

# Federal Health Users of Vital Statistics-- Medicare Program Experience



***National Committee on  
Vital and Health  
Statistics***

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September 11, 2017

# Medicare Beneficiary Vital Record Data

## 1. Enrollment Data Base/Common Medicare Environment

- EDB/CME is the authoritative source for Medicare demographic data
- Data is collected from SSA, RRB, States, Health Plans, etc.
- Data is distributed to those same entities as well as downstream systems such as those used for claims processing

## 2. Examples of data collected/distributed

- Date of Death from SSA and from incoming claims
- Lawful Presence data from SSA
- Incarceration data from SSA
- State Buy-In data from States
- Address data from SSA
- Coordination of Benefits data from insurers/employers

# Why Medicare Needs Vital Record Data

## 1. Proper Claims Payment/Payments to Health Plans

- No payments after date of death (some exceptions)
- No payments if incarcerated
- No payments if not lawfully present
- No primary payments if other insurance exists

## 2. Address

- SSA is system of record for address
- CMS Mailings: *Medicare & You* Handbook, Medicare Initial Enrollment Packages, Medicare Cards (New & Replacements), Medicare Premium Bills for directly billed beneficiaries, Qualifying Health Coverage notices, etc.
- Important for mailing new Medicare Cards
- Important for fraud prevention

## 3. State interaction

- States pay Medicare premiums for dual eligible
- Close connection between Medicare and Medicaid for drug coverage

## 4. Premium Adjustment

- CMS and SSA work together to adjust Medicare premiums for high income beneficiaries

# Medicare Statistics

- 59 Million Medicare Beneficiaries
- 10 Million Low Income Beneficiaries
- 6 Million High Income Beneficiaries
- 45 Million Beneficiaries enrolled in over 700 Part C and D Health Plans
- States pay premiums for about 10 Million Beneficiaries
- Over 1 Billion claims paid per year