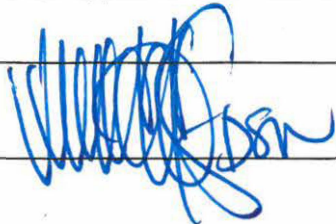




INFORMATION NOTICE 19-09

Date January 2, 2020

To Department of Behavioral Health (DBH) Clinics, Support Staff and Contract Agencies

From Veronica Kelley, DSW, LCSW, Director 

Subject New Medicare Beneficiary Identifier (MBI)

Purpose To provide information regarding the requirement to use the new Medicare Beneficiary Identifier (MBI) when submitting claims for services rendered to Medicare clients.

Background The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) required the U.S. Department of Health and Human Services (HHS) – Centers for Medicare and Medicaid Services (CMS) to remove all social security numbers (SSN) from all Medicare cards by April 2019. Effective January 1, 2020, new MBI's are replacing SSN based Health Insurance Claim Number's (HICN) for all Medicare transactions, including payment claims. Medicare will reject claims submitted with a HICN, rather than the newly issued MBI.

New Medicare Cards CMS provided all Medicare clients new identification cards reflecting their issued MBI. The new cards reflect the following changes:

- MBI has replaced HICN;
- Gender designation removed;
- "Effective Date" replaced by "Coverage Starts" (meaning of terms remains unchanged);
- Hospital/Medical designations removed leaving reference to Part A and Part B only;
- Signature line has been removed; and
- Information descriptions in both English and Spanish.

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MBI versus HICN

The following table outlines key differences between an MBI and HICN to allow for easy distinction between the two identifiers:

Descriptor	HICN	MBI
Identification Keys	Primary Beneficiary Account Holder SSN plus Beneficiary Identification Code (BIC)	New, Non-Intelligent Unique Identifier
Number of bytes	9-byte SSN plus 1 or 2 byte BIC	11 bytes
Key Positions	1-9 and 11 are all numeric	Positions 2, 5, 8 and 9 are always alphabetic. All others may be numeric or alphabetic.
Example	123-45-6789-A1	1EG4-TE5-MK73

Medicare Claim Submission

Starting January 1, 2020, **all claims** must be submitted using MBI, regardless of the day services were provided to the client. If claims do not reflect the MBI, claims will be rejected with the following codes:

- Electronic claims – Reject codes: Claims Status Category Code of A7 (acknowledgement rejected for invalid information), a Claims Status Code of 164 (entity’s contact/member number), and an Entity Code of IL (subscriber)
- Paper claims – Paper notice: Claim Adjustment Reason Code (CARC) 16 “Claim/service lacks information or has submission/billing error(s)” and Remittance Advice Remark Code (RARC) N382 “Missing/incomplete/invalid patient identifier”

The only exceptions in which the HICN can be used include:

- Appeals – may use for claim appeals and related forms;
- Claim status query – to check status of a claim prior to January 1, 2020;
- Span-date claims – if patient began receiving inpatient services before December 31, 2019.

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DBH Clinic Responsibilities

To ensure client MBIs are being collected and recorded for proper claim processing, please refer to the following steps for guidance on what steps to take:

Step	Responsible Party	Action								
1	Clinic Clerical Staff	Upon client arrival and check-in at appointment, look up the client in SIMON to determine if their policy number still contains an HICN or has been updated with their MBI.								
		<table border="1"> <thead> <tr> <th>If ...</th> <th>Then ...</th> </tr> </thead> <tbody> <tr> <td>MBI is updated on <i>Client Maintenance Screen</i> in SIMON</td> <td>Proceed to next step of standard clinic practices.</td> </tr> <tr> <td> Note: The <i>Client Maintenance Screen</i> is the 1 2 screen from the Main Menu in SIMON. </td> <td></td> </tr> <tr> <td>MBI is not updated on the <i>Client Maintenance Screen</i> in SIMON or if they are a new client</td> <td>Proceed to Step 2</td> </tr> </tbody> </table>	If ...	Then ...	MBI is updated on <i>Client Maintenance Screen</i> in SIMON	Proceed to next step of standard clinic practices.	Note: The <i>Client Maintenance Screen</i> is the 1 2 screen from the Main Menu in SIMON.		MBI is not updated on the <i>Client Maintenance Screen</i> in SIMON or if they are a new client	Proceed to Step 2
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DBH Clinic Responsibilities,
continued

Step	Responsible Party	Action						
2	Clinic Clerical Staff	If the client's MBI is not updated in SIMON, on same day as the client's visit, clerical staff will complete the following:						
		<table border="1"> <thead> <tr> <th>If ...</th> <th>Then ...</th> </tr> </thead> <tbody> <tr> <td>Client has a copy updated Medicare card with MBI or knows their MBI</td> <td>Contact the Financial Interviewer Team at 909-388-0960 and provide MBI.</td> </tr> <tr> <td>Client does not have a copy of their updated Medicare card or does not know their MBI</td> <td>Contact the Financial Interviewer Team at 909-388-0960 and request MBI look-up.</td> </tr> </tbody> </table>	If ...	Then ...	Client has a copy updated Medicare card with MBI or knows their MBI	Contact the Financial Interviewer Team at 909-388-0960 and provide MBI.	Client does not have a copy of their updated Medicare card or does not know their MBI	Contact the Financial Interviewer Team at 909-388-0960 and request MBI look-up.
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3	Financial Interviewer	<p>Upon receiving the client's MBI or verifying the client's MBI through Noridian, update the client's MBI in the <i>Insurance Policy Maintenance Selection</i> screen in SIMON.</p> <p>When entering MBI's, no hyphens or spaces shall be used to avoid rejection of future claims.</p> <p>Note: The <i>Insurance Policy Maintenance Selection Screen</i> is the 7 2 2 screen from the Main Menu in SIMON.</p>						
4	Clinic Clerical Staff	<p>If available, photocopy and the client's Medicare card. Retain a photocopy of the client's card and place it in their chart.</p> <p>Forward the scanned copy along with any updated forms to the Financial Interviewer Team: DBH-IT-FI@dbh.sbcounty.gov.</p>						

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Contract Agency Responsibility

Contract agencies are responsible for obtaining client MBI's and ensuring Medicare claim submissions include client MBI's as described herein.

Client MBI Look Up

Clients can access their MBI via the mymedicare.gov website. They will need to have an online account to access their MBI via the secured website. If the client does not have an online account, they are able to create one. Clients will need the following information to create an online account:

- Social Security Number;
 - Last Name;
 - Mailing Address (if available);
 - Date of Birth;
 - City or Zip Code of their residence, and
 - Coverage start date (Part A or Part B).
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Reference

- Strategic Management Services, LLC: [New Medicare Beneficiary Identifier \(MBI\)](#) (August 2019)
 - Centers for Medicare & Medicaid Services: [Medicare Beneficiary Identifiers \(MBI\)](#) (January 2020)
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Questions

- For questions regarding this Information Notice, please contact the Financial Interviewer Team: DBH-IT-FI@dbh.sbcounty.gov.
 - For questions regarding claim submissions and processing please contact the Revenue Claims Management Unit: DBH-IT-ASGLeads@dbh.sbcounty.gov
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