

MCR Reminder-Most HICN Claims Reject- Regardless of Date of Service

December 11, 2019

Medicare Beneficiary Identifiers (MBIs) should be used now to avoid claim and eligibility transaction rejects. **Effective January 1, 2020**, regardless of the date of service on the Medicare transaction, most Social Security Number – based Health Insurance Claim Number (HICN) Medicare transactions will reject with a few exceptions (Click link for exceptions)

If you do not use MBIs on claims after January 1, you will get:

- ⇒ **Electronic claims reject codes:** Claims Status Category Code of A7 (acknowledgment rejected for invalid information), a Claims Status Code of 164 (entity’s contract/member number), and an Entity Code of IL (subscriber)

- ⇒ **Paper claims notices:** Claim Adjustment Reason Code (CARC) 16 “Claim/service lacks information or has submission/billing error(s)” and Remittance Advice Remark Code (RARC) N382 “Missing/incomplete/invalid patient identifier”