a PPN or a Demand Letter. In these cases, CMS is questioning if Medicare paid claims appropriately as the primary insurer. A timely response is very important. After cross-checking dates of coverage and employment, CMS/COB&R and/or Treasury may pursue recovering some of these payments.

Specific detail about the COB&R program is available at www.cms.gov/Medicare/Coordination-of-Benefits-and-Recovery/Coordination-of-Benefits-and-Recovery-Overview/Overview.html

The health plans are aware of this process and will work with you to respond to the Commercial Repayment Center (the vendor used by CMS/COB&R) and other entities such as Treasury.

If you get a PPN or Demand Letter (that is copied to the health plan) **your responsibilities include:**

- You typically need to identify the employee's retirement and/or employment dates on your letterhead to the Commercial Repayment Center to resolve these inquiries. Copy the health plan. You may want to contact the health plan representative from the attached list to discuss the issue.
- If the health plan that insured the member at the time claims were incurred is not copied on the letter, that plan may need you to include an authorization for them to respond to COB&R on your behalf regarding claims. Contact the health plan representative to discuss the issue.

If you get a letter from Treasury, the letter will have a FedDebt Case ID number, Agency Debt ID number and dollar amount due listed, but no member specific information. The ID numbers will likely not match those you may have seen from CMS/COB&R. **Your responsibilities include:**

- You are required in the letter to respond within 10 days of its date.
- You should call Treasury to request the "proof of debt" that should include the member name, Medicare ID number (HICN) and information about the time frame of claims in dispute. They should provide this information in writing. You may also want to ask for their email address so

you can quickly document a response to the letter.

- When you get the detail, work with the appropriate health plan. Information that was sent to the Commercial Repayment Center may need to be duplicated and sent to Treasury.

Legal responsibility for these claims lies with the employer. Consequently, the Department of Employee Trust Funds has no administrative role in the program. However, ETF has established a Voluntary Data Sharing Agreement with CMS that shares Medicare information frequently in order to minimize Secondary Payer inquiries.

ETF has previously provided state agencies and participating local government entities with information about how to reply to notification of claims payable from CMS or a collection agency. You may view previous Medicare Data Match Project Bulletins at etf.wi.gov/employers.htm .

See *Group Health Plan Information for Medicare Data Match*, included in the next pages of this bulletin.

The Department of Employee Trust Funds does not discriminate on the basis of disability in the provision of programs, services or employment. If you are speech or hearing impaired and need assistance, call the Wisconsin Relay Service toll free at 7-1-1 or 1-800-947-3529 (English) 1-800-833-7813 (Español). If you are visually or cognitively impaired, call 1-877-533-5020 or 608-266-3285 locally. We will try to find another way to get the information to you in a usable form.

This *Employer Bulletin* is published by the Wisconsin Department of Employee Trust Funds. Questions should be directed to contact persons listed in the *Bulletin*. Employer agents may copy this *Bulletin* for further distribution to other payroll offices, subunits or individuals who may need the information. Copies of the most recent *Employer Bulletins* are available on our Internet site at the following URL: etf.wi.gov/employers.htm

Wisconsin Department of Employee Trust Funds
P.O. Box 7931
Madison, WI 53707-7931
etf.wi.gov

Group Health Plan Information for Medicare Data Match				
Plan Name (including past and present)	Contact Name	Address	Phone/Fax	Email
Anthem Blue / CompCareBlue	Christine Carter and Vana Brown	4361 IRWIN SIMPSON ROAD, MASON, OH 45040 145 S PIONEER RD FOND DU LAC WI 54935	CC: Ph: 513-336-4942 Fax: 513-492-7509 VB: Phone: 502-889-2902 Fax: 502-889-2907	christine.carter@anthem.com vana.brown@anthem.com
Arise Health Plan	Mary Biskner-Bourin and Cathy Anderkin	PO BOX 11625 GREEN BAY WI 54307-1625	Mary Ph: 920-490-6907 Cathy Ph: 920-490-6981 Fax 920-490-6921	Mary.Biskner-Bourin@wpsic.com Cathy.Anderkin@wpsic.com
Dean Health Insurance / Dean Prevea 360	Victoria Labovsky	P O BOX 56099 MADISON WI 53705 OR 1277 DEMING WAY MADISON WI 53717	Ph: 608-827-4189 Fax 608-836-1210 (Note – shared fax/not secure)	victoria.labovsky@deancare.com
Group Health Cooperative of Eau Claire (GHC-EC)	Amy Wolfgram and Karen Ring	P O BOX 3217 EAU CLAIRE WI 54702	Ph: 715-552-4300 Fax 715-836-7683	awolfgram@group-health.com kring@group-health.com
Group Health Cooperative of South Central WI (GHC-SCW)	David Berry	1265 JOHN Q. HAMMONS DR P O BOX 44971 MADISON WI 53744-4971	Ph: 608-662-4873 Fax: 608-257-3842	dberry@ghcscw.com
Gundersen Health Plan	Cali Kline	1836 SOUTH AVE LA CROSSE WI 54601	Ph: 608-775-8011 Fax 608-775-8060	accountrep@gundersenhealth.org
Health Partners Health Plan	Sue Freese	P.O. BOX 1289 MINNEAPOLIS, MN 55440-1289	Ph: 651-265-1248	Sue.M.Freese@HEALTHPARTNERS.COM

Group Health Plan Information for Medicare Data Match				
Health Tradition Health Plan	Jane Fjerstad	P O BOX 188 LA CROSSE WI 54602-0188	Ph: 507-538-5190 Fax: 608-781-9653	Fierstad.jane@mayo.edu
Humana	Cory Zabenco	101 E MAIN ST LOUISVILLE KY 40202	Ph: 502-580-7375 Fax: 502-508-5699	czabenco@humana.com
Medical Associates Health Plans	Sherie Goffinet	1605 ASSOCIATES DR SUITE 101 DUBUQUE IA 52002	Ph: 563-584-4825 Fax: 563-566-5134	sgoffinet@mahealthcare.com
MercyCare Health Plans	Betsy Fulmer	580 N WASHINGTON ST P O BOX 550 JANESVILLE WI 53547-0550	Ph: 608-758-7705 Fax: 608-752-3751	bfulmer@mhsjvl.org
Navitus Health Solutions	Pam Olson and Laura Morgan	1025 WEST NAVITUS DR APPLETON, WI 54913	Pam Ph: 920-221-4161 Laura Ph: 920-221-4074 Fax: 920-221-4661	Pam.olson@navitus.com Laura.morgan@navitus.com
Network Health Plan	Laura Rasmussen	P O BOX 120 MENASHA WI 54952	Ph: 920-720-1538 Fax: 920-720-1910	lrasmuss@networkhealth.com
Physicians Plus Insurance Corp.	Laurie Klitzman	PO BOX 2078 MADISON WI 53701-2078	Ph: 608-417-4511 Fax: 608-327-0322	Laurie.Klitzman@PPLUSIC.COM
Security Health Plan	Travis Nytes	1515 SAINT JOSEPH AVE P O BOX 8000 MARSHFIELD WI 54449-8000	Ph: 715-221-9467 Fax: 715-221-9500	nytes.travis@securityhealth.org
Standard, SMP WPS Health Insurance	Laura Wethall	1717 W. BROADWAY P O BOX 8190 MADISON, WI 53707-8190	Ph: 608-226-4995 Fax 608-223-3639	Laura.Wethall@wpsic.com
UnitedHealth care of Wisconsin	Andrea Darling	PO BOX 13187 GREEN BAY, WI 54307	Ph: 920-662-8287 Fax 866-674-2861	andrea_m_darling@uhc.com
Unity Health Insurance	Paulette Nelson-Smith	840 CAROLINA ST SAUK CITY WI 53583	Ph: 608-643-1503 Fax: 608-643-2564	paulette.nelson-smith@unityhealth.com
WEA Trust	Geralyn Hawkins	45 NOB HILL ROAD MADISON WI 53707	Ph: 608-661-6647 Fax: 608-276-9119	ghawkins@weatrust.com