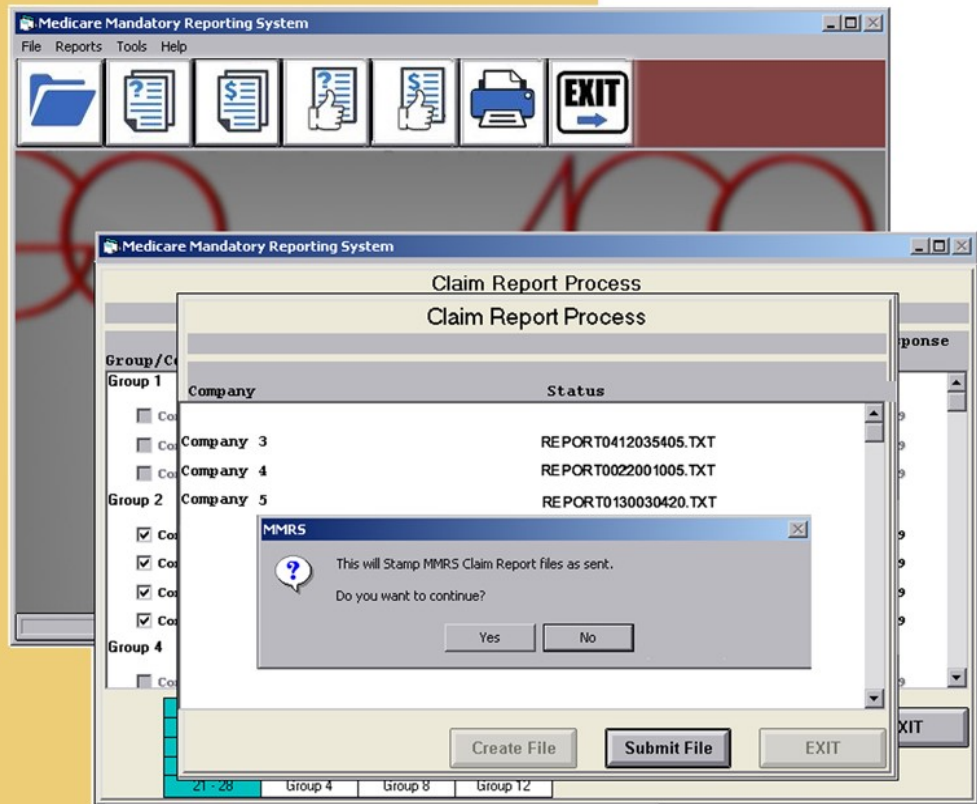


AGO's Medicare Mandatory Reporting System (MMRS)

The AGO Medicare Mandatory Reporting System (MMRS) provides automated compliance with mandatory reporting on Medicare beneficiaries. Section 111 of the Medicare, Medicaid, and SCHIP Extension Act of 2007 ('MMSEA Section 111') added mandatory reporting requirements for Medicare beneficiaries who receive settlements, judgments, awards or other payments from liability insurance (including self-insurance), no-fault insurance, or worker's compensation. The AGO MMRS complies with all requirements as detailed in MMSEA Section 111.

Reporting Components:

- Company Maintenance – allows definition of the Responsible Reporting Entity for which the system is to produce submission files.
- Query File – submits a list of all claims added since the previous filing to verify if claimants qualify for Medicare/Medicaid Services.
- Create Claim Report – generate submission files for applicable claims from AGO's Claims Tracking System on the Web (CTWeb) or a customized routine will import from any 3rd party claims system for MMRS processing.
- Submission Print – generates a user-readable format from a MMRS Submission file. Results can be viewed on screen or printed for review.
- Process Query File – open the response file to access verified beneficiaries that require subsequent report submission to CMS.
- Process Response File – open the response file to verify that there were no submission errors and access return status codes.



System Environment:

- System functions on a Windows platform utilizing SQL, ORACLE, DB2/AS400 or any other ODBC compliant database platform.
- MMRS maintains a separate database for claimant reporting and does not alter the host claims system.

Options:

- The MMRS system is completely integrated with AGO's Claims Tracking System on the Web (CTWeb).
- Custom integration to any 3rd party software system is available.