



Open Payments

Frequently Asked Questions (FAQs): Covered Recipient Definition Expansion

This document is designed as a resource for the Open Payments Frequently Asked Questions (FAQs) in relation to the changes regarding the covered recipient definition expansion effective Program Year (PY) 2021.

A comprehensive list of frequently asked questions about the Open Payments program can be found on the [Open Payment website](#).

All FAQs presented in this document are current as of July 31, 2020

FAQ #2008

Question:

Some states do not have separate licensing programs for some of the non-physician practitioner types, physician assistant (PA), nurse practitioner (NP), clinical nurse specialist (CNS), certified registered nurse anesthetist (CRNA), or certified nurse-midwife (CNM). Reference data on providers in states that do not have separate licensing programs for some non-physician practitioner types may not include information on the specific credential they practice under. How should reporting entities decide which provider type to report for a given provider if it is not specified in the data?

Answer:

Reporting entities should use their best knowledge of the provider and the credential(s) the provider practices under to make a selection. Reporting entities are to follow the definitions provided in the final rule (42 C.F.R. §403.902) to make determinations on which providers are reportable regardless of whether they are identified as a PA, NP, CNS, CRNA or CNM in reference data sources. Reporting entities are encouraged to use the assumptions statement to note the methodologies used in their reporting.

FAQ #2009

Question:

Will reporting entities be required to identify the specific types of non-physician practitioners— physician assistant (PA), nurse practitioner (NP), clinical nurse specialist (CNS), certified registered nurse anesthetist (CRNA), or certified nurse-midwife (CNM)—in their reports?

Answer:

Yes, reporting entities will be required to specify at least one provider type for each reported non-physician practitioner and will be allowed to make multiple selections for providers who carry multiple credentials.

FAQ #2010

Question:

Will all non-physician practitioners be required to obtain National Provider Identifier (NPI) numbers?

Answer:

No, Open Payments does not require non-physician practitioners to obtain NPIs.

FAQ #2011

Question:

How should reporting entities report non-physician practitioners that do not have a National Provider Identifier (NPI)?

Answer:

For non-physician practitioners without an NPI, reporting entities can report up to 5 state licenses on the payment record. Matching will be performed based on the combination of first name, last name, and state license information. Please note that reported providers do not have to have a specific PA, NP, CNS, CRNA or CNM credential associated with their state license to be successfully validated. CMS is aware that not all states license providers for each of the listed credentials and will be able to validate reported data regardless of whether reported license(s) are for a specific non-physician practitioner type or a broader category of Registered Nurse.

FAQ #2012

Question:

How will CMS validate information submitted about non-physician practitioners?

Answer:

CMS will use a combination of data contained in the NPPES and PECOS systems, a commercial data source of aggregated data from state boards, and other sources to validate reported data on non-physician practitioners (PAs, NPs, CNSs, CRNAs, CNMs).

FAQ #2013

Question:

Where can reporting entities find the definition of the non-physician practitioners types, physician assistant (PA), nurse practitioner (NP), clinical nurse specialist (CNS), certified registered nurse anesthetist (CRNA), or certified nurse-midwife (CNM)?

Answer:

The non-physician practitioner terms are defined in the Final Rule, 42 C.F.R §403.902.