THE NPI TIMES

Keeping you up-to-date on National Provider Identifier (NPI) issues at Blue Cross and Blue Shield of Texas (BCBSTX)

Are You Taking the Plunge?

During the NPI transition, BCBSTX has been communicating to providers when they are "good to go" or ready for NPI-only status on claims submissions. All paper claims submitters are approved for NPI-only claims submission, as long as they have shared their NPI with us. Providers who submit claims electronically should wait for a "Congratulations" postcard from BCBSTX (see "Which Have You Received?" article for clarification). As soon as the "Congratulations" postcard is received, the provider should contact their vendor to ensure that the vendor is submitting NPI-only electronic claims on their behalf.

Now is the time to be submitting NPI-only claims. Unless you have system restrictions that do not allow for NPI-only at this time, or have not received the "Congratulations postcard" from BCBSTX, you should begin submitting NPI-only claims to BCBSTX. The current transition period is the perfect time to work through any issues.

Important Reminder

Beginning March 31, 2008, all claims submitted to BCBSTX must include only your NPI(s) in box 33A—claims that include the BCBSTX provider number will be rejected. For more details on our NPI Transition Plan, visit the Provider section of our Web site at www.bcbstx.com – just click on the NPI logo!

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NPI
National Provider Identifier

Taxonomy Codes – What are they & how are they used?

The health care provider taxonomy code set is a comprehensive listing of unique 10-character alphanumeric codes. The code set is structured into three levels—provider type, classification, and area of specialization—to enable individual, group, or institutional providers to clearly identify their specialty category or categories in HIPAA transactions.

The entire code set can be found on the Washington Publishing Company (WPC) Web site, at http://www.wpc-edi.com/codes/taxonomy. The health care provider taxonomy code set levels are organized to allow for drilling down to a provider's most specific level of specialization. Listed below is a random sampling of taxonomy codes:

Allergy Immunology	207K00000X
Durable Medical Equipment	332B00000X
Family Practice	207Q00000X
Opthamology	207W00000X
Urgent Care	261QU0200X

Why do I need to know my taxonomy code(s)?

Taxonomy codes further identify you or the practice you are a part of on claims. They can play a critical role in the claims payment process. Electronic claims transactions already accommodate the entry of taxonomy codes. In the near future, paper claims submitters also may be asked to include taxonomy codes on claims.

How Do I Bill for Locum Tenens?

Within the busy provider world, locum tenens, or substitute physician(s) usually assume professional practices in the absence of a regular physician for reasons such as illness, pregnancy, vacation, continuing education or even filling in while permanent providers are recruited. Coverage ranges from rural solo physician practices to the country's major health systems and managed care organizations. Locum tenens work is designed to fill these vacancies on an interim basis, although assignments can vary in length from a few days to many months. The solo physician, system or organization generally pays the locum tenens directly as an independent contractor rather than an employee.

As covered health care providers, locum tenens are eligible to obtain NPIs. However the interim, substitute physician may or may not be a contracted BCBSTX provider. Therefore, BCBSTX may not have record of their NPI, and claims received from the locum tenen would be rejected once submitted for processing.

In these situations, the contracted BCBSTX provider should submit the claims using his or her provider IDs with the Q6 modifier (services furnished by a locum tenens physician). The Q6 modifier should be populated in one of the four modifier areas in field 24D of the CMS-1500 (08/05) form.

Am I Good to Go?

BCBSTX receives multiple inquiries via our NPI e-mail helpline. Recently, some of you have asked this: "I submit paper and electronic claims. Since paper submitters were approved to begin submitting NPI-only claims as of Dec. 1, 2007, am I OK to submit NPI-only electronic claims as well, or do I still need to wait for a "Congratulations" postcard?"

There are differences in the processing procedures of electronic claims and paper claims. While BCBSTX announced that paper submitters could begin submitting NPI-only claims as of Dec. 1, 2007, as long as they had submitted their NPI to BCBSTX, electronic claims are not automatically included in that approval. Even if you are a provider who submits both types of claims, please wait to receive your "Congratulations" postcard from BCBSTX before submitting NPI-only electronic claims.

Remember, once you receive the "Congratulations" postcard, contact your electronic trading partners (billing services, clearinghouses and software vendors) to ensure they are aware of your NPI-only status with BCBSTX. If your vendor who submits electronic claims on your behalf has any questions, they may contact our E-Commerce Center at 1-800-746-4614.

NPI—Tip of the month

When electronic claims are rejected, there can be many reasons. One is incorrectly populating the rendering and billing loops. Remember: Do not put the rendering provider NPI or BCBSTX ID in the billing loop of the claim. The rendering provider NPI must go in the rendering loop and the billing provider NPI must go in the billing loop. Claims will be rejected if billed incorrectly.

New UB-04 "How to Complete" Guide available NOW

We are continuing to enhance our educational tools to make it easier for you to serve our members. Please refer to the new guide for completing the UB-04 claim form in the Provider Library of our Web site at www.bcbstx.com. This guide provides you with a sample claim form, including fields designated by BCBSTX as TDI-required, conditional or BCBSTX/HMO Blue Texas requested element. The guide also provides detailed instructions on how to properly complete the form.

Professional Claims Announcement from CMS

The Centers for Medicare and Medicaid Services (CMS) recently announced on their Web site that beginning March 1, 2008, all professional claims must be submitted to Medicare with an NPI in the primary fields on the claim (i.e., the billing, pay-to and rendering fields). Therefore, on a Medicare Fee-For-Service 837P and CMS-1500 (08/05) form, the use of NPI-only or NPI/BCBSTX provider number combinations on submitted claims is allowed. Any Medicare claim submitted without an NPI after this date will be rejected.

For more information, please visit the CMS Web site at www.cms.hhs.gov/nationalproviderstand.

Which Have You Received?
NPI Postcard Clarification

During the NPI transition, both contracted and non-contracted providers have diligently participated in submitting their NPI(s) to BCBSTX. To facilitate ongoing communications, BCBSTX currently is mailing two postcards to providers who have either shared information with us or have successfully participated in submitting dual-identifiers on their electronic claims. Here are explanations of the postcards to help clarify any confusion on why they are being recieved.

Thank You Postcard

Once a provider has submitted their NPI, BCBSTX will send each provider a "Thank You" postcard after validating and loading the NPI information to our system. Providers should allow three to four weeks for receipt of this postcard.

*NOTE: Providers who submit paper claims may begin submitting NPI-only paper claims as soon as they receive their "Thank You" postcard.

Congratulations Postcard

After sufficient "testing" of dual-identifier claims submission, a provider will receive a postcard from BCBSTX confirming their transition to NPI-only status. Once the provider has received this notification, they should submit claims using only their NPI number as the identifier.

To view art of these postcards, please visit our Web site at www.bcbstx.com/provider, click on the NPI Logo, and then select *Communications Library*.

Resources

Additional information regarding NPI can be found on the following Web sites:

- Centers for Medicare and Medicaid Services (CMS): **www.cms.hhs.gov/NationalProvidentStand/**.
- National Plan and Provider Enumeration System (NPPES): **www.nppes.cms.hhs.gov**.
- Blue Cross and Blue Shield Association Web site at **www.bcbs.com/npi** for audio and video NPI Web cast sessions.
- BCBSTX Web site at **www.bcbstx.com/provider**. Click on National Provider Identifier for updated information, Frequently Asked Questions, an NPI Glossary and more!

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Have a Question?

If you have any questions on NPI or the application process, contact:

- NPI Enumerator Call Center at **1-800-465-3203**; or
- Send an e-mail to: **customerservice@npienumerator.com**

If you have any questions on how BCBSTX is implementing NPI:

- Send an e-mail to **npi@bcbstx.com**; or
- Contact your Provider Network Representative who can support you through the entire NPI process.