Field	Name	Size	Start Pos.	End Pos.	Data Type	Description
36	ICDDiagnosis Code 19	7	295	301	Alpha-Numeric	See explanation for Field 18 and 19. Provide if available/applicable.
*37	MSA Amount	11	302	312	Numeric	This field is effective starting April 4, 2025: Medicare Set-Aside (MSA) amount: Dollar amount of the MSA. For WC settlements without an MSA, fill with zeros. **Note: The last two positions reflect cents.** Format with an implied decimal and no formatting symbols such as "$" or ".". For example, an amount of $20,500.55 must be submitted as "00002050055". If there is a structured settlement funding the WCMSA, the MSA Amount must be calculated using the total payout amount. If a settlement provides for the purchase of an annuity, it is the total payout from the annuity. For annuities, base the total amount upon the time period used in calculating the purchase price of the annuity or the minimum payout amount (if there is a minimum payout), whichever calculation results in the larger amount. **Required if Plan Insurance Type (Field 51) = 'E' and TPOC Amount 1 (Field 81) > $0 and TPOC Date is 4/4/2025 or later.**
*38	MSA Period	2	313	314	Numeric	This field is effective starting April 4, 2025: Enter the amount of time in years that the MSA is expected to cover the beneficiary. **Required. If MSA Amount is $0, enter 0s.** If an MSA was part of the settlement, this field must be >$0, and fields *39 through *43 filled as directed.
*39	Lump Sum or Structured/ Annuity Payout Indicator	1	315	315	Alphabetic	This field is effective starting April 4, 2025: Valid values: S = Structured/Annuity L = Lump Sum **Required.** If WCMSA is a combination of Lump Sum and Structured/Annuity, enter S. **If MSA Amount is $0, enter a space. Must not be 0 if MSA Amount > $0.**

Field	Name	Size	Start Pos.	End Pos.	Data Type	Description
*40	Initial Deposit Amount	11	316	326	Numeric	This field is effective starting April 4, 2025: **Note: The last two positions reflect cents.** Specify dollars and cents with an implied decimal and no formatting symbols such as "$" or ".". For example, an amount of $20,500.55 must be submitted as "00002050055". Zero is an allowable value—enter all 0s. When an WCMSA is a Lump Sum and Structured Annuity Funding combination, the Lump Sum amount should be included in the Initial Deposit Amount. **Required. If Lump/Structured Payout Indicator (Field 39) is L or blank, fill with 0s.**
*41	Anniversary (Annual) Deposit Amount	11	327	337	Numeric	This field is effective starting April 4, 2025: **Note: The last two positions reflect cents.** Specify dollars and cents with an implied decimal and no formatting symbols such as "$" or ".". For example, an amount of $20,500.55 must be submitted as "00002050055". **Required. If Lump/Structured Payout Indicator (Field 39) is S, enter an amount > 0. If Lump/Structured Payout Indicator (Field 39) is L or blank, fill with 0s.**
*42	Case Control Number	15	338	352	Alpha-Numeric	This field is effective starting April 4, 2025: Case ID for WMCSAs submitted for voluntary review pre-settlement or for non-CMS approved WCMSAs submitted post-settlement. **If unknown, fill with spaces.**
*43	Professional Administrator EIN	9	353	361	Numeric	This field is effective starting April 4, 2025 (and subsequent fields will be renumbered): EIN of Professional Administrator, if applicable. Case administrator will default to the beneficiary if no EIN is entered in this field, or if the EIN submitted does not match a registered administrator account in the WCMSAP. **If unknown, enter all 0s.**
37	Reserved for Future Use	107	302	408	Alpha-Numeric	Fill with spaces. * As of 4/4/2025, this will be Field 44, will start at position 362, and will end at position 408. All subsequent fields will be renumbered accordingly.