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| CMS Manual System | Department of Health & Human Services (DHHS) |
| Pub 100-20 One-Time Notification | Centers for Medicare & Medicaid Services (CMS) |
| Transmittal 1769 | Date: January 6, 2017 |
| | Change Request 9731 |

Transmittal 1707, dated August 12, 2016, is being rescinded and replaced by Transmittal 1769, dated January 6, 2017, to change the implementation date to: January 3, 2017 - MCS and VMS full implementation; April 3, 2017 - FISS full implementation except BR9731.2 media option Q; July 3, 2017 – FISS BR9731.2 media option Q. All other information remains the same.

SUBJECT: eMSN and Alternate Format MSN Service Improvements

I. SUMMARY OF CHANGES: In 2015 the Centers for Medicare & Medicaid Services (CMS) implemented both electronic Medicare Summary Notices (MSNs), and alternate format MSNs as options for Medicare beneficiaries. This Change Request (CR) shall implement the following technical and customer service improvements to these products:

- Include the full unmasked Health Insurance Claim Number (HICN) in a non-printable section of each MSN print file.
- Provide the ability to order MSN reprints in a language and media different from the preferences on file for the beneficiary.
- Produce MSNs in printed form regardless of media preference after the date of death of the beneficiary.

EFFECTIVE DATE: January 1, 2017

**Unless otherwise specified, the effective date is the date of service.*

IMPLEMENTATION DATE: January 3, 2017 - MCS and VMS full implementation; April 3, 2017 - FISS full implementation except BR9731.2 media option Q; July 3, 2017 - FISS BR9731.2 media option Q

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-Only One Per Row.

| R/N/D | CHAPTER / SECTION / SUBSECTION / TITLE |
|--------------|---|
| N/A | N/A |

III. FUNDING:

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined

in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

One Time Notification

Attachment - One-Time Notification

| | | | |
|-------------|-------------------|-----------------------|----------------------|
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I. GENERAL INFORMATION

A. Background: The Virtual Data Center contractors send print files to the NGD contractor for electronic Medicare Summary Notices (MSNs), alternate format MSNs and print MSNs. The MACs can choose to mask the Medicare Number in the print files or have the full Medicare Number included so that the masking is done during the printing process.

The process that the NGD system uses to match the MSNs with HICNs masked in the print files to a valid Medicare Number is time consuming and subject to operational errors. The MSN metadata files are now used as the key component of that internal NGD process. Any transmission or processing exceptions for either the MSN print files or the MSN metadata files can cause a delay in completing the work needed to make eMSNs and alternate format MSNs available for beneficiaries and print MSNs available for customer service purposes.

The Office of Communications is requesting that the shared systems (VMS, MCS and FISS) include a non-printable section in each MSN that has the Medicare Number (HICN) in unmasked form.

The process to change a beneficiary language or media preference for MSNs is sent to the shared system in a claim trailer with the next claim processed. There are times when a change of language or format is requested and the beneficiary wants to receive copies of past MSNs in that format or language. There are also times when a representative payee or another authorized person assisting the beneficiary needs copies of MSNs in a different language or media.

The Office of Communications is requesting that the shared systems (VMS, MCS and FISS) provide a mechanism to order copies of MSNs in any accepted language or media. The language and/or media chosen may be different from the permanent setting on the beneficiary records in EDB, CWF and the shared systems.

When a date of death is recorded for a beneficiary, the MyMedicare.gov account for that person is disabled for security reasons. Therefore, any electronic MSNs are not available to the person's family or executor. The need for alternate format MSNs is likely to end with the death of the beneficiary. The Office of Communications is requesting that all MSNs created for a beneficiary after the date of death be produced in paper form and sent to the address of the beneficiary or representative payee.

B. Policy: Per section 1806(a) of the Social Security Act (the Act): CMS is required to provide an MSN (Part A, Part B, and/or DME) to each Medicare beneficiary. Applicable statutes/legislation/court decisions that impact the content and format of the MSN are: section 1806(b) of the Act; section 1816(j) of the Act; section 1842(h)(7) of the Act; section 1848(g) of the Act; section 1869(a)(4) of the Act; section

1869(a)(4)(C) of the Act; 42 C.F.R. section 405.921; section 925 of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (P.L. 108-173); Gray Panthers v. Schweiker, 652 F. 2d 146, 168 (D.C. Cir. 1980); David v. Heckler, 591 F.Supp. 1033 (E.D.N.Y 1984); Vorster v. Bowen, 709 F.Supp 934 (C.D. Cal. 1989); Connecticut Department of Social Services v. Leavitt, 428 F.3d 138 (2d Cir. 2005).

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

| Number | Requirement | Responsibility | | | | | | | | | |
|--------|---|----------------|---|-------------|-------------|----------------------------------|------------------|-------------|-------------|-------|-------------|
| | | A/B MAC | | | D M E | Shared- System Maintainers | | | | Other | |
| | | A | B | H H H | | M A C | F I S S | M C S | V M S | | C W F |
| 9731.1 | Full HICN in non-printed area of MSNs: The shared system maintainers shall add a non-printable section in the first page of each MSN. The section shall contain the label 'HICN - ' and the full current Medicare number or Railroad Board identifier in unmasked form. Files produced using Advanced Function Printing (AFP) mode shall set up the non-printable section using a TLE or NOP structure. File produced using Xerox Printing Mode shall set up the non-printable section using the Write To Operator (WTO) command. | | | | | X | X | X | | NGD | |
| 9731.2 | Requests for Reprints of MSNs: The shared systems shall add a function to allow MSN reprint requests for one or more claims to be requested in any of the following media options - <ul style="list-style-type: none"> • A = Audio (CD) • B = Braille • C = CD-ROM • E = Electronic • L = Large Print • H = Standard Preference (hard copy print) • Q = Qualified Reader <p>The function shall also allow the reprint requests to be created in either of the following languages –</p> <ul style="list-style-type: none"> • E = English | | | | | X | X | X | | NGD | |

| Number | Requirement | Responsibility | | | | | | | |
|--------|---|----------------|---|-------------|----------------------------|----------------------------------|-------------|-------------|-------|
| | | A/B MAC | | H H H | D M E M A C | Shared- System Maintainers | | | Other |
| | | A | B | | | F I S S | M C S | V M S | |
| | <ul style="list-style-type: none"> S = Spanish <p>Reprints requested this way shall be processed by the shared systems as any other MSN created in the language and format specified. Print file information and metadata file information from the reprints shall be included in the appropriate print and metadata files being sent to the NGD contractor.</p> <p>Please note that this reprint request shall be valid even if there is a date of death present for the beneficiary.</p> | | | | | | | | |
| 9731.3 | <p>MSNs produced in print for deceased beneficiaries. The shared systems shall produce all MSNs in regular print media format regardless of the media on the beneficiary record if there is a validated date of death on file for the beneficiary. Reprints requested using the function in requirement 9731.2 are excluded from this requirement.</p> | | | | | X | X | X | NGD |

III. PROVIDER EDUCATION TABLE

| Number | Requirement | Responsibility | | | | |
|--------|-------------|----------------|---|-------------|----------------------------|-------------|
| | | A/B MAC | | H H H | D M E M A C | C W F |
| | | A | B | | | |
| | None | | | | | |

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements:

"Should" denotes a recommendation.

| X-Ref Requirement Number | Recommendations or other supporting information: |
|--------------------------|--|
| | |

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Donovan Waddel, 410-786-2603 or Donovan.waddel@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

ATTACHMENTS: 2

Xerox Printer DJDE Example for MSN Print files

```
+ DJDE C 'HICN 11111111AAA MBI XXXXXXXXXXXX',END;  
444CDCC4C47CCCD4FFFFFFFFFCCC4DCC4EEEEEEEEEEEE76CDC544444444  
E004145030D89350111111111110429077777777777DB554E00000000
```

