

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
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Baltimore, Maryland 21244-1850



**CENTER FOR MEDICARE**

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**DATE:** October 2, 2017

**TO:** All Part D Plans

**FROM:** Jennifer R. Shapiro  
Acting Director, Medicare Drug Benefit and C&D Data Group

**SUBJECT:** Updates to Part D Coordination of Benefits Processes

The purpose of this memo is to inform Medicare Part D sponsors of two forthcoming updates to the Centers for Medicare & Medicaid (CMS) Part D Coordination of Benefits (COB) process. Both changes pertain to Financial Information Reporting (FIR) transactions as they relate to the Automated TrOOP Balance Transfers (ATBT) process.

***Updates to the Daily Cumulative FIR Reject Report***

The Medicare Access and CHIP Reauthorization Act (MACRA) of 2015 requires that Social Security Numbers (SSN) be removed from all Medicare cards by April 2019. The SSN-based Health Insurance Claim Number (HICN) will be replaced by the Medicare Beneficiary Identifier (MBI). More information about the Medicare Card Project can be found at <https://www.cms.gov/Medicare/New-Medicare-Card/index.html>.

In support of the Medicare Card Project a new Daily Cumulative FIR Aging Guide Report has been developed to include beneficiary MBI values as they become available. The Part D Transaction Facilitator will begin transmitting reports in the new format beginning March 1, 2018. The format can be found under the related documents section at <http://medifacd.relayhealth.com/fir/reports>.

The new template will continue to contain a HICN field but will also include new fields for the MBI and the MBI effective date. In order to minimize the programming impact for Part D sponsors, MBI fields have been appended to the end of existing data fields. During the Medicare Card Project transition period both the HICN and MBI will be populated on the report. Once the HICN is no longer reported, the HICN field will be blank, eliminating the need to reformat the report.

### *Updates to FIR Retrigger Timing*

CMS has established a schedule for plans to receive ATBT-related update to allow plans to receive FIR updates for the entire 36-month COB period.<sup>1</sup> The schedule includes times when plans can expect to receive mass updates for their enrollees who have had FIR updates in the past 17 months, known as “retriggers”. CMS will be making two adjustments to the FIR retrigger time frames based on industry feedback. The changes will be effective starting in calendar year 2018.

CMS has instructed the Transaction Facilitator to move the annual June retrigger to May. A retrigger will take place during the second Tuesday of May rather than the second Tuesday in June which is currently the case. This is being done in order to allow Part D plans additional time to complete adjustments in advance of June 30<sup>th</sup> reconciliation deadlines.

We are also scheduling an additional annual FIR retrigger for the second Tuesday of July. This will enable plans to have updated information two months after the prior retrigger, and well in advance of open season.

Please submit any questions about this memorandum to [PartD\\_COB@cms.hhs.gov](mailto:PartD_COB@cms.hhs.gov).

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<sup>1</sup> See HPMS memo “Enhanced Automated TrOOP Balance Transfer (ATBT) Process” dated July 2, 2015.