

Centers for Medicare and Medicaid Services  
Tuesday, November 1, 2016  
SSNRI Open Door Forum  
Moderator: Jill Darling  
2:00 p.m. ET

Operator: Good afternoon, my name is (Scott) and I will be your conference facilitator today. At this time, I would like to welcome everyone to the Social Security Number Removal Initiative Provider Open Door Forum.

All lines have been placed on mute to prevent any background noise. After the speaker's remarks, there will be a question and answer session. If you would like to ask a question during this time, simply press star then the number on your telephone keypad. If you would like to withdraw your question, press the pound key. Thank you.

Ms. Jill Darling, you may begin your conference.

Jill Darling: Thank you, (Scott). Good morning and good afternoon everyone. My name is Jill Darling in the CMS Office of Communications and welcome to the first Open Door Forum for the SSNRI. We do appreciate your patience. I know we're starting a little late today with this being the first Open Door Forum. We were expecting many people to call in so, we appreciate your patience.

So, one brief announcement from me and then we will begin. This open door forum is not intended for the press and the remarks are not considered on the record. If you are a member of the press, you may listen in but refrain from asking questions during the Q&A portion of the call. If you do have inquiries, please contact us at [press@cms.hhs.gov](mailto:press@cms.hhs.gov).

So now, I'll hand the call over to our chair, Lois Serio.

Lois Serio: Hello everyone. This is Lois Serio from CMS. And again thank you for joining us today for the first quarterly open door forum call to discuss the Social Security Number Removal Initiative.

Just a reminder that on the agenda, there is a link to the slide. Please keep in mind that it is a video so we may not always be in sync with each slide. If that's the case, please pause your video in order to catch up.

Again, thanks for joining us. And after the presentation, we will be opening up for questions. And now, I'm handing it off to Monica Kay to walk through the slides.

Monica Kay: Hello everyone. My name is Monica Kay and I am the Division Director for the Division of Program Management in the Office of Enterprise Information. I wanted to bring you some key points about the Social Security Removal Initiative, myself along with my colleagues will discuss today the operational aspects, the communication aspects, as well as pertinent information that you as a stakeholder will need to know in order to prepare for this initiative.

As I talk about the background of SSNRI, the Centers for Medicare and Medicaid Services uses the HICN with multiple parties, such as the Social Security Administration, the Railroad Retirement Board, States, Medicare providers and Medicare plans.

The Medicare Access and CHIP Reauthorization Act of 2015 mandates the removal of the SSN-based HICN from our Medicare Cards to address the current risk of beneficiary medical identity theft.

From this legislative requirement, CMS must mill out all Medicare cards with the new Medicare Beneficiary Identifier or the MBI – by April of 2019.

So let's talk a little bit about our program goals. We want to decrease Medicare beneficiaries' vulnerability to identify theft by removing that SSN-based HICN from their Medicare I.D. card and replacing that HICN with the new MBI or Medicare Beneficiary Identifier which does not contain the Social Security Number or other personal information.

With this goal, we want to make sure that we minimize disruptions to our Medicare operation, minimize burden for providers, minimize the burden for our beneficiaries and provide a solution to our business partners that allows

usage of the HICN and MBI for our critical business data exchanges, as well as manages the cause, scope and schedule for the project.

So for CMS, that involves complex I.T. systems that affect providers, partners and beneficiaries, where we will need to have a thoughtful planned roll out of the Social Security Removal Initiative for implementation.

Along with our partners, CMS will address those complex system changes for over 75 systems. We will also conduct extensive outreach and education activities and analyze the many changes that would be needed to our business systems and processes. And this affects all of our stakeholders including yourself.

As you look at our SSNRI stakeholders, we have identified approximately 90 different stakeholder entities or groups that are impacted by SSNRI where we currently receive, store, use and/or provide a HICNs today.

So now let us talk about the implementation of SSNRI. The MBI solution concept must accomplish three things. We must generate an MBI or Medicare Beneficiary Identifier for all of our beneficiaries. This includes the existing and new beneficiary. We must issue a new redesigned Medicare card. We must also modify our systems and business processes requiring updates to accommodate the receipt, transmission, display, and processing of the MBI.

CMS will use that MBI generator to assign 150 MBIs in the initial enumeration and that includes 60 million living and 90 million deceased or archive members. And we must also generate a unique Medicare beneficiary identifier for each beneficiary or a beneficiary whose number has been compromised.

Some of the characteristics of the new Medicare beneficiary identifier are as follows. It will have the same number of characters as a current HICN which is 11 but will be visibly distinguishable from the HICN. It will contain uppercase alphabetic and numeric characters throughout the 11-digit identifier. It will occupy the same field as the HICN on transactions. It will

also be unique to each beneficiary. This means the husband and the wife will have their own MBI or Medicare beneficiary identifier.

It will be easy to read and limit the possibility of letters being interpreted as numbers. And it will exclude numbers such as S, L, O, I, B, and Z. It will not contain any embedded intelligence or special characters nor will it contain any appropriate combinations of number or strings that may be offensive. We do not anticipate changing that MBI unless it's been compromised for other reasons that are still under consideration such as religious.

The next slide shows the differences between the HICN, Health Insurance Claim Number, that we use today and the new MBI number. As you can see both numbers are still 11 digits, where the HICN has a 9 byte Social Security Number plus a one or two byte beneficiary identification code. The new Medicare beneficiary identifier will be a new non-intelligent unique identifier. It will still be 11 bytes and key positions 2, 5, and 8, and 9 will always be alphabetic.

Slide 10 shows the MBI format and the syntax that we will be using. Again, as you can see from that slide the positions of each character and whether they're alphabetic or numeric.

So now we'll talk about the MBI generation and transition period. And slide 11 shows the graphical depiction of how we anticipate rolling this out. As you can see, January 2018 we will begin to activate the MBI generator and translation service. April 2018 through December 31, 2019 is our anticipated transition period where we will both accept and process both the HICN and MBI on transactions. And April 2018 through 2019 is where we anticipate conducting our phase card issuance to our beneficiary. This means we will be mailing out all of those new cards with the MBI.

So as we talk about the SSNRI transition period, it needs a couple of things. CMS will establish a transition period during which the HICN or MBI will be accepted from provider, beneficiary, plan and other external stakeholders. We expect the transition period to run from April 2018 through December 31, 2019.

CMS's processes and systems will be updated to accept and return the MBI as of April 1, 2018. CMS will accept, process and return to stakeholders either the MBI or the HICNs during the transition period. All stakeholders to submit or receive transactions containing the HICN must modify their processes and systems to submit or exchange the MBI as of April 1, 2018. Stakeholders may submit either the MBI or the HICN during the transition period.

Additionally, with the SSNRI transition period, CMS will tell you in the message field on eligibility transaction responses when we've mailed a new Medicare card to each person with Medicare. Your eligibility service provider can give you this information. During the transition period, CMS will return the same beneficiary identifier to you that you submitted on that incoming transaction.

Also during the transition period, we'll return the MBI, the Medicare beneficiary identifier, on the remittance advice starting October of 2018 when you submit a claim using your patient's HICN. After the transition period, affected systems interacting with stakeholders will only use the MBI for most information exchanges. And there may be limited exceptions for you to use the HICN after transition. For instance, appeal, adjustments or other scenario as directed by CMS.

So this next section on slide 14 addresses the question regarding what you need to do during the transition period and what you need to do to implement. So no earlier than April of 2018, CMS will start mailing new Medicare cards with MBI to people with Medicare. Providers can ask Medicare patients at their time of service if they have a new card with MBI or during the transition period CMS will return the MBI on the remittance advice starting in October 2018 when you submit a claim using your patient's health insurance claim number or HICN.

The next question becomes when and how do providers use MBI. Once patients get their new Medicare cards and MBI, we encourage you to start using the MBIs as soon as possible but we will continue to accept the HICN

through the transition period. We'll accept either the MBI or the HICN interchangeably during this transition period.

Once we start mailing out new Medicare cards, people new to Medicare will only be assigned an MBI and they will never know that they have a HICN. Your systems must be ready to accept the MBI or the Medicare beneficiary identifier by April of 2018.

So as we talk about card issuance, CMS will start issuing new Medicare cards for existing beneficiaries after the initial enumeration of MBI to roughly 60 million beneficiaries. We will also be removing the gender and signature line from the new Medicare card. And we will work in conjunction with the Railroad Retirement Board who also issues their own cards.

We'll be working with states that include the HICN on their Medicaid card to effectuate a change to remove the Medicare I.D. or replace it with the MBI. And we will also conduct intensive educational outreach to our beneficiary and their agents to help them prepare for this change.

As we talk about the outreach and education, CMS will provide outreach and education to the provider community, which is roughly 1.5 million providers, approximately 60 million beneficiaries, their agents, advocacy groups, and caregivers. We will also provide education and outreach to states and territories, key stakeholders, vendors and other partners. CMS will ensure that we involve our stakeholder community and our outreach and education effort through their existing vehicles for communication.

Now we will open it up to questions and discussion. And I would also like to add that we have several CMS colleagues who will also be responding to your question.

Jill Darling: Thank you, Monica. And (Scott) will open up the queue for Q&A please.

Operator: As a reminder ladies and gentlemen, if you would like to ask a question please press star then one on your telephone keypad. If you would like to withdraw your question please press the pound key.

Please limit your questions to one question and one follow up to allow other participants time for questions. If you require any further follow up you may press star one again to rejoin the queue.

Your first question comes from the line of (Jen Modderman) from Hospice and Home Care. Your line is open.

(Jen Modderman): Hi, when proxy sponsors have instructed beneficiaries to destroy their Medicare card and the beneficiary doesn't know their new MBI, what avenue will be available to providers to find out what their new MBI is?

Monica Kay: So, I will start, and again, this is Monica Kay from the Office of Enterprise Information. CMS is working to develop a tool that will assist the beneficiary in obtaining their MBI via other vehicles. And I will open up the floors to anyone else who would like to respond.

Additionally, with the transition period of 18 of – excuse me, 21 months, we will be sending back the Medicare beneficiary identifier on that remittance advice. So that's another vehicle in which to obtain the MBI from provider.

(Jen Modderman): Well, we're a hospice provider. And as a hospice provider in order to obtain what the current HIC number is we need to have the HIC number in order to really – to pose the Notices of Election which we only have five days in which to do it.

So if we – right now we can play around with it to try to get the right HIC number having a social security. We're dead in the water at that point confirming a patient's benefits or even securing our claims. A lot of our patients come on board and die within the few days so then, we don't get a remit back in April to respond to that.

Monica Kay: So, again, this is Monica Kay, I'm going to ask you to do two things. If you can send us that information to the [SSNRemoval@cms.hhs.gov](mailto:SSNRemoval@cms.hhs.gov), we're working on some activities to, again, provide beneficiaries with access to their MBI. But we definitely want to note it for the hospice situation.

And then, the other thing that I've just wanted to address if you – there has been no determination yet about destroying their old Medicare card. So, I don't know that that would be part of CMS's policy at this time. It's currently under consideration.

(Jen Modderman): Right. What we run into currently is that other – when a patient has Medicare Part C, that Part C insurer tells them to throw away their Medicare cards if they don't need it anymore. And now we can try to get it with their Social Security Number. So we would basically not have any avenue to get it at this point.

Monica Kay: So we will definitely – if you could send that information to our SSN removal e-mail box we can make sure that that's addressed.

(Jen Modderman): All right, thank you.

Operator: Your next question comes from the line of (John Tiniakos) from Cleveland Clinic. Your line is open.

(John Tiniakos): Hello, this is (John) from Cleveland Clinic. I have a question. After the transition period when providers need to check eligibility for patient, could we use the patient name, date of birth as source of criteria or patient's name, date of birth, social, or any other combination when a patient comes to their visit without their insurance card and they don't know their new policy I.D. number?

Monica Kay: So, I actually stated before. During the transition period, the 21-month transition period, we will be providing the MBI on the remittance advices. And we're asking that providers collect that information as well ask that beneficiary when they come in at the time of service.

(John Tiniakos): So when we have a patient who comes in for the first time to our clinic and they state they have Medicare after this transition period but they do not have their card with them, is there any way we can check eligibility or no?

Monica Kay: So, the answer to your question is no you will not be able to get that from the eligibility transaction, but we will be doing extensive education and outreach



to our new beneficiary where they'll only know that MBI. And we will give them instructions as to provide it to the stakeholders and doctors that they seek.

(John Tiniakos): Thank you.

Operator: Your next question comes from the line of Andrea Stark from MiraVista LLC. Your line is open.

Andrea Stark, your line is open.

Andrea Stark: Hello, can you hear me now?

Female: Yes we could hear you now.

Andrea Stark: OK, wonderful, thank you. My question is whether or not, again, kind of in line with the other provider's questions, is it possible to get a proactive response? If we have the HICN from – for the beneficiary and we need to secure the MBI, will that becoming back through and reported in real time eligibility transactions like the HETS transaction?

Monica Kay: So, thank you for your question. We will not be providing it on the eligibility transaction but what we will do is provide it on the remittance advice during the transition period which is the 21-month transition period where any claims that come in will be provided with that MBI on the remittance advice, starting October 1, 2018. So again, we ask providers that they capture that information.

Andrea Stark: Right, and that's after the claim has processed and while we have the HICN. But we couldn't send a compliant eligibility transaction, is that something that CMS has already considered and ruled out that they would not return that in the response file?

Monica Kay: CMS will not be returning that on the response file on the 270 and 271. We will be providing it on the remittance advice during the 21-month period during the transition, so where you can submit either the HICN or MBI.

Andrea Stark: OK. Thank you.

Operator: Your next question comes from the line of (Clarissa Stephen) from (TMFM).  
Your line is open.

(Clarissa Stephen): Yes, please. I'm wondering about the slide presentation where we can locate that please.

Monica Kay: It was on the link but we can provide it on our webpage. And if you look at the last part, and so everybody has the information if you're unable to connect to our web links on YouTube, the e-mail box, if you want – would like to request it will direct you to our webpage. It's [SSNRemoval@cms.hhs.gov](mailto:SSNRemoval@cms.hhs.gov).

(Clarissa Stephen): One more time.

Monica Kay: [SSNRemoval@cms.hhs.gov](mailto:SSNRemoval@cms.hhs.gov) and I will also give you the information on our webpage which is <http://go.cms.gov/ssnri>.

(Clarissa Stephen): OK. Thank you.

Monica Kay: And for those that are on the phone, on that webpage, we have some questions that we would like for you to consider and they entail four different buckets where we talk about your current operational processes and what do you do today and how do you obtain the Medicare card and how you use it currently. We also ask about your patient interaction, what do you do when they don't have a Medicare card or don't know their HICN. And what do you plan to do in the future if the patient is unable to provide you with their MBI and some of those – what percentage of beneficiaries would come in who may not know.

Some other questions that we want you to consider are implementation questions. What are the business and system process and impacts do you expect to have with this change from HICN to MBI? And how much time would you need to implement that change? And what type of outreach and training would you need to perform?

And then lastly, we also ask questions around our patient communication where we ask what do you think and how do you think this change will affect

your patient? And how would you suggest that we communicate with patients about the new card and the associated changes?

So that will be posted to our website, again, it's at <http://go.cms.gov/ssnri>. And if you have any other comments or questions during this that you aren't able to get in, you can definitely send them to [SSNRemoval@cms.hhs.gov](mailto:SSNRemoval@cms.hhs.gov) and we'll open it up again for additional questions.

Operator: Your next question comes from the line of Susan Lindeman from Prime Therapeutics. Your line is open.

Susan Lindeman: Thank you. I have a question on reporting on the TRR standing member data on the TRR. Will you be simply replacing the MBI and HICN or will you be sending both at some point?

(Marni Land): Hi, this is (Marni Land). Are you talking about the transaction reply report that goes to M.A. plans?

Susan Lindeman: Correct.

(Marni Land): OK, the Medicare Advantage folks are coming out with HPMS memo and we'll have a planned user call later this month to discuss ...

Susan Lindeman: OK.

(Marni Land): ... the questions. However, in the meantime, like Monica had asked before we're going to document that question, so to make sure we got it right, can you please e-mail that question to the [SSNRemoval@cms.hhs.gov](mailto:SSNRemoval@cms.hhs.gov) so that we can make sure we get it to the right policy and operation folks?

Susan Lindeman: Sure.

(Marni Land): Appreciate that.

Susan Lindeman: And then, yes, and then a kind of follow up on that is, will CMS expect plans to retain both? So will there be a time where CMS will require plans to retain the HICN or once we move to MBI, we'd move to MBI?

(Marni Land): You know what, I think I know the answer but I don't want to misquote the Medicare Advantage folks who are ...

Susan Lindeman: So that HICN, that went along with that too then.

(Marni Land): I appreciate it. Thank you.

Monica Kay: Thank you.

Susan Lindeman: Thank you.

Operator: Your next question comes from the line of Claudia Garabelli from Modern Management. Your line is open.

Claudia Garabelli: Hello everybody and thank you for the presentation. It's very informative and we appreciate it. I have a follow-up to the question from the Cleveland Clinic and I think that a couple of the people were alluding to it. You know, it's really great that you're going to send us both members during the transition period and I know 21 months and that's a long time. But that is taking all the information from the back-end and we got to then spend time, you know, staff time implementing some kind of a process to try to key in those members on the front-end.

It's much more logical for us and operational – operationally to be able to access that at the frontline when we're first checking eligibility. And if the other person had suggested, you know, sometimes the patients don't have their cards. They're mixed up. They don't bring them. You ask them for it, they really don't get it, they don't understand it.

I mean, that's the reality going on today's hospitals. So, when we send in the information, it would be helpful if you could send us that number back.

And also to reemphasize Medicare Advantage patients, they oftentimes don't have the card. We need it in order to do our zero pay bills into Medicare and also for the cost reports. So, that's the area of concern also for hospitals. And thank you again.

Monica Kay: Thank you. Again, if you would like to send that comment to the [SSNRemoval@cms.hhs.gov](mailto:SSNRemoval@cms.hhs.gov), but CMS will be returning the MBI on the remittance-advice only. Thank you.

Operator: Your next question comes from the line of Wanda Evans from Greenville Health System. Your line is open.

Wanda Evans: Wanda Evans from Greenville Health System. If you're going to return the MBI on the remittance on an 835, what segment loop are you going to put that in? Hello?

Monica Kay: Hi, can you please send that question into [SSNRemoval@cms.hhs.gov](mailto:SSNRemoval@cms.hhs.gov). I want to make sure I give you the correct information.

Wanda Evans: OK. Thank you.

Monica Kay: Thank you.

Operator: Your next question comes from the line of Patrick McCoy from Sharp Healthcare. Your line is open.

Patrick McCoy: Yes. My question is dealing with, after the transition period for claims that we bill prior to the transition claim period, are we suppose to use the new number or are we suppose to use the old HIC number?

Monica Kay: So, thank you for that question. Its two parts. Some of it we will let you know that when the Medicare, new Medicare I.D. card has mailed out to the beneficiary on the eligibility transaction. So, we will also be doing education and outreach during that time. And so you're able to use the HICN and MBI interchangeably during the transition period and we'll return the MBI on the remittance advice on or after October 1st of 2018.

Patrick McCoy: OK. But if I bill, let's say, I have a claim that's prior to the transition period, do I need to use – still use the HIC number for that claim prior to the transition? Or should I just use the new number after that transition period regardless of data service?

Monica Kay: So, let me separate those two questions. Prior to the transition, you can use the HICN or MBI – or I'm sorry, prior to the transition, you can use just the HICN. After the transition, you will need the MBI.

Female: And during the transition period, you can use both.

Patrick McCoy: OK. So, after the transition, it doesn't matter what data service I'm sending. I need to use the new number.

Female: In general, that's correct.

Patrick McCoy: OK. Thank you.

Operator: Your next question comes from the line of (Joe Lamadian) from Care Center. Your line is open.

(Joe Lamadian): Thanks. I apologize. My question has already been answered.

Operator: Your next question comes from the line of Shirley Gamble from Sterling Medical. Your line is open.

Shirley Gamble: Good afternoon. I just want to reiterate the concern that several other people have voiced. Many times our patients do not have access to their Medicare card for a variety of reasons, maybe an adult caregiver that lives in many states away have that information and it's not made available to us. And so I really think that we need to look at something for eligibility. And I'm not sure why that's been taken away from us.

Monica Kay: Thank you for your comment. If you would like to submit that to [SSNRemoval@cms.hhs.gov](mailto:SSNRemoval@cms.hhs.gov). And I also want to note that we are doing an extensive education and outreach campaign for our population. And that doesn't include just the beneficiary but yourselves as well to help you provide access to those things to help the beneficiary get access to those tools, as well as the agents or caregivers that work on their behalf.

Shirley Gamble: For the patients, they don't have the mental capacity to be able to even understand what we're asking for and we don't have contact information that's

readily available to get a hold of their responsible person or responsible party. It's – it really is putting us in problem. And if we don't have the information, there's probably going to have to build the patient for that and I know that's not what anybody wants to do.

Monica Kay: Thank you for your comment. Definitely, please send that to the [SSNRemoval@cms.hhs.gov](mailto:SSNRemoval@cms.hhs.gov). Some of the questions on the back-end ask that very question. And my question that I would like you also to address when you send in the response is what happens today, how did you get that information today?

Operator: Your next question comes from the line of (Nancy Jefferson) from State of New Hampshire. Your line is open.

(Nancy Jefferson):Hi, thank you. How is this going to affect the MMA files going back and forth to state's Medicaid?

Monica Kay: So, thank you for your comment. We are currently working with the states and the states' planning on how the exchange will occur.

(Nancy Jefferson):OK.

Monica Kay: And stay tuned for our website. That will give you additional information for the MMA.

Lois Serio: And this is Lois Serio. If you are in the Medicaid – state Medicaid agency, we do have SSNRI contacts in each state Medicaid agency. If you're interested in reaching out to that contact to get additional information, if you could send the request into the [SSNRemoval@cms.hhs.gov](mailto:SSNRemoval@cms.hhs.gov), we will make sure we connect you with your state's point of contact for this issue.

(Nancy Jefferson):All right. Thank you.

Operator: Your next question comes from the line of Amy White from Franciscan Hospice. Your line is open.

Amy White: Hi. I kind of have the same information that most other people have and then response to your asking what we currently do. I think people are trying to communicate that we currently, because the Social Security is used as their number. We have that as a fall back for those people who aren't able to present with their card. In Hospice, our patients are health-compromised and they're presenting sometimes with their Managed Care card, which do not have a HIC number. But they can present this because they know their Social Security number, we can then try (A.B.), we can assess what their Medicare number might be.

So, we're losing a mechanism that we currently do use to check eligibility. Especially in Hospice, we have some required things that have to have them before admit. So we are going into their home. They're showing us an – card that's not a Medicare card, doesn't have a HIC number on it or having to assess that to figure out if they need a face-to-face or where they might be in their hospice episodes.

So, it is crucial and we do kind of now be able to make some guesses based on their Social Security number. Without that, we'll have no mechanism to be able to check eligibility unless they can give the card to us because they won't be able to say, "Oh, here's my Social Security number, you can try that."

So, I'll send that into the same e-mail, but I think it's the same information that people are trying to share that we do currently have ways to find some info that we will lose.

Female: Thank you. And please definitely send that in.

Operator: Your next question comes from the line of (Charize Sales) from Frontline Management. Your line is open.

(Charize Sales): Hi. Yes, we are with Skilled Nursing (Billing), so we have to submit the MDS and obviously when we submit the MDS it has to match the common working file exactly. If there is a discrepancy, let's say, we submit as female and it's supposed to be male, it's going to come back with just a small error on the file for us to fix on our end and they can resubmit a modified MDS.



What kind of report information is going to come back through the MDS with this change to the MBI?

Female: So, I'm going to ask you to submit that so I can get back to those particular system owners just to make sure I'm telling you the correct information. So, if you can submit that to [SSNRemoval@cms.hhs.gov](mailto:SSNRemoval@cms.hhs.gov).

(Charize Sales): OK. Great.

Female: Thank you.

(Charize Sales): Thank you.

Operator: Your next question comes from the line of (Erin Woodard) from Center for Primary Care. Your line is open.

(Erin Woodard): Hey, this is (Erin) at Center for Primary Care. My question is you're asking everybody to send these questions into the mailbox. Is there a way we're all going to get answers to these? Or is it only people that submit them get the answers? And then I have gotten your – the <http://go.cms.gov/ssnri>, is there a way to print these slides? Or is it only the YouTube video?

Female: So, let me start with the first question. The first question that you ask is that once we compile all the questions, we're developing FAQs and fact sheet that we'll have many of the answers. If you actually go to the website, today, you will find some of the answers already addressed. That's <http://go.cms.gov/ssnri>. So, some of the answers can already be found there. And for those that we need to add, we'll build to that list that we're providing on the webpage so that all will have the information.

And the second piece of this is if you have a computer, if you select file and print, if you double click, it might allow you to print out that particular document. But you might want to check with your I.T. resources.

(Erin Woodard): But not the entire slide. It won't slide individually?

Female: Yes. Unfortunately yes. But what we can do is make it available on our website and then that way, you'll have another way to printout the PDF file.

(Erin Woodard): OK. That would be awesome. Thank you.

Female: OK.

Operator: Your next question comes from the line of (Barry Hayes) from AAFP. Your line is open.

(Barry Hayes): Actually, she just asked my question, are these questions are going to be shared like in FAQ or something. So, it's answered. Thank you.

Operator: Your next question comes from the line of (Elinda Rose) from Eisenhower Medical. Your line is open.

(Elinda Rose): Hi, is there a plan to work with the RACs (Recovery Audit Contractors) so that they are also transitioning, so that if we send appeals in, they will have either both the new number and the HIC number or are they also going to convert at the same time?

Monica Kay: So, this is Monica again. Thank you for question. There is a plan to work with the recovery audit contractors to include them in the scope of SSNRI.

(Elinda Rose): OK. Thank you.

Operator: Your next question comes from the line of (Charles Buckets) from Cleveland Clinic. Your line is open.

(Charles Buckets):I'm sorry. My question was already answered. Thank you.

Operator: Your next question comes from the line of (Debbie Friedman) from Northwell Health. Your line is open.

(Debbie Friedman): Yes. Thank you. I'm representing a very large healthcare system and I have some major concerns about you limiting the eligibility 270, 271 response, that's been brought up a number of times by a lot of people. I have a couple of questions. One is what is your suggested method when patient

presents without the card? Would there be a website or a phone number to get the number, the new number? How do you suggest that that patient, you know, that we deal with that patient?

Monica Kay: So, this is Monica Kay. And we're developing a comprehensive plan around providing beneficiaries or their agents or caregivers with that information and it is currently in progress.

(Debbie Friedman): OK. So you will have alternatives to providers so that we're not just, you know, registering people without their – with their MBI number?

Monica Kay: We will have alternative for the beneficiaries and their caregivers and agents to obtain that number.

(Debbie Friedman): OK. But how about the provider?

Monica Kay: Not at the time other than the education and outreach activities that will occur.

(Debbie Friedman): OK. That's going to be really rough on providers who need that number for various reasons that have been stated before.

Also, my question is, since, you know, you're going down that path, will 270, 271 be affected for other insurance companies now that they except social as part of an inquiry when a patient doesn't show up without, let's say, a Blue Cross card?

Female: Can you submit that question to the [SSNRemoval@cms.hhs.gov](mailto:SSNRemoval@cms.hhs.gov)?

(Debbie Friedman): Certainly.

Female: Thank you.

(Debbie Friedman): Another question. I hope you don't mind, I have one other question. Was that ever considered that on the MBI card that the patient's picture be an identifier on the card to protect the patient, you know, from someone fraudulently using the card?

Monica Kay: So, definitely send that one into the [SSNRemoval@cms.hhs.gov](mailto:SSNRemoval@cms.hhs.gov).

(Debbie Friedman): OK. Thank you very much.

Operator: Your next question comes from the line of Kenneth Holmes from Atrius Health. Your line is open.

Kenneth Holmes: Yes. I wanted to make sure that I did get the address of where we can get the slides from. If you could say it in slow, I would appreciate it, please.

Monica Kay: So, the SNNRI website is <http://go.cms.gov/SSNRI>, and those are the webpage ...

Kenneth Holmes: SSNRI. OK.

Monica Kay: And ...

Kenneth Holmes: I do have one question.

Monica Kay: Sure. I was going to give you the e-mail box as well, [SSNRemoval@cms.hhs.gov](mailto:SSNRemoval@cms.hhs.gov).

Kenneth Holmes: That's fine. Thank you. I did have another question just to ensure that I understand the time period. I think you said that the information or the new number will begin coming back on the remittance in October of 2018 even though that they will start to be given out in April of 2018. So, we actually only have a 15-month window to get the information from the remit. Is that correct? Is that 21 months from when you actually start sending the information back?

Monica Kay: That is correct. There is 15 months to receive it on the remittance advice, but the transition period in its totality is 21 months.

Kenneth Holmes: OK. I just want to make sure I did get that.

Monica Kay: You did.

Kenneth Holmes: All right. Thank you very much. OK.

Monica Kay: And just to clarify ...

Kenneth Holmes: Thank you.

Monica Kay: ... on the cards, we will not be placing a picture on the new Medicare card.

Operator: Your next question comes from the line of (Consuelo Heinz) from Anesthesia Pain Specialist. Your line is open.

(Consuelo Heinz): Yes. Sorry. My question has already been answered.

Operator: Your next question comes from the line of Dana Curtis from the Surgical Clinic. Your line is open.

Dana Curtis: Thank you. We have a question about Railroad Retirement Board members. Is this initiative going to impact those numbers as well? Right now, we rely on those alpha characters in the front to know what to bill for that particular Medicare beneficiary.

Monica Kay: So, this is Monica Kay. So, the Railroad Board will have a non-intelligent number. And those systems that do need to change some of their systems in order to identify and check digits will need to be modified. You will also need to look at the card for the logo. And that also add any information that needs to be added from any of my colleagues.

(MarnieLand): So, hi, this is (Marnie Land), just to reconfirm what Monica has said. There will be no distinguishable differentiation between RRB, MBI and non-RRB MBI other than the card that is printed on. So, you know, there – people like – you know, there could be whether you modify your system to have separate indicator that reflects an RRB beneficiary to, you know, make sure the claims go into the MAC or you scan the card in so that you can see it's RRB. You know, those are some of the ideas that the folks have come up with as far as making sure that the claim goes to the correct MAC.

Dana Curtis: Well, it's already been said a lot of Medicare patients, they don't have the card and they tell they have Medicare and will give us Social Security Number but they really do have Railroad Medicare. But thank you very much.

- Operator: Your next question comes from the line of Donna Shiflett from Mid-Atlantic Home Health. Your line is open.
- Donna Shiflett: Hi, just a quick question on patient communication. What is the outreach or what is the method of communication to the patients so they know also that there are old card that has that number on it, the HICN, is no longer going to be effective and they need to look out like in the mail or however you're going to send it for the new card.
- Monica Kay: So this is Monica Kay. We're planning an extensive education and outreach to our beneficiary stakeholders and their caregivers to give them those instructions. As we roll out that information, we will make sure that the provider community knows those avenues that will be addressed with the beneficiary.
- Donna Shiflett: OK. So they will be notified prior to the actual new card coming through the mail that they need to be on the lookout and that there is a reason that they're getting a new card, it's not just a new, you know, card with a new expiration date or something like that. I'm just concerned because, you know, some of our patients, you know, like others have said are not in the right state of mind. They might toss it. They might not have access to their own personal mail.
- Monica Kay: No, understood. And that's why we are – at CMS, we are planning an education and outreach effort and we'll make the providers aware of what we're doing as well as working with our advocacy groups to ensure that we are hitting all of those populations.
- Donna Shiflett: OK. So just in case like just – let's just say that a patient does not have their new card or their new number, if there's a file or, I'm sorry, a claim filed or submitted, is that claim going to be rejected if it's after the certain period of time?
- Monica Kay: So just to clarify, during the transition period, you may submit either the HICN or MBI. And after the cards have been mailed and you've been notified, you will see that MBI on the remittance advice. After the transition period starting January 1st, 2020, if you submit with a HICN after that period,

your claim will be rejected with the exception of certain areas such as appeals, adjustments and some reporting.

Donna Shiflett: OK, thank you.

Monica Kay: You're welcome.

Operator: Your next question comes from the line of Beth Schneider, surgical specialist. Your line is open.

Beth Schneider: Yes. I have the same concern about us not getting the correct card because to this date, we're given the Medicare card plus the new C cards at the same time and the patient thinks they have both and I know this is going to be the same math. My question is, if they come after the implementation date and we're not going to get it back on a remittance advice and all we have is their old card, can we refuse to see them until they get a card with the MBI?

Monica Kay: So, we at CMS is not advocating any type of reduction of beneficiary access. What we will be doing is providing an extensive education and outreach campaign for our providers, for our stakeholders, for our beneficiaries, for their caregivers, for everyone who is involved in this effort. And we also are working to provide additional tools or processes for beneficiaries to obtain their new MBI.

Beth Schneider: OK. Because right to this date, they can't get it right, a lot of them. And when you're talking people in their 80s and 90s, they just don't grasp any change. So that's my big concern that we're going to be losing? a lot of money.

Monica Kay: And please submit that to the ...

Beth Schneider: We can't get those numbers.

Monica Kay: ... at [SSNRemoval@cms.hhs.gov](mailto:SSNRemoval@cms.hhs.gov). But thank you for your question.

Beth Schneider: OK. And my other question is will these be on paper like the old ones or will it be a plastic card?

Monica Kay: It will be a paper card.

Beth Schneider: OK. And they can't be laminated, is that correct?

Monica Kay: That is correct. They will not be laminated.

Beth Schneider: But the patients are not allowed to laminate them either?

Monica Kay: So, there will be more information coming out about the card and I would ask that you please look for that information. And all, please check out the SSNRI website. Again, that is <http://go.cms.gov/SSNRI>. And if you want to submit any additional information, please submit it to our e-mail box at [SSNRemoval@cms.hhs.gov](mailto:SSNRemoval@cms.hhs.gov). And this will be the first of many other open door forums that CMS will have. And I think everyone who dialed in and ask the thoughtful questions to provide us with feedback. So thank you.

And I'll turn it back over to Jill.

Jill Darling: All right. Thank you, Monica. And so, as Monica said, it's the first one and we will have many more coming down the road. This will be every quarter so please expect the next one to be in February and you will be alerted with an e-mail of when it will be. So thank you, everyone, today for your questions and comments. Have a great day.

Operator: This concludes today's conference call. You many now disconnect.

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