



Related MLN Matters Article #: MM5858

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Medicare Fee for Service Legacy Provider IDs Prohibited on Form CMS-1500 Claims after National Provider Identifier (NPI) Required Date

Key Words

MM5858, CR5858, R1432CP, Legacy, CMS-1500, NPI

Provider Types Affected

Physicians, providers, and suppliers submitting CMS-1500 and CMS-1450 (UB-04) claims to Medicare Carriers, Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs), Durable Medical Equipment Medicare Administrative Contractors (DME MACs), and/or Part A/B MACs for services provided to Medicare beneficiaries

Key Points

- The effective date of the instruction is for claims received on or after May 23, 2008.
- The implementation date is April 7, 2008.
- The Health Insurance Portability and Accountability Act (HIPAA) of 1996 required issuance of a unique NPI to each physician, supplier, and other health care provider who conducts HIPAA standard electronic transactions. In accordance with this act, the Centers for Medicare & Medicaid Services (CMS) began issuing NPIs on May 23, 2005.
- On April 2, 2007, the Department of Health and Human Services provided covered entities guidance regarding contingency planning for NPI implementation. In this guidance, as long as a health plan was compliant, meaning they could accept and send NPIs on electronic transactions, they could establish contingency plans to facilitate the compliance of their trading partners.
- As a compliant health plan, on April 20, 2007, Medicare fee for service (FFS) established a contingency plan that followed this guidance. Since then, CMS has been allowing transactions adopted under HIPAA to be submitted with a variety of identifiers, including:
 - NPI only;
 - Medicare legacy only (Physician Identification Number, Unique Physician Identification Number, or National Supplier Clearinghouse Number); and

- NPI and legacy combination.
- Change Request (CR) 5858 announces that beginning on May 23, 2008, CMS requires the NPI to be submitted on the Form CMS-1500 and CMS-1450 paper claims, **and legacy numbers will NOT be permitted on claims received on or after that date.**
- Effective on that date, Form CMS-1500 and CMS-1450 claims containing legacy identifiers will be returned as unprocessable, without appeal rights.
- When returning these claims, contractors will use an appropriate message and Remittance Advice Remark code. (e.g., N257- "Missing/incomplete/invalid billing provider primary identifier").

Note: Contractors will not return claims in certain situations where an NPI is not required (e.g., foreign claims, deceased provider claims, and other situations as allowed by CMS in the future). Such claims will be processed with established procedures for such claims.

Important Links

The related MLN Matters article can be found at

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5858.pdf> on the CMS website.

Providers can find more information about the prohibition of Medicare FFS legacy provider IDs on Form CMS-1500 and CMS-1450 claims after the NPI required date by going to CR5858, located at <http://www.cms.hhs.gov/Transmittals/downloads/R1432CP.pdf> on the CMS website.

Providers will find updated *Medicare Claims Processing Manual* (100-04), Chapter 26 (Completing and Processing Form CMS-1500 Data Set), Section 10.4 (Items 14-33 - Provider of Service or Supplier Information), as an attachment to that CR.

If providers have any questions, they may contact their carrier, FI, A/B MAC, or DME MAC at their toll-free number, which may be found at

<http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the CMS website.