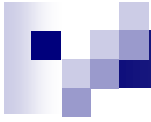




Overview of the National Provider Identifier (NPI)

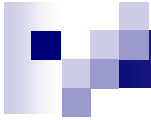


April 18, 2006



The NPI is a HIPAA Administrative Simplification Standard

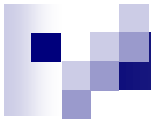
- Transactions
- Code sets
- Security
- Privacy
- Identifiers
 - Employer identifier
 - Health care provider identifier
 - (yet to come): Health plan identifier



Health care provider identifier standard: NPI

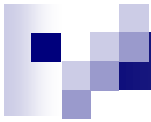
**Adopted by Final Rule published
January 23, 2004**

- Final Rule established the functions of the NPS (NPPES)
- Final Rule placed requirements on health plans, health care clearinghouses, and covered health care providers



Final Rule requires the use of the NPI in standard transactions

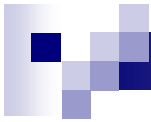
- To identify health care providers and subparts as 'health care providers' in standard transactions
- Replaces the use of proprietary and legacy provider identifiers in standard transactions for health care providers and subparts who have been assigned NPIs
- Legacy identifiers may not be used after 5/23/07 to identify health care providers or subparts who have NPIs



Who must comply with the HIPAA standards?

HIPAA “Covered entities”

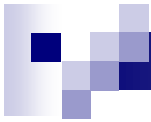
- Health plans (e.g., Medicare, Medicaid, Tricare/CHAMPUS, DVA, BC/BS Plans, HMOs, and all other entities that meet “health plan” definition in 45 CFR 160.103)
- Health care clearinghouses
- Health care providers who conduct standard transactions



Who must get an NPI?

- All health care providers who conduct any of the HIPAA standard transactions
 - ☐ Individuals
 - ☐ Organizations
- Subparts of health care providers if the subparts conduct any HIPAA standard transactions for themselves

NOTE: The size of the health care provider does NOT matter.



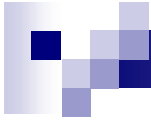
May other health care providers obtain NPIs?

YES!

- Any entity who is a “health care provider” (as defined at 45 CFR 160.103) is eligible for an NPI
- Providers need not be “covered entities” to apply for NPIs

BUT

- Entities that never render “health care” (as defined at 45 CFR 160.103) are not eligible for NPIs



Keep in mind:

- An NPI is expected to last indefinitely
 - Does not expire
 - Does not contain “intelligence”
- An individual (e.g., physician, dentist, pharmacist) is assigned only one NPI regardless of the number of places where he/she may practice
- An organization can decide if it has “subparts” that need their own NPIs



What is a subpart?

It is a component of an organization provider that furnishes health care and is not itself a legal entity

- ☐ Might conduct its own standard transactions
- ☐ Might be at same or different address than organization provider “parent”
- ☐ Might be certified separately from the organization provider “parent” by the State
- ☐ Might furnish services of a type different from that of the organization provider “parent”

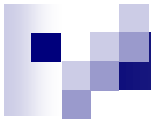
A subpart cannot be a person and a person cannot have subparts!



Why do subparts need NPIs?

They need them so they can be uniquely identified in standard transactions

- If subparts conduct their own standard transactions, they must obtain NPIs
- Not all organization providers have subparts
- The organization providers are required to determine if they have subparts and if the subparts need NPIs
- The organization providers are required to ensure the subparts that need NPIs obtain them



Guidance about subparts

www.cms.hhs.gov/NationalProvIdentStand/

- NPI Final Rule
- Medicare Subparts Paper
- Fact Sheet on Medicare Subparts
- Medlearn Matters Article about Medicare Subparts

www.wedi.org/npioi/

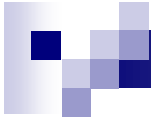
- White Paper



When can health care providers apply for their NPIs?

RIGHT NOW!

- Providers began applying on 5/23/05
- Do not delay applying for your NPI
- “Covered providers” must obtain and use NPIs by 5/23/07



Three ways to apply: Choose only one!

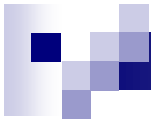
1. Apply over the web

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

2. Fill out a paper application and mail it to the NPI Enumerator

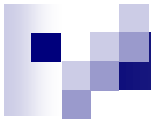
1-800-465-3203

3. An organization might ask if you want it to apply for an NPI on your behalf (EFI) (late spring 2006)



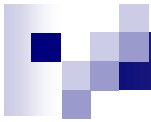
Who assigns NPIs and how is it done?

- All applications (web, paper, EFl) go to National Plan and Provider Enumeration System (NPDES) for processing
- Data on applications are used to ensure uniqueness of provider or subpart who is applying
 - SSN validation, address standardization
 - Duplicate check
- NPI Enumerator resolves problem applications
- Applications are rejected if provider or subpart already has an NPI



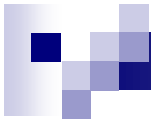
The National Plan and Provider Enumeration System (NPPES)

- Developed under CMS contract
- Uniquely identifies health care providers and subparts and assigns them NPIs
- Sets up and maintains a record for every enumerated health care provider and subpart
- Creates reports and output files
- Will be able to enumerate health plans when a health plan identifier standard is adopted



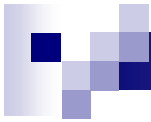
NPI Enumerator

- Handles paper NPI Application/Update Forms (applications, updates, deactivations)
- Resolves problems and answers questions for paper, web-based and EFI NPI applications and updates
- CMS awarded contract to Fox Systems



NPI notifications

- NPPES notifies Contact Person of NPI assignment
- Contact person shares NPI notification with provider
- Keep NPI notification in a safe place
- Share copies of your NPI notification with those who need it (health plans, billing service, vendor, clearinghouse)

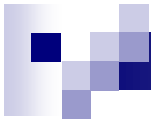


How do providers change their NPPES data?

Three ways to change data:

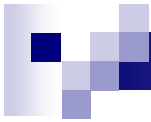
Choose only one!

1. Over the web <https://nppes.cms.hhs.gov>
2. Fill out a paper NP Application/Update Form and mail it to the NPI Enumerator
1-800-465-3203
3. An organization might ask if you want it to maintain your NPPES data for you (EFI) (late spring 2006)



Deactivating NPIs

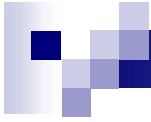
- Provider retires, goes out of business
- Must use paper NPI Application/Update Form to deactivate an NPI
 - May not be done via the web
 - May not be done by an EFI Organization
- NPI deactivation is not the same as disenrollment by a health plan, sanction, or revocation



Release of data from the NPPES

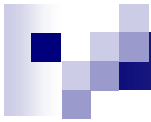
- Broad discussion in NPI Final Rule
- Release must be compatible with SoR Notice, authorities, statutes
- Data Dissemination Notice to be published in Federal Register

Covered entities need NPPES data in order to build crosswalks and link legacy numbers to NPIs



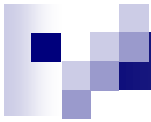
The NPPEs will not...

- Link subparts to covered organization health care providers or vice versa
- Capture memberships in groups
- Capture multiple practice location addresses
- Know whether or not a health care provider is a covered entity



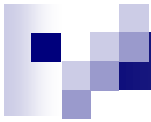
Having an NPI will not...

- Eliminate or replace the provider enrollment processes conducted by health plans
- Guarantee reimbursement by any health plan
- Convey covered entity status
- Assure licensure or credentials
- Require a health care provider or a subpart to conduct standard transactions



Health plans...

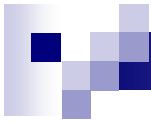
- Must permit the organization providers to determine subparts for themselves
- Will need to know about subpart designations and NPI assignments; may ask health care providers and subparts to disclose their NPIs
- Must develop links or crosswalks between legacy numbers and NPIs in order to “recognize” NPIs in standard transactions
- Are not prohibited from requiring their enrolled health care providers to obtain and use NPIs (if consistent with NPI Final Rule)



Implementation activities

CMS wears three hats for NPI:

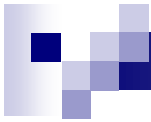
1. MANAGING ACTIVITIES DELEGATED TO CMS BY THE SECRETARY:
 - Regulation development and publication
 - NPPES development and maintenance
 - Provider enumeration, updates
 - Data dissemination
 - Enforcement
 - Guidance for the entire health care industry
2. NPI IMPLEMENTATION WITHIN MEDICARE
3. OVERSEEING NPI IMPLEMENTATION BY THE MEDICAID STATE AGENCIES



Implementation activities

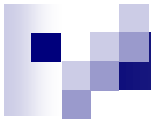
All covered entities:

- Watch for instructions/communications from HHS/CMS, trading partners, professional associations
- Determine impact of NPI on contracts, systems, processes, files
- Develop implementation plans and discuss them with trading partners, vendors, business associates
- Identify/resolve issues early



Cohesive, uniform industry implementation

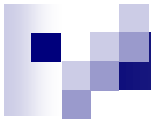
- WEDI www.wedi.org/
 - Named in HIPAA as consulting organization
 - NPI PAG, SNIP NPI listserv, white papers
- Standards Developers
 - NCPDP, X12, HL7, NUCC, NUBC, DeCC
- Other professional organizations and associations



CMS resources

www.cms.hhs.gov/NationalProvIdentStand/

- NPI Final Rule, Overview
- NPI FAQs
- NPI Enumeration Statistics
- How to Apply for NPIs (including EFI)
- Medicare's NPI Implementation
 - Medicare Subpart paper, Medicare timeline
 - Medlearn Matters Articles



NPI Enumerator

For questions from health care providers about their NPI applications

- Phone:
 - ☐ 1-800-465-3203
 - ☐ 1-800-692-2326 (TTY)
- E-mail:
 - ☐ Customerservice@npienumerator.com
- Mail:
 - ☐ NPI Enumerator
P.O. Box 6059
Fargo, ND 58108-6059