

# Bulletin

April 22, 2008

Minnesota Department of Human Services ■ 444 Lafayette Rd. ■ St. Paul, MN 55155

**OF INTEREST TO**

- County Directors
- Social Services Supervisors and Staff
- Waiver and Alternative Care Program Administrators
- Tribal Agencies
- Managed Care Health Plan Organizations
- County Social Services Accounting Supervisors and Staff

**ACTION**

Please read. NPI and UMPI provider numbers are required on all new screening documents, service agreements, and authorizations entered into the MMIS beginning May 10, 2008.

**EXPIRATION DATE**

May 10, 2010

## National Provider Identifier (NPI) Changes for Prior Authorizations

**TOPIC**

NPI changes for the:

- LTC screening document
- DD screening document
- MPAF screening document
- CAC, CADI, DD, EW, and TBI waiver programs
- Alternative Care program
- Consolidated Chemical Dependency Treatment Fund
- MA Home Care authorizations

**PURPOSE**

Explain how the NPI will affect screening documents, service agreements, and authorization requests for the above programs.

**CONTACT**

Disability Services Division Resource Center

Phone (651) 431-2450 or 1-888-968-8463

[dhs.resourcecenter@state.mn.us](mailto:dhs.resourcecenter@state.mn.us)**SIGNED**

LOREN COLMAN

Assisted Commissioner

Continuing Care Administration

## **I. Background**

The federal mandated Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires all individual and group health care providers to use 10-digit National Provider Identifiers (NPIs) instead of payer-specific provider numbers on all electronic transactions. Providers who do not meet the federal definition of a “health care provider” under HIPAA are not eligible to receive NPI numbers and are considered “atypical” providers. Since HIPAA set the industry guidelines for provider identifiers to be ten digits, Minnesota Health Care Programs (MHCP) created new 10-digit Unique Minnesota Provider Identifiers (UMPIs) for atypical providers, including (but not limited to):

- Case managers
- Care coordinators
- Personal Care Assistants (PCA) organizations and PCAs
- Transportation (non-medical)
- Waiver and Alternative Care providers that do not provide health care services

UMPI numbers are the same as the current provider numbers preceded by the letter A or M. NPIs (when reported to the Department of Human Services) and UMPIs are on each provider record in MMIS, listed on any provider screen in the field labeled “NPI.”

To find the NPI or UMPI number, search in the provider subsystem using the provider’s name or MHCP provider ID number. All current edits will continue to check the provider number for accuracy and validity.

On May 10, 2008, DHS is converting to NPIs/IUMPIs only for all health care transactions.

Additional information about NPI is available through the [MHCP NPI Web site](#).

## **II. Changes to the Long Term Care (LTC) and Development Disability (DD) Screening Documents**

Beginning on May 10, 2008 MMIS will convert the case manager/care coordinator provider number field on screening documents saved in the MMIS to the new UMPI provider number. Screening documents entered into the MMIS after May 10, 2008 will require the new UMPI number in this field. If you enter the MHCP provider number or an invalid number instead of the UMPI number the field will turn red and the message “Correct Highlighted Fields” will appear at the bottom of the screen. Edit 114 “Case Manager Number Missing/Invalid” will check that the number is valid.

Use your UMPI number on the Case MGR/Prov Nbr field on the screening document key panel screen ASCR whenever searching for screening documents using your provider number (see screen below). If you use your MHCP provider ID number the field will turn red and the message “Correct Highlighted Fields” will appear.

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NEXT:          04/01/08 15:16:18 MMIS SCRN6 KEY PANEL-ASCR          PWMW901

      ACTION CODE:                      DOCUMENT TYPE:
A=ADD          C=CHANGE    I=INQUIRY    D=DD      L=LTC
B=BATCH ENTRY  D=DELETE          P=MPAF    C=C&TC

1. ENTER THE APPROPRIATE PRIMARY KEY FORMAT:
   DOCUMENT NUMBER:                      COPY FROM:
   RECIPIENT ID:

      CASE MGR/PROV NBR:                  (INQUIRY ONLY)

2. ADDITIONAL SEARCH CRITERIA FOR RECIPIENT OR CASE MGR/PROV SEARCH:
   START DATE:
   END DATE:
   STATUS:          (A=APPROVED  D=DENIED  S=SUSPENDED)
   LOC:              USER ID:

*****
* ALT1 - LTC SCREEN 1    ALT2 - LTC SCREEN 2    ALT3 - LTC SCREEN 3    +    *
* ALT4 - LTC SCREEN 4    ALT5 - LTC SCREEN 5    ALT6 - LTC SCREEN 6    *
*****
ENTER---PF1---PF2---PF3---PF4---PF5---PF6---PF7---PF8---PF9---PF10---PF11---PF12
PAGE          S/EXT          N/EXT PREV  NEXT          OOPS

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### III. Changes to the Waiver, Alternative Care, and Home Care Service Agreements

The same instructions explained in item II pertain to the CM NBR/NAME field of the service agreement ASA1 screen. On May 10, 2008 service agreements saved in the MMIS will convert the provider number in this field to the new UMPI number. Service agreements entered into the MMIS after May 10, 2008 will require the UMPI number. If you enter the MHCP provider ID number, or an invalid number instead of the UMPI number, the field will turn red and the message "Correct Highlighted Fields" will appear. Edit 114 "Case Manager Number Missing/Invalid" will check that the number is valid and the field is not left blank. Edit 289 "Case Manager Not on Provider File" will continue to check that the provider number is in a status of 3 Active NPA on the provider file.

On May 10, 2008, MMIS will also convert the line item provider numbers on the ASA3 screen of service agreements saved in the MMIS to the NPI or UMPI numbers. The UMPI number will be a duplicate of the current number with a proceeding A or M. If a provider was assigned a NPI number, that NPI number will be completely different from the legacy number and it must be used on new service agreements.

After May 10, 2008 line item provider numbers must be either the NPI or UMPI provider number. You can search in the provider subsystem using the provider's name or MHCP provider ID number to find the NPI or UMPI number listed at the top of any provider screen in the NPI field. If you add the MHCP provider ID number in the line item field instead of the NPI or UMPI number, the field will turn red and the message "Correct Highlighted Fields" appears at the bottom of the screen. All current edits will continue to check the provider number for accuracy and validity.

#### **IV. Changes to the Consolidated Chemical Dependency Treatment Fund (CCDTF) Service Agreements**

All CCDTF providers must have NPIs to replace the MHCP provider number.

On May 10, 2008, MMIS will convert all CCDTF service agreements saved into MMIS to the NPI. County data entry personnel will not need to change anything with these service agreements.

After May 10, 2008, county data entry personnel must enter the NPI in the “PROV NBR/NAME” field on the ASA3 screen for all CCDTF service agreements. If they enter the MHCP provider ID number, the field will turn red and the message “Correct Highlighted Fields” will appear at the bottom of the screen.

#### **V. Consolidated Providers**

Some health care providers who had multiple MHCP provider ID numbers have chosen to get only one NPI. MHCP refers to these providers as “consolidated” providers and identifies them in MMIS as provider type 33. If an MHCP provider ID number was used in the past on the service agreement or authorization that is now listed under a consolidated provider type 33 NPI number, follow the instructions below.

When adding an NPI to a line item that belongs to a consolidated (type 33) provider, the following will happen when you use the PF9 key or the transmit key to move to the next screen:

- a. The PPOP screen from the provider file will be shown listing the associated providers.
- b. Select the correct provider by placing an “x” in front of the provider name. Choose the one with the correct provider type as there could be more than one type of provider listed. The provider’s status must show “1 - active”.
- c. Use the transmit key to return to the service agreement line item.
- d. Use the PF9 key again to edit the line item.

If you need to select a different associated provider number, you must retype the provider number in the line item field in order to display the PPOP screen again to make another choice as explained above.

#### **VI. Infopac Reports**

Beginning in June 2008, prior authorization reports generated from screening documents, service agreements, and authorization requests will show the NPI and UMPI provider numbers.

#### **VII. Claim Submissions**

All claims, including waiver, home care, and Alternative Care claims must contain the NPI or UMPI provider numbers. The numbers will be shown on the service agreement letters. When an associated provider under a consolidated NPI is used on the service agreement line

item, enter the address of the associated provider on the fourth claim screen, CHF4 *exactly* as it appears on the PPOP screen to avoid denial edits.

Contact the MHCP Provider Call Center for assistance with fee-for-service [Minnesota Health Care Programs](#) coverage policies and billing procedures at (651) 431-2700 or 1-800-366-5411, or fax (651) 431-7425.

#### **VIII. Special Needs**

This information is available in other forms to persons with disabilities by calling (651) 431-2500, or contact us through the Minnesota Relay Service at 1 (800) 627-3529 (TTY) or 1 (877) 627-3848 (speech-to-speech relay service).