

# National Provider Identifier - Ask the Contractor Teleconference January 11, 2006

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Good afternoon everyone and welcome.

**Today I am going to provide information regarding the National Provider Identifier (NPI).**

## Background

- The final rule adopting the Health Insurance Portability & Accountability Act of 1996 (HIPAA) standard unique health identifier for health care providers was published on January 23, 2004. It can be found in Volume 69, No. 15, page 3434 of the Federal Register.
- Purpose:  
“To improve the efficiency and effectiveness of the health care system through the establishment of standards and requirements for the electronic transmission of certain health information.” “To protect the security and privacy of health care information by setting standards.”

## Overview

- The NPI is part of the HIPAA mandate requiring a standard unique identifier for healthcare providers.
- The NPI will replace other identifiers such as the UPIN, payer identifiers, CHAMPUS, BCBS numbers, Medicaid numbers, etc.
- NPIs are assigned by the National Plan and Provider Enumeration System (NPPES). Fox system, Inc has been selected as the enumerator. Fox is being supported in this work by its subcontractor, Noridian Administrative Services of Fargo, North Dakota.
- Providers and health plans must use **only** the NPI to identify providers in standard EDI transactions- no legacy provider identifiers will be allowed.
- Compliance Date: May 23, 2007 for all but small providers. May 23, 2008 for small providers.
- Providers may apply and obtain NPIs now.

## Who can have an NPI?

- Any health care provider
- Health care providers will be classified as either individual or an organization.
- Entities, such as billing services, that do not qualify as a health care provider will not be eligible for a NPI.

## An NPI will not:

- Guarantee reimbursement by health plans
- Enroll providers in health plans
- Make providers covered entities
- Require providers to conduct electronic transactions

## Organizations/Subparts

Subparts of an organization are considered components of that organization that are a separate program or that have a separate physical location that furnish health care, but are not themselves legal entities. They must conduct their own standard transactions. Subparts cannot be individuals such as physicians, group practices may have more than one NPI, but individual members of that group practice by definition are not and cannot be “subparts.”

## Provider Requirements

- Must obtain NPI and begin using in electronic transactions by May 23, 2007
- Must notify NPES enumerator within 30 days of any changes to application information.
- Must disclose NPI when requested.
- Require Business associates to use NPIs appropriately.

## Tips

### Talk to your vendors:

- Will your practice management system or clearinghouse require changes to accommodate the new number?
- Will these system changes impact your paper claim capability?
- When will your vendor make these changes?
- Testing?

### Talk to your payers:

- Some payers plan to begin accepting the NPI long before the May 23, 2007 compliance date.
- CMS website for Medicare information: <http://www.cms.hhs.gov/NationalProvIdentStand/>
- Allow time for testing with each payer to insure the NPI is setup for accurate and timely reimbursement.

## NPI Application

There are 3 ways to apply:

1. Web-based application

***<http://nppes.cms.hhs.gov>***

2. Mail

Obtain a copy of the form:

***<http://www.cms.hhs.gov/NationalProvIdentStand/>***

Call 1-800-465-3203

Email ***[customerservice@npienumerator.com](mailto:customerservice@npienumerator.com)***

Mail application to:

NPI Enumerator

PO Box 6059

Fargo, ND 58108-6059

3. Electronic File Interchange

Information will come from CMS early 2006

## Make Sure You Are Ready

Remember:

- Application for NPI does not replace the enrollment process for health plans.
- Do not submit NPIs on standard transactions until the health plan has indicated that they are ready to accept the NPI.
- Providers should also ensure that your vendors will be able to implement the NPI in time to meet the compliance date.

## The Next Steps:

- Apply for the NPI as soon as possible! This will facilitate the testing and transaction processes and will also decrease the possibility of any interruption in claims payment.
- Watch for information from the health plans with which you do business on the implementation/testing of NPIs in claims, and other standard transactions.
- Know your Payers NPI scheduled roll out dates.
- Check in your area for collaborative organizations working to address NPI implementation issues on a regional basis among the physicians, hospitals, laboratories, pharmacies, health plans and other impacted parties.
- Ensure alignment with CMS timeliness.
- Monitor CMS Medlearn Matters at [www.cms.hhs.gov/medlearnmattersarticles/](http://www.cms.hhs.gov/medlearnmattersarticles/)
- Check the Upstate Medicare Division website for NPI information at [www.umd.nycpic.com](http://www.umd.nycpic.com)

## Timeframes

Medicare's implementation involving acceptance and processing of transactions with the NPI will occur in separate stages, as shown in the table below:

May 23, 2005 - Jan 2, 2006:	Providers should submit Medicare claims using only their existing Medicare numbers. They should not use their NPI numbers during this time period. CMS claims processing systems will reject, as unprocessable, any claim that includes an NPI during this phase.
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Jan 3, 2006 - Oct 1, 2006:	<p>Medicare systems will accept claims with an NPI, but an existing legacy Medicare number must also be on the claim. Note that CMS claims processing systems will reject, as unprocessable, any claim that includes only an NPI.</p> <p>Medicare will be capable of sending the NPI as primary provider identifier and legacy identifier as a secondary identifier in outbound claims, claim status response, and eligibility benefit response electronic transactions.</p>
Oct 2, 2006 - May 22, 2007:	<p>CMS systems will accept an existing legacy Medicare billing number and/or an NPI on claims. If there is any issue with the provider's NPI and no Medicare legacy identifier is submitted, the provider may not be paid for the claim.</p> <p>Therefore, Medicare strongly recommends that providers, clearinghouses, and billing services continue to submit the Medicare legacy identifier as a secondary identifier.</p> <p>Medicare will be capable of sending the NPI as primary provider identifier and legacy identifier as a secondary identifier in outbound claim, claim status response, remittance advice (electronic but not paper), and eligibility response electronic transactions.</p>
May 23, 2007 – Forward:	<p>CMS systems will only accept NPI numbers. Small health plans have an additional year to be NPI compliant.</p>

## Additional Information

By May 06 the 855 applications will have a place to enter a NPI.  
As of 1/4/06 the latest enumeration statistics for NY is Individuals – 15903 Organizations – 2099  
Total: 18002

**At this time does anyone have any questions?**