



A CELERIAN GROUP COMPANY



New Medicare Card Preparation for Home Health & Hospice Providers ACT



ASK-THE-CONTRACTOR TELECONFERENCE (ACT)

CGS ADMINISTRATORS, LLC. | NYKESHA SCALES, MBA

September 27, 2017

New Medicare Cards

<https://www.cms.gov/Medicare/New-Medicare-Card/index.html>

- Known before as Social Security Number Removal Initiative (SSNRI)
- Under current system, several business partners use HICN to process Medicare transactions
- Under the new system, each person enrolled in Medicare will:
 - be assigned a new MBI
 - be mailed a new Medicare card

MBI is confidential like the SSN and should be protected as Personally Identifiable Information.

Background

- **Health Insurance Claim Number (HICN)** is a Medicare beneficiary's identification number, used for processing claims and determining eligibility for services across multiple entities (for example, Social Security Administration (SSA), Railroad Retirement Board (RRB), States, Medicare providers, and health plans)
- Medicare Access and CHIP Reauthorization Act (MACRA) of 2015 mandates removal of the Social Security Number (SSN)-based HICN from Medicare cards to address current risk of beneficiary medical identity theft
- Legislation requires that CMS mail out new Medicare cards with a new Medicare Number (also referred to as **Medicare Beneficiary Identifier – (MBI)**) by April 2019
- New Medicare numbers won't change Medicare benefits
- People with Medicare may start using their new Medicare cards as soon as they get them

Operational Goals

- **Primary Operational Goal:** Decrease Medicare Beneficiary vulnerability to identity theft by removing the SSN-based number from their Medicare identification cards and replace with a new unique Medicare Number
- In achieving this goal, CMS seeks to
 - Minimize burdens for beneficiaries
 - Minimize burdens for providers
 - Minimize disruption to Medicare operations
 - Provide a solution to our business partners that allows usage of HICN and/or new Medicare Number for business critical data exchanges
 - Manage the cost, scope, and schedule for the project

Operations: 3 Steps to New Medicare Numbers

- 1. Generate new, unique Medicare Numbers for all people with Medicare:** Includes existing (currently active, deceased, or archived) and people new-to-Medicare
- 2. Issue new, redesigned Medicare cards:** New cards containing the new Medicare Number to existing and new people with Medicare
- 3. Modify systems and business processes:** Required updates to accommodate receipt, transmission, display, and processing of the new Medicare Number

Operations: HICN vs MBI

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

Medicare Beneficiary Identifier (MBI)

- New Non-Intelligent Unique Identifier
- 11 bytes
- Key positions 2, 5, 8, and 9 will always be alphabetic

Key	Example
SSA HICN	123-45-6789-A1
MBI	1EG4-TE5-MK73

Note: Identifiers are fictitious and dashes for display purposes only; they are not stored in the database nor used in file formats.

CMS anticipates that the MBI won't be changed for an individual unless the MBI is compromised.

OLD Medicare Card vs NEW Medicare Card



Operations: Transition Period

- Transition period will run from **April 1, 2018 through December 31, 2019**
- CMS will complete its system and process updates to be ready to accept and return the new Medicare Number on April 1, 2018
- All stakeholders who submit or receive transactions containing the HICN must modify their processes and systems to be ready to submit or exchange the new Medicare Number by April 1, 2018
 - Stakeholders may submit **either** the new Number or HICN **during the transition period**
- CMS will accept, use for processing, and return to stakeholders either the new Medicare Number or HICN, whichever is submitted on the claim, during the transition period

Operations: Transition Period (continued)

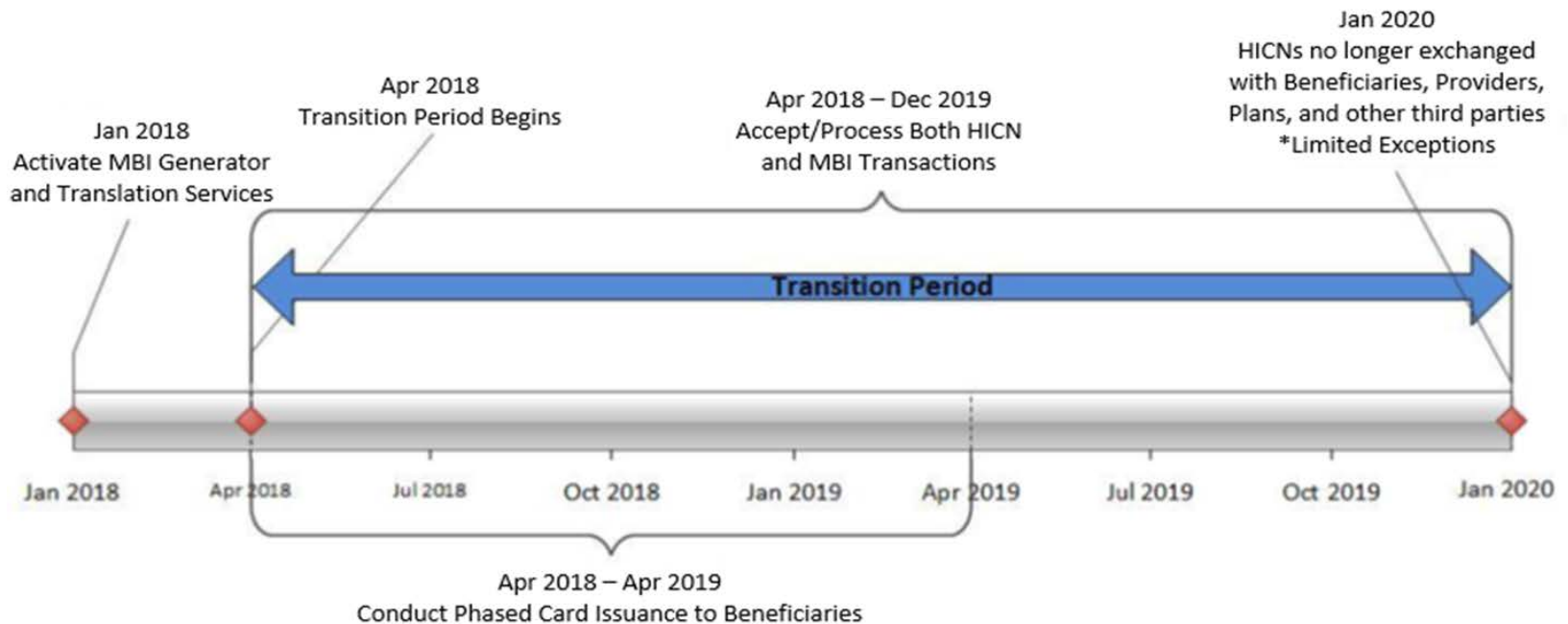
Medicaid and supplemental insurers

- State Medicaid Agencies and supplemental insurers will be provided the new Medicare Numbers for Medicaid-eligible people who also have Medicare before new Medicare cards are mailed
- During the transition period, Medicare crossover claims will process and transmit with either the current HICN or new number

Railroad Retirement Board (RRB) beneficiaries

- RRB will continue to send cards with the RRB logo, but you can't tell from looking at the new Medicare Number if it's for an RRB beneficiary

MBI Generation and Transition Period



Current Outreach Focus:

Supporting Providers

- Providers are implementing system changes to support the new Medicare number
- How CMS and MACs are supporting this:
 - General information and guidance
 - Developing a secure look-up tool for providers (to find new number at the point-of-service)
 - Message on the HIPAA Eligibility Transaction System (HETS) to tell if a beneficiary's new Medicare card was mailed



Outreach to People with Medicare

This is where we really need YOU!

What We Know from People with Medicare

- In general, reactions were positive
 - A good thing to do—protecting identities
 - Smart—will keep SSNs out of the hands of criminals
 - Helpful—need a new card because old card is worn and frayed
 - Long overdue—should have been done some time ago
- Some concerns expressed among a minority of participants
 - Beneficiaries with Medicare Advantage plans concerned about confusing new Medicare card with MA card
 - A few who use their card to reference their SSN or use their Medicare card as an alternate form of identification

Messaging That Works:

Language to Use

Language to Use:	Here's Why:
The new Medicare card has a new "Medicare Number"	"Medicare Number" resonated best with consumers in testing, who easily understand that "number" can include identifiers that are alpha-numeric. Consumers also understand that an alpha-numeric number is considered more "safe."
Medicare is removing Social Security Numbers from Medicare cards	This soft, simple language is well received and easily understood. Consumers prefer "removing" to "taking off," which implies loss. Without specific reference to removal of Social Security Numbers, people with Medicare are more suspicious of the change, leading to conjecture including "my benefits are changing/decreasing" or "this is a waste of money."
Medicare will mail you a new card	This clearly conveys that a new card will arrive by mail, which is more specific than generic words such as "send" or "get."
The change will help protect your identity	While most consumers perceive removing Social Security Numbers from Medicare cards as positive, they still want CMS to explain why this is happening. Consumers perceive preventing identity theft to be the primary benefit of and reason for the change and feel it is a good thing to do.

Messaging that Works (continued)

Language to Use:	Here's Why:
"Unique number" or "number that's unique to you"	Explaining that the number is unique reassures consumers that the new number won't be duplicated or shared with anyone else. Consumers did not react positively to the phrase, "randomly generated number," as it raised concerns that the number could be given to more than one person, such as when multiple people win the lottery.
Once you get your new card, destroy your old card and start using your new card right away	Destroying the old card and using the new card immediately is an understood protocol, but consumers appreciate this as good information to reconfirm.
New card, new number	Helps consumers understand that numbers aren't simply being removed from the cards; they're being replaced with the new unique number.
People with Medicare	Medicare has consistently referred to "beneficiaries" as "People with Medicare" in TV ads and publications for 15 years, and we recommend keeping this language.
Medicare will be mailing new Medicare cards between April 2018 and April 2019	Including a start and stop date for the receipt of new Medicare cards is important to help set consumer expectations and alleviate concerns if a card doesn't immediately arrive.
Protect yourself by making sure no one can get your personal information from your old Medicare card	This is considered good information to re-state and confirms consumer perceptions that preventing theft of their own personal information is the primary advantage of this project.

Messaging That Works (continued)

Other key points to reinforce....

- Understand that mailing everyone a new card will take some time
- Card might arrive at a different time than their friend's or neighbor's
- Make sure beneficiary's mailing address is up-to-date
 - If address needs to be corrected, contact Social Security at <http://ssa.gov/myaccount> or 1.800.772.1213 (TTY: 1.800.325.0778)
- Beneficiaries should beware of anyone who contacts them about their new Medicare card
 - Will never be asked to provide personal or private information to get new Medicare number and card

Sending New Medicare Cards

- New cards start mailing in April 2018 and all cards are replaced by April 2019 deadline
- Gender and signature line won't appear on new Medicare cards
- Once their card is mailed, someone with Medicare also may access their New Medicare Number on a Medicare Summary Notice or through <http://www.MyMedicare.gov>
- The Railroad Retirement Board will issue new cards to RRB beneficiaries

Your Guide for Outreach

■ Now – September 2017: Setting Expectations

- General Messaging
 - Coming in 2018: New Medicare cards!
 - Make sure your address on file with Medicare is correct or go to <http://ssa.gov/myaccount> to update
- Simple and responsive high-level messaging on <http://www.medicare.gov> and 1.800.MEDICARE, Guard Your Card ad campaign
- Training to prepare partners ahead of broad-based outreach and education

■ September 2017: Card Awareness

- New Medicare card design is unveiled
- Beneficiaries get information about the new card in the 2018 “Medicare & You” Handbook: When you get your new card, safely and securely destroy the old Medicare card, keep the new number confidential
- Educational Materials and a more detailed training webinar will be available for Partners

Your Guide for Outreach (continued)

- **October 2017 – December 2017: Open Enrollment**

- Continue “Card Awareness” outreach through messaging embedded in regular Open Enrollment events and earned media, steady drumbeat messaging via press, social media, speaking engagements, blogs, etc.
- Card messaging should supplement, but not supersede “review and compare” actions for Open Enrollment

- **January 2018 – March 2018: New Cards are Coming!**

- Ramp up pre-mailing outreach and identify opportunities for sharing messages and materials with providers and people with Medicare

Your Guide for Outreach (continued)

- **April 2018 – April 2019: Watch for your New Card**
 - Cards are mailed!
 - Simple, direct instructions included with the new card mailing
 - Active, localized information sharing
 - Robust messaging on <http://medicare.gov>, 1.800.MEDICARE, Medicare social media
 - Specialized communications for those with limited English proficiency and alternative format needs

A Few Words About Fraud

- No surprise—we anticipate there will be “bad actors” who try to take advantage of this change and have monitored limited reports already
- Existing basic messages around fraud prevention and detection still apply
 - Medicare will **never** contact you for your Medicare number or other personal information.
 - Don’t share your Medicare number or other personal information with anyone who contacts you by phone, email, or by approaching you in person, unless you’ve given them permission in advance.
- Usual processes still apply for raising concerns and reports of potential fraud
- “Guard Your Card” ad campaign at end of summer will introduce that new Medicare cards are coming and tie to protecting a person’s information

How to be Prepared

- Subscribe to the weekly **MLN Connects** newsletter for updates and new information, <https://public.govdelivery.com/accounts/USCMS/subscriber/new>
- Attend training events
- Verify your patients' addresses:
 - If address you have on file is different than address you get in electronic eligibility transaction responses, ask your patients to contact Social Security and update their Medicare records
- Inform patients new cards will be issued in 2018
- Get ready to use the new MBI Format:
 - Ask your billing and office staff if your system can accept the 11 digit alpha numeric MBI
 - If you use vendors to bill Medicare, ask them about their MBI practice management system changes and make sure they are ready for the change
- For updates: <https://www.cms.gov/Medicare/SSNRI/Providers/Providers.html> and/or <https://www.cms.gov/Medicare/SSNRI/Index.html>

Stay Connected

- Find more technical information, detailed updates, training opportunities, and materials to share on the Web: <https://www.cms.gov/newcard>
- Comments and questions are always welcome! Send to: SSNRemoval@cms.hhs.gov



Resources

CGS HH&H Website: myCGS Portal

<http://www.cgsmedicare.com/hhh/myCGS/index.html>

The screenshot shows the myCGS Portal website. On the left is a vertical navigation menu with the following items: myCGS Portal, myCGS Login, FAQs, User Manual, Help Desk Information/Contact, myCGS Password Help (PDF), Appeals, Claims, Customer Service, EDI, Education & Resources, Enrollment, Financial/Audit & Reimbursement, Forms, LCDs/Coverage, Medical Review, News & Publications, and Tools. The main content area has a breadcrumb trail: Home » Home Health & Hospice » myCGS Portal » myCGS. Below this is the myCGS logo. A red box highlights the logo and a text box to its right that says "myCGS: Login, FAQs, User Manual, Help Desk". Below the logo is the heading "The Jurisdiction 15 Web Portal" followed by a paragraph describing the portal's purpose. Another paragraph explains the requirement for an EDI agreement. A yellow box contains a message: "MyCGS does not currently support simultaneous use of the portal on multiple browser tabs. [Learn more here.](#)". Below this is the "Resources" section, which lists four items: myCGS User Manual, Frequently Asked Questions, myCGS Help Desk and Contact Information, and myCGS Password Quick Reference Guide (PDF). A summary of functions follows, listing three items: Eligibility (PDF), Forms (PDF), and Remittance (PDF). In the top right corner of the website, there are links for Print, Bookmark, Email, and Font Size.

myCGS Portal

- myCGS Login
- FAQs
- User Manual
- Help Desk Information/Contact
- myCGS Password Help [PDF](#)

Appeals

Claims

Customer Service

EDI

Education & Resources

Enrollment

Financial/Audit & Reimbursement

Forms

LCDs/Coverage

Medical Review

News & Publications

Tools

Home » Home Health & Hospice » myCGS Portal » myCGS

Print | Bookmark | Email | Font Size: + | -

myCGS

myCGS: Login, FAQs, User Manual, Help Desk

The Jurisdiction 15 Web Portal

myCGS is a web-based application developed specifically to serve the needs of health care providers and their staff in Jurisdiction 15. Access to myCGS is available 24/7, and is free of charge to all CGS providers. myCGS offers a variety of functions, such as, access to beneficiary eligibility, claim and payment information, forms allowing you to submit redetermination requests, and respond to Medical Review Additional Development Requests (ADR), and much more. Refer to the [myCGS User Manual](#) Web page for more details.

To use myCGS, providers must have an Electronic Data Interchange (EDI) agreement on file with CGS. If you do not have an EDI agreement with CGS, refer to the [J15 EDI Enrollment \(Agreement\) Form & Instructions](#) [PDF](#) document for assistance. In addition, to ensure you are able to utilize this free self-service option, please refer to the [myCGS System Requirements](#).

MyCGS does not currently support simultaneous use of the portal on multiple browser tabs. [Learn more here.](#)

Resources

Once user access is established, providers are encouraged to utilize the following learning resources:

- myCGS User Manual
- Frequently Asked Questions
- myCGS Help Desk and Contact Information
- myCGS Password Quick Reference Guide [PDF](#)

A summary of some of the myCGS functions you may be interested in as a myCGS user:

- Eligibility [PDF](#)
- Forms [PDF](#)
- Remittance [PDF](#)

No costs associated with access to myCGS

What Can myCGS Do For My Agency?

- Use myCGS to do all of this & more...
 - Submit Quarterly Credit Balance Reports
 - Submit Cost Reports
 - Respond to Medical Review (MR) Additional Documentation Requests (ADRs)
 - Submit Requests for Redeterminations (including attachments)
 - Upload attachments to your myCGS redetermination requests up to 40MBs in size (not to exceed a total attachment size of 150MBs)
 - View & Print Copies of Remittance Advices
 - Check Patient Eligibility 24/7
 - Request an “immediate offset” of a demanded overpayment (eOffset)
 - View Number of Claims Approved for Payment & Approved Amounts
 - Submit general inquiries via myCGS
- Register TODAY, <http://www.cgsmedicare.com/mycgs/index.html>

myCGS Assistance

- myCGS Frequently Asked Questions (FAQs),
<http://www.cgsmedicare.com/hhh/myCGS/FAQs.html>
- myCGS Brochures/Resources,
http://www.cgsmedicare.com/hhh/mycgs/brochures_resources.html
- myCGS Help Desk,
 - Supported by CGS Electronic Data Interchange (EDI) staff
 - 1.877.299.4500 (Option 2)

CGS HH&H Web Page

<http://www.cgsmedicare.com/hhh/index.html>

The screenshot shows the CGS HH&H Web Page with several callouts highlighting key features:

- Contact Us Link:** Points to the "Contact Us" link in the QUICK LINKS section.
- Click "+" for Quick Links:** Points to the "+" icon in the MORE QUICK LINKS section.
- Links to Hot Topics:** Points to the HOT TOPICS section.
- Main Menu Navigation:** Points to the left sidebar menu.

The page layout includes a top navigation bar with links for Medicare Home, DME, JC DME, J15 Part A, J15 Part B, and J15 HHH. The main content area features a large banner about security and MFA, a section for DDE users, and a section for Cycle 2 Provider Enrollment Revalidations. The right sidebar contains QUICK LINKS, MORE QUICK LINKS, and HOT TOPICS. The bottom right corner has a "NEED HELP" section with a magnifying glass icon.

myCGS Portal

- Appeals
- Claims
- Customer Service
- EDI
- Education & Resources
- Enrollment
- Financial/Audit & Reimbursement
- Forms
- LCDs/Coverage
- Medical Review
- News & Publications
- Tools

Today security is more important than ever. MFA offers an extra layer of security to help keep your myCGS account secure.

[>>Read More](#)

Click "+" for Quick Links

QUICK LINKS

- Contact Us
- FISS Claims Processing Issues
- News & Publications
- Ordering/Referring Physician Checklist [PDF](#)
- Ordering & Referring File [EXT](#)
- Rates and Fee Schedules
- Steps in Using the CTI System

MORE QUICK LINKS + | -

HOT TOPICS

- Submitting Medicare Secondary Payer (MSP Claims and Adjustments)
- Pre-Claim Review Demonstration for Home Health Services
- Provider Enrollment Revalidation

NEED HELP
FINDING WHAT YOU NEED OR HAVE A QUESTION? (click here and ask us!)

CGS **New Feature Just Added!**

Cycle 2 Provider Enrollment Revalidations

The Centers for Medicare & Medicaid Services (CMS) has completed its initial round of revalidations and has begun Cycle 2. Find your

CGS HH&H Web page

ListServ Options

**CGS**[®]
A CELERIAN GROUP COMPANY

myCGS Login | Contact Us | Join/Update ListServ

Search:

Search Function

Medicare Home JB DME JC DME J15 Part A J15 Part B J15 HHH

Print | Bookmark | Email | Font Size: + | -

myCGS Portal

Appeals

Claims

Customer Service

EDI

Education & Resources

Enrollment

Financial/Audit & Reimbursement

Forms

LCDs/Coverage

Medical Review

News & Publications

Tools

Today security is more important than ever. MFA offers an extra layer of security to help keep your myCGS account secure.

[>>Read More](#)



QUICK LINKS

- Contact Us
- FISS Claims Processing Issues
- News & Publications
- Ordering/Referring Physician Checklist [\[PDF\]](#)
- Ordering & Referring File [\[EXT.\]](#)
- Rates and Fee Schedules
- Steps in Using the CTI System

MORE QUICK LINKS + | -

HOT TOPICS

- Submitting Medicare Secondary Payer (MSP Claims and Adjustments)
- Pre-Claim Review Demonstration for Home Health Services
- Provider Enrollment Revalidation

NEED HELP? 
FINDING WHAT YOU NEED OR HAVE A QUESTION? (click here and ask us!)

If you are a DDE user receiving the message User Inactive or Not authorized please complete and fax the Online Inquiry form located at http://www.cgsmedicare.com/pdf/J15_EDI_OnlineInquiry2015re.pdf. DDE Users are required to complete a yearly certification and access is removed for users that fail to comply.

[>>Online Inquiry Form](#)

myCGS **New Feature Just Added!**

Cycle 2 Provider Enrollment Revalidations

The Centers for Medicare & Medicaid Services (CMS) has completed its initial round of

Updated: CGS HH&H Website: Education & Resources

<http://www.cgsmedicare.com/hhh/education/index.html>

myCGS Portal

Appeals

Claims

Customer Service

EDI

Education & Resources

Advisory Group

Calendar of Events

Educational Resources

Frequently Asked Questions

New Providers

Enrollment

Financial/Audit & Reimbursement

Forms

LCDs/Coverage

Medical Review

News & Publications

Self-Service Options

Medicare HomeJB DMEJC DMEJ15 Part AJ15 Part BJ15 HHH

Home » Home Health & Hospice » Education & Events » Education & Resources

Print | Bookmark | Email | Font Size: + | -

Educational Resources

News and Publications

Calendar of Events

New Providers

Frequently Asked Questions

Advisory Group

Self-Service Options

Updated: 03.28.17

Medicare Learning Network

Official Information Health Care Professionals Can Trust

<http://go.cms.gov/MLNGenInfo>

September 27, 2017

30

© 2017 Copyright, CGS Administrators, LLC.

CGS HH&H Website:

News & Publications

<http://www.cgsmedicare.com/hhh/pubs/index.html>

Medicare Home JB DME JC DME J15 Part A J15 Part B J15 HHH

Print | Bookmark | Email | Font Size: + | -

Home » Home Health & Hospice » News & Publications » Home Health & Hospice News & Publications

Home Health & Hospice News & Publications

NEWS

Keep up to date on the most recent news by selecting “[Join/Update ListServ](#)” to receive electronic mailings from CGS, or update your contact information or preferences.

- [Recent News](#)
- [Archived News](#)

PUBLICATIONS

- [CGS Home Health & Hospice Medicare Bulletin](#)
- [EDI Connection](#)
- [CMS MLN Connects Provider eNews](#) [EXT](#)

Follow HH&H on [Facebook](#) [EXT](#) and [Twitter](#) [EXT](#) to stay even more connected!

Updated: 03.28.17

News & Publications: Recent News (ListSers), CGS Bulletin, EDI Connection, Join ListServ

myCGS
Appeals
Claims
Customer Service
EDI
Education & Resources
Enrollment
Financial/Audit & Reimbursement
Forms
LCDs/Coverage
Medical Review
News & Publications
 Recent News
 Archived News
 CGS HH&H Bulletin
 EDI Connection
 Join the Listsev

Reminder: Join the ListSrvs

- Sign up for CMS ListServ
 - http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/MailingLists_FactSheet.pdf
- CGS Listserv
 - Join/update ListServ http://www.cgsmedicare.com/medicare_dynamic/ls/001.asp



Questions?

CGS Provider Contact Center: 1.877.299.4500

Option 1: Customer Service

Option 2: Electronic Data Interchange (EDI)

Option 3: Provider Enrollment

Option 4: Overpayment Recovery (OPR)

Twitter: <http://www.twitter.com/hhhcgs>

Facebook: <http://www.facebook.com/hhhcgs>