



Provider Inquiry Assistance

National Provider Identifier (NPI) for Secondary Providers – JA6093

Related CR Release Date : September 12, 2008

Date Job Aid Revised: September 30, 2008

Effective Date: May 23, 2008

Implementation Date: September 26, 2008

Key Words MM6093, CR6093, R267PI, NPI, National, Provider, Identifier, Secondary

Contractors Affected

- Medicare Carriers
- Part A/B Medicare Administrative Contractors (MACs)
- Durable Medical Equipment MACs (DME MACs)
- Fiscal Intermediaries (FIs)

Provider Types Affected

All Medicare providers who submit claims to Medicare Carriers, A/B MACs, DME MACs, and/or FIs in which a secondary provider must be identified



Change Request (CR) 6093 outlines the need to use NPIs to identify secondary providers in Medicare claims beginning May 23, 2008.

Provider Needs to Know...

- CR6093 does not alter existing requirements for capturing the name and address (when required) of secondary providers or instructions that address the specific practitioner types that must be reported in certain referral and “incident to” situations.
- CR6093 instruction addresses only the reporting of the identifier for secondary providers, when required.
- When an identifier is reported on a paper or electronically submitted claim for a secondary provider (ordering, referring, attending, operating, supervising, purchased service, other, or service facility provider [in the X12N 837 claims transactions] or for prescriber [in the National Council for Prescription Drug Programs (NCPDP) 5.1 retail

drug claim transactions]), **the identifier must be an NPI.**

- If the secondary provider **does not furnish** their NPI at the time of the order, referral, purchase, prescription, or time of service, **the billing provider** must attempt to obtain that NPI in order to use it in the claim.
- Providers may use the NPI Registry or may need to contact the ordering, referring, attending, operating, supervising, purchased service, other, service facility, or prescriber in order to obtain that NPI.
- While the *Implementation Guides* for the X12N claims transactions permit the reporting of the Social Security Number (SSN) for some secondary providers if there is no NPI, the Centers for Medicare & Medicaid Services (CMS) does not believe providers will be successful in having secondary providers disclose their SSNs.
- If providers are unable to obtain the NPI of the entity to be identified as the service facility provider, or if that entity has not obtained an NPI, **NO identifier** is to be reported in that loop.
- If providers are unable to obtain the NPI of the ordering, referring, attending, operating, supervising, purchased service, other, or prescriber, they (the billing provider) **must use their NPI as the identifier for that secondary provider.**
- Claims will not be paid if the secondary providers (with the exception of the service facility provider) are not identified by NPIs.
- An NPI is not necessary for the service facility provider.

Background

- The Administrative Simplification provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) mandate the adoption of a standard unique health identifier for each health care provider.
 - The NPI final rule, published on January 23, 2004, establishes the NPI as this standard. All health care providers and entities covered under HIPAA must comply with the requirements of the NPI final rule.
 - Effective May 23, 2008, paper and electronic Medicare claims must contain NPIs to identify health care providers in their role as health care providers.
 - NPIs do not replace Taxpayer Identification Numbers, which identify health care providers in their role as taxpayers.
 - Medicare claims always identify primary providers. Primary providers are the billing and pay-to providers and for non-institutional and non-pharmacy claims, the rendering provider.
 - Some Medicare claims also need to identify one or more secondary providers.
 - A secondary provider could be a health care provider who ordered services for a Medicare patient or who referred a Medicare patient to another health care provider (ordering/referring providers).
 - A secondary provider could also be a health care provider who is an attending,
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operating, supervising, purchased service, other, or service facility provider; or a prescriber (the latter only in retail pharmacy drug claims).

- Prior to May 23, 2008, health care providers who ordered/referred were identified by Unique Physician Identification Numbers (UPINs).
- UPINs were assigned to physicians, as defined in Section 1861(r) of the Social Security Act. UPINs were also assigned to nurse practitioners, clinical nurse specialists, physician assistants, licensed clinical social workers, clinical psychologists, and certified nurse midwives.
- These are the only physicians and non-physician practitioners who are permitted by law to order/refer in the Medicare program.
- Medicare ceased assigning UPINs in June 2007 as part of the implementation of the NPI.

Operational Impact N/A

Reference Materials

The related MLN Matters article can be found at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM6093.pdf> on the CMS website.

The official instruction (CR6093) regarding this change may be viewed at <http://www.cms.hhs.gov/Transmittals/downloads/R267PI.pdf> on the CMS website.

The revised Chapter 14 (National Provider Identifier) of the *Medicare Program Integrity Manual* is attached to the CR.

The NPI final rule may be found at <http://www.cms.hhs.gov/NationalProvIdentStand/Downloads/NPIfinalrule.pdf> on the CMS website.