National Provider Identifier: Effective Communication Strategies

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Agenda

- Session Introduction
- Communication Challenges
- Provider Communications
- Health Plan Communications
- Audience Questions

NPI Communication: Industry

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Data Requirements

- Crosswalk solutions
  - NPI + other data = legacy ID
- Taxonomy
- Collection/Validation changes
- Transactional differences
- Availability in PMS
- Companion Guide changes

Enumeration Schema

- Legacy enumeration differences
  - Payer to payer
  - Payer to clearinghouse
  - Payer to provider
- Standard enumeration needs/plans
  - Payer information on current schema
  - Provider information on enumeration plans
- Timing of application

NPI Distribution

- Payer collection/validation methods
  - Re-enrollment
  - Credentialing
  - Contracting
- Proof of assignment
- NPPES interface

Payment Consistency and Continuity

- Revenue cycle management
- Payment rate monitoring
- Error resolution plan
- Timing of ID return on 835 transaction
- Error code utilization through transition

Implementation Strategy

- Dual use
- Trading partner flexibility
- Vendor readiness
- Testing
  - Schedule
  - Priorities
- Paper form implications
- Transition plan timelines

Paper Forms

- Revised 1500 (NUCC)
    - 10/01/06: Payers able to accept
    - 02/01/07: New version only
- UB04 (NUBC)
    - 03/01/07: Payers able to accept
    - 05/23/07: New version only
- Dental
    - Standard ADA form
    - No dual use strategy
- Pharmacy
    - Standard NCPDP Universal Claim Form (UCF)
    - No dual use strategy (electronic or paper)

Medicare Implementation Schedule

- January 3, 2006 -October 1, 2006
  - Providers may send NPI (optional) with Medicare number (Required)
  - CMS will return submitted identifiers on
    - Outbound claims
    - Claim status response
    - Eligibility benefit response
- October 2, 2006 - May 22, 2007
  - Providers may send NPI and/or Medicare number
  - No Medicare number may result in non-payment
  - CMS will return submitted identifiers on electronic remittance advice
- May 23, 2007 – Forward
  - Providers must send NPI only
  - Small health plans have an additional year to comply

NPI Communication: Provider

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Communication Plan

- Internal education
- Identify affected trading partners and business associates
- Review contracts
- Validate internal provider data

Communication Plan

- Determine testing strategy with each partner
- Determine transition strategies
  - Compliance date vs. implementation dates
  - Dual use
  - Atypical providers without NPIs
  - Referrals
  - Prescibers

Communication Plan

- Other considerations:
  - Multiple practice locations
  - Group practice relationships
  - Hospital affiliations
  - Health plan affiliations/participation
  - Organizational relationships
  - Sub-part relationships

Communication Plan for Organizational Providers

- Education-Administration/Leadership
  - Revenue Cycle Departments
  - Managed Care
  - Medical Staff Credentialing
  - Provider Enrollment
  - Medical Records Department
  - Practice Management
  - Billing/financial representatives

Communication Plan for Individual Providers

- Education
  - Front Desk
  - Scheduling/Registration
  - Billing/Appeals
  - Support staff

Communicate Newly Develop Policies

- How and when to use the NPI
- How and when NPIs are secured
- How the NPI is used for claims
- What to do if the NPI is unknown
- How the NPI is used for referrals
- How the NPI is used on prescriptions

Association/Society Communication

- Newsletters
- Journals
- Publications
- Educational workshops/Annual Session
- Road shows
- DVDs/Videos

NPI Communication: Health Plans

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Customer Communication Challenges

- Providers
  - Facility vs. Professional
  - NPI readiness state
  - Business focus not technical
  - Volume vs. need for direct interaction
  - Electronic connection not always direct

Customer Communication Challenges

- ## Trading Partners
  (e.g. clearinghouse, software vendor, billing service)

  - Facility vs. Professional
  - NPI readiness state
  - Technical focus not business
  - Intermediary to provider's system

Internal Communication Challenges

- Information Systems
  - Downstream impacts
- Provider Relations and Contracting
- Claims Processing
- Business Partners
- Etc, etc.

Health Plan Considerations

- Database and system requirements
- Current legacy vs. NPI enumeration schema (cross-walking)
- NPI collection process
- Communication plan
- Paper claim approach

Health Plan Considerations

- Testing – internal
  - Release schedules
- Testing – external
  - Trading partner readiness
- Transition
  - Dual – yes/no?
  - Dual - some/all transactions?

What Happens when Communications Fail?

- Transactions may reject up front
  - Payer not ready to accept NPI
  - Provider not ready to accept returned NPI
  - NPI and/or legacy IDs in unexpected location (270/271)
  - Legacy IDs still needed but not sent

What Happens when Communications Fail?

- NPI to legacy cross-walk may match differently than expected
  - Overpayment
  - Underpayment
  - Duplicate payment
- Potential fraud and abuse

What Happens when Communications Fail?

- Project plan impacts
  - Change in project direction
  - Misunderstood project direction not caught
  - Remove coding
  - New coding
  - Downstream impacts of above changes

What Happens when Communications Fail?

- Testing time frames shorten
  - Reduces comfort levels that after NPI mirrors pre-NPI 100%
  - Reduces adjustment time when necessary
  - Resource impacts to Customer Service ratios
  - Re-education may be needed due to time lag
  - High volume of changes in short time frame instead of low volume in extended time frame

Audience Questions

Thank you!!