



**News Flash** – An additional election period for the Competitive Acquisition Program (CAP) for Medicare Part B drugs will start on January 15 and run through February 15, 2008, to give physicians a chance to take advantage of new changes to the program that began on January 1, 2008. The CAP is a voluntary program that provides an alternative to ASP for physicians to obtain certain Part B drugs. More information about the CAP is available at [http://www.cms.hhs.gov/CompetitiveAcquisforBios/01\\_overview.asp](http://www.cms.hhs.gov/CompetitiveAcquisforBios/01_overview.asp) on the CMS website.

MLN Matters Number: SE0802

Related Change Request (CR) #: N/A

Related CR Release Date: N/A

Effective Date: N/A

Related CR Transmittal #: N/A

Implementation Date: N/A

## Upcoming Critical Dates for Medicare's Fee-for-Service (FFS) Implementation of the National Provider Identifier (NPI)

### Provider Types Affected

This article is primarily for physicians and providers who submit Medicare claims using the Medicare Fee-for-Service (FFS) 837P and the CMS-1500 form.

### Provider Action Needed

This special edition article, SE0802, is being provided by the Centers for Medicare & Medicaid Services (CMS) in order to clear up some confusion that providers are experiencing regarding the March 1, 2008 implementation of the NPI on professional claims, and the May 23, 2008 requirement for **ONLY** the NPI on all Health Insurance Portability & Accountability Act (HIPAA) electronic transactions and their paper versions.

The following charts illustrate expected claim results for different identifiers, or combinations of identifiers, submitted in the primary provider fields on the Medicare FFS 837P and CMS-1500. Note that when the chart indicates that claims will be paid, this would only be if no other errors (non-NPI) exist.

#### Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

**Prior to March 1, 2008 – 837P and 1500 Claims, Primary Provider Fields**

Legacy Medicare Identifier	NPI	Result
X		Claim will be paid
X	X	Claim will be paid as long as there is an NPI/legacy match on the NPI Crosswalk*
	X	Claim will be paid as long as there is an NPI/legacy match on the NPI Crosswalk*

**As of March 1, 2008 – 837P and 1500 Claims, Primary Provider Fields**

Legacy Medicare Identifier	NPI	Result
X		Claim will be rejected
X	X	Claim will be paid as long as there is an NPI/legacy match on the NPI Crosswalk*
	X	Claim will be paid as long as there is an NPI/legacy match on the NPI Crosswalk*

**May 23, 2008 and Beyond –****All Providers, All Transactions\*\*, Both Primary and Secondary Provider Fields**

Legacy Medicare Identifier	NPI	Result
X		Claim/transaction will reject
X	X	Claim/transaction will reject
	X	Claim/transaction will be paid/processed as long as there is an NPI/legacy match on the NPI Crosswalk*

\* Claims will reject when there is not a match on the Medicare NPI Crosswalk. You must correct any data which may be preventing an NPI/legacy match on the NPI crosswalk. The correction might require that you file a CMS-855 Medicare Provider Enrollment form with your Medicare carrier, A/B MAC, or DME MAC a process which can take a number of months to accomplish.

\*\*HIPAA electronic transactions (837I, 837P, 837COB, NCPDP, 276/277, 270/271, and 835), paper claims and SPR remittance advice.

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## TEST NPI-Only NOW

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If you have been submitting claims with both an NPI and a Medicare legacy number and those claims have been paid, you need to test your ability to get paid using only your NPI (i.e., no Medicare legacy number) by submitting one or two claims today for each NPI you've been assigned. If the Medicare NPI Crosswalk cannot match your NPI to your Medicare legacy number, the claim with an NPI-only will reject. You can and should do this test now! If the claim is processed and you are paid, continue to increase the volume of claims sent with only your NPI. If the claims reject, validate that the National Plan and Provider Enumeration System (NPPES) has the correct Medicare Legacy number. If your NPPES information is correct, contact your Medicare carrier or A/B MAC enrollment staff for advice right away.

## Additional Information

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As of January 1, 2008, FFS Medicare required an NPI in the primary provider fields on the 837I and UB-04 claim types. Providers billing with these claim forms must continue to include an NPI in the primary provider field until May 23<sup>rd</sup> at which time an NPI-only is required in all fields

For more information on correcting NPPES errors and how to use the NPI on Medicare claims, visit

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0725.pdf> on the CMS website.

If you do not have an NPI, you need to obtain one as soon as possible. Providers can apply for an NPI online at <https://nppes.cms.hhs.gov> or can call the NPI enumerator to request a paper application at 1-800-465-3203.

A table of Medicare's key dates relative to the NPI is available at the CMS NPI page [http://www.cms.hhs.gov/NationalProvidentStand/02\\_WhatsNew.asp](http://www.cms.hhs.gov/NationalProvidentStand/02_WhatsNew.asp) on the CMS website. More information and education on the NPI can be found through the CMS NPI page <http://www.cms.hhs.gov/NationalProvidentStand> on the CMS website.

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