

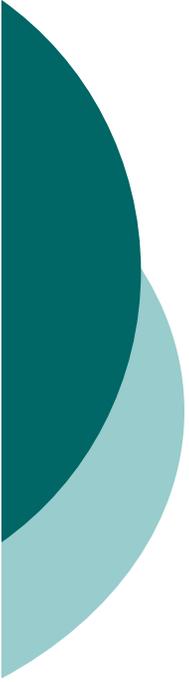


**NORTH CAROLINA MEDICAID
NATIONAL PROVIDER
IDENTIFIER
SEMINAR**

October 2006

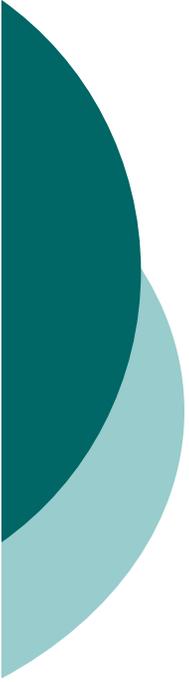
NPI Overview





What is the NPI?

- Mandated by HIPAA of 1996
- Unique identifier for health care providers
- The NPI will replace all proprietary identifiers used in electronic transactions to identify a provider
 - Medicaid Provider Number
 - Health plans can require the NPI on paper transactions



How do you get an NPI?

- The NPI is assigned to providers by the National Plan and Provider Enumeration System (NPPES)
 - Providers can apply for an NPI through a Web application or on a paper application at any time
 - Be sure to include Medicaid provider number on application

- <https://nppes.cms.hhs.gov>



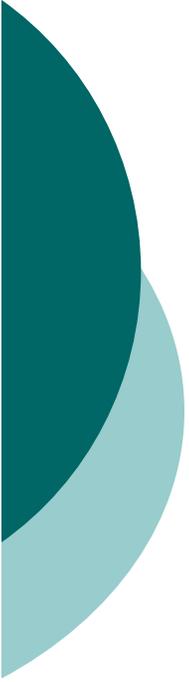
Enumerator Contact Information

- By Phone

- 1-800-465-3203 (NPI Toll-Free)
- 1-800-692-2326 (NPI TTY)

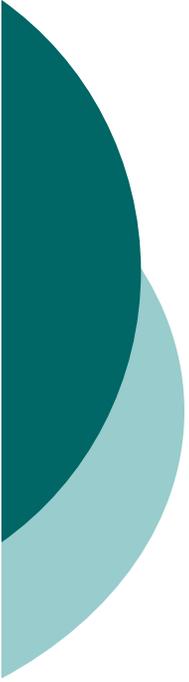
- By Email

- customerservice@npienumerator.com



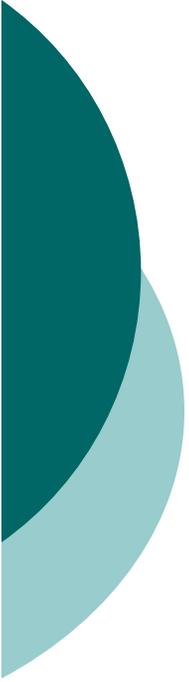
What does the NPI look like?

- The NPI is a 10-byte, all-numeric identifier with the last byte being a check digit
- There is no intelligence built into the NPI



Key Dates for the NPI

- Final Rule published on January 23, 2004
- Effective date was May 23, 2005
 - On the effective date, providers were able to begin applying for their NPI
 - As of September 18, 2006, 35,643 NPIs had been issued in NC – 27,849 individual and 7,794 organizational

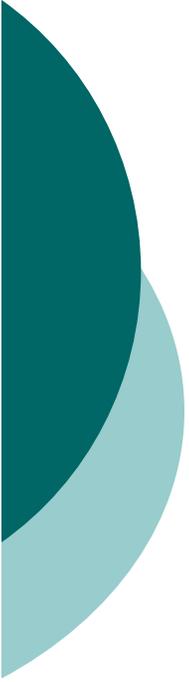


Key Dates for the NPI

- Compliance dates are:

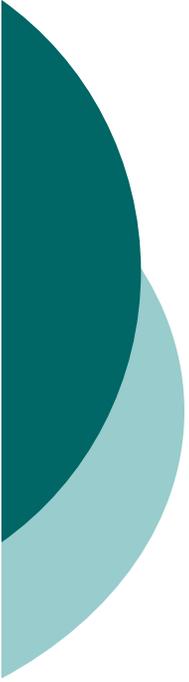
- May 23, 2007 for all covered entities except small health plans
- May 23, 2008 for small health plans

*By these dates, covered entities must use **only** the NPI to identify providers in standard transactions*



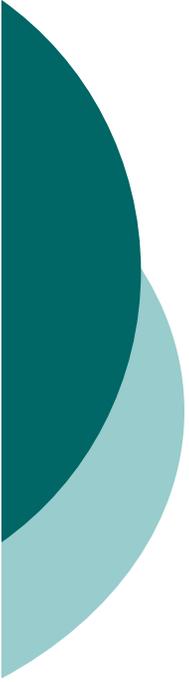
What the NPI will do

- It will:
 - Replace the use of all legacy provider identifiers (e.g., UPIN, Medicaid Provider Number, Medicare Provider Number, Blue Cross and Blue Shield Numbers) in standard transactions as of the compliance dates
 - Simplify transactions, including claims and COB, and save money in the long term



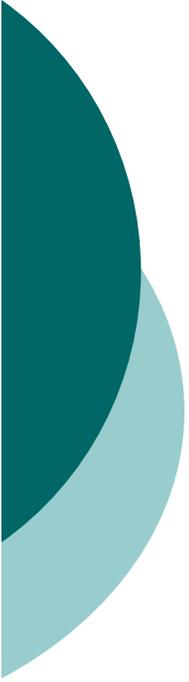
What the NPI will not do

- It will not:
 - Guarantee reimbursement by health plans
 - Enroll providers in health plans
 - Make providers covered entities
 - Require providers to conduct electronic transactions



The NPI will NOT...

- Replace the DEA number when required for prescribing controlled substances or other DEA-regulated activities
- Replace state-issued licenses and certifications verifying a provider's licensing or qualifications
- Replace Social Security Number, Individual Tax ID, or Employer ID for tax purposes



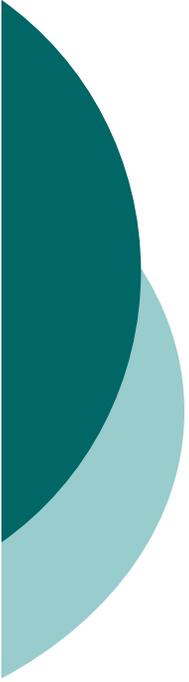
Who can have an NPI?

- Any “health care provider” (160.103)
 - Both covered and non-covered providers
 - Individuals: Physicians, dentists, nurses, chiropractors, therapists, others
 - Organizations: Hospitals, ambulatory care facilities, laboratories, group practices, adult care homes, others
- Subparts of providers

What is a subpart and who determines if a provider has subparts?

- A provider is a legal entity
- A subpart is *not* a legal entity but it furnishes health care
 - Examples: Hospital unit, member of chain





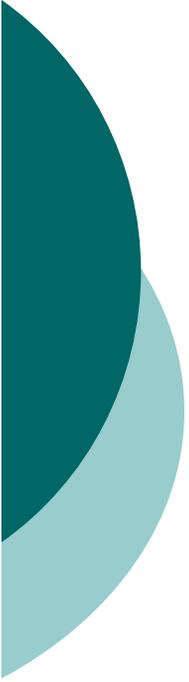
NPI Subparts

- Concept does not apply to individuals
- Covered provider responsible for determining subpart's need for NPI
- If need exists, covered provider responsible for subpart obtaining NPI
- Covered provider responsible for enumerated subpart's compliance with Final Rule



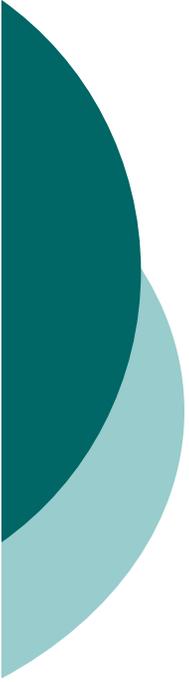
What are the requirements of the provider?

- Obtain and begin to use the NPI in covered transactions by May 23, 2007
- Notify the NPPES enumerator within 30 days of any changes to application data
- Disclose their NPI when requested
- Instruct their business associates to use the NPI appropriately
- Only HIPAA covered providers are subject to the NPI and its requirements



How does NPI impact providers?

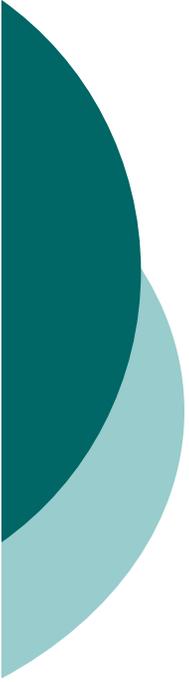
- It may be necessary for the provider to include more information on transactions than they do today in order for the health plan to uniquely identify the provider
 - Taxonomy codes
 - Rendering location address



Taxonomy Codes

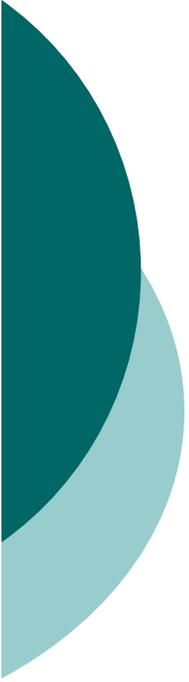
- Identify provider type and specialty
- Code set found here:

www.wpc-edi.com/codes/taxonomy



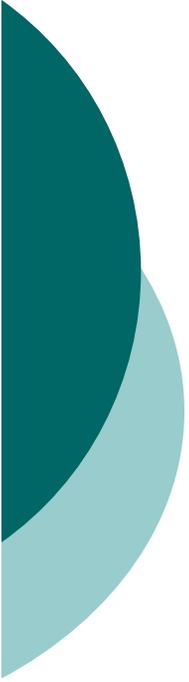
What are the requirements of the Health Plan?

- MUST accept the NPI as the provider identifier on electronic transactions
- CAN require the NPI on paper transactions to identify the provider
- CANNOT direct a provider on how to enumerate
 - Refer to State letter for recommendations
- CANNOT require a proprietary identifier after the compliance date
- The health plan will still need to enroll providers



What are the impacts to the Health Plan?

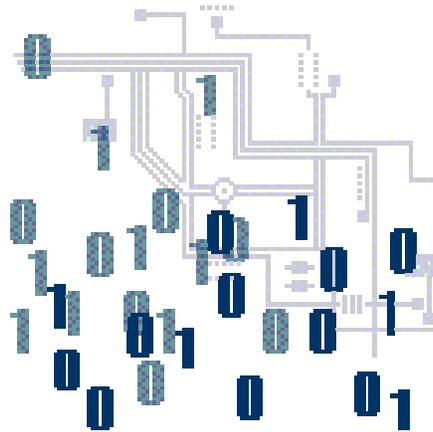
- The NPI contains no embedded intelligence
- Providers who have multiple numbers today to identify different types and specialties will only have one NPI
- Atypical providers cannot get an NPI
 - Non-health care providers
- Transition from proprietary number to the NPI

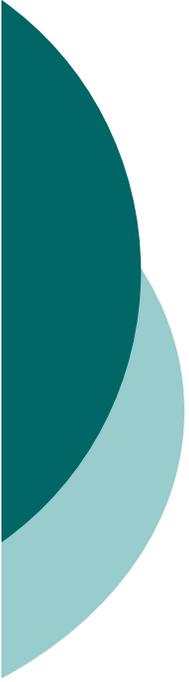


What are the impacts to the Health Plan?

- Contingency plan
- How will the health plan get the NPI?
 - From the provider
 - From the enumerator ?
- How does the health plan validate the NPI?

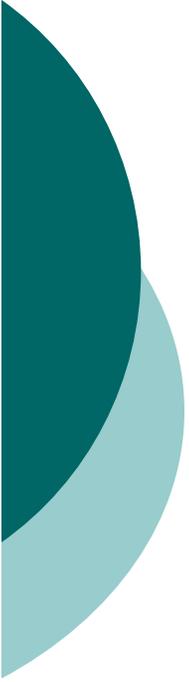
NC Medicaid Approach to Implementation





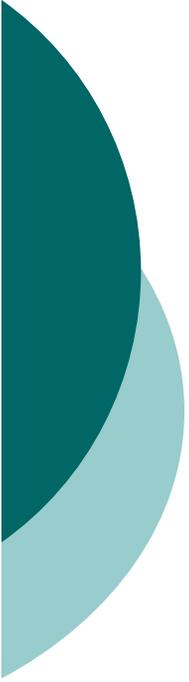
Minimal Enhancements

- North Carolina's approach is consistent with what is being done nationally
- Current implementation status is consistent with other states
- Did not anticipate implementing NPI in our current claims processing system
- For this reason, NC is taking a minimal enhancements approach



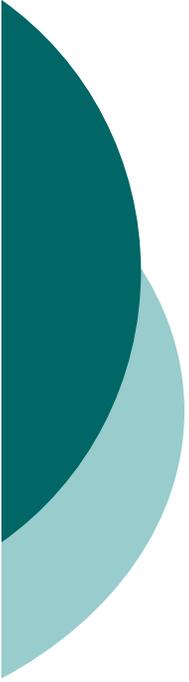
DMA Approach

- The NPI will be mapped to the Medicaid Provider Number for claim adjudication
- Mapping hierarchy established to determine the appropriate Medicaid Provider Number to assign to the claim for adjudication
- Internal edit and audit programs used for adjudications are not changing



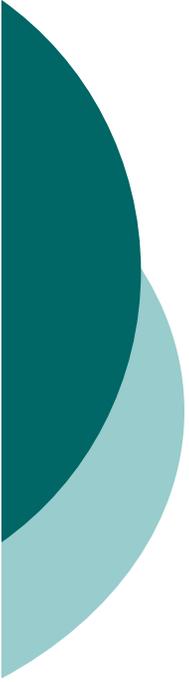
DMA Approach, Continued

- Data elements from the claim will be used in the mapping:
 - Taxonomy codes
 - Service Location and Billing
Provider Zip codes – Zip +4 will be required
 - Procedure Codes



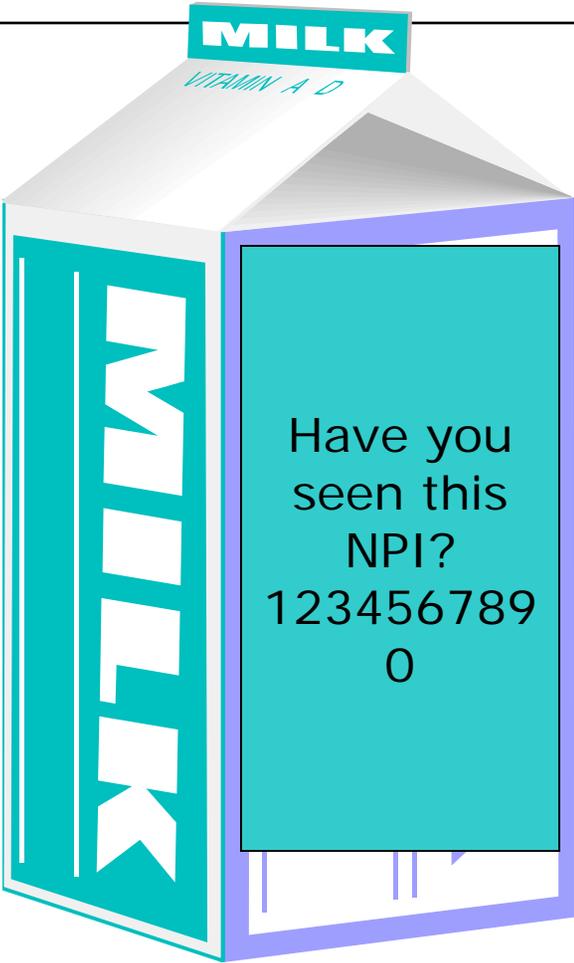
DMA Approach (continued)

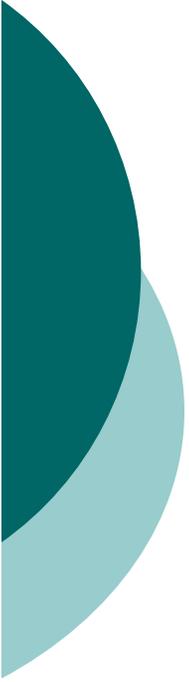
- NC Medicaid will require the NPI on the paper claims
 - New CMS-1500
 - UB04
- The NPI will be mapped to the Medicaid Provider Number for claim adjudication
 - What will happen when an NPI cannot be mapped to a single Medicaid Provider Number?
 - What will happen if the NPI is not on file?



Unknown NPI Report

- NPIs which are not on file
- Claims will not process
- Will be sent out at the same time as Remittance and Status Report
- Instructions will be included





DMA Approach (continued)

- Claim payment will still be based on the Medicaid Provider Number
 - Providers will receive a separate RA (835) for each Medicaid Provider Number. Only the NPI is reported on the RA (835)
 - The Unsolicited 277 transaction used for reporting pending claims will contain the NPI
 - Paper RAs will include both the Medicaid Provider Number and the NPI



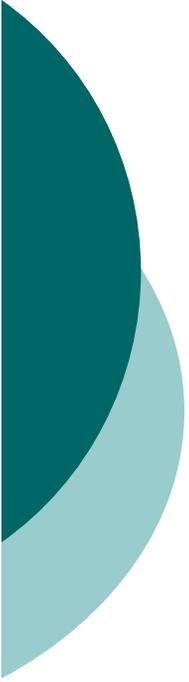
Other Transactions

- **270/271** – Eligibility Request and Response
 - Will validate the NPI is on file for an active Medicaid provider
- **276/277** – Claim Status Request and Response
 - If the ICN is submitted on the request, the NPI will be validated against the NPI on the claim
 - If the ICN is not on the claim, all claims for the Medicaid Provider Numbers associated with the NPI on the request will be searched using the other search criteria from the request



Other Transactions

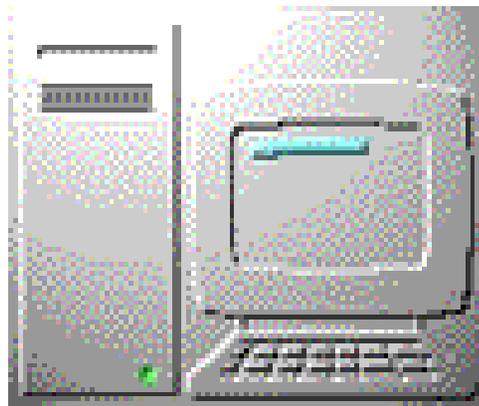
- **278** – Service Review Request and Response
 - Will include the NPI on the transaction report
 - Providers will still be required to submit the appropriate paper Prior Approval form in order to provide the medical necessity information not supported on the transaction

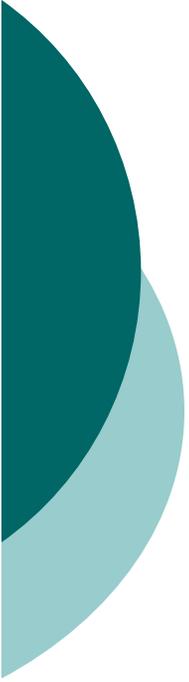


Other Implementation Considerations

- Evaluating which reports will be modified to include the NPI in addition to the Medicaid Provider Number
- Evaluating the impact to external entities that receive files which contain the Medicaid Provider Number
- The Automated Voice Response System (AVRS) will still use the Medicaid Provider Number
 - An analysis is being performed to determine feasibility of use with the NPI

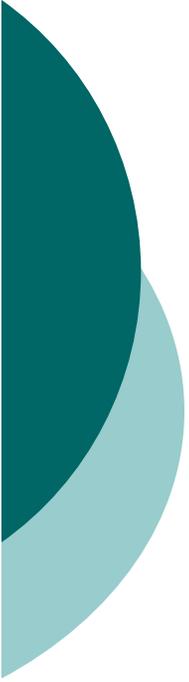
How DMA Will Collect the NPI





Dates To Remember

- **September 1, 2006** - Began Collecting and Inputting NPI on DMA Enrollment Screens
- **September 1, 2006** - New Provider Applications & Provider Change Forms on DMA webpage with NPI & Zip + 4 Showing as Required Fields
- **September 15, 2006** - Link for NPI information on DMA provider webpage
- **September 15, 2006** - NPI Collection Form on DMA provider webpage
- **January 1, 2007** - NPI Required on All Provider Applications & Change Requests
- **March 31, 2007** - Deadline for Reporting NPI to Medicaid
- **May 23, 2007** - Require NPI on All Claims - Paper & Electronic



Collection Method

- Fillable DMA NPI Collection Form
- Mail, Fax or Email but MUST BE TYPED
- Email: npi.dma@ncmail.net
- Electronic Solution Under Review
 - Direct Data Entry on a web portal
 - Excel Spreadsheet
 - Requirements Will Be on the Web
- Provider Change Forms Must Be Sent Separately



Collection Form

- Send CMS Certification letter with form
- We Will Be Collecting ONE NPI Number for Each Medicaid Provider Number
- Required Fields:
 - Medicaid Provider Number
 - NPI
 - Taxonomy
 - Physical & Billing Address Zip +4



Efficiently managing Medicaid and NC Health Choice for Children so that cost-effective health care services are available to all eligible persons across the state.

- Provider Links
- Consumer Links
- County Links
- Programs
- Publications

[National Provider Identifier \(NPI\) Information](#)
[State Medicaid Director Letter from CMS](#)



[Mental Health Reform](#)

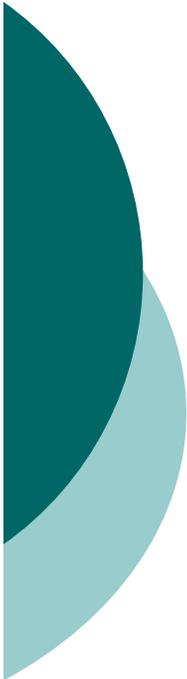
The mission of the Division of Medical Assistance is to provide access to medically necessary health care services to eligible North Carolina residents so they can obtain high value, high quality health care services resulting ultimately in improved quality of life.

The Division manages Medicaid and [NC Health Choice for Children](#) for the state of North Carolina. Medicaid is a health insurance program for certain low-income and needy people paid with federal, state, and county dollars. It covers more than 1 million people in our state, including children, the aged, blind, and/or disabled, and people who are eligible to receive federally assisted income maintenance payments.

[Guía del Usuario para Medicaid en Carolina del Norte](#)

- Contact Us
- Who We Are - DMA Organization
- Disclaimer

[Medicaid "Be Smart" Family Planning Program](#)
[The Official U.S. Government Site for People with Medicare](#)
[DHHS Customer Service Home Page](#)



FOR DMA USE ONLY
 Initials: _____
 Dates: _____
 Follow-up: C-2 C-3

North Carolina Division of Medical Assistance
 2501 Mail Service Center
 Raleigh, NC 27699-2507

National Provider Identifier (NPI) Form

Please complete a separate NPI form for each of your individual Medicaid Provider number (s). This form must be completed online and printed or typed. **Handwritten forms will not be accepted.**

Please **DO NOT** use this form to report changes. You must use the Provider Change Form to report any changes. The change form is available on the DMA's website at <http://www.dhhs.state.nc.us/dma/forms.html#prov>.

Remember: You must also mail or fax a copy of your NPPES certification letter with this NPI form. Deadline for completion is March 15, 2007. Mailed or fax form to:

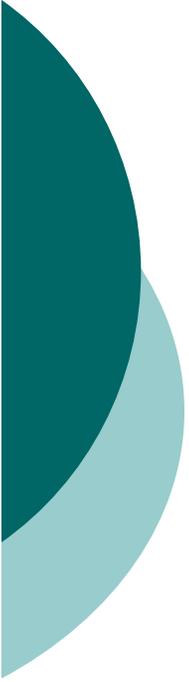
Attention: NPI Form
 DMA Provider Services
 2501 Mail Service Center
 Raleigh, NC 27699-2507
 Fax#: (919) 715-7140

Medicaid Provider Number	National Provider Number	Taxonomy Number
<input type="text"/>	<input type="text"/>	<input type="text"/> X
		<input type="text"/> X
		<input type="text"/> X

	Physical Address	Billing/Accounting Address
Organization Name:		
Individual Name:		
Address 1:		
Address 2:		
City/State:		
Zip - PLUS 4:	<input type="text"/>	<input type="text"/>

Printed Name of Authorized Representative/Title/Date Phone Number

Signature of Authorized Representative
 DMA-4101(09/06)



Examples:

Medicaid Provider

Type

NPI

8#####1

Group

1111111111

8#####2

Anesthesia

2222222222

8#####3

Pediatrics

3333333333

8#####4

PhD's

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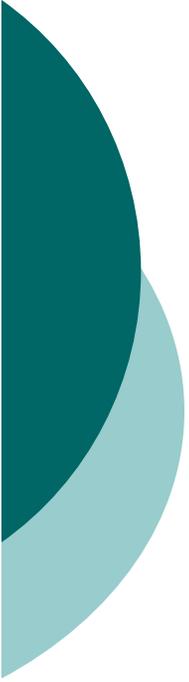
8#####5

Independent Lab

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Medicaid Communication Plan





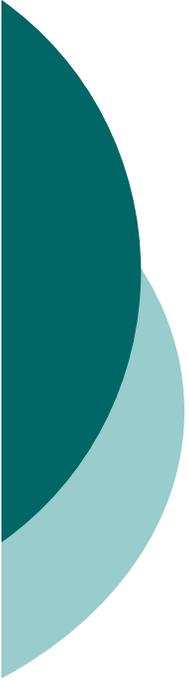
Communication Plan

- Provider Workshops
 - October
 - March
- Bulletin Articles
- Newsletters
- Websites
- RA Banner Messages
- DMA Website



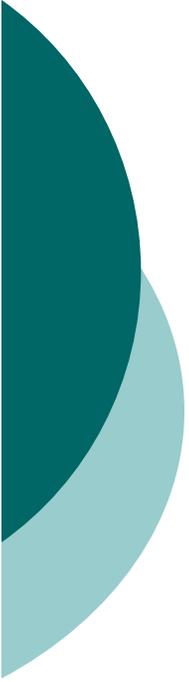
NPI Contact Information

- CMS NPI Homepage
http://www.cms.hhs.gov/apps/npi/01_overview.asp
- How to Apply for NPI
http://www.cms.hhs.gov/NationalProvIdentStand/03_apply.asp#TopOfPage
- National Plan and Provider Enumeration System (NPPES)
<https://nppes.cms.hhs.gov/NPPES/Welcome.do>
- DMA Provider Enrollment Information
<http://www.dhhs.state.nc.us/dma/prov.htm>
- DMA NPI Information and NPI Collection Form
<http://www.dhhs.state.nc.us/dma/npi.htm>



Interesting NPI Facts

- The 10 digit numeric NPI allows for 200 million unique NPIs
- CMS estimates this will allow unique numbers to be issued for 200 years
- Only an estimated 35% of providers have applied for their NPI



National Provider Identifier (NPI):

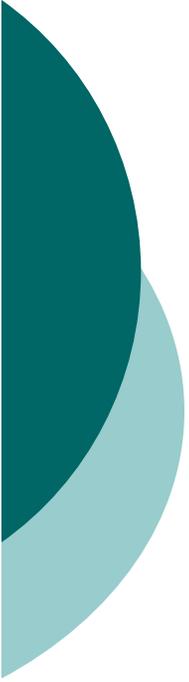
Get It!

Share It!

Use It!

NOW!

Getting one is Free – Not having
one can be costly!



Thank you for attending!

- Please fill out your evaluation

