National Provider Identifier

Hospital Implementation Planning

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Hospital Implementation Steps

A. Project Administration: Project Plan, Team, Continuity

B. Fact Finding

C. Implement the Four Requirements

    1. Get Hospital's own NPIs for Subparts and Subsidiaries; impact on contracts

    2. Get NPIs for Referring and Rendering Physicians, Labs, and others

    3. Remediate Internal Processes, Systems and Data

    4. Manage External Dependencies: Business Associates and Vendors

D. Other Tasks

A. Project Administration

1. **Organization of NPI Implementation Project**. Formation of the Hospital's Steering Committee, Project Leader, and Project Support Team (which may include Steering Committee members).

2. **Continuity with Progress To Date**. Document progress toward NPI Implementation to date and ensure incorporation of this work in the project plan.

3. **Project Plan**. Develop initial project plan with consultant and hospital personnel hours and elapsed time.

4. **Documentation**. Devise a documentation scheme for the project.

5. Initial Inventory of Impacted Areas.

5. *Document all organizational units, processes or workflows, transactions, databases, systems, vendors, business associates, health plans, types of contracts, and other elements NPI may affect.*

6. *Indicate the apparent impact of NPI and criticality.*

7. *Indicate person/s and documentation for information sources.*

8. *Determine the need for travel to other sites.*

Much of this information may already be available from HIPAA Privacy, Security, and Transactions remediation projects.

B. Fact Finding

1. **Rule**. Requirements of NPI Rule applied to the hospital.

2. **State Law**. Requirements of State Laws and Regulations pertaining to NPI and the hospital.

3. **Understanding the Organization**. Determine the impact of NPI on each organizational unit of the hospital.

4. **Transaction Types**. Document all transactions presently conducted by an organizational provider for itself and on behalf of other providers. Types of claims may include: **Institutional, Professional, Dental, Paper, DME, Home Health, HMO, COB.**

5. **Types of Affiliated Providers**. Document the types of other providers included on the hospital's claims and other transactions, including employees, providers with hospital privileges, laboratories, and atypical service providers.

6. **Remittance Advices and Payments**. Document current and planned processing and accounting for remittance advices and payments. Determine need for identifying information and transition from legacy to NPI.

7. **Coordination of Benefits**. Document current and planned processing of coordination of benefits claims, including cross-overs, multiple claim submission by an organizational provider, and other processes. Determine impact of NPI.

8. **Claim Attachments**. Document present processing of claim attachment requests, how NPI may impact the processes, and what steps if any should be taken now in anticipation of the Claim Attachment final rule.

9. **External Reporting**. Document governmental, management, and other reports that may require modification because of NPI.

10. **Provider Enrollment & Credentialing**. Document the present processing by which a physician or other provider is enrolled and credentialed in the provider files of an organizational provider.

11. **Review Policies & Procedures**. Document the impact of NPI, Taxonomy, and Context Data changes on an organizational provider's policies and procedures.

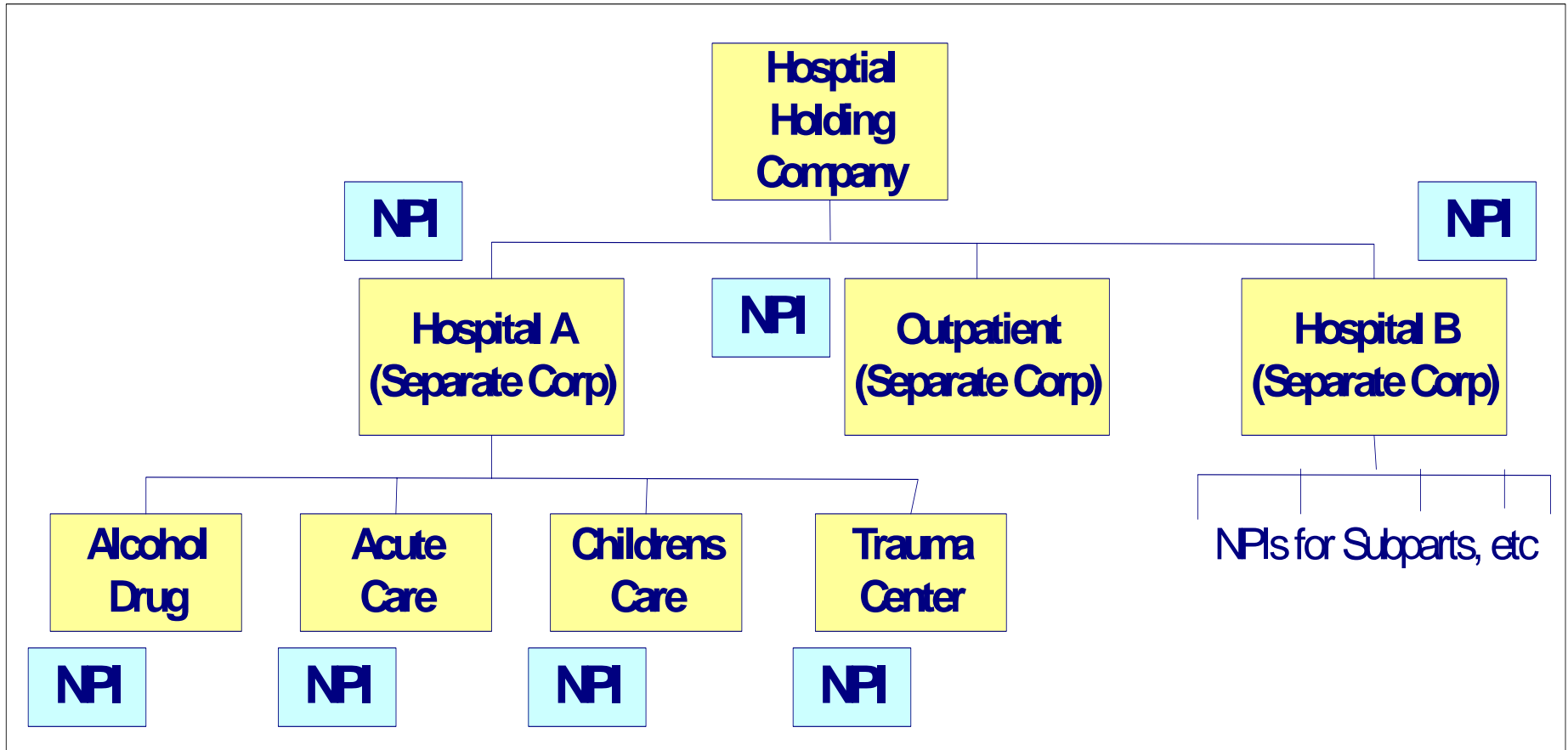# 1. Get Hospital's own NPIs for Subparts and Subsidiaries; Impact on contracts

1. **NPIs to Identify the hospital.**

   - *Determine the NPIs that an organizational provider should obtain for itself, its subsidiaries, and their subparts.*

   - *Develop a cross-reference matrix of the proposed NPIs, together with Taxonomy Codes and Context Data, against Legacy IDs and Context Data.*

Hospitals are using two Basic Approaches:

i. Obtaining an NPI for every Medicare Identifier

ii. Using a single NPI augmented by Taxonomy Codes

1. Hospital's Own NPIs (continued)

1. Get Hospital's own NPIs for Subparts and Subsidiaries; Impact on contracts

2. **Impact on Provider-Plan Contracts**. Assess the impact of the proposed NPIs on existing contracts with health plans. Identify candidate contracts that may require renegotiation. Meet with plans. Resolve contract issues with all health plans.

3. **Disclosure of the Hospital's NPIs**. Develop a methodology for the hospital to disclose its NPI identifiers, together with planned Taxonomy and Context Data, to all health plans and others. Identify to what others the hospital must disclose.

4. **Audit Plan to Ensure No Cash Flow Problems**. Develop a method to audit claims adjudication and payments from every plan to ensure that replacement of legacy identifiers and context data with NPI, Taxonomy, and Context Data does not change pricing and amounts actually paid.

2. Get NPIs for Referring Physicians, Labs, and Others

1. **Receiving NPIs for Other Providers**. Determine the processes needed to receive, validate, and record NPIs, Taxonomy Codes, and Context Data for other providers, including those affiliated with the hospital as employees, contractors in HMO plans, participating providers, non-participating providers, and service providers (such as laboratories).

2. **Outreach to Other Providers**. Determine the hospital's role in educating and guiding other providers to obtain NPIs and use them with their Taxonomy Codes and Context Data.

3. **Regional Collaborative Initiatives**. Determine the feasibility and rationale for the hospital to participate in regional initiatives to ensure complete enumeration of providers.

4. **Establish Policy Regarding Non-NPI Providers**. Should the hosital require NPI of providers where it is permitted to require it?

5. **Use and Disclosure of Other Provider NPIs**. Determine appropriate policy by which the hospital may use and disclose other provider's NPIs, Taxonomy, and Context

3. Remediate Internal Processes, Systems, and Data

1. **Remediation of Processes in Each Organizational Unit**. Determine the changes required in the processes and procedures in each organizational unit of the hospital. Analyze alternative strategies, recommend, and obtain decisions. Implement.

2. **Remediation of Information Systems and Databases**. Determine the changes required in each information system and database. Include reporting and display changes. Analyze alternative strategies, recommend, and obtain decisions. Implement.

4. Manage External Dependencies Business Associates and Vendors

1. **Management of Business Associates, and Software & Service Vendors**. Establish a management process to determine the hospital's NPI remediation requirements for each business associate and software & service vendor. Determine their agreement with the requirements, current status, and schedule. Establish a control process to ensure delivery of the required change in functionality and service.

2. **Implement the control process pro-actively**. Get results.

D. Other Tasks

1. **Dual Use Strategy**. Implement the Dual Use of NPI & Legacy Identifiers strategy. Adjust the strategy according to acceptability of it to each health plan and type of transaction. Develop methods to implement NPI without the strategy for non-cooperating plans.

2. **Use of NPI on Non-HIPAA Communications**. Document likely and expected usage of NPI identifiers on communications and records that are not HIPAA standard transactions.

3. **Education Plan**. Document the scope and approach for education for hospital personnel about NPI Implementation.

To Review:
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   [End of Presentation. Questions?]