

## **National Provider Identifier (NPI) Frequently Asked Questions**

1. **Question:** Will First Coast Advantage (FCA)/Apex Benefits Services (Apex) employ a contingency plan?

**Answer:** Yes. In response to Florida Medicaid's contingency plan, FCA/Apex will delay full implementation of the NPI HIPAA mandate until April 1, 2011. **Beginning April 1, 2011**, providers must include their NPI number (including taxonomy and/or zip code if those values are part of the provider's NPI solution) on all claims submitted via Electronic Data Interchange (EDI) through FCA/Apex and the Medicaid Fiscal Agent (HP). Electronic claims submitted on or after April 1, 2011, to HP/AHCA without an NPI **will be rejected**.

2. **Question:** How do I know if I should submit taxonomy and/or zip code + 4 with my NPI number?

**Answer:** In order to link your NPI number with your Florida Medicaid provider number, you must register your NPI with Florida Medicaid.

Please remember to register your NPI with Florida Medicaid by completing the NPI form located at <https://nppes.cms.hhs.gov/NPPES/Welcome.do>

If taxonomy and zip code were used as part of your NPI solution and registered with Brandt Information Systems or directly with Florida Medicaid, those values must be used when identifying the provider in an EDI transaction to Florida Medicaid.

If you have already registered your NPI with Florida Medicaid, HP/AHCA strongly encourages you to begin sending some transactions with your NPI solution only. This will allow you to test your software and assess whether you are using your NPI correctly as registered.

3. **Question:** I don't have an NPI yet. What should I do?

**Answer:** Please obtain an NPI as soon as possible. Contact NPPES for an NPI assignment. They may be contacted as follows:

- 1-800-465-3203 (NPI Toll-Free); 1-800-692-2326 (NPI TTY)
- customerservice@npienumerator.com
- NPI Enumerator, PO Box 6059, Fargo, ND 58108
- <https://nppes.cms.hhs.gov>

Following this, please visit the link above in question 2 to register your NPI solution with Florida Medicaid.

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4. **Question:** Is the NPI required for all provider types in an EDI claim?

**Answer:** If a provider is required to get an NPI, it must be used to identify the provider in an EDI standard electronic claim for billing, treating, referring and attending roles.

5. **Question:** Are providers required to register their NPI with FCA/Apex prior to sending NPI on electronic claim transactions?

**Answer:** No. FCA/Apex will not employ a registration system for the NPI number. FCA/Apex encourages all providers to obtain their NPI and to use it in all HIPAA standard EDI transactions.

6. **Question:** Will FCA/Apex reject paper claims without an NPI value?

**Answer:** No, FCA/Apex will not reject a paper claim that does not contain the NPI value. Florida Medicaid encourages all providers to continue submitting their Florida Medicaid provider number on paper claims. Atypical providers who do not qualify for an NPI may continue using their Florida Medicaid provider number on paper claims.

FCA encourages the use of the new paper claim forms (CMS-1500 (08-05) and UB-04 CMS-1450). **On September 1, 2007, Florida Medicaid began rejecting paper claims submitted on any outdated CMS-1500 or CMS-1450 forms.**

7. **Question:** Will FCA/Apex accept NPI numbers prior to January 1, 2011?

**Answer:** Yes. FCA/Apex can accept NPI only, legacy number only or a combination of NPI and legacy identifier. FCA/Apex encourages all providers who have their NPI to use it in all HIPAA standard EDI transactions.

8. **Question:** How do I report my NPI solution in an EDI claim transaction?

**Answer:** Please refer to the NPI Quick Reference Guide document posted on the FCA website [http://www.firstcoastadvantage.com/claims\\_Information.asp](http://www.firstcoastadvantage.com/claims_Information.asp) for an overview of how to submit NPI information on EDI claim transactions. This document is based on the ACS Companion Guide for 837 transactions and Florida Medicaid processing requirements.

9. **Question:** *Is referring provider NPI number required on claim to avoid denial 10/1?*

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**Answer:** Yes if the services being billed require the referring provider to be present to pay the claim. Please see procedure codes below that require referring provider.

Proc Code	Proc Name	Refer Ind
99241	OFFICE CONSULTATION FOR A NEW OR ESTABLI	Y
99242	OFFICE CONSULTATION FOR A NEW OR ESTABLI	Y
99243	OFFICE CONSULTATION FOR A NEW OR ESTABLI	Y
99244	OFFICE CONSULTATION FOR A NEW OR ESTABLI	Y
99245	OFFICE CONSULTATION FOR A NEW OR ESTABLI	Y
99251	INPATIENT CONSULTATION FOR A NEW OR ESTA	Y
99251	INPATIENT CONSULTATION FOR A NEW OR ESTA	Y
99252	INPATIENT CONSULTATION FOR A NEW OR ESTA	Y
99253	INPATIENT CONSULTATION FOR A NEW OR ESTA	Y
99254	INPATIENT CONSULTATION FOR A NEW OR ESTA	Y
99255	INPATIENT CONSULTATION FOR A NEW OR ESTA	Y
T1025	PRESCRIBED PEDIATRIC EXTENDED CARE FULL-DAY SERVICES (OVER FOUR HOURS UP TO TWELVE HOURS PER DAY)	Y
T1026	PRESCRIBED PEDIATRIC EXTENDED CARE HALF-DAY SERVICES (FOUR OURS OR LESS PER DAY BILLED IN HOUR INCREMENTS)	Y

10. **Question:** How will the billing provider know the referring provider's NPI?

**Answer:** They will use their current method of obtaining the referring provider's information.

11. **Question:** If a referring provider number is not required on a claim, but the provider lists one anyway, what's the potential impact after NPI implementation?

**Answer:** This will NOT change from the current processing, meaning that today we receive claims where there is a referring provider submitted but not needed. If the referring NPI is present and valid but not needed, nothing will happen. However, if an NPI is present and NOT valid and NOT needed the claim will deny.

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12. **Question** If a therapy group provides PT/OT/ST they would have a separate taxonomy number for each type of therapy. Is that correct?

**Answer:** If the group currently has individual provider numbers for each therapy service then they will need to obtain three NPI numbers. If the group has one provider number currently, then they will only need one NPI number.

13. **Question:** For paper claims, is the NPI/taxonomy also required in box 17A/B? Our assumption would be yes, but can you confirm?

**Answer:** Yes, that is correct.

14. **Question:** For paper claims, there is no place to put a zip code on the claim form. Did we understand correctly that these claims must now go paper?

**Answer:** In the X12 837 transactions, only the Billing and Pay-to-Provider have a reserved place for the zip code. If the treating and/or referring providers have registered AND can only be identified via the NPI/Taxonomy/Zip Code combination, then yes, the claims must be billed on paper. The provider can also choose to change their registration. Please keep in mind the system has a hierarchal process to find an NPI and these types of providers most likely will have only one NPI associated to them and can be easily matched.

15. **Question:** Relationships exist in FMMIS between individual provider numbers and group provider numbers. How will this be impacted by NPI? For example, Happy Mental Health has eight locations, each of which has three group provider numbers assigned, with multiple individual provider numbers under each group number. What happens with NPI implementation?

**Answer:** The same “relationships” will exist in the FMMIS. Those provider numbers that are required to obtain an NPI must do so. This is no different than a hospital with physicians on staff or any other large group practice.

16. **Question:** How would we report the zip code for a provider who registered with it and is assuming the role of referring provider on an electronically submitted HIPAA compliant claim?

**Answer:** You can not. The claims must be billed on paper.

17. **Question:** If a provider has registered the NPI with the State that either has a zip code of 0000 or a zip code that does not match to the zip code in the FMMIS system, will the transaction be rejected?



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**Answer:** If the zip code is required to identify the provider, yes, the claim will post an edit.

18. **Question:** If a provider has registered their NPI with a taxonomy code and they don't send it on an electronic claim, will the transaction be rejected?

**Answer:** If the taxonomy is required to identify the provider, yes, the claims will post an edit.