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Background

- Since the beginning of the Medicare program, the Social Security Number (SSN) based Health Insurance Claim Number (HICN) has been used as the beneficiary identifier for administering the Medicare program.

- The Centers for Medicare & Medicaid Services (CMS) uses the HICN with multiple parties, such as Social Security Administration (SSA), Railroad Retirement Board (RRB), States, Medicare providers, Medicare plans, etc.

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

- Per the legislative requirement, CMS must mail out all Medicare cards with the new Medicare Beneficiary Identifier (MBI) by April 2019.
SSNRI Program Goals

• **Primary goal:** To decrease Medicare beneficiaries’ vulnerability to identity theft by removing the SSN-based HICN from their Medicare id cards and replacing the HICN with a new Medicare Beneficiary Identifier (MBI), which does not contain an SSN or other personal information.

• In achieving this goal CMS seeks to:
  − Minimize disruption to Medicare operations
  − Minimize burdens for providers
  − Minimize burdens for beneficiaries
  − Provide a solution to our business partners that allows usage of HICN and/or MBI for business critical data exchanges
  − Manage the cost, scope, and schedule for the project
Complex IT Systems that affect Providers, Partners, and Beneficiaries

• A thoughtful, planned roll-out of the SSNRI is necessary for a successful implementation

• Along with our partners, CMS will address complex systems changes, conduct extensive outreach & education activities and analyze the many changes that will be needed to systems and business processes

• Affected stakeholders include:
  – Federal partners
  – States
  – Beneficiaries
  – Providers
  – Plans
  – Other key stakeholders, such as billing agencies, advocacy groups, data warehouses, etc.
For CMS, this means:

- Planning and analysis for over 75 complex CMS legacy IT systems, as well as contract modifications and procurements to initiate system changes
- Execution and testing of these system modifications
- Continued operations of existing systems while modifications occur - to ensure that beneficiaries have access to care and to avoid disruption to payment processes for rendered services
SSNRI Stakeholders

CMS has identified approximately 90 different stakeholder entities or groups that are impacted by SSNRI, (i.e. currently receive, store, use, and/or provide a HICN today)

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Implementation of SSNRI
The solution for SSNRI must provide capabilities to accomplish the following:

1. **Generation of MBIs for all beneficiaries:** Includes existing (currently active and deceased or archived) and new beneficiaries

2. **Issuance of new, redesigned Medicare cards:** New cards containing the MBI to existing and new beneficiaries

3. **Modification of systems and business processes:** Required updates to accommodate receipt, transmission, display, and processing of the MBI

4. **Provide MBI-HICN translation services:** Convert the MBI to the HICN and vice versa, for appropriate partners and stakeholders
CMS will use an MBI generator to:
- Assign 150 million MBI’s in the initial enumeration (60 million active and 90 million decease/archived) and generate a unique MBI for each new Medicare beneficiary
- Generate a new unique MBI for a Medicare beneficiary whose identity has been compromised
The Medicare Beneficiary Identifier will have the following characteristics:

- The same number of characters as the current HICN (11), but will be visibly distinguishable from the HICN
- Contain capitalized alphabetic and numeric characters throughout the 11 digit identifier
- Occupy the same field as the HICN on transactions
- Be unique to each beneficiary (e.g. husband and wife will have their own MBI)
- Be easy to read and limit the possibility of letters being interpreted as numbers (e.g. Alphabetic characters are upper case only and will exclude S, L, O, I, B, Z)
- Not contain any embedded intelligence or special characters
- Not contain inappropriate combinations of numbers or strings that may be offensive
- Not contain lowercase letters or characters

Presently, CMS does not anticipate that the MBI will be changed for an individual unless the MBI is compromised or for other reasons that are still under investigation (e.g. religious reasons)
MBI, HICN, and RRB Number

Health Insurance Claim Number (HICN)
• Primary Beneficiary Account Holder Social Security Number (SSN) plus Beneficiary Identification Code (BIC)
• 9-byte SSN plus 1 or 2-byte BIC
• Key positions 1-9 are numeric

Railroad Retirement Board (RRB) HICN
• RRB’s primary HICN format
• 7-12 bytes
• Positions 1-3 contain a variable length BIC
• Key position 1 is alphabetic

Medicare Beneficiary Identifier (MBI)
• New Non-Intelligent Unique Identifier
• 11 bytes
• Key positions 2, 5, 8, and 9 will always be alphabetic

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**Example Key Formats - Layout**

**NOTE:** Identifiers are Fictitious

<table>
<thead>
<tr>
<th>Key</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSA HICN</td>
<td>123-75-9812-A1</td>
</tr>
<tr>
<td>RRB</td>
<td>A-170-99-7608</td>
</tr>
<tr>
<td>MBI</td>
<td>1EG4-TE5-ML72</td>
</tr>
</tbody>
</table>

**NOTE:** Dashes are for display purposes only; they are not stored in the database nor used in file formats.
SSNRI Transition Period

- CMS established a transition period during which the HICN or MBI will be accepted from providers, beneficiaries, plans, and other external stakeholders.

- CMS expects the transition period to run from April 2018 through December 31, 2019.

- All stakeholders who 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 HICN during the transition period.
SSNRI Transition Period

• CMS’ processes and systems will be updated to accept and return the MBI as of April 1, 2018. CMS will accept, use for processing, and return to stakeholders either the MBI or the HICN during the transition period.

• After the transition period, affected systems interacting with stakeholders will only use the MBI for most information exchanges.

• There may be limited exceptions for use of the HICN after transition; (i.e. appeals, adjustments or other scenarios).
Transition Period Timeline

- Jan 2018: Activate MBI Generator and Translation Services
- Apr 2018: Transition Period Begins
- Apr 2018 – Dec 2019: Accept/Process Both HICN and MBI Transactions
- Apr 2018 – Apr 2019: Conduct Phased Card Issuance to Beneficiaries
- Jan 2020: HICNs no longer exchanged with Beneficiaries, Providers, Plans, and other third parties *Limited Exceptions

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SSNRI Card Issuance

- CMS will start issuing new Medicare cards for existing beneficiaries after the initial enumeration of MBIs; roughly 60 million beneficiaries

- We will be removing the gender and signature line from the new Medicare cards

- We will be working in conjunction with the Railroad Retirement Board who will also issue their own cards

- We will be working with states that include the HICN on their Medicaid cards to effectuate a change to remove the Medicare ID or replace it with a MBI

- CMS will be conducting intensive education and outreach to our beneficiaries and their agents to help them prepare for this change
Outreach and Education

• CMS will provide outreach and education to:
  – The provider community (1.5M providers)
  – Approximately 60 million beneficiaries
  – States and Territories
  – Key stakeholders, vendors & other partners

• CMS will ensure that we involve our stakeholder communities in our outreach and education efforts through their existing vehicles for communication
Milestones and Progress to Date
SSNRI Implementation Schedule

2016 - 2017

- March 2016 – Launch Phase I SSNRI web content on cms.gov
- March to August 2016 – Conduct listening sessions with external stakeholders
- April 2016 – October 2017 – Develop/Test internal system and business process changes
- August 2016 – Launch Phase II SSNRI web content on cms.gov
- October –December 2017 – Conduct Integrated Testing for CMS, SSA, RRB, States, Health Plans, and Provider Systems
- October 2017 – Finalize Changes to IT Systems and Internal Systems and Unit Testing
- October 2017 – CY18 Annual Election Period; Distribute Medicare &You (M&Y) Handbook Announcing New Medicare Card

2018 - 2020

- January 2018 – Begin Beneficiary Education and Outreach
- April 2018 – All systems & processes able to accept MBI
- April 2018 – Begin distributing Medicare cards with MBI to 60M beneficiaries
- October 2018 - CY19 Annual Election Period; Distribute M&Y Handbook
- April 16, 2019 – Statutory deadline for issuance of new Medicare Cards
- January 2020 – HICN no longer exchanges with Beneficiaries, Providers, Plans and other 3rd parties

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Provider Listening Sessions

- CMS has held 3 provider listening sessions to obtain feedback from providers

- As a result, we have engaged in dialogue regarding implementation, usage of the MBI, and how it will affect your operations, systems and business processes

- We will continue to dialogue with you to encourage your feedback during this implementation
Questions to Consider

Current Operational Processes

• When do you ask for the Medicare card and what do you use Medicare card and HICN for?
• How have you handled mass patient identification changes with other insurers?
• How do you currently handle Health Insurance Claim Number (HICN) and name changes?
• Who do you exchange the HICN with?
• What transactions do you use the HICN on?
• Where do you store the HICN?

Patient Interactions

• How often does a patient not have their Medicare card OR does not know their HICN?
• What do you do when the patient does not have their Medicare card OR does not know their HICN?
• Do your patients usually bring their health insurance cards with them (Medicare or other patients)?
• Without a HICN, what is the percentage of beneficiaries who are denied services?

• IN THE FUTURE:
  • If the patient is unable to provide you with a MBI, what will you do to ensure they can get the services they need at that visit?
  • What is the impact on the patient who needs service immediately and for whom you don’t have an MBI?
  • What would you do if a patient has their MBI from a prior visit but not for the current visit?
  • What is the percentage of beneficiaries that will be denied services if you cannot obtain their MBI?

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Questions to Consider

**Implementation**
- What systems and business process impacts do you expect given the change from HICN to MBI?
- How much time do you need to implement these changes?
- What other systems issues/implementation are also occurring during the same timeframe?
- How do we need to communicate information to you?
- What are some critical success factors or readiness factors for you?
- What performance metrics will reflect a successful SSNRI Implementation?
- What outreach and training will you need to perform to be ready?

**Patient Communication**
- How do you think this change will affect your patients?
- How do you suggest we communicate with patients about the new card and the associated changes?

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Final Thoughts

• Thank you for participating in this discussion today

• CMS is very interested in your feedback to obtain any additional information on timeframes, implementation concerns or other scenarios that may affect the SSNRI program implementation

• Our goal is to provide minimal disruption to your current operations and procedures as possible. Your feedback is crucial

• Please submit any additional information to the SSNRI team mailbox at: SSNRemoval@cms.hhs.gov