



Urgent! News You Can Use 15K Participants

In December 2007, Congress approved Section 111 of the Medicare, Medicaid and SCHIP Extension Act. This Act addresses payment of benefits, specifically, when Medicare is the secondary payer for these benefits. Medicare has been a secondary payer for workers' compensation benefit payments since the inception of the Medicare program in 1965. Therefore, in order to avoid duplicate payments for the same services, this Act establishes mandatory reporting requirements which impacts workers' compensation plans and any benefits paid.

The Ohio Bureau of Workers' Compensation (BWC) will report the benefits paid through the state system to Medicare beneficiaries. However, **because your company participates in the Fifteen Thousand Medical Only Program and is paying medical benefits, you are also required to file these reports.**

Your company must register with the Centers for Medicare and Medicaid Services (CMS) between May 1 and June 30, 2009 and begin reporting claims as of October 1, 2009 and send quarterly updates thereafter. All entities must file reports electronically in the format dictated by CMS and include minimum data requirements.

Failure to comply with this Act could result in penalties assessed to your organization. More information is available at www.cms.hhs.gov/mandatoryinsrep.

For more information, please contact your Sheakley UniComp Client Relations Manager at 888-743-2559.

As always, thank you for your business. With Sheakley...It's Done!

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