November 25, 2014

Medicare Secondary Payer (MSP) Mandatory Reporting
Provisions Section 111 of the Medicare, Medicaid, and SCHIP
Extension Act of 2007
(See 42 U.S.C. 1395y(b)(7)&(b)(8))

Technical Alert: Reporting Partial Social Security Numbers (SSNs) for Liability Insurance (Including Self-Insurance), No-Fault Insurance, and Workers' Compensation

NOTE: This document provides additional instructions for entry of the partial SSN as specified in the September 10, 2014 Alert (Change in Reporting of Medicare Health Insurance Claim Numbers (HICNs) and Social Security Numbers (SSNs) for Non-Group Health Plan (NGHP) Responsible Reporting Entities (RREs)).

Background

Effective January 5, 2015, where a NGHP RRE cannot obtain an individual's HICN or full SSN, the RRE may report the last 5 digits of the individual's SSN, first initial, surname, date of birth, and gender. NGHP RREs may continue to submit the HICN or full SSN as before without making any changes to the field and file formats. Additionally, the full HICN will continue to be returned if a distinct match to a beneficiary is found, regardless of whether a full or partial SSN was submitted.

If an RRE is unable to obtain the HICN or full/partial SSN, they must document their attempts to obtain this information. The Model Language has been revised to reflect an RRE's attempt to obtain the partial SSN and is located in the Downloads section of the Mandatory Insurer Reporting (MIR) for NGHP page at http://go.cms.gov/mirnghp.

File Requirements for Partial SSN Submission

Query Input and Response Files:
- **Query Input File (Field 6 - SSN)** - To report a partial SSN, fill the first 4 positions with spaces, followed by the last 5 digits of the SSN.
- **Query Response File (Field 6 - SSN)** - If the RRE submitted an SSN on the Query Input File, the value returned on the response file will be the same value that was submitted (i.e. either the partial 5-digit SSN or full 9-digit SSN).
- **Query Response File (Field 8 - Disposition Code)** - A new Disposition Code "DP" has been added as a value for this field. Disposition Code "DP" will be returned if multiple Medicare beneficiary records were identified based upon the partial SSN and data submitted on the Query Input File.

- **New HEW Software (Version 3.1.0)** - RREs using the HEW software will need to obtain the must current version to accommodate the revisions to the Query Input and Response Files. Hew Software (Version 3.1.0) will be available on January 5, 2015. Note: If you are not planning to submit partial SSNs, you may continue to use HEW Version 3.0.0.

  - o Download the Windows version of the HEW software after logging on to the Section 111 COBSW at http://www.section111.cms.hhs.gov.
  - o Request a copy of the mainframe version from your Electronic Data Interchange (EDI) Representative or by contacting the EDI Department at 646-458-6740.

- **New Benefits Coordination & Recovery Center (BCRC) 270/271 Health Care Eligibility Benefit Inquiry and Response Companion Guide for Mandatory Reporting Non-GHP Entities** - RREs using their own X12 translator will need to obtain the revised X12 270/271 companion guide to accommodate the revisions to the Query Input and Response Files. Note: If you are not planning to submit partial SSNs, you do not need to obtain the revised X12 270/271 companion guide.

  - o The revised companion guide is available and can be downloaded from the NGHP User Guide page available at the following link: http://go.cms.gov/MIRNGHPUserGuide.
  - o The revised companion guide will include the following change to the 270 Eligibility Inquiry Companion Document's Table 24 (Subscriber Request Validation): Element ID AAA03 (Reject Reason Code) will be updated to include a new valid value of 76 (Duplicate Subscriber/Insured ID Number).

Claim Input and Response Files:
- **Claim Input File (Field 5 - Injured Party SSN)** - To report a partial SSN, fill the first 4 positions with spaces, followed by the last 5 digits of the SSN.
- **Claim Response File (Field 5 - Submitted Injured Party SSN)** - If the RRE submitted an SSN on the Claim Input File, the value returned on the response file will be the same value that was submitted (i.e. either the partial 5-digit SSN or full 9-digit SSN).
- **Claim Response File (Field 27 - Applied Disposition Code)** - A new Disposition Code "DP" has been added as a value for this field. Disposition Code "DP" will be returned if multiple Medicare beneficiary records were identified based upon the partial SSN and data submitted on the Claim Input File.

Direct Data Entry Requirements for Partial SSN Submission
- **Beneficiary Lookup and Injured Party Information pages** - To enter a partial SSN, enter the last 5 digits of the SSN in the SSN Field. Do not add any leading spaces.
- **Beneficiary Not Found page** – A new message will be displayed when the RRE enters a partial SSN and the system locates multiple Medicare beneficiary records for the search criteria. The new message reads: "Based upon the data you provided, a distinct match could not be found."

Disposition Code "DP" and Beneficiary Not Found Message
- The new Disposition Code "DP" and new Beneficiary Not Found page message indicates there were multiple Medicare beneficiary records identified based upon the partial SSN and data submitted. This should not be interpreted to mean the same as Disposition Code "51" - Individual not identified as a beneficiary based upon the information provided.

- o In instances where the RRE receives Disposition Code "DP" or messaging on the Beneficiary Not Found page, they are instructed to take the following actions to remain in compliance with MMSEA Section 111 reporting requirements:
    1. Verify that the SSN, name, gender and date of birth were entered accurately and re-submit.
    2. Enter the full 9-digit SSN (if available) and re-submit.
    3. If the system is still unable to locate a distinct match after re-submission, contact the BCRC at 1-855-798-2627. The RRE should provide the claim information to the customer service representative to file a self-report.

The information included in this Alert supersedes the applicable language in the MMSEA Section 111 Medicare Secondary Payer Mandatory Reporting Liability Insurance (Including Self-Insurance), No-Fault Insurance, and Workers' Compensation User Guide (Version 4.3.), the MMSEA Section 111 COBSW User Guide (Version 7.8) and the BCRC 270/271 Health Care Eligibility Benefit Inquiry and Response Companion Guide for Mandatory Reporting Non-GHP Entities (Version 5.1) and will be incorporated into subsequent versions of these User Guides