DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard Baltimore, Maryland 21244-1850



CENTER FOR MEDICARE

DATE:	October 30, 2017
TO:	All Part D Plans
FROM:	Jennifer R. Shapiro Acting Director, Medicare Drug Benefit and C&D Data Group
SUBJECT:	Updated Eligibility Inquiry Responses to Accommodate New Medicare Beneficiary Identifier

The purpose of this memo is to inform plans and providers of upcoming changes to Eligibility Inquiry (E1) responses received by pharmacies. The Centers for Medicare & Medicaid Services (CMS) is implementing these changes in support of the New Medicare Card Project.

Beginning April 1, 2018, the E1 response will include the beneficiary MBI and the MBI effective date whenever a beneficiary match is found and the beneficiary has an assigned MBI. If a beneficiary has been assigned a new MBI because a prior MBI was compromised, the E1 response will include the MBI that is effective on the date of the E1 transaction.

A pharmacy can begin to test its capability to accept the new E1 response beginning March 1, 2018; the new E1's responses will be returned without actual MBI data. For Part D E1s, the response 504-F4 field will contain the field identifiers followed by a colon. For Part A/B E1s, the response will contain the Response Status Segment and the 526-FQ field (for A/B) will include the field identifiers followed by a colon as indicated in the appropriate payer sheet. The new payer sheet for both the Part D and the Part A/B E1s can be found at http://medifacd.relayhealth.com/e1 in the payer sheet section.

Pharmacies may submit HICN and Railroad Board (RRB) on the E1 inquiry during the transition period that currently is scheduled to end December 31, 2019. After the transition period, the HICN and RRB will no longer be accepted.

Please submit any questions about this memorandum to PartD_COB@cms.hhs.gov.