

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Center for Medicare
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Baltimore, Maryland 21244-1850



MEDICARE PLAN PAYMENT GROUP

DATE: March 2, 2018

TO: All Medicare Advantage Organizations, Prescription Drug Plans, Cost Plans, PACE Organizations, and Demonstrations

FROM: Jennifer Harlow /s/
Deputy Director, Medicare Plan Payment Group

SUBJECT: Medicare Advantage/Prescription Drug System (MARx) March 2018 Payment – INFORMATION

This letter provides information about the March payment, which is scheduled for receipt on March 1, 2018, and other payment related items that may require plan action.

Frailty Factor Update

Payments were recalculated using the updated 2018 Frailty factors. The payment adjustments will appear on the March 2018 Monthly Membership Report (MMR) using Adjustment Reason Code (ARC) 18 – Part C Rate Change.

Coverage Gap Discount (CGD) Invoice Offsets

The CGD invoice offsets resume in the March payment. There are offsets for 2017. They appear in separate lines on the Plan Payment Report (PPR) with an adjustment type code “CGD”.

New Medicare Card Project – MARx Changes

The Medicare Advantage Prescription Drug System (MARx) stores Medicare Advantage Organization (MAO) Part C and Part D Sponsor Part D enrollment, payment, and premium information and calculates monthly Part C/D payments and adjustments for each Plan. Via MARx, MAOs and Part D sponsors are able to submit batch data files, view information on the User Interface (UI), and download reports.

During the transition period to the MBI between April 2018 and December 2019, MAO and Part D Sponsors will be able to submit data using either the HICN or MBI on all input transaction types, including any online interaction with the MARx UI. MARx output data files/reports will contain the MBI only.

MARx Transaction Reply Codes

During the transition period, when a Plan submits a MARx transaction using a HICN, MARx will return a new TRC 350 (MBI is Available for Beneficiary) on the Daily Transaction Reply Report (DTRR) ([Attachment A](#)). This TRC informs the Plan that the HICN was processed, yet an MBI number is assigned to the beneficiary. The TRC will contain the beneficiary’s MBI number in Field 1 (Beneficiary ID) of the DTRR.

Concerning MBI processing, during and after the transition period all existing TRCs will continue to have the same function. TRC descriptions documented in the Plan Communication User Guide (PCUG) that currently represent a HICN will change to MBI.

MARx User Interface

During the transition period, Plan users can search for a beneficiary in MARx using either the HICN or the MBI, and the MARx User Interface (UI) screens will display both the HICN and the MBI in the banner. After the transition ends, Plan users will only be able to search with the MBI, and the MARx UI screens will only display the MBI.

The MARx UI screen views included in [Attachment B](#) show how the screen will appear and function during the transition period (April 2018 through December 2019). All screens in the MARx UI that currently display only the HICN in the banner will display both the HICN and the MBI in the banner during the transition period.

The screen views in Attachment B are grouped by activities that users commonly perform in the MARx User Interface:

- Searching for a Beneficiary from the Find tab ([Attachment B, Figure 1](#))
- Searching for a Beneficiary from the Eligibility tab ([Attachment B, Figure 2](#))
- Viewing Beneficiary screens ([Attachment B, Figure 3](#))

MARx HICN to MBI Crosswalk File

To assist MAOs and Part D sponsors with the ability to determine or match their beneficiary population between HICN and MBI, MARx will generate and distribute a monthly crosswalk data file. Each crosswalk data file will be created at the MAO/PDP Contract level. The crosswalk files will be sent monthly during the transition period.

- On March 4, 2018, Plans will receive an “initial” (one-time only) HICN to MBI Crosswalk file for past and present membership back to 2006.
- After the initial Crosswalk file, a monthly file will be sent to Plans to include any new enrollment changes.

The crosswalk file layout and naming convention is provided in [Attachment C, Figure 1](#). Please note, the crosswalk file naming convention has been updated from the version presented in the February 2018 Detail Release memo to only include one version of the file name per mode of plan delivery/retrieval.

MARx Output Data Files/Reports

At the start of the MBI transition period in April 2018, CMS will replace the HICN with the MBI on existing MARx output data files/reports that are transmitted to Plans. Before the MBI transition, starting on 11/13/2017, all fields that currently display the HICN were renamed “Beneficiary ID”, but the HICN continues to be displayed. Then during and after the MBI transition, the fields will continue to be named “Beneficiary ID”, but the MBI will be displayed. The following data files/reports will include the MBI:

- Agent Broker Compensation Data File ([Attachment C, Figure 2](#))

- Failed Payment Reply Data File ([Attachment C, Figure 3](#))
- Late Enrollment Penalty Data File ([Attachment C, Figure 4](#))
- Loss of Subsidy Data File ([Attachment C, Figure 5](#))
- Low Income Subsidy/Part D Premium Data File ([Attachment C, Figure 6](#))
- Daily Transaction Reply Report Data File ([Attachment C, Figure 7](#))
- Monthly Membership Data File ([Attachment C, Figure 8](#))
- Monthly Full Enrollment Data File ([Attachment C, Figure 9](#))
- Low Income Subsidy History Data File ([Attachment C, Figure 10](#))
- Monthly Premium Withholding Data File ([Attachment C, Figure 11](#))
- Medical Savings Account Deposit-Recovery Data File ([Attachment C, Figure 12](#))
- Monthly Medicare Secondary Payer Data File ([Attachment C, Figure 13](#))
- No Premium Due Data File ([Attachment C, Figure 14](#))
- Part B Claims Data File ([Attachment C, Figure 15](#))
- Payment Records Report ([Attachment C: Figure 16](#))
- HMO Bill Itemization Report ([Attachment C: Figure 17](#))

The following data files/reports ***will no longer be generated***:

- Monthly Membership Detail Report Drug Plan
- Monthly Membership Detail Report Non-Drug Plan
- Benefits Improvement & Protection Act of 2000 (BIPA) 606 Payment Reduction Report Data File

Frequently Asked Questions (FAQs)

[Attachment D](#) contains a list of frequently asked questions and answers about MARx and the New Medicare Card Project. MARx questions related to the implementation of the New Medicare Card Project can be emailed to MARXSSNRI@cms.hhs.gov.

Attachment A: New and Updated Transaction Reply Codes (TRC)

New Transaction Reply Code

Code	Type	Title	Short Definition	Definition
350	I	MBI is available for beneficiary	MBI AVAILABLE	<p>A transaction was submitted with a HICN during the transition to MBI and it was accepted. A Medicare Beneficiary Identification (MBI) number is assigned to the beneficiary. This TRC provides the MBI number assigned to the beneficiary in the Beneficiary Identifier field.</p> <p>Plan Action: None</p>

New Medicare Card or MBI Screen Views

Figure 1: Searching for a Beneficiary from the Find tab

Beneficiaries: Find (M201) Screen

- Beneficiary ID field – During the transition period (April 2018 through December 2019) the HICN or the MBI can be entered in this field.

The screenshot shows the 'Beneficiaries: Find (M201)' screen in the Medicare Advantage Prescription Drug (MARx) system. The header includes the CMS logo and the title 'Medicare Advantage Prescription Drug (MARx)'. Below the header, there are tabs for 'Welcome', 'Beneficiaries', and 'Payments'. The 'Beneficiaries' tab is selected, and the 'Find' sub-tab is active. The main content area displays the search form. It includes a text input field for the Beneficiary ID, which contains the text '999999999A'. Below the input field, there are 'Find' and 'Reset' buttons. The screen also shows the user role 'MCO REPRESENTATIVE' and the date '8/31/2017'.

This screenshot shows the same 'Beneficiaries: Find (M201)' screen, but with the 'Please Wait... Searching' message displayed in a yellow box, indicating that the system is processing the search request. The input field still contains the text '999999999A'.

Attachment B: MARx User Interface (UI) Screen Updates

Beneficiaries: Search Results (M202) Screen

- The Search Criteria returns the HICN in the Search Criteria: Beneficiary ID, regardless of whether the MBI or HICN is entered.
- Beneficiary ID in the main information displays the MBI.
- The user can either click the hyperlink for Update Enrollment or <Beneficiary ID>.

The screenshot shows the CMS Medicare Advantage Prescription Drug (MARx) interface. The header includes the CMS logo and the title "Medicare Advantage Prescription Drug (MARx)". Below the header, there are links for "Welcome", "Beneficiaries", and "Payments". The main navigation bar includes "Find", "New Enrollment", and "Eligibility". The page title is "Beneficiaries: Search Results (M202)". The user information is "User: Role: MCO REPRESENTATIVE Date: 8/31/2017". There are "Print" and "Help..." buttons. A yellow highlight contains the text: "Select the Beneficiary ID link to view Beneficiary Enrollment Details. Search Criteria: Beneficiary ID = 999999999A". Below this, a table titled "Beneficiaries" displays the search results.

Beneficiary ID	Name	Birth Date	Date of Death	Sex	State	County	Status
999999999A	JOHN DOE	07/26/1973		F	WA	KING	ACTIVE

The screenshot shows the CMS Medicare Advantage Prescription Drug (MARx) interface. The header includes the CMS logo and the title "Medicare Advantage Prescription Drug (MARx)". Below the header, there are links for "Welcome", "Beneficiaries", and "Payments". The main navigation bar includes "Find", "New Enrollment", and "Eligibility". The page title is "Beneficiaries: Search Results (M202)". The user information is "User: Role: MCO REPRESENTATIVE W/ UPDATE Date: 8/31/2017". There are "Print" and "Help..." buttons. A yellow highlight contains the text: "Select the Beneficiary ID link to view Beneficiary Enrollment Details. Select the Update Enrollment link to Update Beneficiary Enrollment/Institutional/NHCP-POS Drug Edit. Search Criteria: Beneficiary ID = 999999999A". Below this, a table titled "Beneficiaries" displays the search results.

Beneficiary ID	Name	Birth Date	Date of Death	Sex	State	County	Status	Action
999999999A	JOHN DOE	07/06/1931		F	NH	STRAFFORD	ACTIVE	Update Enrollment

Figure 3: Searching for a Beneficiary from the Eligibility tab**Beneficiary: Eligibility (M232) Screen**

- The HICN or MBI can be entered.
- The HICN is returned in the Claim Number field.

CMS Medicare Advantage Prescription Drug (MARx)

Welcome | [Beneficiaries](#) | [Transactions](#) | [Payments](#) | [Rates](#) | [Reports](#)

[Find Eligibility](#)

Beneficiary: Eligibility (M232) User: Role: Date: 3/16/2016 [Print](#) [Help...](#)

Enter the Beneficiary ID of the beneficiary.
* Required to enter Beneficiary ID

* Beneficiary ID

[Find](#)

Claim Number:
MBI Number:

Name:
Birth Date:
Date of Death:
Sex:
Address:

Most recent State:
Most recent County:

Enrollment Information for 03/16/2016					
Contract	PBP	Plan Type Code & Description	Start	End	Drug Plan
S2469	003	25 - MEDICARE PRESCRIPTION DRUG PLAN	03/01/2016		Y
H8096	001	46 - MEDICARE-MEDICAID PLAN/HMO	02/01/2016	02/29/2016	Y
S5684	114	25 - MEDICARE PRESCRIPTION DRUG PLAN	11/01/2012	01/31/2016	Y
X0061	002	46 - POINT-OF-SALE CONTRACTOR	08/01/2012	10/31/2012	Y
S5921	001	25 - MEDICARE PRESCRIPTION DRUG PLAN	01/01/2007	03/31/2009	Y
S5820	140	25 - MEDICARE PRESCRIPTION DRUG PLAN	01/01/2006	12/31/2006	Y

Entitlement Information			
Part	Start	End	Option
A	04/01/2000	03/31/2009	S
B	04/01/2000	03/31/2006	T
A	07/01/2011		E
B	04/01/2012		Y

Eligibility Information		
Part	Start	End
D	01/01/2006	03/31/2009
D	08/01/2012	

Medicare Plan Enrollment Ineligibility Periods Due to Incarceration		
Start	End	
There is no incarceration information for the beneficiary		

Medicare Plan Enrollment Ineligibility Periods Due to Not Lawfully Present		
Start	End	
There is no not lawfully present information for the beneficiary		

Number of Uncovered Months View Audit					
Start Date	Indicator	Number of Uncovered Months	Total Number of Uncovered Months	Record Add-Time Stamp	Record Type
01/01/2006		0	0	12/23/2005 21:02:20	V
01/01/2007		0	0	11/26/2006 10:20:53	V
08/01/2012		0	0	09/19/2012 21:26:21	V
11/01/2012		0	0	09/19/2012 21:33:43	V
01/01/2014	L	0	0	12/18/2013 18:46:08	V
01/01/2015	L	0	0	07/16/2014 20:58:56	V
01/01/2016	L	0	0	07/24/2015 22:16:03	V
02/01/2016		0	0	11/23/2015 11:16:15	V
03/01/2016		0	0	02/12/2016 19:19:42	V

Employer Subsidy		
Start	End	
There are no employer subsidies for the beneficiary		

Low Income Status				
Subsidy Start Date	Subsidy End Date	Premium Subsidy Level	Co-Payment Level	Subsidy Source
01/01/2006	12/31/2006	100%	2	DEEMED
01/01/2007	12/31/2007	100%	2	DEEMED
08/01/2012	12/31/2012	100%	2	DEEMED
01/01/2013	12/31/2013	100%	2	DEEMED
01/01/2014	12/31/2014	100%	2	DEEMED
01/01/2015	12/31/2015	100%	2	DEEMED
01/01/2016	12/31/2016	100%	2	DEEMED

Figure 1: HICN to MBI Crosswalk Data File

System	Type	Frequency	Dataset Naming Convention
MARx	Data File	Monthly	Gentran Mailbox/TIBCO MFT Internet Server: P.Rxxxxx.CROSSWLK.Dyymm01.Thhmsst Connect:Direct (Mainframe): zzzzzzzz.Rxxxxx.CROSSWLK.Dyymm01.Thhmsst Connect:Direct (Non-Mainframe): [directory]Rxxxxx.CROSSWLK.Dyymm01.Thhmsst

Item	Field	Size	Position	Description
1	Contract	5	1 – 5	Plan Contract Number
2	PBP	3	6 – 8	Plan Benefit Package ID
3	HICN	12	9 – 20	Health Insurance Claim Number
4	MBI	11	21 – 31	Medicare Beneficiary Identifier
5	Surname	30	32 – 61	Beneficiary's last name
6	First Name	12	62 – 73	Beneficiary's first name
7	Date of Birth	8	74 – 81	YYYYMMDD Format
8	Date of Death	8	82 – 89	YYYYMMDD Format
9	Gender	1	90	Beneficiary Gender Identification Code '0' = Unknown '1' = Male '2' = Female
10	Recent Enrollment Date	8	91 – 98	YYYYMMDD Format; The effective date of the beneficiary's most recent enrollment in the contract.
11	Recent Disenrollment Date	8	99 – 106	YYYYMMDD Format; The disenrollment date (if present) for the beneficiary's most recent enrollment in the contract.

Figure 2: Agent Broker Compensation Data File

Item	Field	Size	Position	Description
4	Beneficiary ID	12	10-21	<ul style="list-style-type: none"> Health Insurance Claim Number (HICN) until the start of Medicare Beneficiary Identifier (MBI) transition then MBI during and after MBI transition. <ul style="list-style-type: none"> MBI is 11 characters, left-justified with one space at the end

Figure 3: Failed Payment Reply Report Data File

Item	Field	Size	Position	Description
1	Beneficiary ID	12	1 – 12	<ul style="list-style-type: none"> Health Insurance Claim Number (HICN) until the start of Medicare Beneficiary Identifier (MBI) transition then MBI during and after MBI transition. <ul style="list-style-type: none"> MBI is 11 characters, left-justified with one space at the end

Figure 4: Late Enrollment Penalty Data File**Detail Record**

Item	Field	Size	Position	Description
5	Beneficiary ID	12	15-26	<ul style="list-style-type: none"> Health Insurance Claim Number (HICN) until the start of Medicare Beneficiary Identifier (MBI) transition then MBI during and after MBI transition. <ul style="list-style-type: none"> MBI is 11 characters, left-justified with one space at the end

Figure 5: Loss of Subsidy Data File

Item	Field	Size	Position	Description
1	Beneficiary ID	12	1 – 12	<ul style="list-style-type: none"> Health Insurance Claim Number (HICN) until the start of Medicare Beneficiary Identifier (MBI) transition then MBI during and after MBI transition. <ul style="list-style-type: none"> MBI is 11 characters, left-justified with one space at the end

Figure 6: Low Income Subsidy/Part D Premium Data File

Item	Field	Size	Position	Description
1	Beneficiary ID	12	1 – 12	<ul style="list-style-type: none"> Health Insurance Claim Number (HICN) until the start of Medicare Beneficiary Identifier (MBI) transition then MBI during and after MBI transition. <ul style="list-style-type: none"> MBI is 11 characters, left-justified with one space at the end

Figure 7: Daily Transaction Reply Report Data File

Item	Field	Size	Position	Description
1	Beneficiary ID	12	1 – 12	<ul style="list-style-type: none"> • Health Insurance Claim Number (HICN) until the start of Medicare Beneficiary Identifier (MBI) transition then • MBI during and after MBI transition. <ul style="list-style-type: none"> ○ MBI is 11 characters, left-justified with one space at the end

Figure 8: Monthly Membership Data File

Item	Field	Size	Position	Description
4	Beneficiary ID	12	20-31	<ul style="list-style-type: none"> • Health Insurance Claim Number (HICN) until the start of Medicare Beneficiary Identifier (MBI) transition then • MBI during and after MBI transition. <ul style="list-style-type: none"> ○ MBI is 11 characters, left-justified with one space at the end

Figure 9: Monthly Full Enrollment Data File

Item	Field	Size	Position	Description
1	Beneficiary ID	12	1 – 12	<ul style="list-style-type: none"> • Health Insurance Claim Number (HICN) until the start of Medicare Beneficiary Identifier (MBI) transition then • MBI during and after MBI transition. <ul style="list-style-type: none"> ○ MBI is 11 characters, left-justified with one space at the end

Figure 10: Low Income Subsidy History Data File

Item	Field	Size	Position	Description
4	Beneficiary ID	12	10-21	<ul style="list-style-type: none"> • Health Insurance Claim Number (HICN) until the start of Medicare Beneficiary Identifier (MBI) transition then • MBI during and after MBI transition. <ul style="list-style-type: none"> ○ MBI is 11 characters, left-justified with one space at the end

Figure 11: Monthly Premium Withholding Data File**Detail Record**

Item	Field	Size	Position	Description
5	Beneficiary ID	12	14-25	<ul style="list-style-type: none"> Health Insurance Claim Number (HICN) until the start of Medicare Beneficiary Identifier (MBI) transition then MBI during and after MBI transition. <ul style="list-style-type: none"> MBI is 11 characters, left-justified with one space at the end

Figure 12: Medical Savings Account Deposit-Recovery Data File**Detail Record**

Item	Field	Size	Position	Description
4	Beneficiary ID	12	12-23	<ul style="list-style-type: none"> Health Insurance Claim Number (HICN) until the start of Medicare Beneficiary Identifier (MBI) transition then MBI during and after MBI transition. <ul style="list-style-type: none"> MBI is 11 characters, left-justified with one space at the end

Figure 13: Monthly Medicare Secondary Payer Data File**Detail Record**

Item	Field	Size	Position	Description
2	Beneficiary ID	12	4-15	<ul style="list-style-type: none"> Health Insurance Claim Number (HICN) until the start of Medicare Beneficiary Identifier (MBI) transition then MBI during and after MBI transition. <ul style="list-style-type: none"> MBI is 11 characters, left-justified with one space at the end

Figure 14: No Premium Due Data File

Item	Field	Size	Position	Description
1	Beneficiary ID	12	1 – 12	<ul style="list-style-type: none"> Health Insurance Claim Number (HICN) until the start of Medicare Beneficiary Identifier (MBI) transition then MBI during and after MBI transition. <ul style="list-style-type: none"> MBI is 11 characters, left-justified with one space at the end

Figure 15: Part B Claims Data File**Record Type 1**

Item	Field	Size	Position	Description
3	Beneficiary ID	11	7-17	<ul style="list-style-type: none"> Health Insurance Claim Number (HICN) until the start of Medicare Beneficiary Identifier (MBI) transition then MBI during and after MBI transition. <ul style="list-style-type: none"> MBI is 11 characters, left-justified

Record Type 2

Item	Field	Size	Position	Description
3	Beneficiary ID	11	7-17	<ul style="list-style-type: none"> Health Insurance Claim Number (HICN) until the start of Medicare Beneficiary Identifier (MBI) transition then MBI during and after MBI transition. <ul style="list-style-type: none"> MBI is 11 characters, left-justified

Figure 16: Payment Records Report

Part B Claim Records Posted (PAYRECDS)												
PART B CLAIMS RECORDS POSTED IN <u>MMM</u> <u>YYYY</u> PAGE 1												
() * * * * * HMO Hnnnn * * * * *												
BENE ID	NAME	EXPENSE FIRST	DATES LAST	ALLOWED TOTAL CHARGES	REIMB AMT	CO INS AMT	DED APP	PHYS SUPP ID	PAY IND	CARRIER NUMBER	CARRIER PAID	INFORMATION CONTROL NUMBER
1AA0AA0AA00	SMITH	20100219	20100219	86.25	69.00	17.25	.00	AP233Z	1	01192	20100508	551210095332060
1AA0AA0AA00	SMITH	20100219	20100219	190.04	152.03	38.01	.00	AP233Z	1	01192	20100408	551120095332070
1AA0AA0AA00	SMITH	20091014	20091014	183.68	146.94	36.74	.00	F36241067	1	00953	20100523	682110111795270
1AA0AA0AA00	SMITH	20091014	20091014	95.31	76.25	19.06	.00	F37698329	1	00953	20100423	681130111796030
1AA0AA0AA00	SMITH	20091015	20091021	584.68	467.73	116.95	.00	F37698372	1	00953	20100523	685110111801720
1AA0AA0AA00	SMITH	20091016	20091016	33.54	26.83	6.71	.00	N33470209	1	00953	20100423	681116111802170
1AA0AA0AA00	SMITH	20091021	20091021	122.39	97.91	24.48	.00	P48970001	1	00953	20100505	681818092314320
1AA0AA0AA00	SMITH	20090215	20090215	31.58	22.73	8.85	.00	U7741Z	1	09102	20100501	591019085112690
1AA0AA0AA00	SMITH	20100225	20100225	35.09	28.07	7.02	.00	000000820	1	10102	20100410	492710091059500
1AA0AA0AA00	SMITH	20100301	20100301	35.09	28.07	7.02	.00	000000820	1	10102	20100510	499210091059710

Attachment C: MARx Output Data File/Report Updates

Figure 17: HMO Bill Itemization Report

Part A Bills Posted (BILLITEM)																			
123456789012345678901234567890123456789012345678901234567890123456789012345678901234567890123456789012																			
1PART A BILLS POSTED IN <u>MM</u> <u>YY</u> <u>YY</u> PAGE1																			
***** HMO <u>Hnnn</u> *****																			
BILL TYPE: INPATIENT																			
Bene ID	Name	PROV	INTE R	HMO PD	ADM DATE	TOTAL CHARGE S	NON-COV CHARGES	INP DED	NC BLD DEDUCT	CO INS DAYS	CO INSC HGS	CO INS AMOUNT	TOTAL DEDUC T	FROM DATE	THRU DATE	COV DAYS	REIM AMT	NP CD	CR
1AA0AA0AA00	SMITH	010139	52280	1	20180308	181547	0	0	0	0	0	0	0	20180308	20180326	18	0	n/a	CR
1AA0AA0AA00	SMITH	010113	10101	n/a	20180109	17527	0	0	0	0	0	0	0	20180109	20180113	4	14	n/a	n/a
1AA0AA0AA00	SMITH	010103	10101	n/a	20180213	594311	0	0	0	0	0	0	0	20180213	20180324	39	6464	n/a	n/a
1AA0AA0AA00	SMITH	010113	10101	n/a	20180322	30454	0	0	0	0	0	0	0	20180322	20180326	4	27	n/a	n/a
1AA0AA0AA00	SMITH	010113	10101	n/a	20180310	56084	0	0	0	0	0	0	0	20180310	20180316	6	85	n/a	CR
1AA0AA0AA00	SMITH	010104	10101	n/a	20180307	48325	0	0	0	0	0	0	0	20180307	20180316	9	396	n/a	n/a
1AA0AA0AA00	SMITH	010113	10101	n/a	20181117	22712	0	0	0	0	0	0	0	20181117	20181121	4	27	n/a	n/a
1AA0AA0AA00	SMITH	010113	10101	n/a	20181117	23389	0	0	0	0	0	0	0	20181117	20181121	4	27	n/a	n/a
1AA0AA0AA00	SMITH	01T113	10101	n/a	20180322	22095	22095	0	0	0	0	0	0	20180322	20180331	0	0	N	n/a
1AA0AA0AA00	SMITH	010023	52280	1	20180227	97263	0	0	0	0	0	0	0	20180227	20180316	17	0	n/a	n/a

Attachment D: New Medicare Card Project and MARx - Frequently Asked Questions (FAQs)

1. **Question:** How much time will Plans have to update their systems with MBIs before CMS begins to send MARx output data files/reports with the MBI only?
Answer: CMS will send the “initial” (one time only) HICN to MBI Crosswalk file for past and present membership at the beginning of March 2018. This will give Plans a few weeks to update their systems prior to receiving MARx output data files/reports with the MBI beginning in April 2018.
2. **Question:** If a beneficiary has had more than one HICN will CMS assign an MBI for each HICN?
Answer: No, each beneficiary will be assigned one MBI, and this will appear with their current HICN on the crosswalk files.
3. **Question:** Can beneficiaries appear on one crosswalk file multiple times?
Answer: Yes. The crosswalk files will be distributed at the 5 digit Plan contract number, and broken down at the PBP level within the file. If a beneficiary has enrollment history with multiple PBPs within the same contract, then they will appear multiple times (one record for each PBP) in the “initial” (one time only) crosswalk file for that contract.
4. **Question:** Does CMS Plan to send test crosswalk files to Plans prior to the initial crosswalk file.
Answer: No. CMS has provided the HICN to MBI Crosswalk file layout, and also the characteristics and format of the MBI. Plans are welcome to use this information to create their own test data in advance of the transition.
5. **Question:** What will the file naming convention be for the MARx HICN to MBI Crosswalk files?
Answer: The file naming convention will be “P.Rxxxxx.CROSSWLK.Dyymm01.Thhmmss”, where “xxxxx” is the contract number.
6. **Question:** How will Plans be able to reconcile the CMS replies to a Plan submitted input transactions to MARx which contain a beneficiary Health Insurance Claim Number (HICN)?
Answer: As part of CMS’s responsiveness to Plans, the Daily Transaction Reply Report Data File will contain Plan submitted input transactions verbatim back to the Plan (Transaction Type “P”). Plans will have the data they submitted readily at hand when receiving and reviewing transaction replies. For reconciliation Purposes, Plans may use the Transaction Tracking ID as part of their input transactions to MARx. This will allow the Plan to reconcile Transaction Reply Codes to the input transaction submitted.
7. **Question:** After transition begins will the HICN be displayed in field 24 of the DTRR for any TRCs?
Answer: No, this field was intended to represent a “previous HICN” when there is a HICN change.

8. **Question:** Will Plans continue to receive a TRC on the DTRR to communicate when a beneficiary's HICN changes after April 2018?

Answer: No. Plans will not be notified if a beneficiary's HICN changes beginning in April 2018. In the rare case that a beneficiary's MBI changes, starting in April 2018, the DTRR will communicate the MBI change using the same TRCs that are currently used to communicate HICN changes.

9. **Question:** With implementation of the MBI Plans will no longer be able to use the HICN format to differentiate between beneficiaries who receive benefits from the Railroad Retirement Board (RRB) versus the Social Security Administration (SSA). What if a Plan selects the incorrect agency when they submit a premium withhold request on behalf of a beneficiary?

Answer: If a Plan selects the incorrect agency for a premium withhold request MARx will automatically route the request to the correct agency. In this situation, for informational purposes, the Plan would receive either a TRC 255 (Plan submitted RRB W/H for SSA Beneficiary), or TRC 256 (Plan submitted SSA W/H for RRB Beneficiary).

10. **Question:** Which will be the first Daily Transaction Reply Report (DTRR) to contain MBIs?

Answer: The DTRR scheduled to be distributed on Sunday, 4/1/2018 will contain HICNs. The next DTRR will be distributed Tuesday, 4/3/2018 and will be the first to contain MBIs.

Questions or concerns about any of the information within this letter should be directed to the MAPD Help Desk at MAPDHelp@cms.hhs.gov, or 1-800-927-8069.

cc: DPO Representatives
Director, DPO
MAPD Customer Support