

National Provider Identifier (NPI) Frequently Asked Questions

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I. GETTING, SHARING AND USING NPI - GENERAL QUESTIONS

1.	<p>Q: Do I need to share my NPI number(s) with BCBSNM? When should I send my NPI to BCBSNM?</p> <p>A: It is extremely important to send your NPI information to BCBSNM as soon as you receive your confirmation notice (letter or e-mail) from the National Plan and Provider Enumeration System (NPPES) Enumerator so that we can update our systems with your new information.</p> <p>The fastest way to share your NPI with us is via e-mail on our Provider Web site at www.bcbsnm.com (click on the NPI Logo, and then click on <i>Share it!</i>). We will attempt to verify your NPI using the NPPES registry; however, if your NPI is not found on the NPI Registry, or if any data doesn't match, then we reserve the right to request submission of your confirmation notice from the Enumerator.</p> <p><u>NOTE:</u> The best way to share your NPI with BCBSNM is to send us a copy of your NPPES confirmation notice (letter or e-mail) from the Enumerator. Please print or type your Tax Identification Number (TIN) and a contact name with phone number and e-mail address on your confirmation letter or within the body of your forwarded e-mail. Fax your NPI confirmation letter to BCBSNM at: 1-866-290-7718, OR forward your e-mail from the Enumerator to: nmnpibcbsnm.com. (<i>NOTE: Please type the provider's name in the subject field of the email.</i>)</p>
2.	<p>Q: Why can't BCBSNM just get my NPI via the NPI Registry (query-only database) or the downloadable data file on the NPPES Web site?</p> <p>A: BCBSNM may eventually use the NPPES downloadable data file or NPI Registry to capture or validate NPI information for contracted and non-contracted providers; <i>however, it is important to note that this public data file cannot yet be considered to be a solution or substitute for sharing your NPI with BCBSNM.</i></p> <p>Remember: if you are a covered health care provider, you are required by the NPI Final Rule to disclose your NPI to any entity who requests it for use in HIPAA standard transactions. According to the regulation, the publication of the NPPES Data Dissemination Notice does not release covered health care providers from this requirement.</p>

3.	<p>Q: If a physician practices under more than one Tax Identification Number (TIN) with two or more separate groups, how can the provider ensure that the individual NPI assigned by the Enumerator is attached to each of those TINs?</p>
	<p>A: Physicians should share their information with BCBSNM via the e-mail submission form on our Web site as soon as they receive their Individual (Type 1) NPI number from the Enumerator. Including all existing BCBSNM provider numbers when you share your NPI with us will ensure that all of your BCBSNM provider record(s) are updated to reflect your NPI – your new, single identifier.</p> <p>Reminder: When submitting claims, you must continue to include your TIN for cross referencing and tax reporting purposes. Your NPI does <i>not</i> replace your TIN.</p>
4.	<p>Q. I'm a referring physician, do I need to share my NPI with other physicians?</p>
	<p>A. Yes. As outlined in the 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.</p>
5.	<p>Q: How do I obtain a replacement copy of the NPI confirmation letter or email from the NPPEs Enumerator?</p>
	<p>A: To request a replacement NPI confirmation letter or email, contact the Enumerator Office at 1-800-465-3203. You may also request a replacement online via the following link: https://nppes.cms.hhs.gov/NPPES/LoginPage.do?userType=PROVIDER. Additional questions regarding the replacement notification can be emailed to the Enumerator Office at customerservice@npienumerator.com.</p>
6.	<p>Q: Will BCBSNM notify me upon receipt of my NPI?</p>
	<p>A: Through May 23, 2008, BCBSNM mailed “Thank You” postcards to providers to confirm receipt, validation and loading of their information into our system.</p> <p><u>“Thank You” postcards confirming receipt of NPIs are no longer being sent to providers.</u></p>
7.	<p>Q: How do I submit claims as of May 23, 2008?</p>
	<p>A: Beginning May 23, 2008, the use of only the NPI as your single provider identification number is required on all claims in all applicable fields.</p> <p>NOTE: Your NPI does <i>not</i> replace your Federal Taxpayer Identification Number (EIN, SSN, or ITIN). The TIN will continue to be required on claims for tax reporting purposes.</p>
8.	<p>Q: Will the NPI be required on other forms such as applications for new professional and facility providers?</p>
	<p>A: Yes. If a new provider application is received without an NPI, the applicant will be notified that the application will not be processed until the NPI is received, along with the required documentation from the Enumerator for verification purposes. Other standard provider forms will also require the NPI.</p>
9.	<p>Q: Is my NPI be required to gain access to the Interactive Voice Response (IVR) system when I call BCBSNM for claims status, benefits and eligibility information?</p>
	<p>A: Yes. As of May 23, 2008, you will only be able to gain access to the IVR system by using your NPI, as the system will no longer recognize your BCBSNM provider number or TIN.</p>

II. TYPE 1 (INDIVIDUAL) VS TYPE 2 (ORGANIZATIONAL)

10.	Q: Is an individual provider eligible for only one NPI number, regardless of the number of locations and specialties the individual provider may have?
	A: Yes. As an individual health care provider, you will receive one <i>Individual</i> (Type 1) NPI. The NPI number is not specific to a location or specialty, so regardless of where you perform the service or what type of service is performed, as an individual, you will always use your Individual (Type 1) NPI. However, please be aware that, if your organization is a group practice, clinic group, multi-specialty clinic, or similar organization, and it conducts transactions electronically (whether directly or through a billing service or clearinghouse), your organization will also need an <i>Organizational</i> (Type 2) NPI number or numbers. While an individual provider may only have <i>one</i> Individual (Type 1) NPI, organizations <i>may</i> obtain multiple Organizational (Type 2) NPIs, or subparts, to reflect different locations or levels of care.
11.	Q. Do providers need Type 1 (Individual) and Type 2 (Organizational) NPIs?
	A. All eligible individual providers (such as physicians, nurses, chiropractors, and physical therapists) are required to obtain a Type 1 (Individual) NPI. Providers who are in a solo practice and who bill currently with their Social Security Number or sole proprietorship Tax ID number may continue to bill as solo practitioners using only their Type 1 NPI. Per the regulation, individuals who have incorporated their practice must also obtain an organizational Type 2 NPI for their corporation. When billing, the individual Type 1 NPI will be used to identify the provider who performed the service, while the organizational Type 2 NPI will identify the group or entity to be paid. Individual health care providers who are part of an incorporated group practice will have an individual Type 1 NPI; the practice or clinic must obtain an organizational Type 2 NPI for the group for claims submission purposes. Large corporations may have many groups working under a shared Tax ID number as DBAs. Since each DBA has its own BCBSNM billing number, each DBA may consider obtaining and using its own Type 2 NPI to maintain the one-to-one relationship.
12.	Q. Can a group of individual providers who are sharing an office space obtain one Type 1 NPI for all the individual practitioners to share?
	A. No. An Individual Type 1 NPI cannot be shared. Each individual health care provider that may render health care services must obtain their own Individual Type 1 NPI. The Type 1 NPI of the <i>rendering</i> provider who performs the service is reported on claims, in addition to the appropriate billing NPI.
13.	Q. What do I do if I am an individual provider who has a Type 1 NPI but also obtained a Type 2 NPI in error?
	A. Individual providers who obtained an NPI in error must deactivate the incorrect NPI. For information on how to deactivate an existing NPI, contact the NPI Enumerator, at 1-800-465-3203.

III. ELECTRONIC CLAIM SUBMISSION

14.	Q: Do I need to wait for a “Congratulations” postcard prior to submitting NPI-only electronic claims to BCBSNM?
	A: Through May 23, 2008, BCBSNM providers were notified via a “Congratulations” postcard upon approval to begin submitting NPI-only transactions. As of May 23, 2008, “Congratulations” postcards are no longer being sent, because all providers are now required to submit NPI-only claims without waiting for notification.
15.	Q: If my professional group practice has an Organizational (Type 2) NPI, in addition to my Individual (Type 1) NPI, which NPI number do I submit on claims?
	A: To correctly submit 837 Professional Health Care Claims to BCBSNM, the sender’s billing and pay-to provider information must be included in the correct loops. The billing provider’s information must be contained in loop 2010AA, the pay-to provider information must be contained in loop 2010AB, the referring provider information must be contained in loop 2310A, and the rendering provider information must be contained in loop 2310B. To correctly submit 837 Institutional Health Care Claims to BCBSNM, the billing, pay-to provider, attending physician name, operating physician name, service facility name, and other provider name must be included in the correct loops. The billing provider’s information must be contained in loop 2010AA, the pay-to provider information must be contained in loop 2010AB, the attending physician name must be contained in loop 2310A, the operating physician name must be contained in loop 2310B, the other provider name must be contained in loop 2310C, and the service facility name must be contained in loop 2310E. <u>IMPORTANT NPI BILLING INFORMATION:</u> Do not put the rendering provider NPI in the billing loop of the claim. Rendering information must go in the rendering loop and billing information must go in the billing loop. Claims will be rejected if billed incorrectly.
16.	Q: What should I do if my NPI-only claims are denied?
	A: If any of your NPI-only electronic claims are rejected, the submitter who transmits claims on your behalf will receive automatic rejection messages, or edits, to explain the reason for denial of the claim. If there are any questions about these electronic edits, your electronic trading partner should contact our E-Commerce Center at 1-800-746-4614. NOTE: As of May 23, 2008, the use of only the NPI is required on all claims—claims that include the BCBSNM provider number will be rejected.
17.	Q: Where can I get more information on electronic claim submission?
	A: Visit the Electronic Commerce section of our Provider Web site at www.bcbsnm.com for “Alerts,” reference guides, and related materials.

IV. PAPER CLAIM SUBMISSION

18.	Q: Are paper claim submitters required by BCBSNM to use NPI(s)? A: Yes. BCBSNM is requiring all eligible providers to use NPI number(s) on electronic <i>and</i> paper claim transactions.
19.	Q: Which version of the CMS-1500 claim form is BCBSNM currently accepting? A: Providers must submit Professional claims to BCBSNM using <i>only</i> the revised version of the CMS-1500 (version 08/05). BCBSNM is no longer accepting the old version of the CMS-1500 (version 12/90). <i>Claims submitted on the incorrect form will be returned.</i> For detailed instructions on how to complete the CMS-1500 claim form, see Section VI. <u>NOTE:</u> As of May 23, 2008, the use of only the NPI is required on all claims—claims that include the BCBSNM provider number will be rejected.
20.	Q: Is BCBSNM still accepting the UB-92 claim form? A: No. Providers must submit Institutional claims to BCBSNM using <i>only</i> the new UB-04 claims form. <i>Claims submitted on the incorrect form will be returned.</i> For additional information on the UB-04 claim form, see Section VII. <u>NOTE:</u> As of May 23, 2008, the use of only the NPI is required on all claims—claims that include the BCBSNM provider number will be rejected.
21.	Q: Will my claims be rejected if I don't use an NPI number? A: Yes. As of May 23, 2008, the use of only the NPI is required on all claims—claims that are missing the NPI and claims including the BCBSNM provider number will be rejected.
22.	Q: Is my Tax Identification Number (TIN) still required? A: Yes. Your NPI does <i>not</i> replace your TIN. You must continue to include your TIN on claims for cross referencing and tax reporting purposes.
23.	Q: What will happen if I send a claim using only my NPI without first sharing my NPI with BCBSNM? A: Submitting an NPI-only claim without previously sharing that NPI number with BCBSNM may result in a claim delay or denial.
24.	Q: What should I do if my NPI-only claims are denied? A: Claims that are not accepted will be returned with a cover letter explaining the reason for the return, along with instruction on how to resubmit the claim properly.

V. CMS-1500 CLAIM FORM

25.	<p>Q: What if I do not have a supply of the current version of the CMS-1500?</p> <p>A: Providers filing with BCBSNM should now be using the current version of the CMS-1500 (version 08/05). If you do not have the CMS-1500 (08/05) form, contact your print vendor to request a correct batch of paper claim forms. The form also may be ordered online at http://bookstore.gpo.gov, or by calling (202) 512-1800.</p> <p>NOTE: BCBSNM is no longer accepting claims submitted on the old version of the CMS-1500 (version 12/90). <i>Claims submitted on the incorrect form will be returned.</i></p>
26.	<p>Q: Can providers still use the "bad" (with printing error*) CMS-1500 (version 08/05) forms?</p> <p>A: No. Outdated or incorrectly printed CMS-1500 forms will be returned to the provider with a cover letter.</p> <p>*Please note that there may still be some incorrectly formatted versions of the revised form being sold by print vendors. The correct version of the form contains "Approved OMB-0938-0999 FORM CMS 1500 (8-05)" on the bottom of the form, signifying the August 2005 version. Properly printed forms will have approximately a 1/4" gap between the tip of the red arrow above the vertically stacked word "CARRIER" and the top edge of the paper. <i>If the tip of the red arrow is TOUCHING the top edge of the paper, then the form is NOT printed to specifications.</i></p>
27.	<p>Q. Do I have to submit my paper claims using the red, original CMS-1500 claim form, or can I use a black-and-white copy instead?</p> <p>A. You must use only the original, standard red-ink claim form. This form is printed with a special red ink to ensure proper scanning. If the form is not scanned properly, errors or processing delays could occur.</p>
28.	<p>Q: If my professional group practice has an Organizational (Type 2) NPI, in addition to my Individual (Type 1) NPI, which NPI number do I submit on claims?</p> <p>A. The individual (Type 1) NPI(s) should be submitted as the rendering provider in field 24j on the CMS-1500 (version 08/05). The organizational (Type 2) NPI should be submitted as the billing provider in field 33a on the CMS-1500 (version 08/05) or electronic equivalent.</p> <p>NOTE: An <i>individual</i> health care provider who is <i>not</i> part of an incorporated practice may use <i>only</i> his or her individual (Type 1) NPI for filing claims. In this situation, the individual (Type 1) NPI should be submitted on the CMS-1500 (rev 08/05) as both the rendering and billing provider in fields 24j and 33a.</p>
29.	<p>Q. Where do I include my NPI on the CMS-1500?</p> <p>A. The following fields are used for entry of the NPI:</p> <p>Field 17b: Enter the NPI of the referring, ordering, or supervising provider.</p> <p>Field 24j (unshaded): Enter the NPI of the rendering provider.</p> <p>Field 32a: Enter the NPI number of the service facility location.</p> <p>Field 33a: Enter the NPI number of the billing provider.</p> <p>NOTE: As of May 23, 2008, the use of only the NPI is required on all claims—claims that include the BCBSNM provider number will be rejected.</p>

30.	Q: Is my Tax Identification Number (TIN) still required?
	A: Yes. Your NPI does <i>not</i> replace your TIN. You must continue to include your TIN on claims for cross referencing and tax reporting purposes. Your Federal Tax I.D. number (EIN, SSN, or ITIN) is required in field 25 on the CMS-1500.

31.	Q. Where can I include my taxonomy code on the CMS-1500?
	A. You may include your taxonomy code on claims as long as it is accompanied by the "ZZ" qualifier. BCBSNM suggests using fields 17a, 24i, 32b, and 33b for the taxonomy code that corresponds to the NPI entered in each related field. (The taxonomy code must be used for Medicaid claims.)

32.	Q: Where can I find more information on how to complete the CMS-1500 claim form?
	A: For detailed instructions on how to complete the CMS-1500 claim form, please visit the Claim Filing Section of our Provider Web site at www.bcbsnm.com . Information can also be found on the National Uniform Claim Committee (NUCC) Web site at www.nucc.org .

VI. UB-04 CLAIM FORM

33.	Q: What if I do not have a supply of the new UB-04 claim form?
	A: Institutional providers must submit claims to BCBSNM using <i>only</i> the new UB-04 claim form. For vendor information, visit the National Uniform Billing Committee (NUBC) Web site at www.nubc.org (click on <i>Other Resources</i> , then select <i>Purchase Medical Claim Forms</i>).
	NOTE: BCBSNM is no longer accepting claims submitted on the UB-92 claim form. Claims submitted on the incorrect form will be returned.

34.	Q. Do I have to submit my paper claims using the red, original UB-04 claim form, or can I use a black-and-white copy instead?
	A. You must use only the original, standard red-ink claim form. This form is printed with a special red ink to ensure proper scanning. If the form is not scanned properly, errors or processing delays could occur.

35.	Q. Where do I include my NPI(s) on the UB-04 paper claim form?
	A: The following fields are used for entry of the NPI:
	Locator 56 is for the facility's NPI.
	Locator 57 is reserved for the taxonomy code (used for Medicaid claims).
	Locator 76 is for the attending physician's NPI. [The corresponding taxonomy code (used for Medicaid claims) goes in the field to the right of the NPI].
	Locator 77 is for the operating physician's NPI. [The corresponding taxonomy code (used for Medicaid claims) goes in the field to the right of the NPI].
	Locators 78 and 79 are for NPIs of other provider types. [The corresponding taxonomy code (used for Medicaid claims) goes in the field to the right of the NPI].
	NOTE: As of May 23, 2008, the use of only the NPI is required on all claims—claims that include the BCBSNM provider number will be rejected.

36.	Q: Is the Federal Tax ID number still required?
	A: Yes. Your NPI does <i>not</i> replace your TIN. You must continue to include your TIN on claims for cross referencing and tax reporting purposes. Your Federal Tax ID number is required in Locator #5 on the UB-04 claim form.

37.	Q: Where can I find more information on how to complete the UB-04 claim form?
	A: There is a printable UB-04 User Guide in the Claim Filing Section of our Provider Web site at www.bcbsnm.com . For complete, detailed information, visit the National Uniform Billing Committee (NUBC) Web site at www.nubc.org .

VII. BASIC INFORMATION ABOUT NPI

38.	Q: What is a National Provider Identifier (NPI)?
	A: The NPI is a numeric 10-digit identifier, consisting of nine numbers plus an ISO standard check-digit in the 10th position. It is accommodated in all standard transactions, and contains no embedded information about the health care provider that it identifies.

39.	Q: Who is eligible to receive an NPI?
	A: Entities who meet the definition of "health care provider," as defined at 45 CFR §160.103, are eligible to receive National Provider Identifiers (NPIs). Health care providers include hospitals, nursing homes, durable medical equipment suppliers, clinical laboratories, pharmacies and many other "institutional" type providers; physicians, dentists, pharmacists, nurses and many other health care practitioners and professionals; group practices, health maintenance organizations, and others. However, it is anticipated that there may be some providers that do not meet this regulation definition and, therefore, will not be eligible to receive an NPI.

40.	Q: Is a health care provider required to obtain an NPI?
	A: Under the National Provider Identifier regulation (that was published in the Federal Register on January 23, 2004), a health care provider who is a covered entity, as defined at 45 CFR §160.103, is required to obtain a National Provider Identifier (NPI).

41.	Q: Who is a covered entity?
	<p>A: The Administrative Simplification standards adopted by Health and Human Services (HHS) under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) apply to any entity that is:</p> <ul style="list-style-type: none"> • a health care provider that conducts certain transactions in electronic form* (called here a "covered health care provider"). • a health care clearinghouse. • a health plan. <p>An entity that is one or more of these types of entities is referred to as a "covered entity" in the Administrative Simplification regulations.</p>

42.	Q: Can a non-covered entity obtain an NPI?
	A: Health care providers who are not considered covered entities (because they do not engage in transactions in electronic form) are encouraged to apply for an NPI to facilitate claims processing. However, if the provider does not meet the regulation definition of “health care provider,” he/she will not be able to obtain an NPI.
43.	Q: How do I obtain an NPI?
	A: There are only three ways that a health provider can apply for an NPI: <ul style="list-style-type: none"> • Apply through a web-based application process. The web address is https://nppes.cms.hhs.gov. • Prepare and send a paper application form to the Enumerator (Fox Systems). A health care provider may call the Enumerator and request a paper application form. The Enumerator’s phone number is 1-800-465-3203 or TTY 1-800-692-2326. • With the permission of the health care provider, an organization may submit a health care provider’s application in an electronic file. Complete details regarding bulk enumeration are available on the CMS Web site.
44.	Q: What is an EFIO?
	A: An Electronic File Interchange Organization (EFIO) is an organization that has been duly authorized to collect and electronically submit a health care provider’s NPI application to the National Plan and Provider Enumeration System (NPPES) in a bulk file.
45.	Q: Where can I find more information on NPI?
	A: More information can be found at the CMS NPI resource online: http://www.cms.hhs.gov/NationalProvIdentStand/ .

VIII. BCBSNM TRANSITION PLAN HISTORY AND NOTES

46.	Q: Was the May 23, 2007, compliance date extended?
	A: No. You may be aware that the Centers for Medicare and Medicaid Services (CMS) published a contingency plan for the National Provider Identifier (NPI) regulation. It is important to note, however, that this contingency plan was not an extension for coming into compliance. The CMS contingency plan provided that health care plans, providers and clearinghouses <i>could</i> have an additional 12 months to implement the NPI regulation provided they demonstrated a “good faith effort” both prior to and after May 23, 2007. The guidance offered relief primarily for compliant health care providers and health plans as they worked through transaction testing and legacy-identifier-to-NPI “crosswalk” issues. <i>BCBSNM was substantially compliant as of the May 23, 2007 effective date. However, after assessing the response and preparedness of our participating provider networks, we extended our dual-identifier acceptance phase to allow providers to further test and prepare for an NPI-only environment.</i>

47.	<p>Q. What timeline did BCBSNM develop for the transition to NPI?</p> <p>A. Our NPI Transition Plan involved three phases:</p> <ul style="list-style-type: none"> • Phase 1: NPI Adoption Providers were required to submit electronic and paper transactions using dual identifiers (BCBSNM provider number <i>and</i> NPI); or BCBSNM provider number only; or NPI only.* • Phase 2: NPI Required (<i>As of January 7, 2008</i>) Providers were required to include NPI on electronic and paper transactions (claims may be submitted with BCBSNM provider number <i>and</i> NPI; or NPI only*). • Phase 3: NPI Only (<i>As of May 23, 2008</i>) BCBSNM provider numbers are no longer being accepted. Electronic and paper transactions must now include NPI only.*
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48.	<p>Q. What were providers required to do during all phases of the transition?</p> <p>A. The transition to NPI involved four stages for our providers:</p> <ol style="list-style-type: none"> 1. Get it! Applying for the NPI(s). 2. Share it! Sharing the NPI(s) with electronic trading partners (billing services, clearinghouses, and software vendors) and all health plans and other payers. 3. Test it! Prior to May 23, 2008, providers were encouraged to begin submitting at least a portion of claims using only their NPI, if approved for NPI-only submission. If not approved or unable to submit NPI-only claims, providers could continue to submit claims using dual identifiers (BCBSNM provider number <i>and</i> NPI) through May 23, 2008. 4. Use it! Prior to the May 23, 2008 NPI-only deadline, approved providers were notified by BCBSNM to begin submitting NPI-only claims.
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49.	<p>Q: What did BCBSNM do to comply with adopting the use of NPI as mandated under the HIPAA regulation?</p> <p>A: Since 2005, Health Care Service Corporation (HCSC) has been working to educate and prepare our provider community for compliance with the NPI standard by providing support and ongoing communication via various channels, including the NPI page of our Provider Web site, our provider newsletters and <i>NPI Times</i> bulletin, and provider workshop presentations. We used an enterprise-wide approach to coordinate business and system impacts of NPI across all four of our health plans—BCBSIL, BCBSNM, BCBSOK, and BCBSTX. We continue to monitor the progress of our provider community to avoid any negative impact on provider revenue and service. Our goal was to maintain HIPAA compliance while executing a seamless transition for our providers to an NPI-only environment.</p> <p>Continue to visit our Provider Web site at www.bcbsnm.com for ongoing updates. If you have not yet obtained your NPI(s), please apply immediately, and share your NPI with us. Further information about the NPI application process is available on the CMS Web site at http://www.cms.hhs.gov.</p>
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