

Information from:

Marcia Pryce, MPH, CHES

Centers for Medicare & Medicaid Services (CMS)

Division of Financial Management & Fee-For-Services Operations (DFM&FFSO)

61 Forsyth Street, SW, Suite 4T20, Atlanta, GA 30309

404.562.3808 (Voice); 404.562.7386 (Fax)

marcia.pryce@cms.hhs.gov

A National Provider Identifier (NPI) Update

New Products from the Medicare Learning Network

**A CMS Review of Payments Made for Single Source Drugs and Biologics
Information on Physician Performance to Be Given to Medicare Beneficiaries**

NPI: Get It. Share It. Use It.

There are less than 90 days left between today and the NPI compliance date of May 23, 2007. It is estimated that it may take at least this much time to implement the NPI into your business practices. Failure to prepare could result in a disruption in cash flow. Will you be ready to use your NPI? Time is running out!

Updating National Plan and Provider Enumeration System (NPPES) Information

All health care providers, including Medicare providers, should include their legacy identifiers, as well as associated provider identifier type(s), on their NPI applications. If a provider has already completed an application and did not submit a legacy identifier, this provider should go back and update its information in NPPES. A provider can easily do so by using the web (<https://nppes.cms.hhs.gov>). While doing so, providers should also validate other data in NPPES, such as address, contact person information, etc. and update anything that has changed.

Sharing NPIs

Once providers have received their NPIs, they should share their NPIs with other providers with whom they do business, and with health plans that request their NPIs. In fact, as outlined in current regulation, providers must share their NPI with any entity that may need it for billing purposes -- including those who need it for designation of ordering or referring physician. Providers should also consider letting health plans, or institutions for whom they work, share their NPIs for them.

New Frequently Asked Questions (FAQs) Posted

CMS has posted new NPI FAQs on its website.

Questions include:

- For Medicare provider enrollment purposes, will group practices need to submit new CMS-855R's for every member of the group practice in order to let Medicare know their NPIs?

- Will health plans link the National Provider Identifiers (NPIs) of group practices to the NPIs of the health care providers who are members of the group practices?
- Who needs an NPI - who is not eligible to apply for an NPI - what if I have a Drug Enforcement Administration (DEA) number - what if I only bill on paper - what if I do not submit claims to Medicare?
- Can my office Employer Identification Number (EIN) be used instead of a National Provider Identifier (NPI)?
- When do I need to use my National Provider Identifier (NPI)?
- Is a corporation that owns pharmacies that have National Provider Identifiers (NPIs) required to have an NPI in order to receive payments on behalf of the owned pharmacies?

To view these FAQs, please go to the CMS dedicated NPI Web page at www.cms.hhs.gov/NationalProviderStand and click on Educational Resources. Scroll down to the section that says "Related Links Inside CMS" and click on Frequently Asked Questions. To find the latest FAQs, click on the arrows next to "Date Updated".

Upcoming WEDI Events

WEDI has several NPI events scheduled in the upcoming month. Visit <http://www.wedi.org/npioi/index.shtml> to learn more about these events. Please note that there is a charge to participate in WEDI events.

Important Information for Medicare Providers

Sharing NPIs with Medicare

In addition to updating critical data and legacy identifiers in the NPPES, Medicare providers should include both their NPIs and their Medicare legacy numbers in their Medicare claims. This will help Medicare build its NPI crosswalk by enabling Medicare to link providers' NPIs to their Medicare legacy identifiers. Also, when Medicare providers make changes to their Medicare enrollment information, they are now required to furnish their NPIs when making those changes. Providers applying for Medicare enrollment must furnish their NPIs on their enrollment applications. These actions inform Medicare of providers' NPIs.

There are no additional actions that Medicare providers need to take to inform Medicare of their NPIs.

Still Confused?

Not sure what an NPI is and how you can get it, share it and use it? As always, more information and education on the NPI can be found at the CMS NPI page www.cms.hhs.gov/NationalProviderStand on the CMS website. Providers can apply for an NPI online at <https://nppes.cms.hhs.gov> or can call the NPI enumerator to request a paper application at 1-800-465-3203.

Getting an NPI is free - not having one can be costly.

New Products from the Medicare Learning Network

The *Acute Inpatient Prospective Payment System Fact Sheet*, which provides general information about the Acute Inpatient Prospective Payment System (IPPS) and how IPPS rates are set, is now available in print format from the **Medicare Learning Network**. To place your order, visit www.cms.hhs.gov/mlngeninfo, scroll down to "Related Links Inside CMS," and select "MLN Product Ordering Page." Remember that all Medicare Learning Network products are free of charge!

A CMS Review of Payments Made for Single Source Drugs and Biologics

After carefully examining Section 1847A of the Social Security Act, as established in the MMA, the Centers for Medicare & Medicaid Services (CMS) is conducting a review to ensure that separate payment is made for single source drugs and biologics as required by this section of the Act. In order to facilitate separate payment, it may be necessary to create unique HCPCS level II codes for certain products. **As part of this effort, we will also review how we have operationalized the terms 'single source drug,' 'multiple source drug,' and 'biological product' in the context of payment under section 1847A to identify the potential need to make any changes to our assignment of National Drug Codes to billing codes for payment purposes.** In the coming months, we will post additional information along with a **preliminary list of drugs and biologics potentially affected.**

So that we can implement any necessary changes during 2007, CMS will use its internal process for modifying the code set. While internally generated code requests are not part of the HCPCS public meeting process, **CMS will consider any comments on potentially affected drugs and biologics** and input to conventions for code descriptors and units of measure. Comments can be sent to HCPCS@cms.hhs.gov.

Information on Physician Performance to Be Given to Medicare Beneficiaries MEDICARE TO PROVIDE BENEFICIARIES WITH INFORMATION ON PHYSICIAN PERFORMANCE AS PART OF VALUE-DRIVEN HEALTH CARE INITIATIVE

The Centers for Medicare & Medicaid Services (CMS) announced that the Delmarva Foundation for Medical Care (Delmarva), one of its quality improvement organizations, has entered into subcontracts with four regional collaboratives, as part of the Better Quality Information to Improve Care for Medicare Beneficiaries (BQI) Project. These regional collaboratives will combine Medicare data with data from other insurers to produce information on the performance of health care providers for the benefit of Medicare beneficiaries.

To view the entire press release, please click here:

http://www.cms.hhs.gov/apps/media/press_releases.asp