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# FEHB Program Carrier Letter

## All Carriers

U.S. Office of Personnel Management  
Office of Insurance Programs

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**Letter No. 2002-11**

**Date:** March 22, 2002

Fee-for-service [ 11 ]    Experience-rated HMO [ 11 ]    Community-rated HMO [ 9 ]

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### **Subject: 2002 Medicare Match**

Every year the Office of Personnel Management (OPM) and the Social Security Administration (SSA) conduct a computer match between Medicare records and OPM's roll of annuitants. This "Medicare Match" identifies persons on OPM's annuity rolls who are also Medicare enrollees. We then share the results of this match with our carriers to help you coordinate benefits with Medicare.

You are contractually required to coordinate benefits with Medicare. The data we will be sending will assist you in determining primary vs. secondary Medicare status. We expect you to use this data as part of a vigorous coordination of benefits program that will facilitate proper payment of benefits and prevent excessive charges to the FEHB Program.

We have completed the computer match for this year and will be sending your Medicare Match Data to your Official Plan Contact in early April.

Please note that your match data report:

- Will include names of people who SSA's records show have Medicare Part A, Part B, both A and B, and neither A nor B.
- May include names that did not match. A "no match" generally means the retiree worked only under CSRS so SSA has no information in their records.
- May include duplicate names. This happens when a person appears on our annuity rolls as both an annuitant and as a spouse.
- Will not include Medicare effective dates. We agreed with SSA that we would not provide Medicare effective dates this year. Effective dates may be included next year.

When using this data you should realize new retirees and people who recently turned age 65 might not be listed. Additionally, individuals are encouraged to enroll for Medicare during the six-month period before coverage becomes effective, and these early enrollments are on the match file as Medicare enrollees even though coverage may not yet be effective. Because of these timing issues, you should supplement the use of this data by continuing to survey your members for current and accurate Medicare data.

If you are community-rated carrier, please note: When your actuarial staff use this data to help you compute your Medicare rate loading, do not count individuals with match codes X, Z or N if they are under age 65.

Please keep the following in mind:

- If the person is on the Match list, he/she is an annuitant.
- If the person is shown as having Medicare, and is age 64 years 6 months or older (per birthdate), the carrier should use the first day of the person's 65<sup>th</sup> birthday month as the effective date of Medicare coverage (until the carrier can verify through its usual sources).
- If the person is shown as having Medicare and is younger than 64 years 6 months, the carrier should use the date of this Match (January 1, 2002) as the effective date of Medicare coverage (until the carrier can verify through its usual sources).

### **Data release agreement**

Before we can send the data, you must agree to the terms of the OPM-SSA agreement to protect the privacy of individuals whose personal records are included in the match and to safeguard the data files on which the records are stored. Please note that our auditors may inspect your safeguards for protecting the match data.

If we have a current agreement on file for you, you need not send another. Please check with your OPM Contract Specialist if you are unsure. If we do not have a current agreement on file, you must submit an agreement (Enclosure A) to your OPM Contract Specialist **within 10 days**.

Use the following to determine whether you need to submit the agreement:

- 1) If your FEHB contract began on January 1, 2002, submit the agreement.
- 2) If your FEHB contract began before that but you have had a major reorganization, merger, or sale of assets since you submitted the last form, submit the agreement.

For more information about this letter, please contact Eric Figg (202/606-4083 or via email at [edfigg@opm.gov](mailto:edfigg@opm.gov)).

Sincerely,



Abby L. Block  
Assistant Director  
for Insurance Programs

Enclosures

## Medicare Data Release Agreement

(Initial year: 2002)

Carrier name \_\_\_\_\_ Contract # \_\_\_\_\_

Enrollment Code(s) \_\_\_\_\_

By the signature of the Contracting Official below, the Carrier contracting with the Office of Personnel Management, hereby agrees

- ✓ to limit access, use and disclosure, and
- ✓ to physically safeguard the records of CSRS and FERS retirees, their spouses, and survivor annuitants who are enrolled in the Plan named above and who are also Medicare enrollees,

in accordance with the FEHB/MEDICARE Enrollment Data Exchange Agreement between the Office of Personnel Management and the Social Security Administration, as follows:

### Data Exchange Agreement

- "OPM and SSA agree that the data obtained from SSA will be used only for the administration of the Federal Employees Health Benefits Program (Chapter 89, title 5, United States Code) and in coordinating benefits through the individual health benefits carriers who contract with OPM;
- to restrict access to the records created by the exchange to authorized personnel whose duties and responsibilities require access;
- that the records involved in the exchange and the data contained therein will be provided adequate security;
- that the files exchanged will not be duplicated or disseminated within or outside OPM or SSA without written authority except as allowed by regulations which permit disclosures among Federal or federally assisted programs;
- files provided by OPM will remain the property of OPM, and files provided by SSA will remain the property of SSA;

- access to the data will be restricted to only those authorized employees and officials who need it to perform their official duties in connection with the intended use of the data;
- the data will be processed under the immediate supervision and control of authorized personnel in a manner which will protect the confidentiality of the data in such a way that unauthorized persons cannot retrieve the data by means of a computer, remote terminal or other means;
- personnel who will have access to the data will be advised of the confidential nature of the information and the civil sanctions for noncompliance contained in the applicable Federal Statutes;
- the data will be stored in an area that is physically safe from access by unauthorized persons during duty hours as well as non-duty hours or when not in use; and
- to reserve the right to make on-site inspections or to make other provisions to ensure that adequate safeguards are being maintained."

Further, Carrier acknowledges that the Medicare match information was obtained under assurances by OPM that all actions would be applied prospectively; therefore, the Carrier agrees that no action will be taken to collect overpaid benefit payments from subscribers based solely on information supplied by this match.

**Authorized Contracting Official:**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name & Title \_\_\_\_\_

Carrier: \_\_\_\_\_ Enrollment Code(s) \_\_\_\_\_

Phone \_\_\_\_\_ FAX \_\_\_\_\_ Email \_\_\_\_\_

Address:

***REPORT DESCRIPTION—Annuitant Medicare Match Lists***

**SOCIAL SECURITY NUMBER.** (9 characters) The Social Security number of the named individual as carried in the CSRS or FERS master payment record.

**OPM CLAIM NUMBER.** (9 characters) OPM's retirement claim number for identifying every individual who is either an annuitant or survivor annuitant. A claim number prefixed by "A" means the person receives a CSRS or FERS annuity based on his or her own Federal employment. A claim number prefixed by "F" means the person receives an annuity as the survivor of a deceased Federal annuitant or employee. Generally, a spouse's claim number is the claim number of the annuitant who elected to provide the survivor benefit if the Spouse Code is "1".

**MEDICARE CLAIM NUMBER.** (9 characters) Social Security Administration's enrollment number under which the named individual has coverage or eligibility for Medicare.

**MEDICARE BIC.** (2 characters) The Basic Insurance Code. The BIC is provided by SSA and indicates current Medicare coverage status.

**SURNAME/FIRST NAME/MIDDLE INITIAL.** (up to 20 characters) The name of the individual identified by the matching process. Names are listed alphabetically with surname first.

**BIRTH DATE.** (8 characters) The named individual's date of birth -- YYYYMMDD.

**OPTION.** (1 character) Means the FEHB enrollment is "1" for self only or "2" for self-and-family. For plans with a standard option, "4" means self only/standard option, and "5" means family/standard option.

**MEDICARE CODE.** (1 character) Means the person's Medicare coverage according to SSA's records.

- "A" means the person matched with SSA's records as having Medicare Part A;
- "B" means the person matched with SSA's records as having Medicare Part B;
- "C" means the person matched with SSA's records as having both Parts A and B;
- "X" means the individual matched with SSA's records but is not eligible for Medicare;
- "Z" means the individual did not match with SSA's records, and we do not know the Medicare status; and
- "N" means the individual is on the CSRS or FERS roll but the name was not sent to SSA to be matched -- for instance, because the Social Security Number is missing, and we do not know the Medicare status.

**SPOUSE CODE.** (1 character) Distinguishes the individual as either an annuitant or spouse of an annuitant; "0" means the individual is a retiree or survivor annuitant; "1" means a spouse for whom an annuitant elected to provide a survivor annuity.

## ANNUITANT MEDICARE MATCH

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*OPM/RIS/Office of Insurance Programs*

*2002*

### File Record Layout

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<u>Record Field</u>	<u>Description</u> <u>Length</u>	<u>Position</u>	
Social Security Number		1-9	9
OPM Claim Number	A,F**	10-18	9
Medicare Claim Number	from SSA	19-27	9
Medicare BIC	Basic Ins. Code	28-29	2
Member Name	Last First MI	30-49	20
Date of Birth	YYYYMMDD	50-57	8
Enrollment Code	XX1, XX2, XX4 or XX5	58-60	3
Medicare Status	A,B,C,X,N,Z*	61	1
Spouse Code	Indicator	62	1

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\* A = A Only  
 B = B Only  
 C = Both A & B  
 X = None  
 N = Unknown  
 Z = Unknown

\*\* A = Annuitant  
 F = Survivor

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Records are in Undelimited Ascii. (Can be opened with WordPad or Notepad.)