

The Centers for Medicare & Medicaid Services (CMS) is the federal agency overseeing the Medicare program. Many Medicare beneficiaries have other private group health plan (GHP) insurance in addition to their Medicare benefits. There are federal rules that determine whether Medicare or the other GHP insurance pays first.

Section 111 of the Medicare, Medicaid and SCHIP Extension Act of 2007 (MMSEA), a federal law effective January 1, 2009, requires insurers of fully insured/self insured group health insurance plans and third-party administrators report specific information about Medicare beneficiaries who have other group coverage. This reporting is to assist CMS and health insurance plans to properly coordinate payment of benefits among plans so that claims are paid promptly and correctly.

If the covered member is unable or unwilling to comply with the request to provide their Social Security Number (SSN), please complete and return this form to our Anthem office so that we may comply with this law.

Note: A completed form is required at least once every 12 months for those members who do not have or refuse to provide SSNs.

Member Name		Member Date of Birth
Subscriber/Employee Name (if different than above)		Subscriber/Employee Identification Number
Employer Name		Group Number
Please check appropriate response. <input type="checkbox"/> Member is not providing a Social Security Number <input type="checkbox"/> Member does not have a Social Security Number Please briefly explain the reason for your selection: _____ _____ _____ _____		

This information is being provided by:

Signature of Individual X	Name of Individual (Please Print)	Date
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Please return this form via:

E-mail: CR_MSP_DATA@Anthem.com

Fax: 877-628-4604 Small Group
800-883-7919 Large Group

Mail: Anthem Blue Cross and Blue Shield
P.O. Box 37910
Louisville, KY 40233-7910