NATIONAL PROVIDER IDENTIFIER (NPI) CLAIMS SUBMISSION REMINDER

As you are aware, as of May 23, 2008, as part of the implementation of the Health Insurance Portability and Accountability Act (HIPAA), the Centers for Medicare and Medicaid Services (CMS) has mandated that all covered entities use their National Provider Identifier (NPI) as the sole identifier on the claim on all electronic claims submissions. Any electronic claim submitted to Community Care after this date still containing only a legacy identifier will not be considered a clean claim and will be denied and sent back to the provider.

As of May 23, 2008 PROMISe claims for fee-for-service (FFS) Medicaid services are also required to contain the NPI, so the NPI that your organization uses for a specific service to bill FFS Medicaid is the same NPI that you should use for that service when billing Community Care.

Based on a review of our provider records, less than 3% of all Community Care providers have failed to submit a valid NPI to us as requested. However we have found that some providers with NPI’s on file have not submitted claims using these numbers and we have had no option but to deny these claims. Please be certain that your billing software is configured and tested so that your claims include your NPI.

FIRST TIME NPI USERS: It is highly recommended that all electronic claims submitters conduct test transmissions of claims in advance of transitioning their submissions. In order to arrange for a test transmission, please contact Bill Simmons, Project Manager, at (412) 454-8609 or via e-mail at simmonswj@ccbh.com.