

Affected Programs: BadgerCare Plus, Medicaid, SeniorCare, Wisconsin AIDS Drug Assistance Program, Wisconsin Chronic Disease Program

To: All Providers, HMOs and Other Managed Care Programs

New Medicare Beneficiary Identifier

Overview

In compliance with federal mandate, per the Medicare Access and CHIP Reauthorization Act (MACRA) of 2015, ForwardHealth will be replacing the beneficiary's ID numbers, called the Health Insurance Claim Number (HICN) and the Railroad Retirement Board (RRB), with a new Medicare Beneficiary Identifier (MBI) on transactions. Currently, Medicare uses the Social Security Administration's (SSA) beneficiary ID numbers for processing claims and encounters and determining eligibility for services with other entities, including with ForwardHealth.

All entities that submit or receive transactions containing the HICN or the RRB number are required to be ready to submit or exchange the new MBI on April 1, 2018. The federal Centers for Medicare and Medicaid Services (CMS) has mandated that the use of HICN and RRB numbers be discontinued by January 1, 2020. Providers should refer to the CMS website for other important compliance dates.

Member ForwardHealth ID cards will not be changing. Furthermore, member enrollment and benefits under ForwardHealth programs are not changing because of the new Medicare cards or the new Medicare numbers.

MBI

The MBI is a randomly assigned, "non-intelligent" identifier that is not Social Security number (SSN)-based, to decrease the potential for identity theft. Like the HICN and RRB

number, the MBI contains 11 characters and is alpha-numeric. Digits in the second, fifth, eighth, and ninth positions of the MBI will always be alphabetic.

CMS Outreach and Resources

CMS has been conducting outreach to providers and members for general awareness of the upcoming changes and to assist providers in their preparation for the new MBI. Providers may refer to the Centers for Medicare and Medicaid Services Information about New Medicare Card link on the Provider and Managed Care Organization home pages of the ForwardHealth Portal, which links directly to the CMS website. Additionally, Medicare information will be available for members via the New Medicare Cards Are Coming link in the Members quick links box on the Portal home page.

New Medicare Cards

Beginning April 1, 2018, through April 1, 2019, CMS will be issuing new Medicare cards with MBIs to individuals with Medicare. The new Medicare cards will be mailed in phases; therefore, there will be a period of time when some members will have the new Medicare cards with MBIs while others will not. During this time, providers should continue to accept the current Medicare cards as well as accept the new cards.

Per CMS guidance, providers are not to disclose new MBIs to members to avoid confusion or expose the member to possible fraud. Providers are reminded that Medicare information that is available to providers from the Portal or

related through Wisconsin's Enrollment Verification System (EVS) is intended solely to be used for the coordination of benefits with Wisconsin Medicaid.

Individuals Newly Enrolled in Medicare

Beginning April 1, 2018, individuals who are newly enrolled in Medicare will be assigned an MBI that will appear on their issued Medicare card; however, Medicare will continue to receive the HICN for newly enrolled individuals from SSA for other internal processing purposes. The HICN will not be communicated or issued directly to these individuals, but it will be available to providers for processing transactions during the transition from the HICN to the MBI.

Transactions with ForwardHealth

ForwardHealth is currently preparing its system to accept the new MBI for compliance with the federal mandate. As a result, providers may begin to notice name changes to panels or fields within ForwardHealth interChange and on the Portal. There will not be any file or format changes. Entities that submit or receive transactions containing the HICN or the RRB number are responsible for their own compliance and may need to modify their systems and processes to be ready to submit or receive transactions with the new MBI.

Claim Transactions

CMS has designated a transition period from April 1, 2018, through December 31, 2019. During this time, ForwardHealth will accept either the new MBI or the HICN for processing on the following transaction types:

- 837 Health Care Claim transactions, including crossover claims
- HMO encounters
- National Council for Prescription Drug Programs (NCPDP) D.0 transactions
- Provider Electronic Solutions software transactions

Providers who have a member's MBI during this period are encouraged to start using it in their transactions submitted to ForwardHealth.

During the transition period, ForwardHealth's 835 Health Care Claim Payment/Advice will reflect the identifier, either

the HICN or the MBI, that was submitted on the claim. On and after January 1, 2020, the HICN may not be submitted on claims to ForwardHealth or to CMS. The MBI must be used in place of the HICN on all claim submissions.

Member Eligibility Verification

Beginning April 1, 2018, the following ForwardHealth EVS methods for determining member eligibility will accept either a HICN or an MBI:

- 270/271 Health Care Eligibility/Benefit Inquiry and Response transactions
- 834 Benefit Enrollment and Maintenance transactions, for managed care organizations
- ForwardHealth Portal
- WiCall, ForwardHealth's Automated Voice Response system
- Provider Services

Until October 12, 2018, a HICN will always be returned in EVS responses, regardless of whether or not an MBI was indicated in the enrollment inquiry. This includes EVS responses for individuals newly enrolled in Medicare who are only aware of their MBI, but have been assigned a HICN for internal processing only.

After October 12, 2018, if a member has an MBI on file with ForwardHealth, an MBI will always be returned in the enrollment response, regardless of whether or not a HICN was indicated in the enrollment inquiry. For members without an MBI on file with ForwardHealth, a HICN will be returned in the enrollment response until December 31, 2019.

The *ForwardHealth Update* is the first source of program policy and billing information for providers.

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Medicaid Services, the Wisconsin Department of Health Services (DHS). The Wisconsin AIDS Drug Assistance Program and the Wisconsin Well Woman Program are administered by the Division of Public Health, DHS.

For questions, call Provider Services at 800-947-9627 or visit our website at www.forwardhealth.wi.gov/.

P-1250