To: Experian Health - Patient Access Customers
From: Experian Health, Inc.

**Re: (MBI) Request to CMS for an Enhancement to the 271 Eligibility Response**

As we are all aware, the Medicare Beneficiary ID will be changing beginning in April 2018. While all of us advocate for Electronic Data Interchange standardization and compliance within the healthcare industry, there are some issues of which those who use Medicare’s eligibility system (HETS 270/271) should be aware. The current decision from CMS is that the MBI will be returned only on the eligibility response (271) if the MBI is used in the inquiry (270). CMS will require a provider to use a look up tool available through the individual MAC’s website when a provider cannot obtain the new MBI from the member. Additionally, CMS will be returning the MBI in the E1 NCPDP transaction (the pharmacy equivalent to the 270/271 transaction) if the HICN is submitted.

Since this will complicate and slow down a provider’s workflow when registering a Medicare Beneficiary, we as an EDI community have drafted a recommended enhancement request to CMS. The attached enhancement request was sent to CMS by the Cooperative Exchange, which represents 90 percent of the clearinghouse community. We want to make this same enhancement request available to you and your provider community. The intent of this communication is to share a recommended template to send to CMS that outlines the issue and recommended solutions.

The attached template is asking CMS to consider the following recommendations:

1. MBI to be return in all 271’s; and
2. Provide Clearinghouses with a HICN to MBI crosswalk.

Sending these concerns and recommendations to CMS is solely your decision, along with the content of the request. For example, if the crosswalk is not something that your clearinghouse or vendor can utilize, feel free to eliminate that recommendation.

Our goal is that CMS will see the concerns of a large number in the EDI community and accept these recommendations. Please send your request based on stakeholder type:

**Providers (Please Consider Sending to Both):**

* New Medicare Card Ombudsman
	+ The Provider Ombudsman for the New Medicare Card is your resource to make sure CMS hears and understands any problems providers are having implementing the new Medicare cards. As the Provider Ombudsman, Dr. Eugene Freund will send you information about the new Medicare cards and work inside CMS to settle any implementation problems that come up. Contact the new Medicare card Ombudsman at NMCProviderQuestions@cms.hhs.gov.
* New Medicare Card Email
	+ Feedback and questions on the New Medicare Card Project can be sent to: NewMedicareCardSSNRemoval@cms.hhs.gov.

For more information about the New Medicare Project, please visit the CMS website: <https://www.cms.gov/newcard>.