

<b>Colorado Department of Health Care Policy and Financing</b> 1570 Grant St., Denver, CO 80203-1818	<b>NUMBER:</b> HCPF 06-030
	<b>CROSS REFERENCE:</b>
<b>DIVISION OR OFFICE:</b> Medical Assistance Office	<b>DATE:</b> July 07, 2006
<b>SUBJECT AREA:</b> Medical Assistance	
<b>SUBJECT:</b> Medicare Buy-In Accretion Logic Fixed	<b>APPROVED BY:</b>  Barbara B. Prehmus, M.P.H.
<b>TYPE:</b> Procedure	

*HCPF Agency Letters can be accessed online at:  
[www.chcpf.state.co.us](http://www.chcpf.state.co.us) >>Reference Material >>Agency Letters*

**Purpose:**

The purpose of this agency letter is to advise County Departments of Social/Human Services and Medical Assistance (MA) sites of a change in procedures relating to Medicare Buy-In. Please share this agency letter with all eligibility workers who approve these cases.

**Background:**

The accretion logic in the Medicare Buy-In system in the Medicaid Management Information System had, in some cases, failed to re-accrete clients to the Medicare Part B buy-in program whenever buy-in stopped due to case closure, and the case reopened at a later date. This problem had required manual intervention on the part of both the Department of Health Care Policy and Financing Buy-In Officer and eligibility workers. Eligibility workers were required to contact the Buy-In Officer whenever they reopened a case after buy-in had stopped. The Buy-In Officer then had to manually enter a buy-in transaction (RIC S) to request that Part B buy-in be restarted.

**Procedure or Information:**

The buy-in accretion logic in MMIS has been fixed. The accretion logic should re-accrete buy-in automatically within two (2) weeks after the case is opened in CBMS med spans. If you have a buy-in case prior to May 26, 2006 that needs to be restarted, and buy-in has not restarted after June 5, 2006, please notify the Department's Buy-In Officer.

Please refer to the Medicare Buy-In User's Guide for detailed information on how to read the buy-in screens in CBMS. Appendix C, "Troubleshooting Tips" may be most helpful in identifying and resolving problems. Below is a brief description on how to identify when buy-in has been re-accreted (restarted), and when there is a problem.

After a case has been reopened in CBMS, allow 3 business days for the update to reach MMIS. For example, a case opened in CBMS on a Tuesday should show open in MMIS on Friday of the same week. A case opened in CBMS on a Wednesday will not show open in MMIS until Monday of the following week. Buy-in accretion runs every Sunday night in MMIS. Transactions created during the accretion process are viewable in CBMS on Monday of the following week. Keeping that time frame in mind, allow two (2) full weeks from the date the case is opened in CBMS, then view the Buy-In Summary the following Monday (2 weeks, then the next Monday).

When reading the Buy-In Summary screen, ignore txn code 99 RIC S. This txn code does not start or stop buy-in; it is an informational transaction code the States use to tell the Centers for Medicare and Medicaid Services (CMS) to update the State ID or Buy-in Eligibility Code (BEC) in their system.

Look for the following in the **Buy-In Summary** screen:

<b>GOOD NEWS (Buy-In Has Restarted)</b>	<b>BAD NEWS (Contact Sharon)</b>
<ul style="list-style-type: none"> <li>◆ The most current txn code is 11XX RIC B or D (1161, 1165, 1167, 1180): Buy-in has started. Any refund due should be received soon.</li> <li>◆ The most current txn code is 41 RIC B: Buy-in is still ongoing.</li> <li>◆ The most current txn code is 61 RIC S <u>sent within the last 2 weeks</u>: A request to start buy-in was sent to CMS Baltimore; response from CMS should be received the next week (hopefully an 1161).</li> </ul>	<ul style="list-style-type: none"> <li>◆ The most current txn code is 1751: Buy-in has stopped. The med spans may not be open in MMIS (grant code 4), the med spans may not be coded correctly for buy-in, or the Medicare ID (HIC#) may be missing.</li> <li>◆ The most current txn code is a reject (RIC F). Most common examples:               <ul style="list-style-type: none"> <li>◆ 2161 subcode A: Bad HIC# (may be due to a typographical error or hyphens)</li> <li>◆ 2161 subcode B: Personal characteristics don't match. Name and Date of Birth are the usual mismatches. Compare CBMS data to SSA Title 2 data, verify which is correct, make the appropriate changes to either CBMS or SSA, and contact the Buy-In Officer when completed.</li> </ul> </li> <li>◆ The most current txn code is a 61 RIC S sent more than 2 weeks ago (no CMS response).</li> </ul>

**Effective Date:**

Immediately

**Contact Persons:**

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