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# National Provider Identifier: Updates for the States



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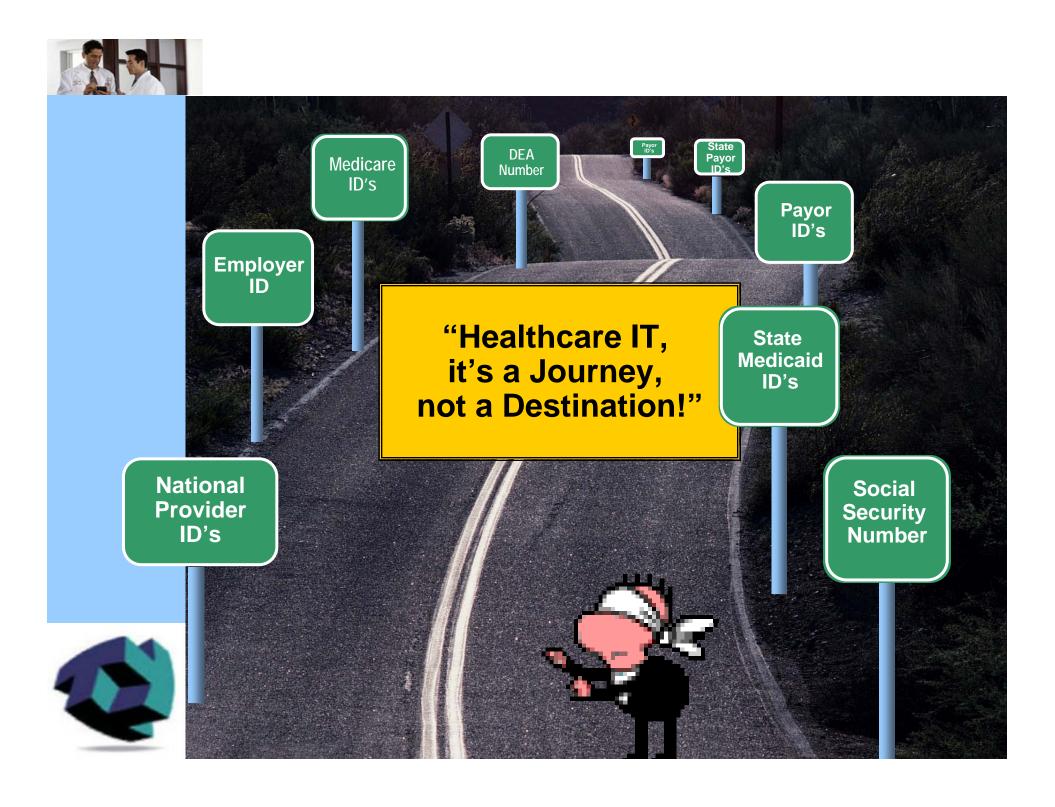




### Agenda

- National Provider Identifier
- NPI & Issues With Your State
- Key NPI Technical Strategies
- NPI & Texas Medical Board A Strategic Plan
- NPI/Physician Directory Strategy
- A Connectivity Solution for Texas Medical Board







# Only 240 more days until the National Provider Identifier (NPI) compliance date!

Are you ready?





- The National Provider Identifier (NPI) is a unique identification number for use in standard health care transactions.
- The NPI is a new number that will be issued to health care providers and covered entities that transmit electronic transactions (e.g. electronic claims and eligibility verification) through the National Provider System (NPS).
- As of May 2005, the National Provider System, an entity established by the federal government, began issuing NPI's to providers that apply and qualify for one.





- This identifier, which fulfills a requirement of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), must be used by health plans and health care clearinghouses in HIPAA standard electronic transactions by May 23, 2007.
- Small health plans (with less than \$5 million in annual revenues) must use only the NPI by May 23, 2008.
- NPIs will replace other provider identifiers previously used by health care providers (and assigned by payers).
- NPIs will not replace the tax identification number (TIN) on the HIPAA electronic transactions when used for tax reporting. This applies only to the 837 electronic claim.





- All HIPAA covered healthcare providers, whether they are individuals or organizations, must obtain an NPI for use to identify themselves in HIPAA standard transactions.
- Once enumerated, a provider's NPI will not change.
- The NPI remains with the provider regardless of job or location changes.





- When applying for your NPI, CMS urges you to include your legacy identifiers, not only for Medicare but for all payors.
- If reporting a Medicaid number, include the associated State name.
- This information is critical for payors in the development of cross identification and to aid in the transition to the NPI.





# National Provider Identifier - Who will have an NPI?

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Physicians Nurses Dentists

Chiropractors Pharmacists Physical Therapists

#### **Organizations and Sub-Parts of Organizations**

Hospitals

Home health Organizations

Clinics

Nursing Homes

Pharmacies Laboratories

Ambulance Companies

**Group Practices** 

HMO's

Durable Equipment Suppliers Residential Treatment Centers

Organizations must be ready for the NPI initiative by May 23, 2007. If you are not prepared, your revenue cycle may be crippled by

your inability to file claims with payers for HIPAA standard transactions.





# National Provider Identifier - Issues With Your State

#### Review of state laws

- Identify any conflicts or supplemental requirements

#### State licensure issues

- Determine if there are any NPI-related requirements by state boards
- Simplification of fraud and abuse tracking, monitoring of physician licensure revocation, suspension or other probation monitoring activities

### Why is managing the information so hard?

- Many sources of data
- Distributed data ownership
- Secured Access is limited
- Multiple ID's from a variety of providers





### National Provider Identifier - Key NPI Technical Strategies

- Applications, databases and interfaces must be analyzed to see if they currently accommodate a 10 digit provider ID
  - Each object must be assessed to determine if an additional element (NPI) is needed in order not to break an existing process
- New ways to validate the accuracy and integrity of new NPIs must be built (i.e. automated way to access NPPES database to verify NPI against provider demographic or other information data and method yet to be defined by CMS)



Continuity and accuracy of auditing, reporting, analytics and other processing of provider data over an extended time period must be considered



# National Provider Identifier - Key NPI Technical Strategies (continued)

- Internal processing or storage of NPI data received from business partners (i.e. PBMs) must be reviewed for impact
- External processing or storage of NPI data sent to business partners (i.e. account/group/purchaser reporting, chronic disease management, vendors, etc.) must be reviewed for impact
- Affected systems must be able to process with both NPI and legacy IDs, as some providers are not eligible to receive an NPI
- New web-based or other applications may need to be created to assist in the collection and validation of NPIs from the provider community





# National Provider Identifier A TMB Physician Directory Strategic Plan

#### What is Needed/Provided:

- A Single Source of Data
- Integration
- Auditing Capabilities
- Secure
- Physician Accessible
- Real Time Notification
- Reporting Capabilities
- Reduce TMB DB Maintenance





#### Data

- Provides a single source of truth for physician information (demographics, board certifications, education, etc.)
- Able to maintain multiple identifiers for the same provider (UPIN, DEA, SSN, NPI, and any internal enterprise numbers)

#### Integration

- Message-based system for distributed integration at a very low level of granularity
- Real-time or scheduled data integration intervals
- Supports industry standards for data transfer (HL7, XML, web-services, FTP, email)
- Full visibility to interface history (who was notified of what information and when)





#### Auditing

- All changes are audited with what changes, by whom, and when with rollback capability
- Audit history showing that information was disseminated to hospitals along with full auditable reporting and tracing features on PD users

#### Secure

- Access to view or edit Information can be controlled at the field level
- Role-based security measures can be implemented
- Ability to show consumers and hospital staff the same data that the TMB works off of while securing sensitive data internally





#### Real-time Notification

- Instant communication from TMB to all hospitals in the state or just where the physician is credentialed when a physician's license has been revoked, suspended, restricted or fully restored.
- Review and approval procedures are incorporated within the system
- Internal to TMB, updates go to Credentialing, Compliance, Licensing and, if necessary, the NPDB

### Physician Self-Service

Physicians can maintain their demographic information by logging into the secure TMB website or the hospitals





#### Reporting

- TMB physician online directory will be the most current
- Currently, Board orders requiring physicians to keep the TMB updated with respondents various mailing addresses will be kept up to date here
- Update the National Practitioners Database in real-time

#### Reduce data maintenance effort by TMB

- Physician self-service will reduce data administration tasks
  - Potential penalties for misrepresenting provider data
- Optional ability to provide valid requestors the complete state directory with no TMB personnel intervention





# National Provider Identifier & Physician Directory – Benefits

- Potential simplification across disparate clinical, financial and reporting information systems – internal / external
- Clinical, RHIO, and EHR data benefits from single identifier
- Through the TMB website, physicians can log into the secure site and self manage their demographic information thus reducing support costs to TMB.





# National Provider Identifier & Physician Directory – Benefits (Continued)

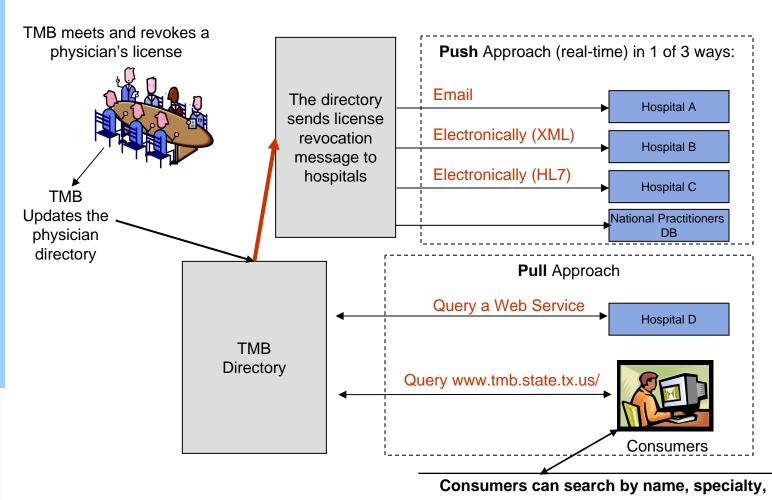
- Reminders can be sent periodically to solicit updates or license renewals from physicians.
- A real-time communication vehicle of license status changes to all hospitals and interested parties.
- A tool that can connect to the National Practitioners Database.
- Consumers can search directory by name, address, city, zip code, specialty, board certifications, etc.





### **Connectivity Solution for Texas Medical Board**

When the TMB revokes a provider's license, the directory will instantly send a communication to participating hospitals and organizations with the announcement.



board certifications, locations, zip code, etc.

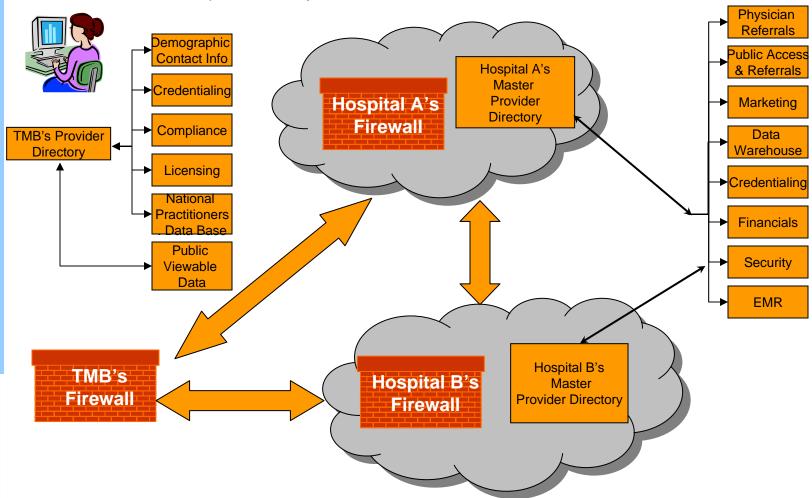




### **Module Features – Integration Framework**



- Sends provider data real-time to your PD system and to your participating provider systems and provides full auditable reporting and tracing features
- Supports data translation between systems
- Review and approval process incorporated within the system
- Fault-tolerant and decoupled architecture by using queues and audits
- Update data anywhere







### Thank you!

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