Changes to Provider Web Portal and Paper Remittance Advice to Support New Medicare Number Project

In an effort to combat identity theft and safeguard taxpayer dollars, the United States Congress passed the Medicare Access and CHIP Reauthorization Act (MACRA) of 2015 directing the Centers for Medicare & Medicaid Services (CMS) to remove any reference to a Social Security Number (SSN) from all Medicare cards by April 2019. This mandated national undertaking, formerly referred to by CMS as the Social Security Number Removal Initiative (SSNRI), is now known simply as the New Medicare Card replacement initiative.

The focal point of the New Medicare Card replacement initiative is the Medicare Beneficiary Identifier (MBI), which will replace a recipient’s existing SSN-based Health Insurance Claim Number (HICN) currently inscribed on their Medicare benefits card. The MBI will be used for all Medicare transactions including eligibility status, claims and billing. CMS will begin issuing MBIs and mailing new Medicare cards to active recipients in 2018.

In preparation for the national transition from HICN to MBI, state agencies across the country are in the process of readying their respective Medicaid Management Information System (MMIS) to support usage of the MBI for “dual eligible” (Medicare and Medicaid) recipients. The Nevada Department of Health and Human Services’ Division of Health Care Financing and Policy (DHCFP) will make programmatic changes in support of CMS’ issuance of new Medicare cards.

Provider Web Portal Change:

One change that will be made by DHCFP to support the new Medicare number conversion will impact the policy number (HICN) of the recipient. The HICN display in the Electronic Verification System (EVS) will be masked when the system change goes into effect on July 16, 2018.

- Until July 16, 2018, the HICN will always be returned in EVS responses, regardless of whether or not an MBI was indicated in the enrollment inquiry. This includes EVS responses for individuals newly enrolled in Medicare who are only aware of their MBI, but have been assigned a HICN for internal processing only.
- After July 16, 2018, if a member has an MBI on file with DHCFP, an MBI will always be returned in the enrollment response, regardless of whether or not the HICN was indicated in the enrollment inquiry.

Paper Remittance Advice (RA) Change:

A second change that will be made by DHCFP to support the new Medicare number conversion will impact the paper remittance advice. Beginning July 16, 2018, the HICN will be masked on the paper RA. On and after January 1, 2020, the HICN may not be submitted on Nevada Medicaid or Medicare claims. The MBI must be used in place of the HICN on all claim submissions.