

Action Request Transmittal Aging and People with Disabilities



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Topic: Systems Issues

Subject: Medicare ID Numbers Must Be Updated in Oregon ACCESS - CORRECTED

Number: APD-AR-19-022

Issue date: 5/15/2019

CORRECTED

Due date: 08/01/2019

Applies to (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input checked="" type="checkbox"/> Area Agencies on Aging: Type B | <input type="checkbox"/> Health Services |
| <input checked="" type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Office of Developmental Disabilities Services (ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs | <input type="checkbox"/> ODDS Children's Intensive In Home Services |
| <input type="checkbox"/> County DD program managers | <input type="checkbox"/> Stabilization and Crisis Unit (SACU) |
| <input type="checkbox"/> Support Service Brokerage Directors | <input checked="" type="checkbox"/> Other (<i>please specify</i>): CMEU |
| <input type="checkbox"/> ODDS Children's Residential Services | |
| <input type="checkbox"/> Child Welfare Programs | |

Action required: All Medicare ID numbers must be updated in Oregon ACCESS by 8/1/19. Medicare recipients who live in Oregon were sent new Medicare cards with new Medicare ID numbers between April and June of 2018. See [APD-IM-18-030](#) for more information about the new Medicare ID numbers.

The individual's Medicare ID number can be found on the **Recipient Information** panel in MMIS:

The screenshot shows the MMIS interface with the 'Recipient Information' panel. The 'Medicare ID' field is highlighted with a red box. The interface includes a navigation bar with 'information' selected, and search filters for 'Current ID' and 'Case ID'. The recipient details include Name, Prev Name, Address, City (ESTACADA), State (OR), and Zip (97023-0000). Other fields include Gender (FEMALE), Birth Date, Death Date, and Vital Stats Death Date.

The new Medicare ID number must be entered in **Nmbr** field on the **Health Ins.** tab in Oregon ACCESS as shown below – do not enter dashes or spaces between digits:

The screenshot shows the 'Health Ins.' tab in the Oregon ACCESS system. The 'Health Insurance List' table has columns for 'Insurance Type', 'Company', 'Premium Amt', and 'Verified'. Below this is the 'Health Insurance Detail' section. The 'Type' dropdown is set to 'Medicare Part A & B & D'. The 'Company' section includes fields for Name, Address, Line 2, City State ZIP, and Tele Nmbr. The 'Policy' section includes fields for Holder, Nmbr, Group, Premium, Spend Down Deduction, Start Date, and End Date. A red arrow points to the 'Nmbr' field in the Policy section. The 'Verified' checkbox is at the bottom right.

Reports

To help identify records that require updates, the **APD-1203 Medicare ID Report** was created and will be posted in the Medicaid section of OBI. This report will be refreshed on the 15th or next business day each month through September 2019. The report may also contain Medicare Supplement records, which you can disregard.

Duplicate and Separate Records

In general, individuals should only be associated with one Medicare record for Part A and Part B in Oregon ACCESS reflecting their current enrollment. Any duplicate records should be deleted. This does not include Medicare Supplement records, which are a separate insurance type; continue creating a separate record for Medicare Supplement plans.

Example: Lois has a **Medicare Part A & D** record with a **Start Date** of 1/1/17, and a separate **Medicare Part A & B & D** record with a **Start Date** of 1/1/19. Delete the Part A record and leave the Part A & B & D record as-is.

If Lois has a **Medicare Part A & D** record with a **Start Date** of 1/1/17 and a separate **Medicare Part B** record with a **Start Date** of 1/1/19, it is not necessary to delete one and combine them; however, if you are correcting Lois's Medicare ID number, you do have the option of combining them into one **Medicare Part A & B & D** record using the latest **Start Date**. Again, this is optional, it is not absolutely necessary to combine these particular records because the dates don't overlap for any one part of Medicare.

Note: If there are separate records for Part A and Part B, the Part D can be included with either record, it's not necessary to record the Part D enrollment date anywhere. See below for an example of how this would look in ACCESS:

○ Health Ins. Med. Services Medical Cost Physical Medical Trans

Health Insurance List

	Insurance Type	Company	Premium Amt	Verified
1	Medicare Part B		.00	No
2	Medicare Part A & D		.00	No

Health Insurance Detail

Type: **Medicare Part A & D** OHP/Managed Health Care Coverage:
Medicare Part D Enrollment Assistance Offered

Company **Policy**

Name: Holder:
Address: Nbr: AB1234CD345
Line 2: Group:
City State ZIP: - Premium: .00 Spend Down Deduction:
Tele Nbr: () - Ext **Start Date: 01/01/2017** End Date: 00/00/0000

Verified:

Person Insured

Name	Coverage Thru Employer?	TPL	Share Amt	
TEST, NEW	<input type="checkbox"/>	0-NO TPL	.00	Add
				Remove

Health Ins. | Med. Services | Medical Cost | Physical | Medical Trans

Health Insurance List

Insurance Type	Company	Premium Amt	Verified
1 Medicare Part B		.00	No
2 Medicare Part A & D		.00	No

Health Insurance Detail

Type: Medicare Part B

OHP/Managed Health Care Coverage:

Medicare Part D Enrollment Assistance Offered

Company

Name:

Address:

Line 2:

City State ZIP:

Tele Nbr: () - Ext

Policy

Holder:

Nmbr: AB1234CD345

Group:

Premium: .00 Spend Down Deduction:

Start Date: 01/01/2019 End Date: 00/00/0000

Verified:

Person Insured

Name	Coverage Thru Employer?	TPL	Share Amt	
TEST, NEW	<input type="checkbox"/>	0-NO TPL	.00	Add Remove

Reason for action: When the Integrated ONE system is implemented, information will be converted from our current computer systems into Integrated ONE. Medicare information will be converted from the **Health Ins.** tab in Oregon ACCESS. The Medicare ID number field in Integrated ONE will only allow the new ID number format; consequently, errors may occur during conversion if the ID numbers in ACCESS aren't updated.

Field/stakeholder review: Yes No

If yes, reviewed by: APD Operations, APD Policy

If you have any questions about this action request, contact:

Contact(s): APD Medicaid Policy	
Phone:	Fax:
Email: APD.MedicaidPolicy@dhsosha.state.or.us	