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## INTEROFFICE MEMORANDUM

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**TO:** Trading Partners and Interested Parties

**FROM:** Pat Van Dyke, Director, Privacy, Security and EDI

**SUBJECT:** NPI Contingency Plan

**DATE:** April 20, 2007

**CC:**

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The compliance date for the use of the National Provider Identifier (NPI) within the HIPAA electronic transactions is May 23, 2007. There have been difficulties with obtaining NPI's including inconsistency of guidance on obtaining Type 1 and Type 2 NPI's, availability of the National Provider and Plan Enumeration System (NPES) for finding and loading NPI's etc. There have been concerns about the sharing of NPI's between payers, clearinghouses and health plans. Because of these concerns, the healthcare industry requested consideration to easing the NPI burden until the NPI would be more available to all concerned.

On April 2<sup>nd</sup>, CMS announced and published Guidance on Compliance with the HIPAA National Provider Identifier (NPI) Rule. It is important to realize that the compliance date itself was not changed---the compliance date is still May 23, 2007. This guidance offered that if the members of the healthcare community were showing a 'Good Faith' effort in obtaining, testing and using the NPI as described in the federal law, the enforcement of compliance including civil penalties would not occur until May 23, 2008. A requirement of the Guidance is that all persons or organizations responsible to obtain and/or use NPIs in the electronic transactions, develop a Contingency Plan. As in the past, the Contingency Plan must be available for review on request.

Attached is the compliance plan for ODS. If you have any questions about the content, please contact me directly at 503-243-4492.

## **Contingency Plan in meeting Guidance Requirements for the National Provider Identifier**

### Programming/Testing with Trading Partners:

We are receiving NPI's from some Trading Partners.

All trading partners have been contacted regarding our testing requirements.

Testing will continue with a target completion date of June 15, 2007.

For those clearinghouses that have advised us that they will not be able to participate in testing by that date, we will continue to work with them on development of a schedule that allows production files including the NPI by end of 08/07.

Testing will be coordinated across both the FACTS and FACETS systems as well as the WAF and Content Manager Systems.

### Acceptance of Claims during Contingency Period

From May 23, 2007 through May 22, 2008:

Continue accept electronic claims as follows:

Dental:

- a. Without NPIs but with legacy identifiers including TIN, Dental license number and OMAP ID if applicable
- b. With NPIs but also requesting the continued sending of the Tax ID, Dental license number and OMAP ID if applicable (Dual Use)

Medical and Hospital:

- a. Without NPIs but with legacy identifiers including TIN and OMAP ID if applicable
- b. With NPIs but also requesting the continued sending of the Tax ID and OMAP ID if applicable (Dual Use)

During this period, EDI would review the electronic claims files and outreach to the providers reminding them to include NPI's in their claims data. We will also coordinate with the clearinghouses to send the same message to the healthcare providers and health systems.

### Acceptance of Claims after Contingency Period

May 23, 2008

Interim Check points: Report to stakeholder progress in obtaining/loading NPI's  
August, 2007  
November, 2007  
February, 2008

EDI to assess by April 15, 2008 the percentage of electronic claim reduction ODS may experience if the 'dual use of NPI and legacy identifiers' is terminated and only electronic claims with NPIs are accepted. Affected department heads to determine the risk and make final recommendation.

Outreach to the Healthcare Provider Community

Require NPIs where applicable as part of the electronic setup process.

Outreach in ODS website updates and regularly scheduled newsletters.

Outreach via national organizations such as NDEDIC.

Outreach to provider groups and healthcare systems to obtain organized lists of Type I and Type II NPIs and taxonomy codes. Use these lists as quality improvement tools in cleaning up ODS provider records.