CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-05 Medicare Secondary Payer	Centers for Medicare & Medicaid Services (CMS)
Transmittal 108	**Date: November 7, 2014**
	Change Request 8932

SUBJECT: Inpatient Hospital Claims and Medicare Secondary Payer (MSP) Claims with Medicare Coinsurance Days and/or Medicare Lifetime Reserve Days Occurring in the Seventh to Fifteenth Years

I. SUMMARY OF CHANGES: This CR revises Medicare systems to accurately process inpatient hospital claims and MSP claims with coinsurance and/or lifetime reserve days in the seventh to fifteenth years.

EFFECTIVE DATE: April 1, 2015
**Unless otherwise specified, the effective date is the date of service.*
IMPLEMENTATION DATE: April 6, 2015

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)
R=REVISED, N=NEW, D=DELETED-*Only One Per Row.*

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
R	5/50/50.2.3/Return Codes
R	5/50/50.2.7/Payment Calculation for Inpatient Bills (MSPPAYAI Module)

III. FUNDING:
For Medicare Administrative Contractors (MACs):
The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC statement of Work. The contractor is not obliged to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

Business Requirements
Manual Instruction

Attachment - Business Requirements

Pub. 100-05	Transmittal: 108	Date: November 7, 2014	Change Request: 8932

SUBJECT: Inpatient Hospital Claims and Medicare Secondary Payer (MSP) Claims with Medicare Coinsurance Days and/or Medicare Lifetime Reserve Days Occurring in the Seventh to Fifteenth Years

EFFECTIVE DATE: April 1, 2015
**Unless otherwise specified, the effective date is the date of service.*
IMPLEMENTATION DATE: April 6, 2015

I. GENERAL INFORMATION

A. Background: CR8130 initiated Fiscal Intermediary Shared System (FISS) changes to process inpatient hospital claims, including MSP claims, with coinsurance and/or lifetime reserve days occurring in the third to sixth years. Medicare Administrative Contractors (MACs) reported the inability to process claims with coinsurance and or lifetime reserve (LTR) days applied beyond year six. In the majority of inpatient admissions, full, coinsurance and lifetime reserve days are applied during the year of admission and the year of discharge. In other admissions, non-covered level of care spans are present that require available benefit days to be applied to years six through fifteen.

B. Policy: This Change Request contains no new policy. It revises Medicare systems to accurately process inpatient hospital claims and MSP claims with coinsurance and/or lifetime reserve days applied in years seven to fifteen.

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
8932.1	FISS shall add new fields, for FISS internal use only, to the claim record for the 7th, 8th, 9th, 10th, 11th, 12th, 13th, 14th and 15th year coinsurance.					X				
8932.2	FISS shall add new fields, for FISS internal use only, to the claim record for the 7th, 8th, 9th, 10th, 11th, 12th, 13th, 14th and 15th year LTR.					X				
8932.3	FISS shall update calculations to determine benefit application per calendar year for 15 years.					X				
8932.4	FISS shall update extensions to calculate coinsurance amount per calendar year for 15 years and roll up 2nd through 15th year coinsurance days to field ‘2nd year coinsurance’.					X				

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
8932.5	FISS shall roll up 2nd through 15th year coinsurance amounts to value code 11.					X				
8932.6	FISS shall update extensions to calculate LTR amount per calendar year for 15 years and roll up 2nd through 15th year LTR days to field ‘2nd year LTR’.					X				
8932.7	FISS shall roll up 2nd through 15th year LTR amounts to value code 10.					X				
8932.8	FISS shall update the Part A Medicare Secondary Payer Payment (MSPPAY) module to determine coinsurance and LTR benefit application per calendar year for 15 years.					X				
8932.9	FISS shall use current coinsurance and LTR calculations found in the MSPPAY module and source code to determine coinsurance and LTR remaining benefits for the 7th, 8th, 9th, 10th, 11th, 12th, 13th, 14th and 15th year.					X				
8932.10	FISS shall add new fields to the Part A MSPPAY module, specifically the MSPPAYAI sub-module, to include 7th, 8th, 9th, 10th, 11th, 12th, 13th, 14th and 15th year LTR for MSP claims that includes the numeric life-time reserve days, numeric life-time reserve rate, and the numeric life-time reserve amount for both sending and receiving data elements.					X				
8932.11	FISS shall update the Part A MSPPAY module error codes to include 7th, through 15th year LTR for MSP claims that includes the non-numeric life-time reserve days, non- numeric life-time reserve rate, and the non-numeric life-time reserve amount.					X				
8932.12	FISS shall add new fields to the Part A MSPPAY module, specifically the MSPPAYAI sub-module, for coinsurance amounts to include 7th through 15th year numeric regular coinsurance days, numeric regular coinsurance rate, and the numeric regular coinsurance amount for both sending and receiving data elements.					X				
8932.13	FISS shall update the MSPPAY module error codes coinsurance amounts to include 7th through 15th year identifying non-numeric regular coinsurance days, non- numeric regular coinsurance rate, and the non-					X				

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
	numeric regular coinsurance amount.									
8932.14	FISS shall update the MSPPAY module to include the following new error codes for coinsurance in the 7th through 10th years : 4160 - Non-numeric regular coinsurance days 7th year 4170 - Non-numeric regular coinsurance rate 7th year 4180 - Non-numeric regular coinsurance amount 7th year 4190 - Non-numeric regular coinsurance days 8th year 4200 - Non-numeric regular coinsurance rate 8th year 4210 - Non-numeric regular coinsurance amount 8th year 4220 - Non-numeric regular coinsurance days 9th year 4230 - Non-numeric regular coinsurance rate 9th year 4240 - Non-numeric regular coinsurance amount 9th year 4250 - Non-numeric regular coinsurance days 10th year 4260- Non-numeric regular coinsurance rate 10th year 4270 - Non-numeric regular coinsurance amount 10th year					X				
8932.15	FISS shall update the MSPPAY module to include the following new error codes for coinsurance in the 11th through 15th years : 4280 - Non-numeric regular coinsurance days 11th year 4290 - Non-numeric regular coinsurance rate 11th year					X				

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
	4300- Non-numeric regular coinsurance amount 11th year 4310 - Non-numeric regular coinsurance days 12th year 4320- Non-numeric regular coinsurance rate 12th year 4330 - Non-numeric regular coinsurance amount 12th year 4340 - Non-numeric regular coinsurance days 13th year 4350 - Non-numeric regular coinsurance rate 13th year 4360 - Non-numeric regular coinsurance amount 13th year 4370 - Non-numeric regular coinsurance days 14th year 4380 - Non-numeric regular coinsurance rate 14th year 4390- Non-numeric regular coinsurance amount 14th year 4400 - Non-numeric regular coinsurance days 15th year 4410 - Non-numeric regular coinsurance rate 15th year 4420 - Non-numeric regular coinsurance amount 15th year									
8932.16	FISS shall update the MSPPAY module to include the following new error codes for life-time reserve days in the 7th through 10th years : 4430 - Non-numeric life-time reserve days 7th year 4440 - Non-numeric life-time reserve rate 7th year					X				

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
	4450 - Non-numeric life-time reserve amount 7th year 4460 - Non-numeric life-time reserve days 8th year 4470 - Non-numeric life-time reserve rate 8th year 4480 - Non-numeric life-time reserve amount 8th year 4490 - Non-numeric life-time reserve days 9th year 4500 - Non-numeric life-time reserve rate 9th year 4510 - Non-numeric life-time reserve amount 9th year 4520 - Non-numeric life-time reserve days 10th year 4530 - Non-numeric life-time reserve rate 10th year 4540 - Non-numeric life-time reserve amount 10th year									
8932.17	FISS shall update the MSPPAY module to include the following new error codes for life-time reserve days in the 11th through 15th years: 4550 - Non-numeric life-time reserve days 11th year 4560 - Non-numeric life-time reserve rate 11th year 4570 - Non-numeric life-time reserve amount 11th year 4580 - Non-numeric life-time reserve days 12th year 4590 - Non-numeric life-time reserve rate 12th year 4600 - Non-numeric life-time reserve amount 12th year 4610 - Non-numeric life-time reserve days 13th year 4620 - Non-numeric life-time reserve rate 13th year 4630 - Non-numeric life-time reserve amount 13th year					X				

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
	4640 - Non-numeric life-time reserve days 14th year 4650 - Non-numeric life-time reserve rate 14th year 4660 - Non-numeric life-time reserve amount 14th year 4670 - Non-numeric life-time reserve days 15th year 4680 - Non-numeric life-time reserve rate 15th year 4690 - Non-numeric life-time reserve amount 15th year									
8932.18	FISS shall update the source code and the Part A MSPPAY Module Software Manual with the updated MSP information and provide CMS with a copy of the updated MSPPAY Module Software Manual.					X				

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		A	B	HHH		
	None					

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements:
"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
	Analysis only CR8555

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Richard Mazur, Richard.mazur2@cms.hhs.gov , Cami DiGiacomo, cami.digiacomo@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):
The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

ATTACHMENTS: 0

50.2.3 - Return Codes

(Rev.108, Issued: 11-07-14, Effective: 04-01-15, Implementation: 04-06-15)

One of the following codes which indicates the results from processing secondary payment computation and savings is returned to the Part A system. These codes are also referenced in the technical documentation released with the MSPPAY modules.

Return Code	Description
3010	Claim is fully paid
3020	Claim is partially paid
3030	Line of service denied
3500	Invalid MSP value code
3510	Invalid number of other payers
3520	Non-numeric MSP amount
3530	MSP amount equals zeros
3540	Invalid record identification
3545	Non-numeric Gramm-Rudmann-Hollings percent
3550	Non-numeric total covered charges
3560	Non-numeric blood deductible
3570	Non-numeric cash deductible
3700	Non-numeric total coinsurance amount
3730	Non-numeric Medicare primary payment
3780	Non-numeric provider payment amount
3790	Non-numeric patient payment amount
3820	Non-numeric charges not subject to deductible and coinsurance
3830	Non-numeric charges subject to deductible
3850	Invalid from date of claim
3880	Invalid "thru-date" of claim
3900	Non-numeric Medicare payment amount
3910	Non-numeric obligated to accept
3580	Non-numeric regular coinsurance days 1st year
3590	Non-numeric regular coinsurance rate 1st year

3600	Non-numeric regular coinsurance amount 1st year
3610	Non-numeric regular coinsurance days 2nd year
3620	Non-numeric regular coinsurance rate 2nd year
3630	Non-numeric regular coinsurance amount 2nd year
3640	Non-numeric life-time reserve days 1st year
3650	Non-numeric life-time reserve rate 1st year
3660	Non-numeric life-time reserve amount 1st year
3670	Non-numeric life-time reserve days 2nd year
3680	Non-numeric life-time reserve rate 2nd year
3690	Non-numeric life-time reserve amount 2nd year
3710	Non-numeric full days
3720	Non-numeric covered days
3740	Invalid PPS indicator
3750	Non-numeric DRG amount
3760	Non-numeric direct graduate medical education
3770	Non-numeric pass thru per diem amount
3920	Non-numeric regular coinsurance days 3rd year
3930	Non-numeric regular coinsurance rate 3rd year
3940	Non-numeric regular coinsurance amount 3rd year
3950	Non-numeric regular coinsurance days 4th year
3960	Non-numeric regular coinsurance rate 4th year
3965	Non-numeric regular coinsurance amount 4th year
3985	Non-numeric regular coinsurance days 5th year
3990	Non-numeric regular coinsurance rate 5th year
4000	Non-numeric regular coinsurance amount 5th year
4010	Non-numeric regular coinsurance days 6th year
4020	Non-numeric regular coinsurance rate 6th year
4030	Non-numeric regular coinsurance amount 6th year
4040	Non-numeric life-time reserve days 3rd year

4050	Non-numeric life-time reserve rate 3rd year
4060	Non-numeric life-time reserve amount 3rd year
4070	Non-numeric life-time reserve days 4th year
4080	Non-numeric life-time reserve rate 4th year
4090	Non-numeric life-time reserve amount 4th year
4100	Non-numeric life-time reserve days 5th year
4110	Non-numeric life-time reserve rate 5th year
4120	Non-numeric life-time reserve amount 5th year
4130	Non-numeric life-time reserve days 6th year
4140	Non-numeric life-time reserve rate 6th year
4150	Non-numeric life-time reserve amount 6th year
4160	*Non-numeric regular coinsurance days 7th year*
4170	*Non-numeric regular coinsurance rate 7th year*
4180	*Non-numeric regular coinsurance amount 7th year*
4190	*Non-numeric regular coinsurance days 8th year*
4200	*Non-numeric regular coinsurance rate 8th year*
4210	*Non-numeric regular coinsurance amount 8th year*
4220	*Non-numeric regular coinsurance days 9th year*
4230	*Non-numeric regular coinsurance rate 9th year*
4240	*Non-numeric regular coinsurance amount 9th year*
4250	*Non-numeric regular coinsurance days 10th year*
4260	*Non-numeric regular coinsurance rate 10th year*
4270	*Non-numeric regular coinsurance amount 10th year*
4280	*Non-numeric regular coinsurance days 11th year*
4290	*Non-numeric regular coinsurance rate 11th year*
4300	*Non-numeric regular coinsurance amount 11th year*
4310	*Non-numeric regular coinsurance days 12th year*
4320	*Non-numeric regular coinsurance rate 12th year*
4330	*Non-numeric regular coinsurance amount 12th year*

4340	*Non-numeric regular coinsurance days 13th year*
4350	*Non-numeric regular coinsurance rate 13th year*
4360	*Non-numeric regular coinsurance amount 13th year*
4370	*Non-numeric regular coinsurance days 14th year*
4380	*Non-numeric regular coinsurance rate 14th year*
4390	*Non-numeric regular coinsurance amount 14th year*
4400	*Non-numeric regular coinsurance days 15th year*
4410	*Non-numeric regular coinsurance rate 15th year*
4420	*Non-numeric regular coinsurance amount 15th year*
4430	*Non-numeric life-time reserve days 7th year*
4440	*Non-numeric life-time reserve rate 7th year*
4450	*Non-numeric life-time reserve amount 7th year*
4460	*Non-numeric life-time reserve days 8th year*
4470	*Non-numeric life-time reserve rate 8th year*
4480	*Non-numeric life-time reserve amount 8th year*
4490	*Non-numeric life-time reserve days 9th year*
4500	*Non-numeric life-time reserve rate 9th year*
4510	*Non-numeric life-time reserve amount 9th year*
4520	*Non-numeric life-time reserve days 10th year*
4530	*Non-numeric life-time reserve rate 10th year*
4540	*Non-numeric life-time reserve amount 10th year*
4550	*Non-numeric life-time reserve days 11th year*
4560	*Non-numeric life-time reserve rate 11th year*
4570	*Non-numeric life-time reserve amount 11th year*
4580	*Non-numeric life-time reserve days 12th year*
4590	*Non-numeric life-time reserve rate 12th year*
4600	*Non-numeric life-time reserve amount 12th year*
4610	*Non-numeric life-time reserve days 13th year*
4620	*Non-numeric life-time reserve rate 13th year*

4630	*Non-numeric life-time reserve amount 13th year*
4640	*Non-numeric life-time reserve days 14th year*
4650	*Non-numeric life-time reserve rate 14th year*
4660	*Non-numeric life-time reserve amount 14th year*
4670	*Non-numeric life-time reserve days 15th year*
4680	*Non-numeric life-time reserve rate 15th year*
4690	*Non-numeric life-time reserve amount 15th year*

50.2.7 - Payment Calculation for Inpatient Bills (MSPPAYAI Module)

(Rev.108, Issued: 11-07-14, Effective: 04-01-15, Implementation: 04-06-15)

MSPPAYAI performs the necessary payment calculation for inpatient, skilled nursing facility (SNF), and Religious Nonmedical Health Care (RNHC) bills with service dates on or after November 13, 1989.

A. Data Elements to send to MSPPAYAI

MSPPAY must send the following data elements to MSPPAYAI

No.	Field Name	Definition/Use	Source/Value
1	TEST SWITCH	Indicator to turn on function within the MSP software to display sending and returning data. Use to identify payment errors.	"T" = display send/return data; Space = do not display data.
2	THRU DATE	Ending service date of the period included on the bill (CCYYMMDD) THRU DATE CC THRU DATE YY THRU DATE MM THRU DATE DD	Supplied by the Part A system from form locator 42 of the Form CMS-1450 (UB-92) Value = "19" thru "20" Value = "00" thru "99" Value = "01" thru "12" Value = "01" thru "31"
3	RECORD ID	Identifies the bill type.	Inpatient (including SNF/CSS) bills = "HMIP"
4	CLMNO	Health Insurance Claim Number (HICN)	Supplied by the Part A system from form locator 60B of the Form CMS-1450 (UB-92)
5	DOC CNTL NUM	Assigned document control number	Assigned and supplied by the Part A system
6	FULLY PAID CLAIM IND	Indicator that reflects claim is fully paid by the third party payer.	Supplied by the Part A system. Can be identified by an "O" frequency indicator in Field 4 of the Form CMS-1450 (UB-92). Also identified by condition code "77" in form locators 24-30 of the Form CMS-1450 (UB-92). Value Y = Fully Paid Space = Not Fully Paid
7	NUM OF OTHER PAYERS	The number of other payers who are primary to Medicare.	Supplied by the Part A system. Values = "01" thru "10"
8	THIRD PARTY PAYER TABLE	MSP code and MSP amount comprise primary payer data.	Supplied by the Part A system. May occur up to 10 times.

No.	Field Name	Definition/Use	Source/Value
	MSP CODE	Code(s) identifying the other payer: 12 = GHP (Working Aged) 13 = ESRD (End Stage Renal Disease) 14 = AUTO (Automobile/No-Fault) 15 = WORK (Workers' Compensation) 16 = FEDS (Federal) 41 = BL (Black Lung) 42 = VA (Veterans) 43 = DSAB (Disability) 47 = LIAB (Liability)	Form CMS-1450 (UB-92), form locators 39-41 (Value codes 12-16 and 41-47)
	MSP AMOUNT	Amount(s) paid by the other payer.	Form CMS-1450 (UB-92) form locators 39-41 (Value amounts)
9	TOTAL COVERED CHARGES	Total charges covered by Medicare	Form CMS-1450 (UB-92) form locator 47
10	OBLIGATED TO ACCEPT	The amount a provider agrees to accept as payment in full when this amount is less than the charges but higher than the payment received from the primary payer. This field only needs to be completed when a value code "44" appears on the bill. It is reported in addition to the MSP Code(s) and MSP amounts(s) and the total covered charges on the bill.	Form CMS-1450 (UB-92), form locators 39-41 Value Code "44"
11	FILLER		Eighteen value spaces.
12	MED PAYMENT AMOUNT	Medicare payment without regard to deductibles and coinsurance.	Computed and supplied by the Part A system.
13	BLOOD DEDUCTION	Dollar amount of blood deductible charged by Medicare	Form CMS-1450 (UB-92) form locators 39-41, Value Code 06
14	CASH DEDUCTION	Dollar amount of cash deductible charged by Medicare.	Form CMS-1450 (UB-92) form locators 39-41, Value Code 07
15	REG COIN DAYS 1ST YR	Medicare coinsurance days charged in the year of admission.	Computed and supplied by the Part A system based on information obtained from CMS 1450 (UB-92), form locator 9
16	REG COIN RATE 1ST YR.	The Medicare coinsurance rate charged in the year of admission.	Computed and supplied by the Part A system.
17	REG COIN AMT 1ST YR	The Medicare coinsurance amount charged in the year of admission.	Form CMS-1450 (UB-92), form Locators 39-41, Value Code 09
18	REG COIN DAYS	Medicare coinsurance days	Computed and supplied by the

No.	Field Name	Definition/Use	Source/Value
	2ND YR	charged in the year of discharge where the bill spans two calendar years.	Part A system.
19	REG COIN RATE 2ND YR	The Medicare coinsurance rate charged in the year of discharge where the bill spans two calendar years.	Computed and supplied by the Part A system.
20	REG COIN AMT 2ND YR	The Medicare coinsurance amount charged in the year of discharge where the bill spans two calendar years.	Form CMS-1450 (UB-92), form Locators 39-41, Value Code 11
21	REG COIN DAYS 3RD YR	Medicare coinsurance days charged in the year of discharge where the bill spans three calendar years.	Computed and supplied by the Part A system.
22	REG COIN RATE 3RD YR	The Medicare coinsurance rate charged in the year of discharge where the bill spans three calendar years.	Computed and supplied by the Part A system.
23	REG COIN AMT 3RD YR	The Medicare coinsurance amount charged in the year of discharge where the bill spans three calendar years.	Form CMS-1450 (UB-92), form Locators 39-41, Value Code 11
24	REG COIN DAYS 4TH YR	Medicare coinsurance days charged in the year of discharge where the bill spans four calendar years.	Computed and supplied by the Part A system.
25	REG COIN RATE 4th YR	The Medicare coinsurance rate charged in the year of discharge where the bill spans four calendar years.	Computed and supplied by the Part A system.
26	REG COIN AMT 4TH YR	The Medicare coinsurance amount charged in the year of discharge where the bill spans four calendar years.	Form CMS-1450 (UB-92), form Locators 39-41, Value Code 11
27	REG COIN DAYS 5TH YR	Medicare coinsurance days charged in the year of discharge where the bill spans five calendar years.	Computed and supplied by the Part A system.
28	REG COIN RATE 5TH YR	The Medicare coinsurance rate charged in the year of discharge where the bill spans five calendar years.	Computed and supplied by the Part A system.
29	REG COIN AMT 5TH YR	The Medicare coinsurance amount charged in the year of discharge where the bill spans five calendar years.	Form CMS-1450 (UB-92), form Locators 39-41, Value Code 11
30	REG COIN DAYS 6TH YR	Medicare coinsurance days charged in the year of discharge where the bill spans six calendar years.	Computed and supplied by the Part A system.
31	REG COIN RATE 6TH YR	The Medicare coinsurance rate charged in the year of discharge where the bill	Computed and supplied by the Part A system.

No.	Field Name	Definition/Use	Source/Value
		spans six calendar years.	
32	REG COIN AMT 6TH YR	The Medicare coinsurance amount charged in the year of discharge where the bill spans six calendar years.	Form CMS-1450 (UB-92), form Locators 39-41, Value Code 11
33	*REG COIN DAYS 7TH YR*	*Medicare coinsurance days charged in the year of discharge where the bill spans seven calendar years.*	*Computed and supplied by the Part A system.*
34	*REG COIN RATE 7TH YR*	*The Medicare coinsurance rate charged in the year of discharge where the bill spans seven calendar years.*	*Computed and supplied by the Part A system.*
35	*REG COIN AMT 7TH YR*	*The Medicare coinsurance amount charged in the year of discharge where the bill spans seven calendar years.*	*Form CMS-1450 (UB-92), form Locators 39-41, Value Code 11*
36	*REG COIN DAYS 8TH YR*	*Medicare coinsurance days charged in the year of discharge where the bill spans eight calendar years.*	*Computed and supplied by the Part A system.*
37	*REG COIN RATE 8TH YR*	*The Medicare coinsurance rate charged in the year of discharge where the bill spans eight calendar years.*	*Computed and supplied by the Part A system.*
38	*REG COIN AMT 8TH YR*	*The Medicare coinsurance amount charged in the year of discharge where the bill spans eight calendar years.*	*Form CMS-1450 (UB-92), form Locators 39-41, Value Code 11*
39	*REG COIN DAYS 9TH YR*	*Medicare coinsurance days charged in the year of discharge where the bill spans nine calendar years.*	*Computed and supplied by the Part A system.*
40	*REG COIN RATE 9TH YR*	*The Medicare coinsurance rate charged in the year of discharge where the bill spans nine calendar years.*	*Computed and supplied by the Part A system.*
41	*REG COIN AMT 9TH YR*	*The Medicare coinsurance amount charged in the year of discharge where the bill spans nine calendar years.*	*Form CMS-1450 (UB-92), form Locators 39-41, Value Code 11*
42	*REG COIN DAYS 10TH YR*	*Medicare coinsurance days charged in the year of discharge where the bill spans ten calendar years.*	*Computed and supplied by the Part A system.*
43	*REG COIN RATE 10TH YR*	*The Medicare coinsurance rate charged in the year of discharge where the bill*	*Computed and supplied by the Part A system.*

No.	Field Name	Definition/Use	Source/Value
		spans ten calendar years.	
44	*REG COIN AMT 10TH YR*	*The Medicare coinsurance amount charged in the year of discharge where the bill spans ten calendar years.*	*Form CMS-1450 (UB-92), form Locators 39-41, Value Code 11*
45	*REG COIN DAYS 11TH YR*	*Medicare coinsurance days charged in the year of discharge where the bill spans eleven calendar years.*	*Computed and supplied by the Part A system.*
46	*REG COIN RATE 11TH YR*	*The Medicare coinsurance rate charged in the year of discharge where the bill spans eleven calendar years.*	*Computed and supplied by the Part A system.*
47	*REG COIN AMT 11TH YR*	*The Medicare coinsurance amount charged in the year of discharge where the bill spans eleven calendar years.*	*Form CMS-1450 (UB-92), form Locators 39-41, Value Code 11*
48	*REG COIN DAYS 12TH YR*	*Medicare coinsurance days charged in the year of discharge where the bill spans twelve calendar years.*	*Computed and supplied by the Part A system.*
49	*REG COIN RATE 12TH YR*	*The Medicare coinsurance rate charged in the year of discharge where the bill spans twelve calendar years.*	*Computed and supplied by the Part A system.*
50	*REG COIN AMT 12TH YR*	*The Medicare coinsurance amount charged in the year of discharge where the bill spans twelve calendar years.*	*Form CMS-1450 (UB-92), form Locators 39-41, Value Code 11*
51	*REG COIN DAYS 13TH YR*	*Medicare coinsurance days charged in the year of discharge where the bill spans thirteen calendar years.*	*Computed and supplied by the Part A system.*
52	*REG COIN RATE 13TH YR*	*The Medicare coinsurance rate charged in the year of discharge where the bill spans thirteen calendar years.*	*Computed and supplied by the Part A system.*
53	*REG COIN AMT 13TH YR*	*The Medicare coinsurance amount charged in the year of discharge where the bill spans thirteen calendar years.*	*Form CMS-1450 (UB-92), form Locators 39-41, Value Code 11*

No.	Field Name	Definition/Use	Source/Value
54	*REG COIN DAYS 14TH YR*	*Medicare coinsurance days charged in the year of discharge where the bill spans fourteen calendar years.*	*Computed and supplied by the Part A system.*
55	*REG COIN RATE 14TH YR*	*The Medicare coinsurance rate charged in the year of discharge where the bill spans fourteen calendar years.*	*Computed and supplied by the Part A system.*
56	*REG COIN AMT 14TH YR*	*The Medicare coinsurance amount charged in the year of discharge where the bill spans fourteen calendar years.*	*Form CMS-1450 (UB-92), form Locators 39-41, Value Code 11*
57	*REG COIN DAYS 15TH YR*	*Medicare coinsurance days charged in the year of discharge where the bill spans fifteen calendar years.*	*Computed and supplied by the Part A system.*
58	*REG COIN RATE 15TH YR*	*The Medicare coinsurance rate charged in the year of discharge where the bill spans fifteen calendar years.*	*Computed and supplied by the Part A system.*
59	*REG COIN AMT 15TH YR*	*The Medicare coinsurance amount charged in the year of discharge where the bill spans fifteen calendar years.*	*Form CMS-1450 (UB-92), form Locators 39-41, Value Code 11*
60	LTR COIN DAYS 1ST YR	Medicare lifetime reserve days charged in the year of admission.	Computed and supplied by the Part A system.
61	LTR COIN RATE 1ST YR	The Medicare lifetime reserve rate charged in the year of admission.	Computed and supplied by the Part A system.
62	LTR COIN AMT 1ST YR	The Medicare lifetime reserve amount charged in the year admission.	Form CMS-1450 (UB-92) form locators 39-41, Value Code 08
63	LTR COIN DAYS 2ND YR	Medicare lifetime reserve days charged in the year of discharge where the bill spans two calendar years.	Computed and supplied by the Part A system.
64	LTR COIN RATE 2ND YR	The Medicare lifetime reserve rate charged in the year of discharge where the bill spans two calendar years.	Computed and supplied by the Part A system.
65	LTR COIN AMT 2ND YR	The Medicare lifetime reserve amount charged in the year of discharge where the bill spans two calendar	Form CMS-1450 (UB-92) form locators 39-41, Value Code 11

No.	Field Name	Definition/Use	Source/Value
		years.	
66	LTR COIN DAYS 3RD YR	Medicare lifetime reserve days charged in the year of discharge where the bill spans three calendar years.	Computed and supplied by the Part A system.
67	LTR COIN RATE 3RD YR	The Medicare lifetime reserve rate charged in the year of discharge where the bill spans three calendar years.	Computed and supplied by the Part A system.
68	LTR COIN AMT 3RD YR	The Medicare lifetime reserve amount charged in the year of discharge where the bill spans three calendar years.	Form CMS-1450 (UB-92) form locators 39-41, Value Code 11
69	LTR COIN DAYS 4TH YR	Medicare lifetime reserve days charged in the year of discharge where the bill spans four calendar years.	Computed and supplied by the Part A system.
70	LTR COIN RATE 4TH YR	The Medicare lifetime reserve rate charged in the year of discharge where the bill spans four calendar years.	Computed and supplied by the Part A system.
71	LTR COIN AMT 4TH YR	The Medicare lifetime reserve amount charged in the year of discharge where the bill spans four calendar years.	Form CMS-1450 (UB-92) form locators 39-41, Value Code 11
72	LTR COIN DAYS 5TH YR	Medicare lifetime reserve days charged in the year of discharge where the bill spans five calendar years.	Computed and supplied by the Part A system.
73	LTR COIN RATE 5TH YR	The Medicare lifetime reserve rate charged in the year of discharge where the bill spans five calendar years.	Computed and supplied by the Part A system.
74	LTR COIN AMT 5TH YR	The Medicare lifetime reserve amount charged in the year of discharge where the bill spans five calendar years.	Form CMS-1450 (UB-92) form locators 39-41, Value Code 11
75	LTR COIN DAYS 6TH YR	Medicare lifetime reserve days charged in the year of discharge where the bill spans six calendar years.	Computed and supplied by the Part A system.
76	LTR COIN RATE 6TH YR	The Medicare lifetime reserve rate charged in the year of discharge where the bill spans six calendar years.	Computed and supplied by the Part A system.
77	LTR COIN AMT 6TH YR	The Medicare lifetime reserve amount charged in	Form CMS-1450 (UB-92) form locators 39-41, Value Code 11

No.	Field Name	Definition/Use	Source/Value
		the year of discharge where the bill spans six calendar years.	
78	*LTR COIN DAYS 7TH YR*	*Medicare lifetime reserve days charged in the year of discharge where the bill spans seven calendar years.*	*Computed and supplied by the Part A system.*
79	*LTR COIN RATE 7TH YR*	*The Medicare lifetime reserve rate charged in the year of discharge where the bill spans seven calendar years.*	*Computed and supplied by the Part A system.*
80	*LTR COIN AMT 7TH YR*	*The Medicare lifetime reserve amount charged in the year of discharge where the bill spans seven calendar years.*	*Form CMS-1450 (UB-92) form locators 39-41, Value Code 11*
81	*LTR COIN DAYS 8TH YR*	*Medicare lifetime reserve days charged in the year of discharge where the bill spans eight calendar years.*	*Computed and supplied by the Part A system.*
82	*LTR COIN RATE 8TH YR*	*The Medicare lifetime reserve rate charged in the year of discharge where the bill spans eight calendar years.*	*Computed and supplied by the Part A system.*
83	*LTR COIN AMT 8TH YR*	*The Medicare lifetime reserve amount charged in the year of discharge where the bill spans eight calendar years.*	*Form CMS-1450 (UB-92) form locators 39-41, Value Code 11*
84	*LTR COIN DAYS 9TH YR*	*Medicare lifetime reserve days charged in the year of discharge where the bill spans nine calendar years.*	*Computed and supplied by the Part A system.*
85	*LTR COIN RATE 9TH YR*	*The Medicare lifetime reserve rate charged in the year of discharge where the bill spans nine calendar years.*	*Computed and supplied by the Part A system.*
86	*LTR COIN AMT 9TH YR*	*The Medicare lifetime reserve amount charged in the year of discharge where the bill spans nine calendar years.*	*Form CMS-1450 (UB-92) form locators 39-41, Value Code 11*
87	*LTR COIN DAYS 10TH YR*	*Medicare lifetime reserve days charged in the year of discharge where the bill spans ten calendar years.*	*Computed and supplied by the Part A system.*
88	*LTR COIN RATE*	*The Medicare lifetime*	*Computed and supplied by the*

No.	Field Name	Definition/Use	Source/Value
	10TH YR	*reserve rate charged in the year of discharge where the bill spans ten calendar years.*	*Part A system.*
89	*LTR COIN AMT 10TH YR*	*The Medicare lifetime reserve amount charged in the year of discharge where the bill spans ten calendar years.*	*Form CMS-1450 (UB-92) form locators 39-41, Value Code 11*
90	*LTR COIN DAYS 11TH YR*	*Medicare lifetime reserve days charged in the year of discharge where the bill spans eleven calendar years.*	*Computed and supplied by the Part A system.*
91	*LTR COIN RATE 11TH YR*	*The Medicare lifetime reserve rate charged in the year of discharge where the bill spans eleven calendar years.*	*Computed and supplied by the Part A system.*
92	*LTR COIN AMT 11TH YR*	*The Medicare lifetime reserve amount charged in the year of discharge where the bill spans eleven calendar years.*	*Form CMS-1450 (UB-92) form locators 39-41, Value Code 11*
93	*LTR COIN DAYS 12TH YR*	*Medicare lifetime reserve days charged in the year of discharge where the bill spans twelve calendar years.*	*Computed and supplied by the Part A system.*
94	*LTR COIN RATE 12TH YR*	*The Medicare lifetime reserve rate charged in the year of discharge where the bill spans twelve calendar years.*	*Computed and supplied by the Part A system.*
95	*LTR COIN AMT 12TH YR*	*The Medicare lifetime reserve amount charged in the year of discharge where the bill spans twelve calendar years.*	*Form CMS-1450 (UB-92) form locators 39-41, Value Code 11*
96	*LTR COIN DAYS 13TH YR*	*Medicare lifetime reserve days charged in the year of discharge where the bill spans thirteen calendar years.*	*Computed and supplied by the Part A system.*
97	*LTR COIN RATE 13TH YR*	*The Medicare lifetime reserve rate charged in the year of discharge where the bill spans thirteen calendar years.*	*Computed and supplied by the Part A system.*
98	*LTR COIN AMT 13TH YR*	*The Medicare lifetime reserve amount charged in the year of discharge where the bill spans thirteen calendar years.*	*Form CMS-1450 (UB-92) form locators 39-41, Value Code 11*

No.	Field Name	Definition/Use	Source/Value
99	*LTR COIN DAYS 14TH YR*	*Medicare lifetime reserve days charged in the year of discharge where the bill spans fourteen calendar years.*	*Computed and supplied by the Part A system.*
100	*LTR COIN RATE 14TH YR*	*The Medicare lifetime reserve rate charged in the year of discharge where the bill spans fourteen calendar years.*	*Computed and supplied by the Part A system.*
101	*LTR COIN AMT 14TH YR*	*The Medicare lifetime reserve amount charged in the year of discharge where the bill spans fourteen calendar years.*	*Form CMS-1450 (UB-92) form locators 39-41, Value Code 11*
102	*LTR COIN DAYS 15TH YR*	*Medicare lifetime reserve days charged in the year of discharge where the bill spans fifteen calendar years.*	*Computed and supplied by the Part A system.*
103	*LTR COIN RATE 15TH YR*	*The Medicare lifetime reserve rate charged in the year of discharge where the bill spans fifteen calendar years.*	*Computed and supplied by the Part A system.*
104	*LTR COIN AMT 15TH YR*	*The Medicare lifetime reserve amount charged in the year of discharge where the bill spans fifteen calendar years.*	*Form CMS-1450 (UB-92) form locators 39-41, Value Code 11*
105	TOTAL COIN AMT	The total coinsurance amount chargeable to the beneficiary.	Computed and supplied by the Part A system.
106	FULL DAYS	The inpatient Medicare days occurring in the first 60 days in a single spell of illness.	Computed and supplied by the Part A system.
107	COVERED DAYS	The number of Medicare covered days.	Form CMS-1450 (UB-92) form locator 7
108	FILLER		One value space
109	PPS IND	An indicator that identifies a prospective payment provider.	Supplied by Part A system: X = PPS S = CSS (non-PPS), Spaces = non-PPS
110	DRG AMOUNT	Total prospective payment amount including any outlier payment, as determined by Pricer.	Computed by Pricer and supplied by the Part A system
111	DIRECT GRADUATE MEDICAL EDUCATION	Estimated adjustment for the direct graduate medical education activities (See 42 CFR 413.86.)	Computed and supplied by the Part A system.
112	PASS THRU PER DIEM	Payment amount for those items that are reimbursed	Computed and supplied by the Part A system.

No.	Field Name	Definition/Use	Source/Value
		on a reasonable cost basis.	
113	MED PRIMARY PAYMENT	The Medicare reimbursement amount less applicable deductible and coinsurance.	Computed and supplied by the Part A system.
114	PROVIDER PAYMENT AMOUNT	The Medicare reimbursement amount to be paid to the provider.	Computed and supplied by the Part A system.
115	PATIENT PAYMENT AMT	The Medicare reimbursement amount to be paid to the patient.	Computed and supplied by the Part A system.
116	G-R-H PERCENT (GRAMM-RUDMANN-HOLLINGS)	The applicable percent reduction required by the Gramm-Rudmann-Hollings Act.	Supplied by the Part A system.
117	CHARGES NSDC (CHARGES NOT SUBJECT TO DEDUCTIBLE AND COINSURANCE)	Charge amount not subject to deductible and coinsurance, i.e., reimbursed at 100%.	Computed and supplied by the Part A system.
118	CHARGES SD (CHARGES SUBJECT TO DEDUCTIBLE)	Charge amount subject to the deductible.	Computed and supplied by the Part A system.
119	RESERVED FOR CMS	Space reserved for future enhancements.	One hundred ninety eight value spaces.
120	RESERVED FOR USER	Space reserved for user as necessary.	One-hundred ninety value Spaces

B. Data Elements returned from MSPPAYAI

MSPPAYAI will return the following data elements to MSPPAY. Refer to §50.2.7 for field definitions not reflected below.

NO.	Field Name	Definition/Use	Source/Value
1	RETURN CODE	Numeric code indicating the results from processing the secondary payment computation and savings. Identifies a fully or partially paid bill as well as invalid sending data.	Determined by MSPPAYAI. Valid values "3000" thru "3999" (See §50.2.3 above; also refer to the technical documentation released with the software.

Unless specified otherwise, MSPPAY is the source of all the following fields, possibly modified by MSPPAYAI.

NO.	Field Name	Definition/Use
2	BLOOD DEDUCTION TO CWF	Amount of blood deductible to report to the Common Working File (CWF).
3	CASH DEDUCTION TO CWF	Dollar amount of deductible to report to the Common Working File (CWF).
4	REG COIN DAYS 1ST YR	
5	REG COIN RATE 1ST YR	
6	REG COIN AMT 1ST YR	

NO.	Field Name	Definition/Use
7	REG COIN DAYS 2ND YR	
8	REG COIN RATE 2ND YR	
9	REG COIN AMT 2ND YR	
10	REG COIN DAYS 3RD YR	
11	REG COIN RATE 3RD YR	
12	REG COIN AMT 3RD YR	
13	REG COIN DAYS 4TH YR	
14	REG COIN RATE 4TH YR	
15	REG COIN AMT 4TH YR	
16	REG COIN DAYS 5TH YR	
17	REG COIN RATE 5TH YR	
18	REG COIN AMT 5TH YR	
19	REG COIN DAYS 6TH YR	
20	REG COIN RATE 6TH YR	
21	REG COIN AMT 6TH YR	
22	*REG COIN DAYS 7TH YR*	
23	*REG COIN RATE 7TH YR*	
24	*REG COIN AMT 7TH YR*	
25	*REG COIN DAYS 8TH YR*	
26	*REG COIN RATE 8TH YR*	
27	*REG COIN AMT 8TH YR*	
28	*REG COIN DAYS 9TH YR*	
29	*REG COIN RATE 9TH YR*	
30	*REG COIN AMT 9TH YR*	
31	*REG COIN DAYS 10TH YR*	
32	*REG COIN RATE 10TH YR*	
33	*REG COIN AMT 10TH YR*	
34	*REG COIN DAYS 11TH YR*	
35	*REG COIN RATE 11TH YR*	
36	*REG COIN AMT 11TH YR*	
37	*REG COIN DAYS 12TH YR*	
38	*REG COIN RATE 12TH YR*	
39	*REG COIN AMT 12TH YR*	
40	*REG COIN DAYS 13TH YR*	
41	*REG COIN RATE 13TH YR*	
42	*REG COIN AMT 13TH YR*	
43	*REG COIN DAYS 14TH YR*	
44	*REG COIN RATE 14TH YR*	
45	*REG COIN AMT 14TH YR*	
46	*REG COIN DAYS 15TH YR*	
47	*REG COIN RATE 15TH YR*	
48	*REG COIN AMT 15TH YR*	
49	LTR COIN DAYS 1ST YR	
50	LTR COIN RATE 1ST YR	
51	LTR COIN AMT 1ST YR	
52	LTR COIN DAYS 2ND YR	
53	LTR COIN RATE 2ND YR	
54	LTR COIN AMT 2ND YR	
55	LTR COIN DAYS 3RD YR	
56	LTR COIN RATE 3RD YR	
57	LTR COIN AMT 3RD YR	
NO.	**Field Name**	**Definition/Use**
58	LTR COIN DAYS 4TH YR	
59	LTR COIN RATE 4TH YR	

60	LTR COIN AMT 4TH YR	
61	LTR COIN DAYS 5TH YR	
62	LTR COIN RATE 5TH YR	
63	LTR COIN AMT 5TH YR	
64	LTR COIN DAYS 6TH YR	
65	LTR COIN RATE 6TH YR	
66	LTR COIN AMT 6TH YR	
67	*LTR COIN DAYS 7TH YR*	
68	*LTR COIN RATE 7TH YR*	
69	*LTR COIN AMT 7TH YR*	
70	*LTR COIN DAYS 8TH YR*	
71	*LTR COIN RATE 8TH YR*	
72	*LTR COIN AMT 8TH YR*	
73	*LTR COIN DAYS 9TH YR*	
74	*LTR COIN RATE 9TH YR*	
75	*LTR COIN AMT 9TH YR*	
76	*LTR COIN DAYS 10TH YR*	
77	*LTR COIN RATE 10TH YR*	
78	*LTR COIN AMT 10TH YR*	
79	*LTR COIN DAYS 11TH YR*	
80	*LTR COIN RATE 11TH YR*	
81	*LTR COIN AMT 11TH YR*	
82	*LTR COIN DAYS 12TH YR*	
83	*LTR COIN RATE 12TH YR*	
84	*LTR COIN AMT 12TH YR*	
85	*LTR COIN DAYS 13TH YR*	
86	*LTR COIN RATE 13TH YR*	
87	*LTR COIN AMT 13TH YR*	
88	*LTR COIN DAYS 14TH YR*	
89	*LTR COIN RATE 14TH YR*	
90	*LTR COIN AMT 14TH YR*	
91	*LTR COIN DAYS 15TH YR*	
92	*LTR COIN RATE 15TH YR*	
93	*LTR COIN AMT 15TH YR*	
94	PART A REG COIN DAYS	The total Medicare coinsurance days chargeable to the beneficiary.
95	PART A LTR COIN DAYS	The total Medicare lifetime reserve days chargeable to the beneficiary.
96	PARTA COIN DAYS	The total Medicare coinsurance and lifetime reserve days chargeable to the beneficiary.
97	TOTAL COIN AMT TO CWF	The total coinsurance amount to report to the Common Working File (CWF).
98	FULL DAYS	The number of inpatient Medicare days occurring in the first 60 days in a single spell of illness.
99	UTILIZED DAYS	Days of care that are chargeable to Medicare
100	COST REPORT DAYS	Days credited to the provider's PS&R as Medicare days.
101	MED SECONDARY PAYMENT	Medicare's secondary payment computed by the MSP software.
NO.	**Field Name**	**Definition/Use**
102	PROVIDER PAYMENT AMT	
103	PATIENT PAYMENT AMT	

104	BLOOD DEDUCTION TO CHG	The amount of blood deductible the beneficiary may be charged by the provider.
105	CASH DEDUCTION TO CHG	The dollar amount of deductible the beneficiary may be charged by the provider.
106	TOTAL COIN AMT TO CHG	The total coinsurance amount chargeable to the beneficiary.
107	MSP COVERED DAYS	The number of days covered by the primary payer.
108	G-R-H (GRAMM-RUDMANN-HOLLINGS) SAVINGS REDUCTION	The amount of the MSP savings reduced for Gramm-Rudmann-Hollings.
109	GROSS MEDICARE PAYMENT	The amount Medicare pays excluding deductibles and coinsurance. (For PPS claims, direct graduate medical education and pass-thru amounts are included.)
110	MSP NON-EGHP PYMT SDC	The amount paid by a non-EGHP to be reflected on the PS&R. The primary payer amount designated to lab charges reimbursed at 100%is not reflected in this figure. (This field is only returned for claims with service "thru-dates" prior to 11/13/89.)

NO.	**Field Name**	**Definition/Use**
111	MSP PYMT SDC	The amount excluding "MSP CASH DEDUCTIBLE, MSP BLOOD DEDUCTIBLE, AND MSP TOTAL COINSURANCE AMOUNT" paid by an EGHP or LGHP to be reflected on the PS&R report. This amount, when added to the "MSP CASH DEDUCTIBLE, MSP BLOOD DEDUCTIBLE, and the MSP TOTAL COINSURANCE AMOUNT" reflects the total primary payer amount. The primary payer amount designed to lab charges reimbursed at 100% is not reflected in this figure. (This Field is only returned for claims with service "thru-dates" prior to 11/13/89.)
112	FILLER	Nine Value spaces.
113	PPS CREDIT AMOUNT	The excess of the MSP amount over the DRG amount.
114	SAVINGS MSP EGHP	Amount saved by Medicare when an EGHP has made a payment for a working aged beneficiary (MSP Code 12).
115	SAVINGS MSP ESRD	Amount saved by Medicare when an EGHP has made a payment for an ESRD beneficiary (MSP Code 13).
116	SAVINGS MSP AUTO	Amount saved by Medicare when another insurer has made payment in an automobile/no-fault situation (MSP Code 14).
117	SAVINGS MSP WORK	Amount saved by Medicare when workers'

		compensation payment has been made (MSP Code 15).
118	SAVINGS MSP FEDS	Amount saved by Medicare when PHS or other Federal agency made payment (MSP Code 16).

NO.	Field Name	Definition/Use
119	SAVINGS MSP BL	Amount saved by Medicare when Black Lung payment has been made by the Department of Labor (MSP Code 41).
120	SAVINGS MSP VA	Amount saved by Medicare when payment has been made by the Department of Veteran's Affairs (MSP Code 42).
121	SAVINGS MSP DSAB	Amount saved by Medicare when an LGHP has made a payment for a disabled beneficiary (MSP Code 43).
122	SAVINGS MSP LIAB	Amount saved by Medicare when payment has been made by a liability insurer (MSP Code 47).
123	SAVINGS TOTAL	Total savings to the Medicare program when Medicare is the secondary payer and a primary payer(s) has made some payment. Includes all MSP codes 12 - 16, 41 - 43, and 47.
124	SAVINGS NON-EGHP	Total savings to the Medicare program for all non-EGHP payments for a Medicare beneficiary. Includes MSP codes 14, 15, 16, 41, and 47. (This field is only returned for claims with service "thru-dates" prior to 11/13/89.)
125	SAVINGS EGHP	Total savings to the Medicare program for all EGHP payments for a Medicare beneficiary. Includes MSP codes 12, 13, 42, and 43. (This field is only returned for claims with service "thru-dates" prior to 11/13/89.)
126	MSP COMPUTATION 1	The result of the gross amount payable by Medicare minus the amount paid by the primary payer for covered services.
127	MSP COMPUTATION 2	The result of the gross amount payable by Medicare minus applicable deductible and coinsurance amounts.

NO.	Field Name	Definition/Use
128	MSP COMPUTATION 3	The result of the provider charges (or an amount the provider is obligated to accept as payment in full, if that is less than the charges), minus the amount paid by the primary payer.
129	MSP COMPUTATION 4	The result of the provider charges (or an amount the provider is obligated to accept as payment in full, if that is less than the charges), minus applicable deductible and coinsurance amounts.
130	RESERVED FOR CMS	Space reserved for future enhancements. (200 Value Spaces)

131	RESERVED FOR USER	Space reserved for user as necessary. (153 Value Spaces)