



DATE: January 10, 2019

TO: All Medicare Advantage, Prescription Drug Plan, Cost, PACE, and Demonstration Organizations Systems Staff

FROM: Jennifer R. Shapiro, Acting Director, Medicare Plan Payment Group
Center for Medicare

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SUBJECT: Announcement of the February 2019 Software Release

The purpose of this memo is to convey information about upcoming Medicare Advantage Prescription Drug (MARx) system changes. There is only one change for the February Release – see below for details. The update described in this communication will be included in the February 2019 Plan Communications User Guide v13.0, scheduled for publication on February 28, 2019.

The February 2019 Software Release will include the following:

Changes to the Medicare Part C Advantage Medicaid Status Data (MCMD) File

The monthly Medicare Part C Advantage Medicaid Status Data (MCMD) File will be modified to include start and end dates of entire Medicaid period(s) and match how they appear on the MARx User Interface (UI). With this change, the MCMD data file will display all past and current Medicaid periods in their entirety for beneficiaries with enrollment as of January 2017 or later.

The following data elements will be removed from the MCMD data file:

- Dual Status Code Start Date
- Dual Status Code End Date

A new field, Medicaid Record Type, will be added with the following possible values:

- V = Valid
 - This reflects an active Medicaid record.
- A = Audited
 - This reflects a no longer active Medicaid record. Audited records are not considered for the beneficiary's payment calculation.

This change is designed to make it easier for Medicare Advantage Plans to match/compare the Medicaid status data with other sources where Medicaid data is displayed, such as the MARx UI and the Monthly Membership Report (MMR) Detail data file. Please refer to the page below for the updated [MCMD Detail Record Layout](#).

Plans are encouraged to contact the MAPD Help Desk for any issues encountered during the systems update process. Please direct any questions or concerns to the MAPD Help Desk at 1-800-927-8069 or e-mail at mapdhelp@cms.hhs.gov.

Beneficiary Detail Record

Item	Field	Length	Position	Description
1	Record Type	1	1	3 - Beneficiary Detail Record(s)
2	Contract Number	5	2-6	Contract Identification
3	Medicaid Status Start Date	8	7-14	Medicaid Status Start Date YYYYMMDD Format
4	Medicaid Status End Date	8	15-22	Medicaid Status End Date YYYYMMDD Format Spaces if there is no end date
5	Medicaid Status	1	23	Medicaid Status: F – Full Dual P – Partial Dual
6	Dual Status Code	2	24-25	Dual Status Code: 01 = Eligible - entitled to Medicare- QMB only (Partial Dual) 02 = Eligible - entitled to Medicare- QMB AND Medicaid coverage (Full Dual) 03 = Eligible - entitled to Medicare- SLMB only (Partial Dual) 04 = Eligible - entitled to Medicare- SLMB AND Medicaid coverage (Full Dual) 05 = Eligible - entitled to Medicare- QDWI (Partial Dual) 06 = Eligible - entitled to Medicare- Qualifying individuals (Partial Dual) 08 = Eligible - entitled to Medicare- Other Dual Eligibles (Non QMB, SLMB, QDWI or QI) with Medicaid coverage (Full Dual) 09 = Eligible - entitled to Medicare – Other Dual Eligibles but without Medicaid coverage (Non-Dual) 10 = Other Full Dual
7	Record Add Timestamp	12	26-37	Record Add Timestamp for Dual Status Code YYYYMMDDHHMM format
8	Record Update Timestamp	12	38-49	Record Update Timestamp for Dual Status Code YYYYMMDDHHMM Format

Item	Field	Length	Position	Description
9	Medicaid Record Type	1	50	Medicaid Record Type: V = Valid A = Audited
10	Filler	25	51-75	Spaces