



30 East Broad Street • Columbus, Ohio 43215-3414
www.state.oh.us/odjfs

Information Regarding the National Provider Identifier (NPI)

September 1, 2006

«Greeting» «FirstName» «LastName»
«ProviderName»
«Address»
«City», «State» 44004

Dear «Greeting» «LastName»:

In accordance with federal regulations (45 CFR § 162.404), all eligible health care providers will be required to have obtained their ten digit National Provider Identifier (NPI) from the National Plan and Provider Enumeration System (NPPES) by May 23, 2007. It is very important to consider Medicaid reimbursement when making decisions about enumeration. This letter provides direction to Medicaid hospital providers for enumeration and reporting to ensure successful Medicaid billing and reimbursement using the NPI.

NPI Enumeration and Medicaid Reimbursement

Medicaid hospital providers are currently uniquely identified by a legacy Medicaid provider number which is directly tied to reimbursement rates. It is important to obtain one or more NPIs that replace the Medicaid provider number/s currently in use. For instance, if a hospital system currently uses one Medicaid provider number to bill for all of its hospitals, they should obtain one NPI to replace the Medicaid provider number. Or, if a hospital system has a unique Medicaid provider number for each hospital facility, they will need to obtain a unique NPI to replace each Medicaid provider number. Enumeration in this fashion is crucial because each Medicaid hospital provider number is tied to a specific rate based on peer grouping, neonatal level and other factors.

Some hospitals currently have two or more Medicare identifiers because they are required to use separate identifiers to bill Medicare for services provided in psychiatric or rehabilitation units. In addition, some hospitals have a separate Medicare identifier for non hospital services such as ambulance or DME or because they operate a pharmacy to fill prescriptions for take home drugs. It is understood that hospitals will obtain separate NPIs for these units and services for Medicare.

However, it is important to obtain an NPI for the general acute care hospital that corresponds to the Medicaid provider number to ensure a smooth transition to NPI including Medicaid reimbursement. The examples below illustrate how hospitals should enumerate in these circumstances.

Example 1: Hospital System A

Hospital System A is comprised of three hospital facilities with three separate Medicaid provider numbers. Hospital A3 has a rehabilitation unit, a psychiatric unit and a Part D pharmacy and uses one Medicaid provider number for all Medicaid billing, but uses four separate identifiers to bill Medicare.

Hospital System A before NPI enumeration:

- Hospital A1 (Medicaid provider # 1111111)
- Hospital A2 (Medicaid provider # 2222222)
- Hospital A3 (Medicaid provider # 3333333)
 - Rehabilitation Unit A3 (Medicaid provider # 3333333)
 - Psychiatric Unit A3 (Medicaid provider # 3333333)
 - Part D Pharmacy A3 (Medicaid provider # 3333333)

Hospital System A after NPI enumeration:

- Hospital A1 (NPI: 4444444444)
- Hospital A2 (NPI: 5555555555)
- Hospital A3 (NPI: 6666666666)
 - Rehabilitation Unit A3 (NPI: 7777777777)
 - Psychiatric Unit A3 (NPI: 8888888888)
 - *Note: Do not bill ODJFS directly using the NPI assigned to the Rehabilitation or Psychiatric units.*
 - Part D Pharmacy A3 (NPI: 9999999999)
 - *Will only be used for Medicaid purposes if they have a separate Medicaid pharmacy provider number. Otherwise, NPI 6666666666 would be used to bill pharmacy claims.*

Example 2: Hospital System B

Hospital System B is comprised of three hospitals which use the same Medicaid provider number. Hospital B3 has a rehabilitation unit, a psychiatric unit and a Part D pharmacy and uses the same Medicaid provider number for all Medicaid billing, but uses four separate identifiers to bill Medicare.

Hospital System B before NPI enumeration:

- Hospital B1 (Medicaid provider # 1111111)
- Hospital B2 (Medicaid provider # 1111111)
- Hospital B3 (Medicaid provider # 1111111)

National Provider Identifier (NPI) Information

Page 3

- Rehabilitation Unit B3 (Medicaid provider # 1111111)
- Psychiatric Unit B3 (Medicaid provider # 1111111)
- Part D Pharmacy B3 (Medicaid provider # 1111111)

Hospital System B after NPI enumeration:

Hospital B1 (NPI: 2222222222)

Hospital B2 (NPI: 2222222222)

Hospital B3 (NPI: 2222222222)

- Rehabilitation Unit B3 (NPI: 3333333333)
- Psychiatric Unit B3 (NPI: 4444444444)

**Note: Do not bill ODJFS directly using the NPI assigned to the Rehabilitation or Psychiatric units.*

- Part D Pharmacy B3 (NPI: 5555555555)

**Will only be used for Medicaid purposes if they have a separate Medicaid pharmacy provider number. Otherwise, NPI 2222222222 would be used to bill pharmacy claims.*

NPI Reporting to ODJFS

In order to maintain successful Medicaid billing and reimbursement, you must report your NPI information to the Ohio Department of Job and Family Services. Although NPI submission on EDI claims format is not required until May 23, 2007, we strongly recommend that you enumerate and notify ODJFS before **November 1, 2006** to ensure that Medicaid payments are not interrupted. You must submit NPI information to the department in the following format.

For each Medicaid provider number, provide the following information:

1. Provider Name (Include hospital system name if applicable.)
2. Hospital Medicaid Provider Number
3. Corresponding NPI
4. Other NPIs obtained and their designation (i.e. rehab or psych units, Part D pharmacy, DME, Ambulance, etc.) and corresponding Medicaid provider number
5. NPPEs e-mail receipt, HTML print out, or copy of paper letter to verify NPI assigned by the enumerator
6. Hospital NPI coordinator and contact information including phone number and e-mail address

Example

1. Central Ohio Hospital (Absolute Healthcare System)
2. 2222222
3. 3333333333
4. 4444444444 psychiatric unit (Medicaid provider # = 2222222)
5555555555 rehabilitation unit (Medicaid provider # = 2222222)
6666666666 Part D pharmacy (Medicaid provider # = 8888888)
7777777777 ambulance (Medicaid provider # = 2222222)

National Provider Identifier (NPI) Information

Page 4

5. NPPES e-mail notice of NPI number attached
6. Jane Smith, (614)555-5555 jsmith@AHS.com

Please e-mail your NPI information in the format above before November 1, 2006 to hospital_npi@odjfs.state.oh.us .

Claims Submission and NPI

The Department will continue to assign the seven-digit Ohio Medicaid provider number upon enrollment because each hospital's NPI number will be mapped to their Legacy Medicaid provider number, which will be used for claim adjudication. Since January 1, 2006, the Ohio Department of Job and Family Services has been accepting NPIs on electronic claims as long as it is accompanied by an existing legacy Medicaid Provider ID.

When submitting EDI claims with the NPI, use the qualifier XX in the primary identification qualifier location NM108 and use the NPI in the primary identification location NM109, loop 2010 AA (unless 2010AB is used). Until May 23, 2007, continue to submit your Legacy Medicaid provider number with the 1D qualifier in the secondary identification qualifier location REF01 and the Legacy Medicaid provider number in the secondary identification location REF02 in loop 2010 AA (unless 2010AB is used). After May 23, 2007 it will no longer be necessary to submit a Legacy Medicaid provider number on EDI claims.

Billing on Paper Claims or by Tape

Continue to use your Medicaid provider number when submitting claims in formats that use only the Medicaid provider number, e.g., the current UB-92 paper claim.

Resources

To learn more about the enumeration process and to obtain a National Provider Identifier, contact NPPES directly at <http://nppes.cms.hhs.gov>, or contact NPPES by phone at 1-800-465-3203 (1-800-692-2326 (TTY)).

If you have questions regarding NPI enumeration as it relates to Ohio Medicaid, you may send an e-mail to hospital_npi@odjfs.state.oh.us or call the Bureau of Health Plan Policy at (614) 466-6420.

Thank you for your attention to this matter. With your cooperation, we anticipate a successful transition to NPI.

Sincerely,

Robyn Colby, Bureau Chief
Bureau of Health Plan Policy