

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1766	Date: December 29, 2016
	Change Request 9858

Transmittal 1758, dated November 23, 2016, is being rescinded and replaced by Transmittal 1766, dated, December 29, 2016 to update the Implementation Date to clarify CWF will not implement code in April 2017, to add two additional requirements to BR 9858.24 for FISS to utilize extra hours, and to extend the due date for Shared System Maintainers to deliver July 2017 business requirements to December 22, 2016. All other information remains the same.

SUBJECT: Updates for the Shared System Maintainers to implement the Social Security Number Removal Initiative (SSNRI)

I. SUMMARY OF CHANGES: This Change Request (CR) instructs Medicare Shared Systems Maintainers (SSMs) to update their systems to implement changes for Social Security Number Removal Initiative (SSNRI).

EFFECTIVE DATE: April 1, 2017

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

IMPLEMENTATION DATE: April 3, 2017; April 3, 2017 - for BRs 15-23.1, CWF development only

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

Pub. 100-20	Transmittal: 1766	Date: December 29, 2016	Change Request: 9858
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SUBJECT: Updates for the Shared System Maintainers to implement the Social Security Number Removal Initiative (SSNRI)

EFFECTIVE DATE: April 1, 2017

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I. GENERAL INFORMATION

A. Background: This Change Request (CR) instructs Medicare Shared Systems Maintainers (SSMs) to update their systems to implement changes for Social Security Number Removal Initiative (SSNRI).

B. Policy: The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) requires removal of the Social Security Number (SSN)-based Health Insurance Claim Number (HICN) from Medicare cards within 4 years of enactment. Centers for Medicare and Medicaid Services (CMS) will be establishing a new Medicare Beneficiary Identifier (MBI) that will replace the HICN on the Medicare card. The MBI must be submitted on claims, translated to the HICN for processing, and translated back to the MBI for outgoing communications. These changes will be implemented in several phases.

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
9858.1	Medicare contractors shall participate in up to (6) hourly conference calls to discuss SSNRI requirements and design. Note: CMS will reduce the total number of calls required if requirements are satisfactorily addressed in less than (6) calls.	X	X	X	X	X	X	X	X	X	BCRC, CEDI, CERT, IDR, PDAC, RRB-SMAC, STC, VDCs
9858.2	The maintainers shall take minutes from their own system's perspective, and each shall submit minutes into ECHIMP in the POC forum within three days of the conference call and provide a copy to the SSNRI					X	X	X	X		

Number	Requirement	Responsibility									
		A/B MAC			D M E M A C	Shared- System Maintainers				Other	
		A	B	H H H		F I S S	M C S	V M S	C W F		
	PMO Mailbox: SSNRI@cms.hhs.gov.										
9858.3	The maintainers shall submit business requirements for a July 2017 implementation CR for CMS approval, in Microsoft Word, no later than December 22, 2016.					X	X	X	X		CEDI
9858.3.1	The maintainers shall email the document to SSNRI@cms.hhs.gov and also post it to the POC forum in ECHIMP.					X	X	X	X		CEDI
9858.4	General Dynamics Information Technology (GDIT) shall modify the Medicare Summary Notice (MSN) to display an MBI rather than the HICN as the beneficiary identifier if any claim reported in the MSN was submitted with an MBI. This includes duplicate copies of the Medicare Summary Notice (MSN). Note: Duplicate MSNs with HICN only shall continue to be created with HICN.							X			
9858.5	GDIT shall continue to redact the beneficiary identifier (MBI or HICN) on the MSN.							X			
9858.6	GDIT shall modify VMS processing to resolve the beneficiary identifier on Overpayment Recoupment Letters to an MBI when an MBI is submitted on a claim. NOTE: For Overpayment Recoupment Letters when reporting the payee number in cases where the payee is a beneficiary, GDIT shall make changes in a future CR to invoke the Common Working File (CWF) translation service to obtain the MBI associated with the available HICN.							X			
9858.7	GDIT shall modify VMS processing to resolve the beneficiary identifier on the Automated Development Letters to the MBI when an MBI is submitted on a claim.							X			
9858.8	GDIT shall modify VMS processing to resolve the beneficiary identifier on the ICOR letters to the MBI when an MBI is submitted on a claim. NOTE: For ICOR letters where there is no claim data available, GDIT shall make changes in a future CR to invoke the CWF translation service to obtain the MBI							X			

Number	Requirement	Responsibility								Other
		A/B MAC		H H H	D M E M A C	Shared- System Maintainers				
		A	B			F I S S	M C S	V M S	C W F	
	query to XWALK; EXCI CALL for batch query to XWALK									
9858.21	CWF shall create the XWALK query/response interface layout for the CICS EXCI and LINK COMMAREA. Note: This communication area is shared between the Shared System and CWF and will use the COMM-DATA-AREA to send query HICN or MBI and receive XWALK responses.									X
9858.22	CWF shall create 'HMBI' XWALK response layout for the shared systems XWALK queries.									X
9858.23	CWF shall create a new disposition code '56' to identify an MBI not found condition. MBI data will not be returned on queries that set consistency or record not found, CICS or system errors.									X
9858.23.1	CWF shall apply the following edits for the MBI: <ul style="list-style-type: none"> Disposition ER – A002 (Part A) or 0302 (Part B/DME) -Invalid Claim number where syntax is zeros, spaces, or suggested MBI Identification byte is not valid; Disposition 56 – 5052 – MBI not found in XWALK file; and Disposition 50 – 5052 – HICN not found in XWALK file 									X
9858.24	Fiscal Intermediary Standard System (FISS) shall add a new field to the claim record to store and display a twelve position alphanumeric actual submitted beneficiary number on claim screen MAP1031 (claim page 01) to indicate what number was originally submitted.					X				
9858.25	FISS shall modify the Integrated Data Repository (IDR) process to include the new twelve position alphanumeric field in the IDR record.					X				
9858.26	FISS shall modify the Expert Claims Processing System (ECPS) to include a claim level twelve position alphanumeric actual submitted beneficiary					X				

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	C W F	
	number field.									
9858.27	FISS shall modify the 276/277 claim search criteria to accommodate the submission of an MBI.						X			
9858.27.1	If an MBI is submitted, FISS shall call the CWF MBI crosswalk to obtain the HICN. The search criteria will return a response for all claims that match the other 276 search criteria identified in loop 2200D. Return on the 277 whatever identifier was submitted on the 276 loop 2100D NM109 where NM108 is equal to MI.						X			
9858.28	FISS shall modify the Additional Development Request (ADR) process to include MBI evaluation logic. FISS will always send the identification number that was submitted on the claim, HICN or MBI.						X			
9858.29	FISS Shall allow access to Bene file with HIC only even if crosswalk is down. MBI will not be displayed so message should state crosswalk down.						X			
9858.30	FISS shall allow users to access claims by the MBI on the Claim Summary screen. If the crosswalk down or there is no match in Cache or crosswalk, any claim with that MBI in the HIC field will be displayed.						X			
9858.31	MCS shall modify the Medicare Summary Notice (MSN) to display the MBI rather than the HICN as the beneficiary identifier if any claim reported in the MSN was submitted with an MBI. This includes duplicate copies of the MSN. Note: Duplicate MSNs with HICN only shall continue to be created with HICN.							X		

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E M A C	C E D I
		A	B	H H H		
	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): Marlene Biggs, 410-786-7880 or marlene.biggs@cms.hhs.gov , Jeanne Helsley, 410-786-1470 or Jeanne.Helsley@cms.hhs.gov , Monica Kay, 410-786-1323 or Monica.Kay@cms.hhs.gov , Brian Reitz, 410-786-5001 or Brian.Reitz@cms.hhs.gov , Stacey Shagena, 410-786-8208 or Stacey.Shagena@cms.hhs.gov , Bobbett Plummer, 410-786-3321 or Bobbett.Plummer@CMS.hhs.gov , Phillip Kendall, 410-786-8817 or phillip.kendall1@cms.hhs.gov , Tracey Mackey, 410-786-5736 or Tracey.Mackey@cms.hhs.gov , Wendy Tucker, 410-786-3004 or Wendy.Tucker@cms.hhs.gov

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

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

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