



## National Provider Identifier

### It's here! It's now! Are you using it?

May 24, 2008 marks the end of the contingency plan for the **National Provider Identifier** (NPI). With the end of the plan, South Carolina Department of Health and Human Services (SCDHHS) will implement changes to the Web Tool to incorporate the NPI-related requirements.

Providers who are covered entities under the Health Insurance Portability and Accountability Act (HIPAA) – **typical providers** – must begin using their own unique NPI to identify themselves in the following standard transactions:

- Claims, claims status queries/responses, eligibility queries/responses and remittance advices
- Hard copy claims and edit correction forms (ECF)

SCDHHS will no longer accept six-character S.C. Medicaid provider numbers on standard transactions, hard copy claims, or ECFs for **typical providers**.

**Atypical** providers (those providers that do not provide health care services) are not required to have NPI. They will continue to use their six-character provider ID on all transactions.

The major changes to the Web Tool will affect Eligibility, List Management, and Claims Entry options of the Web Tool.

*Continued in column 2.*

## NPI Web Tool Changes

### Eligibility, List Management, Claims Entry

#### ELIGIBILITY

Currently, when verifying eligibility for one recipient or multi recipients, you are able to enter the Provider ID, Provider NPI or both numbers. The Web Tool will require you to enter the *Provider ID* **OR** *Provider NPI*, not both. A warning message will be added to the Web Tool to remind users to enter only one number, not both.

#### LIST MANAGEMENT - Provider List

The Medicaid Legacy Provider ID field and column and National Provider ID field and column will be combined into one field and one column. The new Provider Identification field will allow users to enter a maximum of 10 characters. Atypical providers will still be able to build a provider list using their 6-character (legacy) Medicaid Provider ID. The Provider Identification column will be equipped to display 6- or 10-character provider identifiers. **\*Note: If you are a typical provider and you have built a Provider List, you will need to rebuild your list with NPI numbers.**

#### CLAIMS ENTRY - Dental and UB-04 – Add

**All Dental and UB-04 providers are typical providers and will no longer use their six-character legacy Medicaid Provider ID.** All references to the Medicaid Provider ID have been removed on the Dental and UB-04 claims entry screens.

#### Dental – Add/Edit Detail

In the Dental Add/Edit Details section, the Referring Provider ID, Referring Provider NPI, and Referring Provider Taxonomy fields will be removed from the Web Tool. These fields are not required on hard copy claims and, therefore, are not required on the Web Tool.

#### UB-04 – Add/Edit Other Insurance

Likewise, in the UB-04 Add/Edit Other Insurance section, the Provider ID, Provider NPI, and Provider NPI fields will be removed.

*Continued on page 2.*

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## NPI Web Tool Changes continued from page 1

### CLAIMS ENTRY

#### Dental Warning Messages

In the Dental Add section of the Web Tool, the current warning message “Please enter a Medicaid Provider ID **AND/OR** Medicaid Provider NPI” will be changed to warn, “Please enter a Medicaid Provider NPI.”

This warning message change will also occur for the R/A Medicaid Provider NPI and in the Add/Edit Detail section for the Rendering Provider NPI field.

#### UB-04 Warning Messages

In the UB-04 Add section of the Web Tool, the current warning message “Please complete the Medicaid Provider ID field **AND/OR** Provider NPI” will be changed to warn “Please complete the Provider NPI.”

#### CMS-1500 Warning Messages

Since both typical and atypical providers file claims using the CMS-1500, all references to the Medicaid Provider ID will remain in the CMS-1500 Claims Entry sections.

The current warning message “Complete: Medicaid Provider ID **AND/OR** Medicaid Provider NPI” will be changed to warn “Please Complete One: Medicaid Provider ID **OR** Medicaid Provider NPI. **This message will also appear for the Rendering/Attending Provider Medicaid ID or Rendering Attending Medicaid Provider NPI fields in the Miscellaneous section when adding a CMS-1500 claim.**

In the Add/Edit Details section, the current warning message “Complete: Rendering Provider ID **AND/OR** Rendering Provider NPI” will be changed to warn “Please Complete One: Rendering Provider ID **OR** Rendering Provider NPI.”

See pages 3-6 for screen illustrations of these changes.

## Additional Web Tool Changes

While implementing NPI changes to the Web Tool, SCDHHS will also incorporate three additional non-NPI related changes.

### WEB SUBMITTED CLAIMS – LOOKUP

A new column, BatchID will be added to the Web Submitted Claims Lookup screen to aid you in your search for a particular claim status.

### UB-04

In the Additional Patient Information section, SCDHHS will add two new drop-down options for the Admission Source field. If you choose “4-Newborn” in the Admission Type field, you will be able to choose one of the following Admission Source codes from the drop-down box.

- 5-Born inside hospital/Transfer from a Skilled Nursing Facility
- 6-Born outside hospital/Transfer from another Health Care Facility

A new warning message will appear alerting you to select 5 or 6 Admission Source if you choose Admission Type 4.

See page 7 for examples of these screen shots.

## Web Tool Word Search Clues to NPI

Puzzle on page 9!

Answers below! Don't peek!

#### Across

- 1 – Atypical
- 4 – HIPAA
- 6 – Contingency
- 7 – Legacy

#### Down

- 2 – Typical
- 3 – Taxonomy Code
- 5 – NPI

# NPI Web Tool Changes

## Eligibility

Eligibility > Verify one Recipient (or Verify multi Recipients) > Eligibility Information Inquiry

## List Management

List management > Provider > Provider List Add/View

Provider Last Name or Organization Name	Provider First Name	Provider Identification	Provider Taxonomy	Status	Edit	Delete
Alpha	omega	2587695124	123584695x	A	Edit	Delete
Alpha	omega	z34456	123584695x	A	Edit	Delete
jones	jonez	6666558852	124578964x	A	Edit	Delete
jones	jonez	111222	124578964x	A	Edit	Delete
Morrelli Clinical Services		BR5490		A	Edit	Delete
Smith	Jacky-o	456789		A	Edit	Delete
The one to make money	happy	777766	454654646x	A	Edit	Delete
The one to make money	happy	7987987467	454654646x	A	Edit	Delete

# NPI Web Tool Changes (continued)

## Claims Entry – Dental Claims Entry>Dental>Add

## Claims Entry>Dental>Add>Add/Edit Details

# NPI Web Tool Changes (continued)

## UB-04

### Claims Entry>UB-04>Add

**Provider Information**

Provider Last Name or Organization Name:  ...

Provider First Name:

Medicaid Provider NPI:

Medicaid Provider Taxonomy:

Medicaid Provider:  EIN  SSN

Billing Provider Zip Code:  -

**Additional Patient Information**

Admission Date:  Admission Hour:  Admission Type:

Discharge Hour:  Date of Service From:  Date of Service Through:  Patient Status:

Covered Days:  Non-Covered Days:  Co-Insurance Days:  Lifetime Reserve Days:

Type of Bill (Facility Type/Frequency):

### Claims Entry>UB-04>Add

**Treatment Authorization Code**

A:

**Rendering/Attending Provider Data**

R/A Provider Last Name or Organization Name:  ...

R/A Provider First Name:

R/A Provider NPI:

R/A Taxonomy:

Remarks:

**Other Insurance**

No Other Insurance Information

**UB-04 Detail**

No ITR Detail Information

# NPI Web Tool Changes (continued)

## CMS-1500

### Claims Entry>CMS-1500>Add

The screenshot shows the 'Add' form for a CMS-1500 claim. A red-bordered dialog box is overlaid on the form, containing a warning icon and the text: "Please Complete One: Medicaid Provider ID or Medicaid Provider NPI." The dialog box has an "OK" button. Red arrows point from the dialog box to the "Medicaid Provider ID" and "Medicaid Provider NPI" fields in the "Provider Information" section. Another red arrow points from the dialog box to the "Rendering/Attending Information" section. A third red arrow points from the dialog box to the "Miscellaneous Claim Information" section.

**Recipient Information**

Claim Type: CMS-1500 Claim ID: New

Recipient Last Name: [ ] Recipient First Name: [ ]

Medical Record Number: [ ]

Prior Authorization Number: [ ]

**Provider Information**

Provider Last Name or Organization Name: [ Jones ]

Medicaid Provider ID: [ 112233 ]

Medicaid Provider NPI: [ 1234567891 ]

Medicaid Provider:  EIN  SSN

Billing Provider Zip Code: [ ]

CLIA Number: [ ]

**Miscellaneous Claim Information**

EPSDT: [ ]

EPSDT referral given to Patient?: [ ]

**Rendering/Attending Information**

R/A Provider First Name: [ ] R/A Provider Last Name or Organization Name: [ ]

R/A Medicaid Provider ID: [ ]

R/A Medicaid Provider NPI: [ ] R/A Provider Taxonomy: [ ]

Both typical and atypical providers file claims using the CMS-1500; therefore, all references to the Medicaid Provider ID will remain in the CMS-1500 Claims Entry sections.

The current warning message "Complete: Medicaid Provider ID AND/OR Medicaid Provider NPI" will be changed to warn "Please Complete One: Medicaid Provider ID OR Medicaid Provider NPI."

This message will also appear for the Rendering/Attending Provider Medicaid ID or Rendering Attending Medicaid Provider NPI fields in the Miscellaneous section when adding a CMS-1500 claim.

### Claims Entry>CMS-1500>Add/Edit Details

The screenshot shows the 'Add/Edit Details' form for a CMS-1500 claim. A red-bordered dialog box is overlaid on the form, containing a warning icon and the text: "Please Complete One: Rendering Provider ID or Rendering Provider NPI." The dialog box has an "OK" button. Red arrows point from the dialog box to the "Rendering Provider ID" and "Rendering Provider NPI" columns in the table below. Another red arrow points from the dialog box to the "Rendering Provider Taxonomy" column.

**Rendering/Attending Information**

R/A Provider First Name: [ ] R/A Provider Last Name or Organization Name: [ ]

R/A Medicaid Provider ID: [ ]

R/A Medicaid Provider NPI: [ ] R/A Provider Taxonomy: [ ]

Mod4	Charge	Units	E/F	NDC	Rendering Provider ID	Rendering Provider NPI	Rendering Provider Taxonomy	Emergency Ind
[ ]	[ 100.12 ]	[ 1 ]	[ ]	[ ]	[ 112233 ]	[ 1234567891 ]	[ ]	[ N-No ]

In the Add/Edit Details section, the current warning message "Complete: Rendering Provider ID AND/OR Rendering Provider NPI" will be changed to warn "Please Complete One: Rendering Provider ID OR Rendering Provider NPI."

# Additional Web Tool Changes

## Web Submitted Claims

Web Submitted Claims > Web Submitted Claims > Web Submitted Claims Lookup

**Web Submitted Claims - Lookup**

Web Submitted Claims for Submitter: test8

Check Status    Clear Checkboxes

	Recipient Last Name	Recipient First Name	Recipient Account Number	Recipient Medicaid ID	Total Claim Charge	BatchID
<input type="checkbox"/>			1	1234567890	\$1,100.00	test80001067
<input type="checkbox"/>			3	3456789012	\$1,200.00	test80001067

Check Status    Clear Checkboxes

A new *Batch ID* column will be added to the Web Submitted Claims Lookup screen to aid providers when looking for claims status.

## UB-04

Claims Entry > UB-04 > Add > Additional

Admission Date:    Admission Hour:    Admission Type: 4-New Born    Admission Source:    Patient Status:    Lifetime Reserve Days:

Discharge Hour:    Date of Service From: 04/28/2008    Date of Service Through: 04/28/2008

Covered Days:    Non-Covered Days:    Co-Insurance Days:

Type of Payment (Facility) Type/Frequency

Service Frequency

Condition

1    2    3    4    5    6    7    8    9    10    11    12    13    14    15    16    17    18    19    20    21    22    23    24

Occurrence Codes

Code    Date    Code    Date    Code    Date    Code    Date    Code    Date

If you choose *Admission Type 4-New Born*, you will be able to choose one of two new *Admission Source Codes, 5 or 6*.

Also, a new warning message will appear if you choose *Admission Type 4* but do not choose 5 or 6 as the *Admission Source*.



### **Eligibility**

Effective **Monday, April 7, 2008**, SCDHHS implemented an enhancement to the *Eligibility Verification Results* screen of the Web Tool to display the new payment category code 99 and its description.

#### *Payment Category:*

99, HEALTHY CONNECTIONS KIDS, DENTAL IS FFS  
This child is a participant in SCHIP. Dental services are covered at regular fee for service. The beneficiary is exempt from all co-payment requirements.

### **UB-04**

When filing an **inpatient** UB-04 claim, providers must enter a Present on Admission (POA) indicator. The new fields, added in January 2008, are positioned next to each diagnosis code field.

With the NPI changes, any diagnosis code that is entered without a POA indicator will automatically default to 1 (not needed). If you enter an invalid POA indicator you will receive a warning message reminding you of the valid codes: W, Y, N, U or 1.

### **National Drug Code (NDC) on UB-04 claims**

Effective for dates of service on and after **June 1, 2008**, SCDHHS will require providers billing for physician-administered drug products in the outpatient hospital setting to report the NDC when using a drug-related Healthcare Common Procedure Coding System (HCPCS) code or Current Procedural Terminology (CPT) code.

The claim will reject if a HCPCS or the CPT Drug Code has been reported, and the NDC is missing or invalid.

### **Unsubmitted Claims need an NPI**

The NPI changes with also affect unsubmitted claims on the Web Tool. The legacy provider fields from the UB-04 and Dental fields will not be transferred on saved Web Tool claims – claims that have been entered and saved, but not yet submitted. If these claims do not have an NPI entered, you must go back and edit the saved claims to enter the NPI before submitting them on and after May 24, 2008. Any claims submitted without an NPI will not be able to be processed.

Also, on UB-04 and Dental claims in the Reports section – claims that have already been submitted, the legacy number will be removed.

### **National Provider Identifier –**

### **Edit Codes on Claims that do not include NPI**

Medicaid Bulletin (dated March 18, 2008)

RE: National Provider Identification (NPI) required on Claims Effective **May 24, 2008**

Effective for claims and ECF's received on and after **May 24, 2008**, typical providers must identify themselves by NPI and taxonomy only.

NPI related Edit Codes and Resolution Steps:

<b>Edit Code &amp; Description</b>	<b>Resolution Steps</b>
<b>210 - Missing taxonomy code</b> (CARC 16 / RARC N94)	Submit a new claim which includes the taxonomy code.
<b>305 - Invalid taxonomy code</b> (CARC 16/RARC N94)	Submit a new claim which includes a valid taxonomy code. Valid codes are found at: <a href="http://www.wpc-edi.com/codes/taxonomy">http://www.wpc-edi.com/codes/taxonomy</a>
<b>520 – Typical Provider, legacy number not allowed on claim</b> (CARC 16 – RARC N77)	A new claim must be filed <i>without</i> the six character legacy provider number.
<b>941 - NPI on claim not found on provider file</b> (CARC 16 – RARC N77)	Check the NPI on the claim to ensure it is correct. If so, register the NPI with Provider Enrollment.
<b>942 - Invalid NPI</b> (CARC 16 – RARC N77)	The NPI used in the claim is inconsistent with numbering scheme utilized by NPES. Submit a new claim with the correct NPI.
<b>943 – Typical provider, no NPI on claim</b> (CARC 16 – RARC N77)	Submit a new claim that includes the NPI.
<b>944 - Taxonomy on claim has not been registered w/ provider enrollment for the NPI used on the claim</b> (CARC 16 – RARC N94)	Submit a new claim with the taxonomy that the provider registered with SCDHHS or contact Provider Enrollment to change the taxonomy that is being used on the claim.
<b>946 - Unable to crosswalk to legacy Medicaid number</b> (CARC 16 – RARC N77)	Contact Program Manager to clarify why the NPI could not be cross-walked.
<b>947 - Atypical provider and NPI utilized on the claim</b> (CARC 16 – RARC N77)	Atypical providers must continue to use their legacy Medicaid number on the claim. Do not include the NPI if you are an atypical provider. If you are not sure, contact your Program Manager.

# Web Tool WORKSHOPS



Workshops Scheduled through  
August 2008!

South Carolina Medicaid continues to offer free Web Tool workshops in Columbia, South Carolina, for all providers.

Please register by calling the toll-free number for South Carolina Medicaid Provider Outreach, 1-888-289-0709, or register online at [www.scm Medicaidprovider.org](http://www.scm Medicaidprovider.org).

June 18, 2008

**Wednesday**

**10:00am – 4:00pm (Lunch on your own)**

Location: BlueCross BlueShield  
17 Technology Circle (Farrow Rd.)  
Columbia, SC 29203

July 24, 2008

**Wednesday**

**10:00am – 4:00pm (Lunch on your own)**

Location: BlueCross BlueShield  
17 Technology Circle (Farrow Rd.)  
Columbia, SC 29203

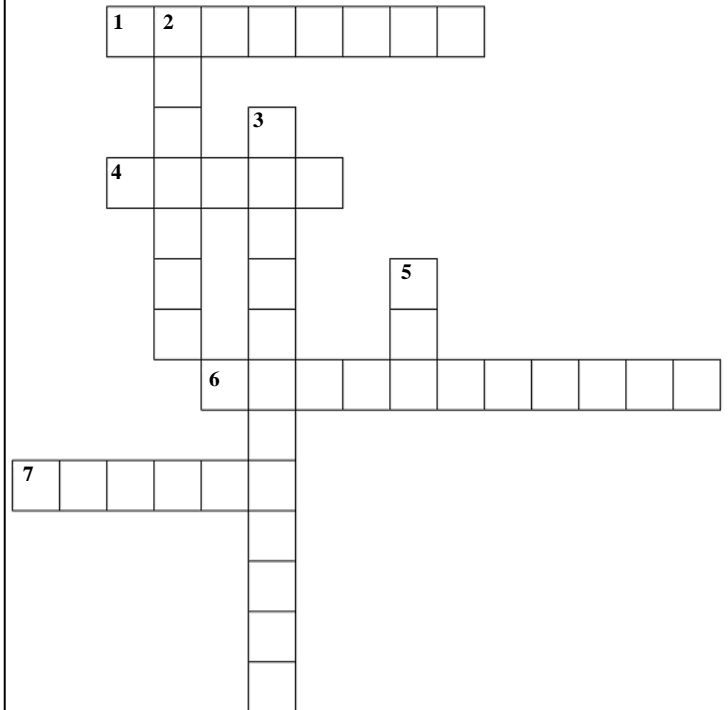
August 22, 2008

**Friday**

**10:00am – 4:00pm (Lunch on your own)**

Location: BlueCross BlueShield  
17 Technology Circle (Farrow Rd.)  
Columbia, SC 29203

## Web Tool Word Search Clues to NPI



### Across

- Providers that do not provide health care services.
- Health Insurance Portability and Accountability Act (Abbreviation)
- The plan implemented by the Centers for Medicare and Medicaid Services (CMS) that ends on May 23, 2008.
- The six-character Medicaid ID not to be used by typical provider on and after May 24, 2008.

### Down

- Providers that do provide health care services
- A unique 10-character specialty code assigned to health care providers that identifies the provider type, classification and area of specialization.
- A 10-digit identifier for health care providers that's mandated by HIPAA.

## Contact Us

South Carolina Medicaid Provider Outreach  
P.O. Box 17  
Columbia, SC 29202

Visit our Web site at: [www.scm Medicaidprovider.org](http://www.scm Medicaidprovider.org)

Please send address or telephone number changes in writing to Provider Enrollment, PO Box 8809, Columbia, SC 29202-8809.

Contact our EDI Support Center with email changes at 1-888-289-0709, fax to 1-803-870-9021, or via email at [edig.ops-mcaid@palmettogba.com](mailto:edig.ops-mcaid@palmettogba.com).

The Web Tool is a free online Web-based application offered by South Carolina Medicaid for claims submission and eligibility requests. For help with Web claims, please call 1-888-289-0709 or e-mail us at [edig.ops-mcaid@palmettogba.com](mailto:edig.ops-mcaid@palmettogba.com).