CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 2164	Date: February 25, 2011
	Change Request 7318

SUBJECT: Healthcare Provider Taxonomy Codes (HPTC) Update April 2011

I. SUMMARY OF CHANGES: Affected Medicare contractors shall obtain the most recent Healthcare Provider Taxonomy Codes (HPTC) list and use it to update their internal HPTC tables and/or reference files. The attached Recurring Update Notification applies to Chapter 24, Section 60.8.

EFFECTIVE DATE: July 1, 2011 IMPLEMENTATION DATE: July 5, 2011

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated) R=REVISED, N=NEW, D=DELETED-*Only One Per Row*.

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
N	24/60.8/Health Care Provider Taxonomy Code (HPTC) Requirements

III. FUNDING:

For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs) and/or Carriers: No additional funding will be provided by CMS; Contractor activities are to be carried out within their operating budgets.

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

Recurring Update Notification

Manual Instruction

*Unless otherwise specified, the effective date is the date of service.

Attachment – Recurring Update Notification

Pub.100-04 Transmittal: 2164 Date: February 25, 2011 Change Request: 7318

SUBJECT: Healthcare Provider Taxonomy Codes (HPTC) Update April 2011

Effective Date: July 1, 2011

Implementation Date: July 5, 2011

I. GENERAL INFORMATION

A. Background: The HPTC set is maintained by the National Uniform Claim Committee (NUCC) for standardized classification of health care providers. The NUCC updates the code set twice a year with changes effective April 1 and October 1. The HPTC list is available for view or for download from the Washington Publishing Company (WPC) Web site at www.wpc-edi.com/codes.

The changes to the code set include the addition of a new code and addition of definitions to existing codes. When reviewing the Health Care Provider Taxonomy code set online, revisions made since the last release can be identified by the color code; new items are green, modified items are orange, and inactive items are red.

B. Policy: HIPAA requires that covered entities comply with the requirements in the electronic transaction format implementation guides adopted as national standards. The institutional and professional claim electronic standard implementation guides (X12 837-I and 837-P) each require use of valid codes contained in the HPTC set when there is a need to report provider type or physician, practitioner, or supplier specialty for a claim. Valid HPTCs are those codes approved by the NUCC for current use. Terminated codes are not approved for use after a specific date and newly approved codes are not approved for use prior to the effective date of the code set update in which each new code first appears. Although the NUCC generally posts their updates on the WPC Web page 3 months prior to the effective date, changes are not effective until April 1 or October 1 as indicated in each update. Specialty and/or provider type codes issued by any entity other than the NUCC are not valid, and Medicare would be guilty of non-compliance with HIPAA if Medicare contractors accepted claims that contain invalid HPTCs.

II. BUSINESS REQUIREMENTS TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A	D	F	C	R	,	Shai	red-		OTH
		/	M	I	A	Н		Syst	tem		ER
		В	Е		R	Н	M	aint	aine	rs	
					R	I	F	M	V	C	
		M	M		I		I	C	M	W	
		A	A		Е		S	S	S	F	
		C	C		R		S				
7318.1	Contractors and maintainers shall use the	X		X	X	X	X				CEDI
	most cost effective means to obtain the April										

Number	Requirement	Responsibility (place an "X" in each									
		applicable column)									
		A	D	F	C	C R Shared-					OTH
		/	M	I	A	Н	System			ER	
		В	Е		R	Н	M	aint	aine	ers	
					R	I	F	M	V	С	
		M	M		I		I	C	M	W	
		A	A		Е		S	S	S	F	
		C	C		R		S				
	2011 HPTC list, which is available online at										
	WPC and the NUCC Web sites.										
7318.2	Contractors and maintainers shall update the	X		X	X	X	X				CEDI
	current HPTC Tables with the April 2011										
	HPTC list.										

III. PROVIDER EDUCATION TABLE

Number	Requirement Responsibility (place an "X" in each										
		applicable column)									
		Α	D	F	C	R	,	Shai	red-		OTH
		/	M	I	Α	Н	1	Syst	tem		ER
		В	Е		R	Н	•				
					R	I	F	M	V	C	
		M	M		I		I	C	M	W	
		A	A		Е		S	S	S	F	
		C	C		R		S				
7318.3	Contractors shall notify submitters of 837-I	X	X	X	X	X					CEDI
	and 837-P claims in a Newsletter/Bulletin and										
	on their provider Web page of deletions,										
	additions, or modifications in each HPTC										
	update that could affect claims sent to										
	Medicare, and the effective date of those										
	changes. MLN articles are not prepared for										
	code updates.										

IV. SUPPORTING INFORMATION

A. For any recommendations and supporting information associated with listed requirements, use the box below: N/A

Use "Should" to denote a recommendation.

X-Ref	Recommendations or other supporting information:
Requireme	
nt	
Number	

B. For all other recommendations and supporting information, use this space: N/A

V. CONTACTS

Pre-Implementation Contact(s): Brian Reitz, <u>Brian.Reitz@cms.hhs.gov</u>, 410-786-5001 for professional claims and Matthew Klischer <u>Matthew.Klischer@cms.hhs.gov</u>, 410-786-7488 for institutional claims.

Post-Implementation Contact(s): Contact your Contracting Officer's Technical Representative (COTR) or Contractor Manager, as applicable.

VI. FUNDING

A. For Fiscal Intermediaries (FIs), Carriers, and Regional Home Health Intermediaries (RHHIs):

No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.

B. For Medicare Administrative Contractors (MAC):

The contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the Statement of Work (SOW). The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the contracting officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the contracting officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

60.8 - Health Care Provider Taxonomy Code (HPTC) Requirements

(Rev. 2164, Issued: 02-25-11, Effective: 07-01-11, Implementation: 07-05-11)

Health Care Provider Taxonomy Codes (HPTC) are also called Specialty Codes. HPTCs are 9-digit identifiers assigned by the National Uniform Claim Committee (NUCC) to be used in HIPAA transactions.

[Contractors] are required to validate the incoming HPTC against the most recent taxonomy code list. CMS will notify [contractors] and their shared system maintainers (via Recurring Update Notification) to load the most recent HPTC code list into a contractor-controlled table designed by the shared system maintainer. HPTCs may not be hard coded by the shared system maintainers. Contractor-controlled tables minimize the impact of future system updates.

HPTCs are updated twice a year (tentatively October and April) by the NUCC and the updates are available for download in a portable document format (PDF) from the Washington Publishing Company (WPC) for no charge at www.wpc-edi.com/codes, or an electronic representation of the list, which could facilitate loading of the codes, may be purchased from WPC on a subscription basis. [Contractors] are to use the most cost effective means to obtain the list for validation programming and updating purposes.