

**Bulletin Number:** MSA 07-59

**Distribution:** All Providers

**Issued:** November 8, 2007

**Subject:** Beneficiary Identification Numbers

**Effective:** As Indicated

**Programs Affected:** Medicaid, Children's Special Health Care Services, Adult Benefits Waiver, MOMS, Plan First!

The purpose of this bulletin is to inform providers of a delay in the requirement for submitting 10-digit beneficiary ID numbers as described in policy bulletin MSA 07-54 issued October 1, 2007.

Due to unavoidable delays, the 10-digit beneficiary ID numbers will not be implemented until January 16, 2008. Therefore, providers and billers will have additional time to complete business-to-business (B2B) testing prior to the start of this requirement.

## BACKGROUND

As detailed in MSA 07-54, once Michigan Department of Human Services (MDHS) begins implementing Bridges, providers may be presented **mihealth** cards with either an eight-digit or 10-digit ID number since new cards will not be issued for beneficiaries with eight-digit IDs.

## Claims and Remittance Advices

Prior to January 16, 2008, providers and billers that have already completed changes required to submit 10-digit IDs have the option to report either eight or 10-digits on their claims to Michigan Department of Community Health (MDCH). However, enrolled health plans may require providers to submit eight or 10 digits until January 16, 2008. Beginning January 16, 2008, providers must report a 10-digit beneficiary ID number for both paper and electronic claim formats to both MDCH and enrolled health plans.

MDCH will report back an eight-digit ID on the paper or electronic (835/820) remittance advice until the date noted below. MDCH will begin reporting 10-digit IDs on remittance advices according to the following schedule:

- Paper remittance advices - January 25, 2008
- Proprietary electronic remittance advices (1232) - January 25, 2008
- Electronic remittance advices (835) - January 30, 2008
- Electronic remittance advices to enrolled health plans (820) - January 30, 2008

Pharmacy providers should continue to report 10-digit beneficiary IDs in the National Council for Prescription Drug Programs (NCPDP) claim format. No leading zeroes will be required for beneficiaries with MDHS issued 10-digit IDs.

### **Eligibility Verification**

Beginning January 16, 2008, providers should enter a 10-digit beneficiary ID number when using the beneficiary ID search method. Eight-digit IDs should be entered with two leading zeroes. Providers with magnetic stripe technology that swipe a **mihealth** card with an eight-digit ID will receive a 10-digit ID (eight-digit ID with two leading zeroes) back in their response. Beginning January 16, 2008, providers should enter a 10-digit beneficiary ID number on the 270 transaction and will receive a 10-digit ID back in the 271 transaction.

### **Enrollment Files**

Beginning with the enrollment file created on January 19, 2008, MDCH will report 10-digit ID numbers on the 834 enrollment transactions sent to enrolled health plans.

### **Encounter Data**

Beginning January 16, 2008, enrolled health plans should provide 10-digit beneficiary IDs in their encounter reporting. Eight-digit IDs should be entered with two leading zeroes. Prior to this date, health plans have the option of reporting either eight or 10-digit ID's on their encounters.

### **Manual Maintenance**

This bulletin supersedes MSA 07-54 and should be retained until the information has been incorporated into the Michigan Medicaid Provider Manual.

### **Questions**

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Community Health, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mail at [ProviderSupport@michigan.gov](mailto:ProviderSupport@michigan.gov). When you submit an e-mail, be sure to include your name, affiliation, and phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-292-2550.

### **Approved**



Paul Reinhart, Director  
Medical Services Administration