
Medicare

Intermediary Manual

Part 3 – Claims Process

Department of Health &
Human Services (DHHS)
Centers for Medicare &
Medicaid Services (CMS)

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<u>HEADER SECTION NUMBERS</u>	<u>PAGES TO INSERT</u>	<u>PAGES TO DELETE</u>
Table of Contents – Chapter VI 3-3501 – 3-3524.2	1 - 2 (2 pp.) None	2-1 – 2-3 (3 pp.) 2-5 – 2-89 (73 pp.)

NEW/REVISED MATERIAL--EFFECTIVE DATE: Not Applicable
IMPLEMENTATION DATE: Not Applicable

Chapter VI, Identifying the Patient's Health Insurance Record, This chapter is being deleted and the related instructions are issued in the CMS Internet-only manual (IOM). The table of contents is replaced with a crosswalk from the old Part 3 to the related instruction in the IOM. If the material from MIM, Part 3, is no longer applicable, we indicate that it was not moved to the IOM by entering "deleted" in the crosswalk. For each included cross-reference, we provide the old manual number (e.g., a3) and the IOM number (e.g., 100-4 for Claims Processing), and the IOM chapter and section (§) numbers.

The Internet-only manual can be found at <http://www.cms.hhs.gov/manuals>

These instructions should be implemented within your current operating budget.

CHAPTER VI – IDENTIFYING THE PATIENT’S HEALTH INSURANCE RECORD

NOTE: Chapter VI has been moved to the new CMS Manual System, in the Medicare Claims Processing Manual (Pub. 100-4). The new manual can be found at <http://www.cms.hhs.gov/manuals>. A crosswalk from the deleted manual sections to the new manual sections follows.

	Old §	Pub, Chapter, & §
Health Insurance (HI) Card	A3-3501	100-4, 2-§30.2
Temporary Eligibility Notice	A3-3501.1	100-4, 2-§30.3
Health Insurance Claim Numbers (HICNs)	A3-3502	100-4, 2-§10.1
Change in HICNs	A3-3502.1	100-4, 2-§10.1.1
Procedures for Obtaining Missing or Incorrect HICNs and Other Data	A3-3503	100-4, 2-§10.1.2
Cross-Reference of HICN	A3-3504	100-4, 2-§30.1
Guidelines for Use of Carrier Alphabetic State File (CASF) -- General	A3-3505	Deleted - Obsolete
Confidentiality	A3-3505.1	Deleted - Obsolete
Receipt and Disposition Procedures	A3-3505.2	Deleted - Obsolete
Explanation of CASF Data	A3-3505.3	Deleted - Obsolete
Using the CASF	A3-3505.4	Deleted - Obsolete
Guidelines for Beneficiary Identification	A3-3505.5	Deleted - Obsolete
Tolerances for Use With the Guidelines	A3-3505.6	Deleted - Obsolete
Special Conditions in the CASF	A3-3505.7	Deleted - Obsolete
Guidelines for Use of the Health Insurance Beneficiary State Tape (BEST)--General	A3-3506	Deleted - Obsolete
Confidentiality	A3-3506.1	Deleted - Obsolete
Receipt and Disposition Procedures	A3-3506.2	Deleted - Obsolete
Description of BEST	A3-3506.3	Deleted - Obsolete
Special Conditions in the BEST	A3-3506.4	Deleted - Obsolete
Using the BEST	A3-3506.5	Deleted - Obsolete
Exhibits	A3-3507	100-1, 2-§50 100-1, 2-§50.1
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Part A Inquiry Screen Display - HIQA	A3-3508.3	100-4, 2-§30.6.1.1
Part A Inquiry Reply Screen Display - HIQAR	A3-3508.4	100-4, 2-§30.6.1.2
Part A Inquiry Data - HUQA	A3-3508.5	100-4, 2-§30.6.1.3

	Old §	Pub, Chapter, & §
Part A Inquiry Reply Data - HUQAR	A3-3508.6	100-4, 2-§30.6.1.4
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Health Insurance Master Record (HIMR) Inquiry	A3-3510	100-4, 2-§30.8
HIMR Main Menu	A3-3511	http://cms.csc.com/cwf/downloads/docs/pdfs/overhimr.pdf
Beneficiary Master Information	A3-3512	100-4, 2-§30.10
Medicare Secondary Payer Information (MSP)	A3-3513	100-4, 2-§30.11
Group Health Organization (GHO)	A3-3514	100-4, 2-§30.12
Hospice Enrollment	A3-3515	100-4, 2-§30.13
Surgery Information	A3-3516	100-4, 2-§30.14
End Stage Renal Disease (ESRD)	A3-3517	100-4, 2-§30.15
Beneficiary Cross-Reference	A3-3518	100-4, 2-§30.16
DMEPOS CMN Display	A3-3519	100-4, 2-§30.17
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Hospice History	A3-3521.3	100-4, 2-§30.19.3
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Requesting Assistance in Resolving Problem Areas in the Inquiry/Inquiry Response Procedures	A3-3523	100-4, 2-§30.21
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Critical Case Procedures--Establishing Entitlement Under Part A and B	A3-3524	100-4, 27-§§40.2, 40.3
Referral of Critical Case to the RO	A3-3524.1	100-4, 27-§40.3
SSO Responsibilities	A3-3524.2	100-4, 27-§40.4