New Medicare Cards: What you need to know

March 29, 2018
Our Client Focus

The combination of Navicure and ZirMed uniquely positions Waystar to simplify and unify the healthcare revenue cycle with innovative technology that allows clients to collect more with less cost and less stress, so they can focus on their goals, patients, and communities.
Learning Objectives

- Background and overview of the new Medicare card program
- Characteristics of the New Medicare Beneficiary Identifier (MBI)
- Transition period and post transition exceptions
- What providers can do now to prepare
- Q&A
The Health Insurance Claim Number (HICN) is a Medicare beneficiary’s identification number, used for processing claims and for determining eligibility for services across multiple entities (e.g., Social Security Administration (SSA), Railroad Retirement Board (RRB), States, Medicare providers, and health plans).

The Medicare Access and CHIP Reauthorization Act (MACRA) of 2015 mandates the removal of the Social Security Number (SSN)-based HICN from Medicare cards to address current risk of beneficiary medical identity theft.

The legislation requires that CMS mail out new Medicare cards with a new Medicare Beneficiary Identifier (MBI) by April 2019.
Program Goals

Primary Operational Goal: To decrease Medicare beneficiary vulnerability to identity theft by removing the SSN-based number from the Medicare identification cards and replace with a new unique Medicare Number.

In achieving this goal, the Centers for Medicare & Medicaid Services (CMS) seeks to:

- Minimize burdens for beneficiaries
- Minimize burdens for providers
- Minimize disruption to Medicare operations
- Provide a solution to business partners that allows usage of the Health Insurance Claim Number (HICN) and/or new Medicare Number for business critical data exchanges
- Manage the cost, scope, and schedule for the project
Medicare System Remediation

- Along with its partners, CMS will address complex systems changes for over 75 systems, conduct extensive outreach and education activities and analyze the many changes that will be needed to systems and business processes.

- Affected stakeholders include:
  - Federal partners, States, Beneficiaries, Providers, and Plans
  - Other stakeholders, such as billing agencies, advocacy groups, data warehouses, etc.
Implementation of New Cards

- Medicare Cards have been redesigned
- The gender and signature line will be removed from the new Medicare cards
- CMS will generate new Medicare Beneficiary Identifiers (MBI’s) for all beneficiaries (active, deceased, or archived) and generate a unique MBI for each new Medicare beneficiary

No earlier than April 2018, CMS will start mailing new Medicare cards with MBIs to people with Medicare.
Implementation of New Cards

- The Railroad Retirement Board will issue their new cards to RRB Beneficiaries.

- Railroad Retirement Board is listed at the bottom of the card.

- Visit the link below to find out more: https://www.rrb.gov/benefits/medicare/NewMedicareCardsAreComing
## Mailing Strategy

<table>
<thead>
<tr>
<th>Wave</th>
<th>States Included</th>
<th>Card Mailing</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, West Virginia</td>
<td>April – June 2018</td>
</tr>
<tr>
<td>2</td>
<td>Alaska, American Samoa, California, Guam, Hawaii, Northern Mariana Islands, Oregon</td>
<td>April – June 2018</td>
</tr>
<tr>
<td>3</td>
<td>Arkansas, Illinois, Indiana, Iowa, Kansas, Minnesota, Nebraska, North Dakota, Oklahoma, South Dakota, Wisconsin</td>
<td>After June 2018</td>
</tr>
<tr>
<td>4</td>
<td>Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Rhode Island, Vermont</td>
<td>After June 2018</td>
</tr>
<tr>
<td>5</td>
<td>Alabama, Florida, Georgia, North Carolina, South Carolina</td>
<td>After June 2018</td>
</tr>
<tr>
<td>6</td>
<td>Arizona, Colorado, Idaho, Montana, Nevada, New Mexico, Texas, Utah, Washington, Wyoming</td>
<td>After June 2018</td>
</tr>
<tr>
<td>7</td>
<td>Kentucky, Louisiana, Michigan, Mississippi, Missouri, Ohio, Puerto Rico, Tennessee, Virgin Islands</td>
<td>After June 2018</td>
</tr>
</tbody>
</table>

The Medicare Beneficiary Identifier (MBI) will have the following characteristics:

- The same number of characters as the current HICN (11), but will be visibly distinguishable from the HICN
- Contain uppercase alphabetic and numeric characters throughout the 11-digit identifier
- **Occupy the same field as the HICN on transactions**
- Be unique to each beneficiary (e.g., husband and wife will have their own MBI)
- Be easy to read and limit the possibility of letters being interpreted as numbers (e.g., alphabetic characters are upper case only and will exclude S, L, O, I, B, Z)
- Not contain any embedded intelligence or special characters
- Not contain inappropriate combinations of numbers or strings that may be offensive

*CMS anticipates that the MBI will not be changed for an individual unless the MBI is compromised or other limited circumstances still undergoing review*
**HICN and MBI Number**

**Health Insurance Claim Number (HICN)**
- Primary Beneficiary Account Holder Social Security Number (SSN) plus Beneficiary Identification Code (BIC)
- 9-byte SSN plus 1 or 2-byte BIC
- Key positions 1-9 are numeric

**Medicare Beneficiary Identifier (MBI)**
- New Non-Intelligent Unique Identifier
- 11 bytes
- Key positions 2, 5, 8, and 9 will always be alphabetic

<table>
<thead>
<tr>
<th>KEY</th>
<th>EXAMPLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSA HICN</td>
<td>123-45-6789-A1</td>
</tr>
<tr>
<td>MBI</td>
<td>1EG4-TE5-MK73</td>
</tr>
</tbody>
</table>

*Note: Identifiers are fictitious and dashes for display purposes only; they are not stored in the database nor used in file formats*
MBI Generation and Transition Period

- Jan 2018: Activate MBI Generator and Translation Services
- Apr 2018: Transition Period Begins
- Apr 2018 – Dec 2019: Accept/Process Both HICN and MBI Transactions
- Jan 2020: HICNs no longer exchanged with Beneficiaries, Providers, Plans, and other third parties
  *Limited Exceptions
- Apr 2018 – Apr 2019: Conduct Phased Card Issuance to Beneficiaries

TRANSITION PERIOD
New Medicare Card – Transition Period

The transition period will run from **April 2018 through December 31, 2019**

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**CMS system and process updates will be ready to accept and return the MBI on April 1, 2018**

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All stakeholders who submit or receive transactions containing the HICN must modify their processes and systems to be ready to submit or exchange the MBI by April 1, 2018.

- Stakeholders may submit **either** the MBI or HICN **during the transition period**

- CMS will accept, use for processing, and return to stakeholders either the MBI or HICN, whichever is submitted on the claim, **during the transition period**

- CMS will actively monitor use of HICNs and MBIs during the transition period to ensure that everyone is ready to use MBIs only by January 1, 2020
**Medicaid and supplemental insurers**
CMS will give State Medicaid Agencies and supplemental insurers the MBIs for Medicaid-eligible people who also have Medicare before they mail the new Medicare cards. During the transition period, we’ll process and transmit Medicare crossover claims with either the HICN or MBI.

**Private payers**
For non-Medicare business, private payers won’t have to use the MBI. 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.

**End-to-end testing by CMS**
CMS will not be conducting any external testing for the new MBI. The extended transitional period to allow both the old HICN and new MBI has a primary operational goal to minimize burdens for beneficiaries and providers and minimize disruption of Medicare operations.
During the transition period, use the MBI or the HICN to check Medicare eligibility. Once the transition period ends you must use the MBI to check eligibility.

Options to check eligibility verification include:

- EDI – Check with your EDI vendor
- MACS Online Web portal
- CMS Common Working File
Beginning in April 2018, through the end of the transition period, if you submit a HICN on the 270 eligibility transaction request, CMS will tell you in the message text field on the 271 response they have mailed a new Medicare card to each individual with fee-for-service Medicare. The message text field is located in the:

271 Loop 2110C, Segment MSG

The message will say, "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)."

For Railroad Retirement Board beneficiaries. The message will say, "Railroad Retirement Medicare Beneficiary.” Medicare providers should use this information to know when to send claims to a Specialty Medicare Administrative Contractor (SMAC)
If your Medicare beneficiaries don’t want to give you their SSN, they can log into https://www.mymedicare.gov to get their MBI.

Your Medicare beneficiaries with RRB benefits can ask for a replacement card through the RRB SMAC Beneficiary Contact Center at 1.800.833.4455, log into https://www.rrb.gov, or call the RRB office at 1.877.772.5772

If you don’t already have access to your MAC's provider portal, sign up so you can use the provider MBI look-up tool starting in June 2018. Your office/facility staff might want to coordinate with your billing/administrative staff, who may already have portal access. Contact your MAC to learn more.
During the transition period, the same beneficiary that was submitted on the outgoing transaction will be returned on the incoming transaction.

Beginning in October 2018, through the transition period, the MBI will also be returned on the remittance advice in the same place you get the “changed HICN”, “Corrected Patient/Insured Name, Identification Code” field, when you submit a claim using a patient’s valid and active HICN.

Medicare Remit Easy Print (MREP) and PC Print software will also be updated beginning in October 2018 to return both the submitted Medicare ID and the new MBI.

- The first MID field will show the Medicare ID submitted on the claim
- The second MID field will show the Medicare Beneficiary Identifier (MBI) when a provider submits a valid and active HICN on a claim

**Example MREP:**

```
PERF | PROV | SERV DATE | POS | NOS | PROC | MODS | BILLED | ALLOWED | DEDUCT | COINS | GREF
-----|------|-----------|-----|-----|------|------|--------|---------|--------|-------|-------
NAME | SMITH, JOHN L | MID | 000000000A | ACNT | 0000000 | ICN | YYJJBBBS000
      |       | MBI | 1EG4TB5MK72 |      |        |     |        |         |        |       |       
      | 111111111 | 0919 | 091917 | 12 | 100.0 | J7512 | KX   | 18.33  | 0.90   | 0.00  | 0.18  |
      | 111111111 | 0919 | 091917 | 12 | 1.0 | 04512 |      | 16.00  | 16.00  | 0.00  | 3.20  |
      | 111111111 | 0919 | 091917 | 12 | 25.0 | J7502 | KX   | 522.69 | 69.23  | 0.00  | 13.65 |
```
Beneficiaries, providers, and plans will no longer use the HICN for internal and most external purposes.

However, once the transition period is over, you’ll still be able to use the HICN in these situations:

**Medicare plan exceptions:**

**Appeals** – You can use either the HICN or the MBI for claims appeals and related forms

**Adjustments** – You can use the HICN indefinitely for some systems (Drug Data Processing, Risk Adjustment Processing, and Encounter Data) and for all records, not just adjustments

**Reports** – We will use the HICN on these reports until further notice:

- Incoming to us (quality reporting, Disproportionate Share Hospital data requests, etc.)
- Outgoing from us (Provider Statistical & Reimbursement Report, Accountable Care Organization reports, etc.)
Use the MBI as soon as your patients get their new cards. The effective date of the new cards is the date beneficiaries are eligible for Medicare.

Beginning January 1, 2020, you can only use the new MBI, with a few exceptions.
CMS Implementation Milestones

**2016-2017**

- **March 2016** – Launch Phase I New Medicare Card Web Content on cms.gov
- **March 2016 to August 2016** – Conduct listening Sessions with External Stakeholders
- **August 2016** – Launch Phase II New Medicare Card Web Content on cms.gov
- **September 2016** – MBI Generator in Testing Environment
- **May 2017** – MBI Development Complete

- **September 2017** – Medicare & You Handbook mailed with information about New Medicare Card, beginning robust education and outreach to people with Medicare
- **September 2017** – Give providers tools to reach their patients about the new card

**2018-2020**

- **April 2018** – All systems & processes able to accept MBI
- **April 2018** – Begin mailing new Medicare cards with MBI to 60M beneficiaries
- **April 2018** – Begin mailing new Medicare cards with MBI to 60M beneficiaries
- **April 2018** – Begin mailing new Medicare cards with MBI to 60M beneficiaries
- **May 2018** – MBI Development Complete
- **October 2018** – Return MBI on remittance advice
- **April 16, 2019** – Deadline for issuance of new Medicare cards
- **January 2020** – End of Transition Period: Use the MBI on data exchanges
What should providers do now to prepare?
Confirm System Readiness

Work with your stakeholders such as billing system vendors, clearinghouses and outsourced third party billing services to identify if the system will accept and process both the old HICN and new MBI starting in April 2018 through the transition period.

Consider the following questions:

Who do you exchange the HICN with?

What transactions do you use the HICN on?

Where do you store the HICN?
Confirm System Readiness

- If using a vendor to connect with Medicare for eligibility verification check to make sure the new message field will display in your system.
- If using a vendor to process the electronic remittance advice check to make sure the corrected patient information will process correctly prior to October 2018.

If your organization is using a manual process to check eligibility or manually process remittance advices consider technology solutions to automate those manual processes.
Training

1. Ensure staff is prepared to answer questions from patients regarding the new MBI and process and procedures are updated to start “asking for a new Medicare card” starting in April 2018.

2. Specialties that do not see patients need to make sure they are asking their referring providers if the patient has a new Medicare card starting April 1, 2018.

3. Recurring services such as skilled nursing, PT and hospice should work with beneficiaries and caregivers to identify if the patient has a new card starting April 1, 2018.

4. Verify patient addresses. If the address you have on file is different than the address you get in electronic eligibility transaction responses, encourage your patients to correct their address in Medicare's records at SSA using ssa.gov/myaccount (this may require coordination between your billing and office staff).
Resources to help you communicate with people with Medicare are available on the CMS website [https://www.cms.gov/newcard](https://www.cms.gov/newcard) to print and/or order

### Outreach and Education

**A Flyer to Distribute**

You’re getting a new Medicare card!

<table>
<thead>
<tr>
<th>Current Medicare Card</th>
<th>New Medicare Card</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Name: John Smith</td>
<td>- Name: John Smith</td>
</tr>
<tr>
<td>- Beneficiary ID: 1234567890</td>
<td>- Beneficiary ID: 1234567890</td>
</tr>
</tbody>
</table>

**A Full Timeline for Your Records**

- **2017**
  - March 2017: Medicare will mail new Medicare cards between April 2018 – April 2019.
  - April 2017: Card availability will increase.

- **2018**
  - January 2018: New Medicare cards will be mailed to all beneficiaries.
  - April 2018: New Medicare cards will be mailed to all beneficiaries.

- **2019**
  - January 2019: New Medicare cards will be mailed to all beneficiaries.
  - April 2019: New Medicare cards will be mailed to all beneficiaries.

- **2020**
  - January 2020: New Medicare cards will be mailed to all beneficiaries.
  - April 2020: New Medicare cards will be mailed to all beneficiaries.

**Tear-offs for Patients**

- **You're Getting a New Medicare Card!**
  - Medicare will mail new Medicare cards between April 2018 – April 2019.
  - Your card will have a new Medicare Number instead of a Social Security Number.
  - Make sure your mailing address is up to date so you get your new card.
  - Contact Social Security at 1-800-772-1213 to correct your mailing address.
  - Visit [Medicare.gov](https://www.medicare.gov) for the latest updates.

**A Poster for Providers’ Offices**

- **New Card! New Number!**
  - Mailing in 2018

**Conference Cards for Beneficiaries**

- **NEW MEDICARE CARDS!**
  - Medicare will mail new Medicare cards between April 2018 – April 2019.
  - To help protect your identity, your new card will have a unique Medicare Number instead of your Social Security Number. The new card won’t change your coverage or benefits. Here’s what you need to know:
    - Your card is protected. If someone gets it, they can’t use it to get your benefits.
    - If you lose, damage, or misplace your card, you may be able to replace it for free. Contact Medicare at 1-800-772-1213. If the recipient happens to be calling from the United States or one of its territories, they can dial 1-800-772-1213 to request a replacement Medicare card.
  - Medicare will never call you uninvited and ask for your personal information. Know someone who might be targeted? Encourage them to report it at [Medicare.gov](https://www.medicare.gov) or call 1-800-772-1213.
  - You’ll get more information from Medicare when your new card is mailed.

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Key Points to Reinforce with Patients

- Understand that mailing everyone a new card will take some time. Your card might arrive at a different time than your friend’s or neighbor’s.

- Make sure your mailing address is up-to-date. If your address needs to be corrected, contact Social Security at ssa.gov/myaccount or 1-800-772-1213. TTY: 1-800-325-0778.

- Beware of anyone who contacts you about your new Medicare card. We will never ask you to give us personal or private information to get your new Medicare number and card.
Provider Resources for Help

- Provider Ombudsman for the New Medicare Card
  - Dr. Eugene Freund
  - NMCProviderQuestions@cms.hhs.gov

- Serves as a CMS resource for the provider community
- Will ensure that CMS hears and understands any implementation problems experienced by clinicians, hospitals, and suppliers
Providers-Key Points to Know

- Providers need to be ready **NOW** (systems and business processes)

- There will be a 21-month transition period from April 1, 2018 – December 31, 2019

- Providers will have 3 ways to get the new MBI:
  1. Patient presents the card at time of service
  2. Provider receives it through the remittance advice
  3. Provider obtains it through the a secure web portal with the MAC

- Providers have resources you can use when you talk to people with Medicare about the new Medicare cards: [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)
Stay Connected

- Subscribe to CMS weekly MLN newsletter for upcoming educational events.

- Check the New Medicare Card website for other information:
  - https://www.cms.gov/newcard

- Submit any additional questions or comments to the New Medicare Card team: NewMedicareCardSSNRemoval@cms.hhs.gov
Q&A and Resources

For more information, contact:

Visit: www.zirmed.com

Call: (888) 803-8732

Email: information@zirmed.com