



## National Provider Identifier Tool Kit

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# 1. NPI 101 – Frequently Asked Questions

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## **What is NPI?**

- NPI is the acronym for the National Provider Identifier. It is one provision of the Administrative Simplification portion of the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

## **What is the purpose of NPI?**

- The NPI is a single identification number that will be assigned by the federal government to health care providers. The NPI will be used to identify physicians, hospitals and other medical professionals in all electronic HIPAA transactions. It is intended to improve the efficiency of the health care system and help to reduce fraud and abuse.

## **What are HIPAA transactions?**

- American National Standards Institute (ANSI) is a committee that defines standards for many American industries. Thus far, HIPAA has mandated that nine ANSI transactions must be used for specific electronic health care transactions. These transactions include: 837 Claim, 835 Remittance Advice, 834 Enrollment, 270 Eligibility Inquiry, 271 Eligibility Response, 276 Claim Status Inquiry, 277 Claims Status Response, 278 Referral, and 820 Premium Payment. It is expected that additional transactions will be mandated in the future.

## **Who must comply with NPI requirements and when?**

- The NPI must be used in all HIPAA transactions by all covered entities—health plans, health care clearinghouses, and health care providers—by May 23, 2008.

## **Will NPIs only be issued for hospitals and physicians?**

- No. Any “health care provider” as defined in the NPI rule may apply for an NPI. In addition to hospitals and physicians, NPIs will be issued to institutional and other health care providers such as:
  - skilled nursing facilities,
  - home health agencies,
  - comprehensive outpatient rehabilitation facilities,
  - assorted clinics and centers,
  - clinical laboratories,
  - various licensed/certified health care practitioners such as dentists, chiropractors, pharmacists, etc., and
  - suppliers of durable medical equipment.
- They also will be issued to any appropriately licensed or certified health care practitioners or organizations, including pharmacies, nursing homes and

many types of therapists, technicians, aides, and any other individual or organization that furnishes health care services or supplies. In other words, a NPI applies to any health care individual or organization that bills and is paid for health care services or supplies. If organizations, such as hospitals, are made up of components, or separate physical locations that qualify as separate health care facilities, they also will be issued their own NPI. These types of arrangements are referred to as “subparts” in the NPI Final Rule.

### **What does the NPI look like?**

- The NPI is a ten-digit all numeric identifier that will include one check digit in the tenth position to ensure accuracy. This format will permit 200 billion unique identifiers to be issued without re-using the same values. The NPI will contain NO imbedded intelligence. In other words, you will not be able to determine a provider’s state, region, specialty, or any other information directly from their NPI.

### **What is an Entity Type Code?**

- An Entity Type code is a category indicator that will determine the type of provider that is being assigned an NPI:
  - Entity Type Code 1 will be issued to healthcare providers that are individual human beings. Examples include physicians, dentists, chiropractors, pharmacists, nurses, etc.
  - Entity Type Code 2 will be issued to organizations such as hospitals, residential treatment centers, laboratories, group practices, etc.

### **What is Subpart?**

- Subparts of organizational health care providers are eligible to be assigned NPIs. A subpart can be uniquely identified, for example, by separate physical location, by separate license or certification.
- While we cannot tell you how to structure your organization in regard to enumerating, our recommendation is for each incorporated practice to secure an Entity Type 2 NPI to assure that the proper entity is reimbursed for services that are rendered by the individual provider.

### **How will the NPI be generated?**

- The NPI will be generated by a new system called the National Plan and Provider Enumeration System (NPPES) and issued by the U.S. Department of Health and Human Services (HHS) through the Centers for Medicare and Medicaid Services (CMS).

### **How will a provider be issued a NPI?**

- Providers can apply to NPPES for an NPI and must have an NPI by May 23, 2008, when exchanging electronic transactions. Applications are available on the CMS web site at [http://www.cms.hhs.gov/NationalProvIdentStand/03\\_apply.asp](http://www.cms.hhs.gov/NationalProvIdentStand/03_apply.asp). Providers will

need to supply adequate information to ensure that they can be identified uniquely by the National Plan and Provider Enumeration System (NPPES). Should any of that information change in the future, CMS must be notified within 30 days.

**What if a doctor changes practices, moves, or changes specialties?**

- Even if a provider moves, changes specialty, or changes practices, the provider will retain the same NPI, but must notify CMS and supply the new information. The NPI is intended to identify the provider throughout his or her career. Organization NPIs also are intended to be permanent except in rare situations such as when a health care provider does not wish to continue an association with a previously used NPI, or when a health care provider's NPI has been used fraudulently by another.

**How will Blue Cross of California be able to associate a provider with his or her NPI?**

- The NPIs will be maintained in a database in the National Plan and Provider Enumeration System (NPPES). CMS will provide a method of extracting data from the NPPES database. Blue Cross of California is developing a strategy for acquiring NPI data from the database and will use it to identify providers submitting HIPAA transactions. In most cases, it will probably mean modifying current processes to include the NPIs.

**What is Blue Cross of California doing to prepare for NPI?**

- Blue Cross of California's NPI program has established project teams throughout its organization. These teams are dedicated to researching the issues, assessing systems, reviewing business processes, and educating the Blue Cross of California organization about implementation procedures while helping to ensure an understanding of the expected end-result.

**Where can I learn more about NPI?**

- To learn more about NPI from CMS, visit <http://www.cms.hhs.gov/NationalProvIdentStand/>. In addition, we encourage you to log on to [www.bluecrossca.com/home-providers.html](http://www.bluecrossca.com/home-providers.html) to find the most up-to-date information regarding HIPAA and Blue Cross of California compliance status.

**Has CMS issued any additional information on the application process for the NPI?**

- In early May of 2005, CMS issued a "Dear Provider Letter" that can be accessed at <http://www.cms.hhs.gov/NationalProvIdentStand/>. This letter briefly outlines the application process and the various ways the provider may obtain an NPI.

### **When will the providers be able to begin applying for an NPI?**

- Providers began applying for their NPI in May of 2005. Providers may apply electronically through CMS' web-based application system located at the following URL: <https://nppes.cms.hhs.gov/NPPES>. For those providers who prefer to use the paper format, a copy of the application and the enumerator's address is available at <https://nppes.cms.hhs.gov/NPPES>. Also, the provider may choose to submit their application through an organization, professional association, or employer. This process is yet to be finalized and is expected to be available sometime during late spring of 2006.

### **What if a provider has numerous health plan IDs, will each health plan require an additional NPI?**

- The NPI is the single provider identifier that will replace each of the different health plans' numerous identifiers. This regulation requires each of the health plans to use the NPI as the sole identifier for each provider. The provider needs only to apply once for an NPI.

### **Where can I learn more about the NPI application process?**

- Up-to-date information regarding the NPI is available on the NPPES web site at <https://nppes.cms.hhs.gov/NPPES>. You may also contact the enumerator by telephone at 1-800-465-3203 or TTY 1-800-692-2326. In addition, an instructional web tool, called the NPI Viewlet, is now available for viewing at <http://www.cms.hhs.gov/apps/npi/npiviewlet.asp>.

### **When will Blue Cross of California begin accepting the NPI?**

- Effective October 1, 2006, as long as the NPI number is accompanied with the provider's current Blue Cross of California provider identification number, Blue Cross of California will have the capability to accept the 10-digit NPI on electronic claims and CMS1500 (08/05) and UB-04 paper claim forms transactions.

### **Where will the NPI be located on the Electronic Claims Transactions?**

- The NPI will be reported within the provider loops on electronic claims transactions. The changes required for HIPAA Standard transactions are:
  - NM 108 qualifier will be XX for NPI Submission
  - NM 109 field will display the 10-digit NPI
  - Tax ID will be required in the REF segment when NPI is reported in the NM109
  - REF01 qualifiers (EI=Tax ID, SY= SSN)
  - REF02 field will display the Providers/Facilities Tax ID or SSN.

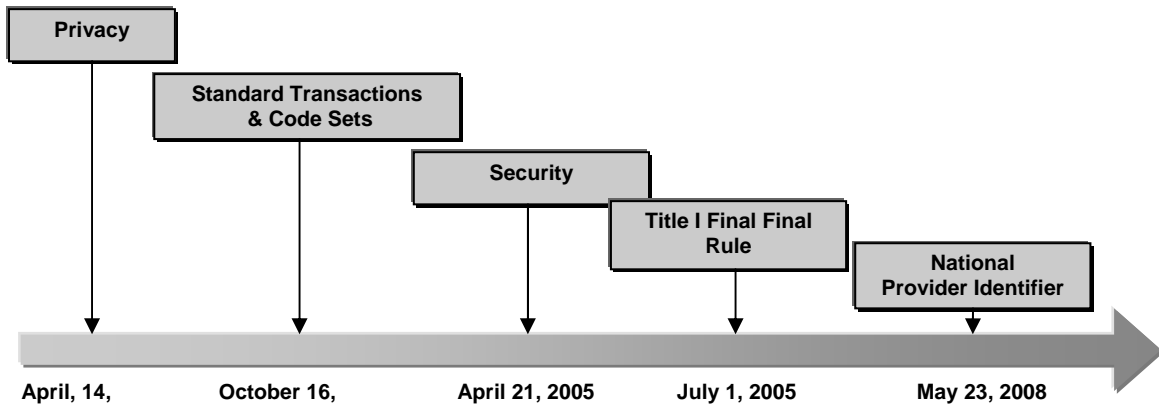
**Will the NPI be located on the Electronic Remittance Advise (835)?**

Yes, the NPI will be returned on the 835 electronic remittance advice in the following loops/segments:

<b>Loop/Segment</b>	<b>Dent</b>	<b>Inst</b>	<b>Prof</b>
Loop 1000B; N103	XX	XX	XX
Loop 1000B; N104	NPI	NPI	NPI
Loop 1000B; REF01	TJ	TJ	TJ
Loop 1000B; REF 02	Tax ID	Tax ID	Tax ID
Loop 2000; TS301	Not Used	Not Used	Not Used
Loop 2100; NM108	Not Used	XX	XX
Loop 2100; NM109	Not Used	NPI	NPI

## 2. Important Dates! NPI Calendar

### The HIPAA Timeline



### The NPI Timeline

#### Electronic transactions

<b>HIPAA Standard Electronic Claims – 837 Professional, Institutional, and Dental Claims</b>			
<b>Provider submits a transaction with...</b>	<b>Dual Receipt Period</b> (Now through 05/22/08)	<b>Contingency Period</b> (05/23/07 – 05/23/08)	<b>Full Implementation</b> (Post 05/23/08)  (A notification will be sent 60 days before requiring the use of NPI only on transactions)
Legacy ID Only (Provider Identification Number)	Accept Transaction	Accept Transaction	Reject Transaction
NPI & Legacy ID (Provider Identification Number)	Accept Transaction (Dual Receipt)	Accept Transaction (NPI must be in primary loops)	Reject Transaction
NPI Only	Reject (unless testing is completed with EDI area)	Accept Transaction (NPI must be registered with us)	Accept Transaction

#### Paper Forms

- Revised 1500 - National Uniform Claim Committee (NUCC)
  - Dual Receipt period begins October 1, 2006

- UB04 - National Uniform Billing Committee (NUBC)
  - Dual Receipt period begins October 1, 2006
- Dental – Standard ADA form, no dual receipt period
- Pharmacy - Standard NCPDP(UCF), no dual receipt period

### 3. Provider Checklist

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You may be asking your self, what can I do to prepare for the NPI? Keep in mind, the NPI will be replacing all legacy identifiers of providers, practices, facilities, etc. that have been assigned by payors for reimbursement. Since NPIs play a critical role in reimbursement, organizational providers should determine if they have subparts and begin to obtain NPIs for those subparts in a timely manner. Listed below are some helpful key components to keep in your thoughts during the next year:

1. Determine your organizational structure – are you an Entity Type 2 Organization that requires subparts?
2. Review your current Identifiers and how they relate to your NPIs or future NPIs.
3. Identify any gaps when you compare your current reimbursement schedules with your current identifiers and how that will be different with your NPI(s).
4. Discuss your current enumeration scheme and future enumeration plans with your staff and with your payors so that if any modifications are necessary for reimbursement, you won't experience any delay.
5. Request your NPIs and if necessary, your subparts.
6. Communicate your NPIs and/or subparts to all of your trading partners to minimize any disruption to reimbursement processes.
7. Be sure to review your current system software and work with your software vendor to ensure that your systems are capable of submitting and receiving NPIs within your electronic transactions.



## 4. Registering Your NPI with us

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We encourage providers to notify us with their NPIs as soon as possible, so that our internal systems accurately reflect providers' NPI information. After receiving your NPI, please complete our online submission form to register your NPI with us available at <https://npi.wellpoint.com>. If you are registering more than one NPI, please complete one form for each NPI. If you have a large quantity of NPIs to submit (provider practice or large organization), we will be implementing a "Bulk" submission process in September, 2006. Please check <https://npi.wellpoint.com> periodically for additional information regarding this process.



## 4. How to Submit Your NPI on Electronic Transactions:

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Beginning October 1, 2006, Blue Cross of California will accept your National Provider Identifier (NPI) number as long as it is accompanied with your current Provider Identification Number (PIN). Your PIN will be required so that we can properly process your claims.

If you haven't already, we recommend that you apply for your NPI as soon as possible to prepare you to begin submitting it on October 1, 2006 along with your PIN. For more information on applying for and obtaining an NPI please visit the CMS website at <https://nppes.cms.hhs.gov/NPPES>.

The NPI will be reported within the Provider loops on the electronic transaction. The elements we will require are:

- NM108 qualifier will be "XX" for NPI submission
- NM109 field will display the 10 digit NPI
- TaxID will be required in the Ref segment when NPI is reported in the NM109.
- REF01 qualifiers (EI =Tax Id, SY = Soc Sec. #)
- REF02 field will display the Providers/Facilities Tax Id or SS#

Please note that the electronic 835 (remittance advice) transaction will not change in October 2006. Blue Cross of California will provide advance notification regarding these changes as appropriate.

The NPI will be used on transactions required by the *Health Insurance Portability and Accountability Act (HIPAA)*. If you plan to submit your NPI between October 1, 2006, through May 23, 2008, the chart on the following page outlines upcoming changes required for the HIPAA transactions:

Electronic 837 - Professional, Institutional, and Dental Claims				
Field	Locator	Dual Receipt Period Now until 5/22/08	Contingency Period 5/23/07 – 5/23/08	Full Implementation** Post 5/23/08
<b>Primary Identifier Qualifier</b>	NM108 qualifier	Key “XX” for NPI submission.	Key “XX” for NPI submission.	Key “XX” for NPI submission.
	NM109 field	Key 10-digit NPI. (Tax identification number will be required in the Ref segment when NPI is reported in NM109 locator.)	Key 10-digit NPI. (Tax identification number will be required in the Ref segment when NPI is reported in NM109 locator.)	Key 10-digit NPI. (Tax identification number will be required in the Ref segment when NPI is reported in NM109 locator.)
<b>Secondary Identifier Qualifier</b>	REF01 qualifiers	Key “EI” (tax identification) or “SY” [Social Security Number (SSN)].	Key “EI” (tax identification) or “SY” [Social Security Number (SSN)].	Key “EI” (tax identification) or “SY” [Social Security Number (SSN)].
<b>Secondary Identifier</b>	REF02	Key your provider Tax ID or SSN	Key your provider Tax ID or SSN	Key your provider Tax ID or SSN
<b>Secondary Identifier Qualifier</b> (New REF Segment)	REF01 qualifiers	<b>Required:</b> * Key “1B” or “1A” (Professional Provider ID BCBS) or “G2” (Commercial Provider Identifier).	<b>Optional:</b> Key “1B” or “1A” (Professional Provider ID BCBS) or “G2” (Commercial Provider Identifier).	Provider ID Qualifier may no longer be submitted
<b>Secondary Identifier</b>	REF02	<b>Required:</b> * Your current identification provider number (legacy ID). Without the current provider identification number, the claim CANNOT be processed.	<b>Optional:</b> Your current identification provider number (legacy ID).	Your current provider identification number (legacy ID) may no longer be submitted.

\*Unless you have tested your NPI with us and have been approved for production

\*\* After 5/23/08, NPI is required on all HIPAA Standard Transactions submitted to Blue Cross of California.

Please refer to Blue Cross of California companion guides before submitting the NPI on electronic transactions.

We’ve expanded our website [www.bluecrossca.com/home-providers.html](http://www.bluecrossca.com/home-providers.html) to include NPI information specific to Blue Cross of California. We encourage you to routinely visit these sites to obtain the most up-to-date information.

## 5. Paper Claims Forms Changes & NPI

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### We will begin accepting Revised Paper Claim Forms on October 1, 2006:

The CMS 1500 (version 08/05) and the UB-04 paper claim forms have been revised to accommodate the National Provider Identifier (NPI) along with other modifications. Blue Cross of California will begin the transition to the revised claim forms on October 1, 2006. During this transition time, Blue Cross of California will accept the current and revised forms. When submitting the revised claims forms with your NPI, you must include your current Blue Cross of California provider number. However, prior to October 1, 2006, you must continue to use your current Blue Cross of California provider number for all your business interactions with us.

#### CMS-1500 (version 08/05) Claim Form

The *CMS-1500* claim form has been revised to accommodate NPI and your current provider number will be required so that we can properly handle your claims and assure timely payments effective October 1, 2006. On the revised *CMS-1500* claim form, the NPI shall be included in the following locators:

- ✓ Locator 17b for the referring provider
- ✓ Locator 24j for the rendering provider
- ✓ Locator 32 a & 33 a for servicing provider location and billing provider location

If you plan to submit your NPI on the revised CMS-1500 (version 08/05) claim between October 2, 2006 through May 23, 2008, the following chart outlines changes required for the revised CMS-1500 claim form:

Field	Locator	Changes
<b>CMS-1500 (version 08/05) Claim Form</b>		
Referring Provider-Other Identifiers	17a	Referring Current Provider Number will be placed here
Referring Provider NPI	17b	Referring Provider NPI will be placed here
Rendering Provider Shaded filed	24j	Rendering Provider NPI will placed here
Rendering Provider-Unshaded Field	24j	Rendering Provider NPI will be placed here
Servicing Provider Location	32 a	Servicing Provider NPI will be placed here

Servicing Provider Location	32 b	Servicing Provider current provider number will be placed here
Billing Provider Location	33 a	Billing Provider NPI will be placed here
Billing Provider Location	33 b	Billing Provider current provider number will be placed here
Federal Tax ID number	25	Federal Tax ID or Social Security Number to be placed here

For more information, please visit our Web site at [www.bluecrossca.com/home-providers.html](http://www.bluecrossca.com/home-providers.html) and the NUCC web site at [www.nucc.org](http://www.nucc.org).

UB-04 Claim Form

Likewise, a revised version of the facility claim form – formerly called UB-92 and now renamed *UB-04* has been revised to accommodate NPI. When submitting the *UB-04* form with your NPI, your current Blue Cross of California provider number will be required so that we can properly handle your claims and assure timely payments. On the *UB-04*, the NPI shall be displayed in the following locators:

- ✓ Locator 56 for the facility
- ✓ Locator 76 for the attending physician
- ✓ Locator 77 for the operating physician
- ✓ Locator 78 and 79 for other provider types

If you plan to submit your NPI on the UB-04 claim form between October 1, 2006 through May 23, 2008, the following chart outlines changes required for the UB-04:

Field	Locator	Changes
UB-04		
Facility NPI	56	Facility NPI will be placed here.
Other ID	57	Current provider number will be placed here.
Attending Physician	76	Attending Physician NPI will be placed here. Current provider number will be placed in field to the right of the NPI.
Operating Physician	77	Operating Physician NPI will be placed here. Current provider number will be placed in field to the right of the NPI.
Other Provider Types	78 & 79	Other provider types' NPIs will be

		placed in these two boxes. Current provider number will be placed in field to the right of the NPI.
Federal Tax ID	5	Federal Tax ID of Facility to be placed here.

After October 1, 2006, Blue Cross of California urges providers to file claims using the revised version of the *CMS-1500* claim form and new *UB-04* claim form, as a locator for the NPI does **NOT** exist on the former claim forms. For more information, please visit our Web site at [www.bluecrossca.com/home-providers.html](http://www.bluecrossca.com/home-providers.html) and the NUBC web site at [www.nubc.com](http://www.nubc.com).

## 6. NPES Data Dissemination Notice

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### **Centers for Medicare & Medicaid Services' (CMS) National Plan and Provider Enumeration System (NPES) Data Dissemination Notice: How Does It Affect Registering Your NPIs With (company name here)?**

The Data Dissemination Notice does not change (Company name here)'s policy on registering your National Provider Identifiers (NPI) with (Company name here). In order to avoid payment disruptions, please continue to register your NPIs with (Company name here).

#### **Why do we still need you to register your NPIs when NPIs will be available to us from NPES?**

The National Plan and Provider Enumeration System (NPES) coordinates the provider application process, assigns National Provider Identifiers (NPI), and houses the data received from providers as a result of their application. As a result, the NPES is a tremendous source of this important information. CMS published its policy for making the NPES data available to providers and health plans in the May 30, 2007, edition of the Federal Register. According to this notice, the NPES data:

- is expected to be available on or about September 4, 2007,
- will be in a file that can be downloaded from the CMS NPI web site,
- will be updated monthly,
- will be free of charge to be downloaded directly from the CMS NPI web site,
- will include information such as; provider NPI, entity type, name, address and state license number
- will not include a provider's tax identification number, social security number or date of birth.

In addition, a query-only tool will be available on the CMS NPI web site. This will allow users to search for a provider's NPI by entering his/her name and other demographic information. This should assist providers' offices in obtaining the NPI information for referring physicians or for the service facility location (such as a hospital, surgery center or imaging center) if such information is needed.

Custom reports (containing only those data elements allowed under the Freedom of Information Act), such as NPI information for providers in a specific state, will also be available. There will be a charge for any custom reports.

Link to Data Dissemination Notice information on CMS Web stie:

[http://www.cms.hhs.gov/NationalProvIdentStand/06a\\_DataDissemination.asp#TopOfPage](http://www.cms.hhs.gov/NationalProvIdentStand/06a_DataDissemination.asp#TopOfPage)

**Blue Cross of California Process for Incorporating the NPPES data:**

[Company Name Here] is developing a process and corresponding timeline for incorporating the NPPES data into our claim processing system:

- Currently, our enterprise project team is developing the design specifications and business requirements to add the NPPES data to our Enterprise Data Store.
- Process development and testing will begin once the NPPES data is available.
- It is estimated with development and testing, the NPPES data will be entered into our claims processing system in late Fall of 2007.

**NPI Registration:**

Since it will be several months before the NPPES data is entered and tested for accuracy into the [Company Name Here] claim processing system, it continues to be important for you to register your NPI information with [Company Name Here]. This will help ensure that your claims will process accurately. You may register your NPI by using our online tool available by logging on to <https://npi.wellpoint.com>, or by contacting your provider representative. When registering your NPI, please be sure to complete as many fields as possible so that we may match up your information to our currently existing database.

If you have questions regarding enumeration (entity types, sub-parts, etc.), please refer to the CMS web site for guidance.

## 7. Informational Websites

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There are many organizations which are undertaking various activities in an effort to support the success and implementation of NPI. For your information, we have provided some of these organizations and their respective Web sites below.

### **Government Organizations**

- Centers for Medicare & Medicaid Services NPI Website: <http://www.cms.hhs.gov/NationalProvIdentStand/>
- National Plan and Provider Enumeration System (NPPES) (Enumerator): <https://nppes.cms.hhs.gov/NPPES>

### **Professional and Trade Associations/Workgroups**

- American Hospital Association: <http://www.aha.org/hipaa/resources/scanheadline.asp>
- American Health Information Management Association: <http://www.ahima.org>
- American Medical Association: <http://www.ama-assn.org>
- National Council for Prescription Drug Programs: <http://www.ncdp.org>
- Medical Group Management Association: <http://www.mgma.com>

### **Paper Claim Forms:**

- UB04: National Uniform Billing Committee (NUBC): <http://www.nubc.org>
- CMS1500: National Uniform Claim Committee (NUCC): <http://www.nucc.org>

### **Data and Transaction Standards**

- Electronic Healthcare Network Accreditation Commission (EHNAC): <http://www.ehnac.org>
- Workgroup for Electronic Data Interchange: <http://www.wedi.org>

### **Taxonomy Codes & Implementation Guides**

- Washington Publishing Company (WPC): <http://www.wpc-edi.com>

## 8. Blue Cross of California Plan Contacts

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Provider Care: 1-800-677-6669

Member Services:

Large Group 1-800-999-3643

Small Group 1-800-627-8797

Individual 1-800-333-0912

Blue Cross Web Site [www.bluecrossca.com/home-providers.html](http://www.bluecrossca.com/home-providers.html)

## 8. Blue Cross of California's HIPAA NPI Readiness Statement

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The National Provider Identifier (NPI) is a component of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). The NPI is a 10-digit single provider identification number the Centers for Medicaid and Medicare Services (CMS) will assign through the National Plan and Provider Enumerator System (NPPES) to uniquely identify a physician, other health care professional or institution within specified electronic HIPAA transactions. It is intended to improve the efficiency of the health care system and reduce fraud and abuse. Ultimately, the NPI will replace all existing identification numbers including the Medicare, Medicaid, Unique Physician Identification Number (UPIN) and plan provider identification numbers.

Blue Cross of California has reviewed the requirements of the NPI and has implemented our strategy to integrate the NPI into our information systems (e.g., claims adjudication, financial, provider databases, etc.). Since October 1, 2006, we have been accepting the 10-digit NPI with the provider's current identification number in electronic claim transactions, CMS-1500 version 08/05, and UB-04 paper claim forms. Blue Cross of California will be capable of accepting and processing NPIs in institutional, medical and dental claims as well as claim status and member status inquiries by the mandated deadline of May 23, 2007.

On April 2, 2007, CMS announced a contingency plan for covered entities (other than small health plans). The CMS guidance allows providers and health plans that show "good faith efforts" to take up to May 23, 2008 (one additional year) to complete testing and other activities in order to mitigate potential payment disruption. Pursuant to this guidance, after the May 23, 2007 deadline, Blue Cross of California will accept either the NPI, current provider identification number (legacy identifier), or both in electronic and paper transactions until May 23, 2008 to avoid business disruption. This will help ensure maintenance of current service levels while our provider partners continue to pursue enumeration, and registration with health plans. We will no longer accept the legacy identifier after May 23, 2008. Providers will be sent a reminder notification approximately 60 days in advance of that date.

The requirement of the NPI in electronic transactions only applies to electronic transactions subject to the HIPAA requirements as set forth in the HIPAA Transactions and Code Sets Standards. For paper claims forms transactions, we strongly encourage the use of the NPI on the CMS 1500 form (version 08/05) and UB-04 claim forms to minimize any disruption to claims payment.

After receiving their NPI(s), providers are required to complete our online submission form, at <https://npi.wellpoint.com>, to register their NPI. Registration will help to ensure our internal system accurately reflects providers' NPI information in order to secure a seamless conversion to NPI and minimize potential payment disruptions.

To help meet the compliance efforts of our business partners, we've expanded our newsletters and provider Web sites to include the most up-to-date information about the NPI implementation, specific to Blue Cross of California. In addition, Blue Cross of

California will continue to relay information from CMS regarding NPI and NPPES. The Web sites may be accessed to obtain the most up-to-date information.

## 9. NPI Glossary

<b>Bulk Enumeration</b>	See Electronic File Interchange (EFI)
<b>Clearinghouse</b>	Authorized vendor or company that accepts electronic data transmissions and translates health care data to or from standard formats.
<b>CMS</b>	Centers for Medicare & Medicaid Services
<b>Covered Entities (CE)</b>	Under HIPAA, this is a health plan, a healthcare clearinghouse or a health care provider who transmits any health information in electronic form in connection with a covered HIPAA Transaction.
<b>Covered Healthcare Provider</b>	Under HIPAA, a person who is trained and licensed to give healthcare or a place that is licensed to give healthcare. Doctors, nurses, and hospitals are examples of healthcare providers.
<b>Electronic File Interchange (EFI)</b>	Distribution of NPIs to a large number of health care providers, all at once. This process will be coordinated by authorized organizations through the enumerator (formerly known as Bulk Enumeration and also referred to as Mass Enumeration).
<b>Employer Identification Number (EIN)</b>	Also known as the Tax Identification Number (TIN), or the Federal Tax Identification Number, it is a unique nine-digit number assigned by the Internal Revenue Service (IRS) to business entities operating in the United States for the purposes of identification. This number is sometimes utilized for provider identification purposes. Covered entities are required to use the EIN in HIPAA standard transactions that require EINs in certain data fields.
<b>Entity Type Code</b>	The type of healthcare provider that is being assigned an NPI. The entity type code can be either Entity Type 1 (human beings) or Entity Type 2 (organizations).
<b>Entity Type 1</b>	Will be issued to individual human beings (not organizational) including but not limited to physicians, dentists, chiropractors. The NPI is a permanent identifier and is assigned for the provider's life.
<b>Entity Type 2</b>	Will be issued to organizations, including but not limited to hospitals, residential treatment centers, laboratories, group practices. Subparts of organization healthcare providers are eligible to be assigned NPIs. This is a permanent identifier and will be assigned for the life of the organization.

<b>Enumerator</b>	An organization under contract with HHS to assign NPIs. This organization is called National Plan and Provider Enumeration System (NPPES).
<b>HIPAA</b>	Health Insurance Portability and Accountability Act of 1996
<b>Legacy/Plan Identifiers</b>	Identification numbers assigned by health plans.
<b>Legal Entity</b>	The covered entity ultimately responsible for complying with the HIPAA rules and ensuring that its subparts and/or healthcare components are in compliance.
<b>National Provider Identifier (NPI)</b>	The National Provider Identifier (NPI) is one provision of the Administrative Simplification portion of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). The NPI is a 10-position, all numeric identifier that will be assigned by the federal government to health care providers. The NPI will be used to identify physicians, hospitals and other medical professionals in all electronic standard HIPAA transactions. It is intended to improve the efficiency of the health care system and help to reduce fraud and abuse.
<b>National Plan and Provider Enumerator Services (NPPES)</b>	The administrative system for supporting a national plan and provider registry. This is a comprehensive uniform system for identifying and uniquely enumerating health care providers and plans at the national level. (Formerly National Provider Systems (NPS))
<b>Non-Health Care Services</b>	Atypical or non-traditional services that are indirectly related to healthcare but do not fall with the definition of healthcare services. These could include taxi, home and vehicle modifications or insect control. These types of services will not be able to receive an NPI.
<b>Payer</b>	Health carrier or plan
<b>Social Security Number (SSN)</b>	A number assigned by the Social Security Administration (SSA) to the individual being identified. An SSN could be used as a TIN (Tax ID Number).
<b>Small Health Plan</b>	A health plan with annual receipts of \$5 million or less.
<b>Standard HIPAA Transaction</b>	A transaction that any health plan, any healthcare clearinghouse and any healthcare provider transmits containing any health information in electronic form in the standard format such as 835, 837, etc.
<b>Subparts</b>	A component or separate physical location of an entity type 2 organization health care provider. Examples of subparts include outpatient departments, surgical centers, psychiatric units and laboratories that are tied to a hospital/facility.
<b>Tax Identification Number (TIN)</b>	The number used to identify an individual or entity for federal income tax purposes (can be used interchangeably with the EIN). A tax ID may be either the SSN or an EIN. The

	number depends on the type of business, corporation, sole proprietor, etc. A Tax ID number is sometimes used to identify a provider.
<b>Taxonomy Code</b>	An administrative code set that classifies healthcare providers by type, classification, and specialization. This code is not assigned by the payor or CMS. The provider selects the Taxonomy code.
<b>Transactions and Code Sets</b>	Rules that regulate and standardize electronic exchanges of healthcare information.
<b>UPIN</b>	Unique Physician Identification Number