

What should we do now?

The first step is to become informed about the NPI and how it will impact the organization and/or individual, both financially and operationally. This can be done by researching the NPI using the resources on the back of this pamphlet or working with community and regional workgroups such as HIPAA COW (HIPAA Collaborative of Wisconsin) or professional associations.

Once informed about the NPI and its impacts, work with the organization to:

- Create a plan for enumerating and receiving NPI(s),
- Identify what areas are impacted (both business units and systems); apply for the NPI(s)
- Coordinate a smooth transition from the old identifiers to the NPI; and
- Communicate the NPI(s) to associated hospitals/facilities/health plans.

Where can we find more information?

Centers for Medicare and Medicaid:

<http://www.cms.hhs.gov/hipaa/hipaa2>

Review the following sections;

1. General Information – Frequently Asked Questions
2. Regulations and Standards – Identifier Standards
3. Future updates on other parts of this page.

Workgroup for Electronic Data Interchange (WEDI) and Strategic National Implementation Process (SNIP) - Various Whitepapers, Sub-workgroup information and Listserve sign-up:www.wedi.org

This information was brought to you as a public service by the following organizations:

The HIPAA Collaborative of Wisconsin



www.hipaacow.org

Wisconsin Hospital Association



www.wha.org



Rural Wisconsin Health Cooperative

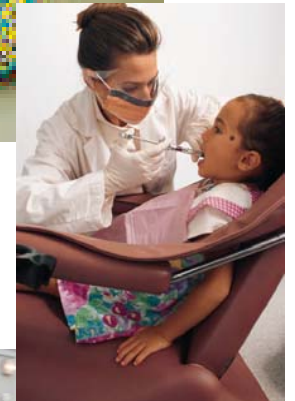
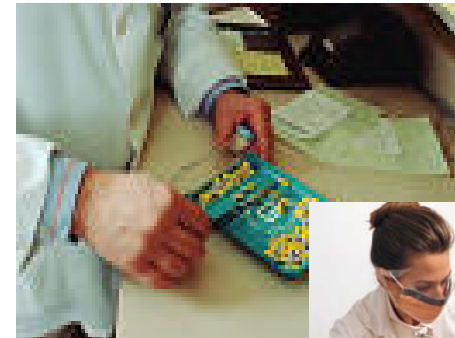
www.rwhc.com

WHIMA

Wisconsin Health Information Management Association

www.whima.org

NATIONAL PROVIDER IDENTIFIER (NPI) INFORMATION



What is the National Provider Identifier?

On January 23, 2004, the Department of Health and Human Services (DHHS) published the "Standard Unique Health Identifier for Health Care Providers" regulations. As expected, these final regulations adopt the National Provider Identifier (NPI) as the unique identifier for health care providers for use in the HIPAA (Health Insurance Portability and Accountability Act) standard transactions and for other lawful purposes. The NPI has **ten** all-numeric positions (with the last position being a check digit) and will contain no embedded information about the provider.

Most covered entities will be required to use the NPI to identify providers on all standard electronic transactions by May 23, 2007 or for small health plans May 23, 2008. One example of a standard electronic transaction is a claim sent from a provider to a health plan or a provider sending a claim to a clearinghouse who in turn passes the claim along to the payer.

The NPI will be issued by the National Provider and Plan Enumeration System (NPPES), which is being set up under a CMS (Centers for Medicare and Medicaid Services) contract. The "enumerator", Fox Systems, Inc. will operate the NPPES. The enumerator will be responsible for receiving and assisting providers with the applications, assigning a unique NPI to each requestor, deactivating and reactivating NPIs as appropriate, updating information, and generally troubleshooting the NPPES.

Only "Covered health care providers" (meaning health care providers that transmit health information in electronic form in connection with the HIPAA standard transactions) are

required to apply for an NPI. Health care provider is defined as a provider of medical or health services and any other person or organization who furnishes, bills or is paid for health care in the normal course of business. (NPI regulation, page 3437)

The web-based system for NPI Applications will be available on May 23, 2005. Starting July 1, 2005, paper applications will be able to be submitted. Bulk enumeration information will be forth coming in the fall of 2005.

Examples of covered entities include, but are not limited to: Physicians, physician groups, hospitals, suppliers of Durable Medical Equipment, Pharmacies and Pharmacists, etc...

There are some services that are not eligible to receive a NPI. Examples of excluded entities include, but are not limited to: Taxi services and home and vehicle modifications, etc...

How will the NPI affect the organization and/or individual providers?

The NPI will replace all legacy provider numbers (e.g. UPIN, Medicaid Provider Number, Medicare Provider Number, Blue Cross and Blue Shield Numbers) in standard electronic transactions as of May 23, 2007 for most covered entities except small health plans which have until May 23, 2008.

The NPI **will not:**

- Eliminate health plan requirements to credential the organization or individual provider.
- Guarantee reimbursement by health plans.
- Enroll providers in health plans.

- Make providers covered entities.
- Require providers to conduct electronic transactions.

Providers may also be asked for their NPI from other health care organizations such as other provider organizations, health plans and clearinghouses in order to continue the flow of health care operations. Please be aware of the NPI so that these requests can be answered.

Providers that conduct any of the standard electronic transactions under HIPAA will need to ensure that their software vendors or IS/IT staff makes the appropriate programming changes to their systems and applications.

Billing, registration, and other staff members will also need to be informed of this change so that when they are working with health plans and other providers, they can use the NPI to identify the individual provider and/or organization.

Finally, business offices will need to work with other covered entities to determine when they will begin to accept and send the NPI on any of the standard electronic transactions. Some plans may require the use of the NPI on paper transactions (i.e. Claims) to identify the provider or organization.

Entities that do not conduct their own billing or any of the standard electronic transactions under HIPAA, will still need to obtain an NPI as the organization that conducts these transactions on their behalf will need the appropriate NPIs to successfully continue its health care operations.

It is the provider's responsibility to notify the NPPES of any changes with the application information within 30 Days.