

## TribalNet Bringing Technology & Tribes Together

## New Medicare Card Update: Transition Period Ends December 31, 2019

PRESENTED BY DR. SUSY POSTAL AND MS. MARNI LAND





### Presenter

- Marni Land, Centers for Medicare & Medicaid Services (CMS) Federal Partners Liaison CMS, Office of Information Technology (OIT)
- Susy Postal, DNP, RN-BC, Chief Health Informatics Officer Indian Health Service (IHS), OIT





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- Important Note: This presentation was developed in collaboration with Centers for Medicare & Medicaid Services (CMS).
- All slides are courtesy of CMS from CMS presentations or from CMS Website
   https://www.cms.gov/Medicare/New-Medicare-Card/
   Open-Door-Forums.html
   (with the exception of slides noted prepared by IHS).



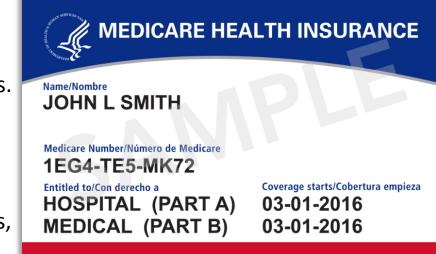
## New Medicare Card - Background

#### The Medicare Access and CHIP Reauthorization Act (MACRA) of 2015

• The legislation mandates the removal of Social Security Numbers (SSN) from all Medicare cards.

#### **New Medicare Card Initiative**

- A fraud prevention initiative to combat identity theft and illegal use of Medicare benefits.
- The Medicare Beneficiary Identifier (MBI) replaces the SSN-based
   Health Insurance Claim Number (HICN) on the new Medicare cards.
- The MBI replaces HICN for Medicare transactions such as billing, processing claims and determining eligibility for services across multiple entities (Example include: Social Security Administration (SSA), Railroad Retirement Board (RRB), States, Medicare providers, and health plans).



## **New Medicare Card**

#### Just 7 weeks away from the end of the transition!

- Starting January 1, 2020, you must submit claims with the Medicare Beneficiary Identifier (MBI). CMS will reject claims submitted with the Health Insurance Claim Number (HICN), with limited exceptions.
- Starting January 1, 2020, you must submit all eligibility transactions with the MBI. CMS will reject all eligibility transactions submitted with the HICN.

Are you ready?



## New Medicare Card Mailing Complete

- We've finished mailing new cards to people with Medicare across all U.S. states and territories.
- Over 61 million beneficiaries got new cards in the mail since April 2018.
  - Includes people new to Medicare and existing beneficiaries.
- All beneficiaries and providers should use MBIs Now!





## Key Points to Reinforce with Beneficiaries

#### If someone with Medicare says they didn't get a new card with a new number, they should:

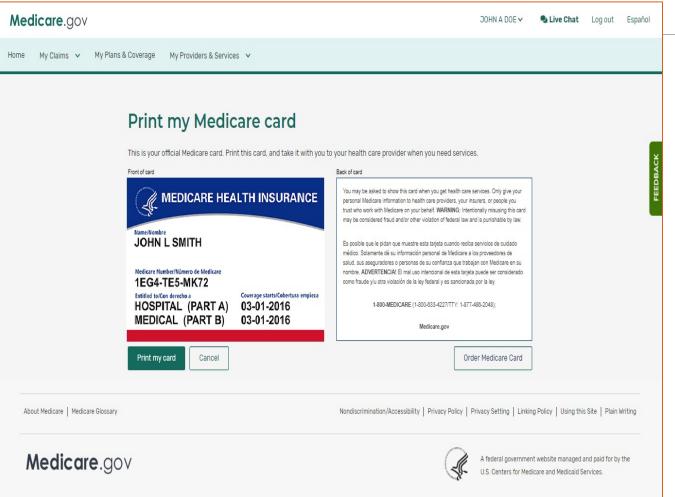
- Sign into MyMedicare.gov to see their Medicare number or print their official card. They must create an account if they don't already have one.
- Call 1-800-MEDICARE (1-800-633-4227) where we can verify their identity, check their address and help them get their new card. There might be something that needs to be corrected, like their mailing address.
- Use their current card to get health care services (until December 31, 2019) **but** remember to bring your card the next time. (<u>Providers</u>: remember to get the MBI from the remittance advice and save it in your system to use the next time you submit a claim and give your patients the Get Your New Medicare Card flyer in <u>English</u> or <u>Spanish</u>.)



## Key Points to Reinforce with Beneficiaries

- Beneficiaries should:
  - Use their new Medicare card
  - Make sure to bring their new card with them when they get health care services –
     Very Important!!
  - Continue to protect their new Medicare number
- CMS will never call beneficiaries uninvited for their Medicare number or other personal information. Beneficiaries who think their number is compromised should call 1-800-MEDICARE.
- MBIs use numbers 0-9 and all uppercase letters **except** for S, L, O, I, B, and Z
  - Don't get confused between "0" and "O" when signing up for or logging into MyMedicare.gov.

## MyMedicare.gov - View or Print new Medicare card



- Log into or sign up for MyMedicare.gov. Accounts are password-protected and secure.
- Beneficiaries can view Medicare numbers/print a card.
- This page is available to view on smaller devices like cell phones.



# Transition Period ALMOST OVER

April 1, 2018 – December 31, 2019



## **Transition Period Milestones**

#### April 1, 2018

All systems & processes able to accept MBI. Mailing new Medicare cards to newly eligible people with Medicare. **BEGIN** 

#### TRANSITION PERIOD

#### **June 2018**

Launch of provider look-up tool

#### Apr 16, 2019

Deadline for issuance of new Medicare cards

#### May 2018

Continue mailing new Medicare cards with MBI to 60M beneficiaries

#### October 2018

Return MBI on remittance advice MBI shared with downstream partners

December 31, 2019

#### END OF TRANSITION PERIOD.

Use the MBI on data exchanges

## Using the New Medicare Number – During Transition

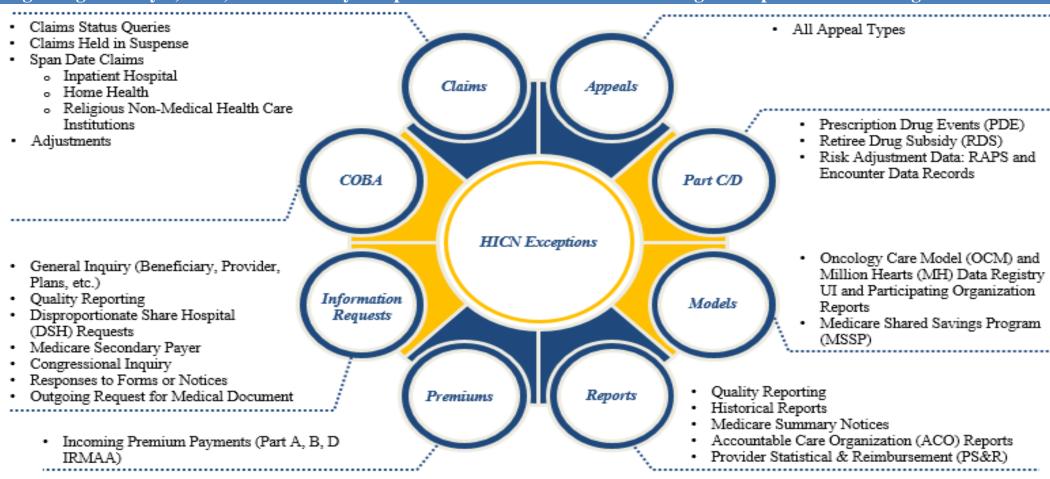
- The transition period continues through December 31, 2019.
- CMS is accepting, using for processing, and returning to stakeholders either the MBI or HICN, whichever is submitted on the claim, during the transition period.
- We encourage all stakeholders who submit or receive transactions with the HICN to start submitting or exchanging the MBI now.
- CMS is actively monitoring the use of HICNs and MBIs to ensure that everyone is ready to use MBIs only by January 1, 2020.

79% of Medicare fee-for-service claims now include the MBI!



## New Medicare Number HICN Exception Usage After the Transition Period

#### Beginning January 1, 2020, CMS will only accept the MBI for external data exchanges except for the following:



Note: CMS, Federal Partners and States will continue to use HICN for internal processing during and after the transition

## New Medicare Number

#### Providers Should Use the MBI Now!

- Providers have 4 ways to get the new MBI:
  - Patient presents the card at time of service
  - Provider gets it through the a secure web portal with the MAC
  - Provider gets it through the remittance advice (through the end of the transition period)
  - Pharmacies get it through the E1 response (through the end of the transition period)
- 79% of Medicare fee-for-service claims now include the MBI, demonstrating that Medicare patients are successfully using their new cards in doctor's offices and other health care facilities.

All beneficiaries and providers should use MBIs as soon as possible!



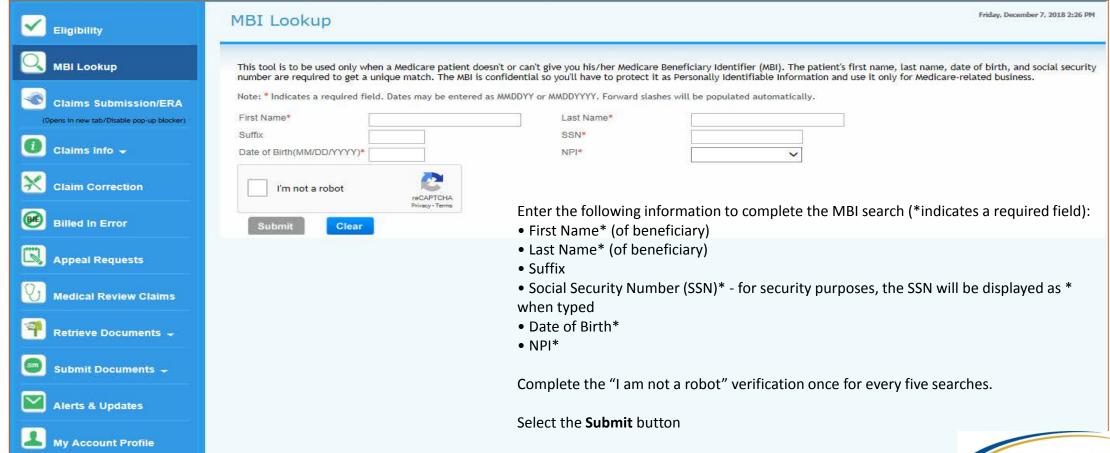
## Using the New Medicare Number - Providers

- Providers/Suppliers can use a MAC portal to look up any beneficiary's MBI.
- Providers must authenticate through their MAC portal with a valid user ID, password and NPI to look up a beneficiary's MBI via the Provider Lookup Tool.
- Providers must have the following beneficiary information to look-up MBIs:
  - Patient SSN, Last Name, First Name and Date of Birth

(Reminder - An individual's HICN may not always be their own SSN if benefits are tied to a spouse. Thus, using the numerical part of a HICN will not always return a response in the MBI look-up tools. Instead, use the individual's specific SSN.)

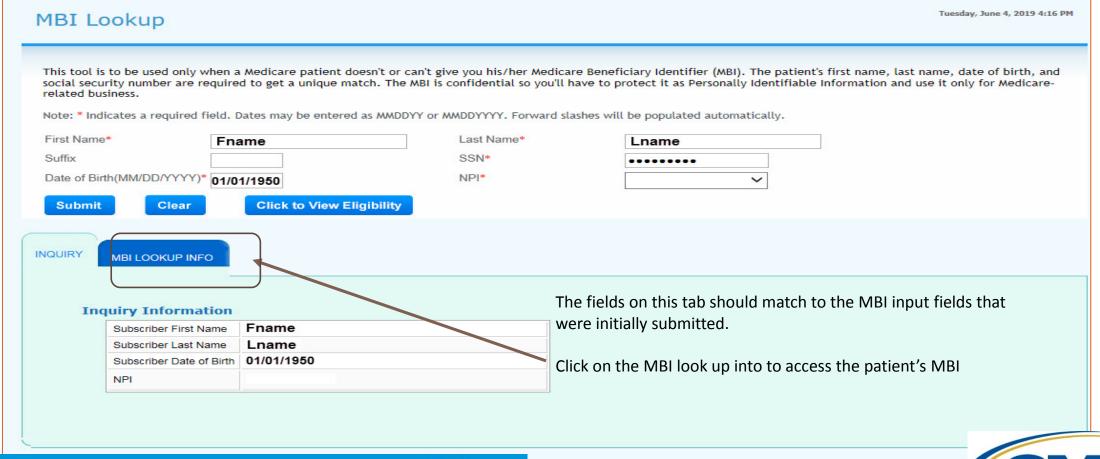
• Additional information can be found at: <a href="https://www.cms.gov/Medicare/New-Medicare-Card/Providers/Providers-and-office-managers.html">https://www.cms.gov/Medicare/New-Medicare-Card/Providers/Providers-and-office-managers.html</a> (providers can also reference the portal instructions sent in September 2017).

## Provider Look-Up Tool - MAC Portal Example





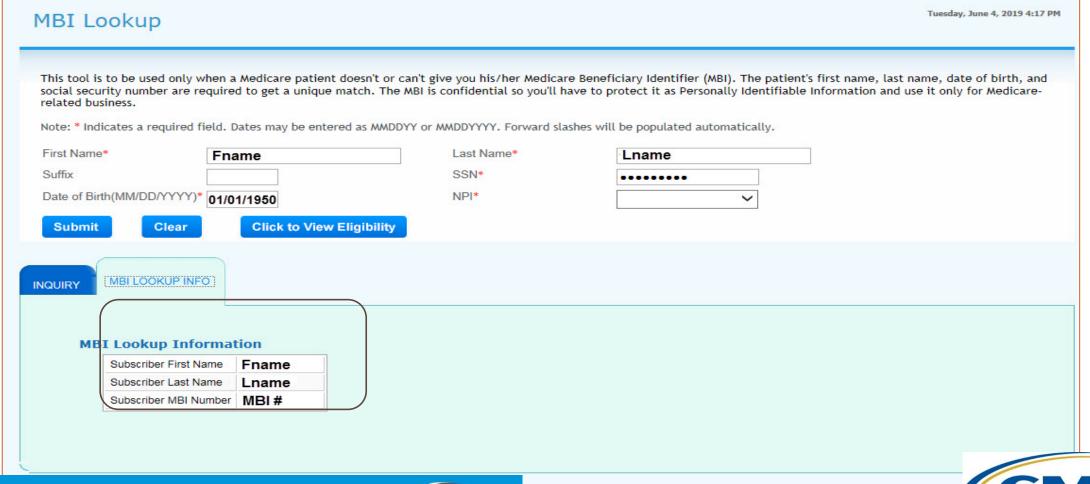
## Provider Look-Up Tool - MAC Portal Example





OFFICE OF INFORMATION TECHNOLOGY

## Provider Look-Up Tool - MAC Portal Example





OFFICE OF INFORMATION TECHNOLOGY

## Using the New Medicare Number - Providers

- When a provider checks a beneficiary's eligibility, the CMS HIPAA Eligibility Transaction System (HETS) returns a message on the response that says, "CMS mailed a Medicare card with a new Medicare Beneficiary Identifier (MBI) to this beneficiary. Medicare providers, please get the new MBI from your patient and save it in your system(s)."
- Through the end of the transition period, when a provider submits a **valid and active** HICN on Medicare fee-for-service claims, CMS will return **both the HICN and the MBI** on the remittance advice.
- Providers have resources when they talk to people with Medicare about the new Medicare cards: <a href="https://www.cms.gov/Medicare/New-Medicare-Card/Outreach-and-Education/Products-to-share-with-beneficiaries.html">https://www.cms.gov/Medicare/New-Medicare-Card/Outreach-and-Education/Products-to-share-with-beneficiaries.html</a>



## Using the New Medicare Number – Plans/Pharmacies

#### **Plans**

- All Medicare Advantage and Prescription Drug Plans received a HICN to MBI crosswalk file prior to the start of the transition period (April 1, 2018).
- The MARx User Interface (UI) is now showing both the HICN and the MBI during the transition, but only the MBI when the transition's over.
- Medicare Advantage and Prescription Drug (Part D) Plans may submit either the Health Insurance Claim Number (HICN) or the Medicare Beneficiary Identifier (MBI) both during and after the transition period for Prescription Drug Event (PDE) and Risk Adjustment Records (i.e., RAPS and Encounter Data).
- CMS has provided information regarding the systems changes via the Health Plan Management System (HPMS) memos that have been released for the systems impacted.
- For beneficiaries enrolled in Medicare Advantage Plans, they should use their new card to enroll in a Medicare Advantage or Prescription Drug Plan.
- All Medicare beneficiaries who are enrolled in a Medicare Advantage and/or a Prescription Drug Plan will still receive an insurance card from their Plan that they must continue to use when obtaining services while enrolled in the Plan.

#### **E1 Transactions for Pharmacies**

- Both the Part D and A/B E1 transactions will return the MBI.
- Pharmacies must submit the MBI after the end of the transition period.



### Using the New Medicare Number – Other Stakeholders

#### **Accountable Care Organizations (ACOs)**

- ACOs get MBI information for their assigned Medicare beneficiary populations.
- CMS includes Both HICNs and MBIs in the Claims and Claims Line Feed Files (CCLFs) until December 2019.

#### **Crossover Claims Processing**

- During the transition period, CMS is processing and transmitting Medicare crossover claims using either (HICN) or (MBI).
- After the transition period, CMS will continue to transmit Medicare crossover claims with either the HICN or MBI based upon what identifier was included on the incoming claim. This will be a common occurrence for adjustment claims where the original claim contained a HICN.

#### **Medicaid Agencies – Dual Eligible Medicare and Medicaid beneficiaries**

- State Medicaid Agencies get both HICNs and MBIs in their system exchanges with CMS.
  - State Third Party Buy-In Dual Eligible beneficiaries will continue to use HICN now and post transition.



## Using the New Medicare Number – Other Stakeholders

#### **Private Payers**

- For non-Medicare business, private payers won't have to use the MBI.
- For Medicare, we'll continue to use supplemental insurer's unique numbers to identify customers, but after the transition period, supplemental insurers must use the MBI for any Medicare transactions where they would have used the HICN.

#### **Third Party Group Payers**

- Third Party Group (TPG) Payers systems accept either the MBI or the HICN throughout the transition period.
  - o However, after the transition period—as of January 1, 2020, TPG Payers must use the MBI for any Medicare transactions where they would have used the HICN.



## Railroad Retirement Board Beneficiaries

- RRB mailed cards to their beneficiaries with the RRB logo, but you can't tell from looking at the MBI if beneficiaries are eligible for Medicare because they're railroad retirees.
- We return a message on the HETS eligibility transaction response to alert the provider it's an RRB patient. The message says, "Railroad Retirement Medicare Beneficiary."
- Medicare Providers should have already programmed their systems to identify RRB beneficiaries so they know to send those claims to the Specialty Medicare Administrative Contractor (SMAC).



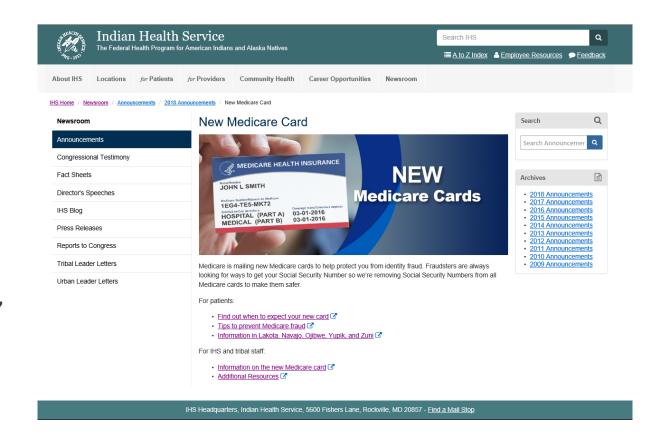
# Spotlight On Indian Health Services



## **IHS Communication**



- Website Banner: www.IHS.gov
- Social Media
  - Facebook: IHS Home page
  - Twitter
  - ADM Weahkee's Week in Review
- Outreach and Education
  - Presentations
  - RPMS Training (application update)
- Office of Resource Access and Partnership (ORAP),
   Division of Business Office Enhancement (DBOE)
   Outreach includes:
  - Developed Business Office Memo
  - Developed Business Office Resource Guide







#### A few examples of outreach:

#### Calendar Year 2017

#### August

- IHS Partnerships Conference: August 22 & 23
- National Indian Health Board (NIHB) Tribal Technical Advisory Group (TTAG): August 23

#### September

- Outreach to IHS, Tribal and Urban Partners
- Information System Advisory Council: September 19
- NIHB National Tribal Health Conference: September 25

#### October

- IHS National Business Office Committee Meeting: October 25
   November
- NIHB TTAG: November 1

#### December

EHR for Health Information Management Training: December 12

#### Calendar Year 2018

#### February

- New Medicare Card posted on IHS.gov website
- NIHB TTAG: February 21
- Long Term Service and Support Technical Assistance for AI/AN February 28

#### March

- General Staff Meeting: March 1
- ISAC: March 14
- Alaska Tribal Health Pre-Negotiations: March 20

#### April

- CMS Open Forum: April 5
- Purchased/ Referred Care Officers Meeting: April 24

#### May

- Tribal Health Revenue Improvement Conference: May 1
- Nashville Area: May 15
- Business Office Memo and Resource Guide Distributed to IHS Area Offices

#### Calendar Year 2019

Utilized CMS Outreach and sent to list servs

# Phase I: IHS Preparation April 1, 2018 Go Live

- IHS addressed impacted applications:
  - o Resource and Patient Management System (RPMS)
  - o National Patient Information Reporting System (NPIRS) National Data Warehouse
- OIT Project team formed
  - Held weekly meeting
  - Developed Project plan
  - Addressed communication
  - Addressed data flow of information
  - o Addressed enhancement needs to accept MBI number before April 1, 2018
  - o Proactive planning for future initiatives (Phase II)



## Phase I: Impacted Applications

Released the following updates on March 29, 2018 (FY18 Q2 release):

- Third Party Billing (ABM) v2.6 p26
- Point of Sale (ABSP) v1.0 p50
- Contract Health Management System (ACHS) v3.1 p27
- Patient Registration (AG) v7.1 p13
- IHS Dictionaries (Patient) + IHS PCC Suite (AUPN) v99.1 p26
- Accounts Receivable (BAR) 1.8 p27
- Practice Management Suite (BPRM) v3.0 p6
- Note: Information is accurate pending there are no changes from CMS



## Phase I: Impacted Applications

#### High Level Schedule: Completed

- Alpha -2/5/2018 2/16/2018
- Beta  $-\frac{2}{20}/2018 \frac{3}{19}/2018$
- National Release 3/29/2018
- Milestone: Go live April 1, 2018 Completed
- Training Sessions (1 hour classes): Completed
- Addressed all impacted applications First class was recorded.
- Dates
  - 3/27/18
  - 4/6/18
  - 4/13/18



## Phase II: Impacted Applications

#### Phase II Completed October 2018

Non-critical enhancements to display the most current Medicare/Railroad Retirement number: HICN or MBI.

- IHS Dictionaries (Patient) + IHS PCC Suite (AUPN) v99.1 p27
- Patient Registration (AG) v7.1 p14
- Referred Care Info System RCIS (BMC) v4.0 p13: Released on 6/13/2018
- IHS PCC Suite (BJPC) v2.0 p21
- Health Summary Components (BHS) v1.0 p15
- Text Integration Utilities (TIU) v1.0 p1020
- Immunization Data Exchange (BYIM) v2.0 p9
- Data Warehouse Export System (BDW) v1.0 p5
- Laboratory (LR) v5.2 p1042
- Contract Health Services/Mgmt Info System (ACHS) v3.1 p28: Fixes from Phase 1 release only, if necessary.
- Pharmacy Point of Sale (ABSP) v1.0 p51: Fixes from Phase 1 release only, if necessary.



## 2019 IHS Updates



## **IHS Business Office Implementation**

- IHS Areas have been conducting outreach to patients including at patient registration during check in, through mail outs, and with Patient Benefits Coordinators to get them to bring in their new Medicare cards to their IHS clinic or hospital so that their MBI can be entered into their electronic health record.
- IHS Areas have also been able to use portals such as Novitas as well as remittance advices to obtain the MBIs.
- IHS Areas report that they are on track to meet the end of the year deadline.





## **Final Thoughts**

- Thank you for participating in this discussion today. There's more information about the New Medicare Card on our websites:
  - For stakeholder/operational information go to: <a href="https://www.cms.gov/newcard">https://www.cms.gov/newcard</a>
  - For beneficiary focused information go to: <a href="https://www.medicare.gov/forms-help-resources/your-medicare-card">https://www.medicare.gov/forms-help-resources/your-medicare-card</a>
- For resources to use when you talk to people with Medicare about the new Medicare cards: <a href="https://www.cms.gov/Medicare/New-Medicare-Card/Partners-and-Employers/Partners-and-employers.html">https://www.cms.gov/Medicare/New-Medicare-Card/Partners-and-Employers/Partners-and-employers.html</a>
- Please submit any additional comments or questions to the New Medicare Card team mailbox: NewMedicareCardSSNRemoval@cms.hhs.gov



## Thank you for attending!

For more info contact

CMS= Marni.land@cms.hhs.gov

IHS= Susy.Postal@ihs.gov

