



State of California—Health and Human Services Agency  
Department of Health Care Services



ARNOLD SCHWARZENEGGER  
*Governor*

December 14, 2007

CHDP Provider Information Notice No.:07-18

TO: ALL CHILD HEALTH AND DISABILITY PREVENTION (CHDP)  
PROGRAM PROVIDERS AND MEDI-CAL MANAGED CARE  
PLANS

SUBJECT: NATIONAL PROVIDER IDENTIFIER (NPI) UPDATE

The purpose of this Provider Information Notice (PIN) is to provide you with a copy of a recent CHDP provider bulletin informing providers of NPI implementation on December 17, 2007. Please read the bulletin carefully as NPI implementation will result in billing policy changes when the NPI is used for claiming.

Your continuing participation in the CHDP Program is greatly appreciated. If you have any questions about the enclosed bulletin or other CHDP issues, please contact your local CHDP program office.

**Original Signed by Marian Dalsey, M.D., M.P.H.**

Marian Dalsey, M.D., M.P.H., Chief  
Children's Medical Services Branch

Enclosure

# UPDATED INFORMATION

CHDP Bulletin

December 2007

## NPI Update: CHDP Claim Submission Requirements

Effective December 17, 2007, CHDP providers have a choice to continue using their current Medi-Cal/CHDP-only (legacy) provider number or begin using their National Provider Identifier (NPI). Providers who are not ready to transition to using the NPI may continue to submit claims using their legacy provider number until further notice.

**Note:** When a claim is submitted with an NPI the associated legacy provider number(s) will be end-dated. Use of a legacy provider number following NPI claim submission will result in claim denials for subsequent dates of service.

### Billing Policy Changes

Providers submitting claims with an NPI will be required to bill using the latest version of the Confidential Screening/Billing Report (PM 160) claim form (Version 8). With this version, providers are required to include the appropriate Place of Service code and service location (name, street address, city, state and nine-digit mailing ZIP code where the service was provided). Providers should refer to the *Confidential Screening/Billing Report (PM 160) Claim Form: Completion Instructions* section of the CHDP provider manual for additional information about these fields. Claims submitted using an NPI without the appropriate Place of Service code and service location may result in denial.

Providers who continue to bill using their legacy provider number may use either the PM 160 **Version 7** or **Version 8**, and must continue to submit in accordance with existing CHDP billing policy. Current claims processing edits and audits will not be affected.

### CHDP Computer Media Claim (CMC) PM 160

Effective December 17, 2007, all electronic CHDP CMC PM 160 submissions must be in the new NPI compliant format. This new NPI compliant format must be used even if the legacy provider number is submitted.

Providers using an NPI for CMC PM 160 submissions will be required to include the appropriate Place of Service code and a service location (name, street address, city, state and nine-digit mailing ZIP code where the service was provided). CMC claims submitted with an NPI but without the appropriate Place of Service code and service location may result in denial.

### CHDP Appeal and Tracer

Providers who wish to appeal or submit a tracer must use the provider number originally submitted on the claim being appealed or traced.

### Accessing CHDP Applications

After the initial use of the NPI for claims submission, the NPI will become the provider's "key" for accessing CHDP applications, including Transactions Services on the Medi-Cal Web site and the Provider Telecommunications Network (PTN).

*Please see NPI Update: CHDP, page 2*

**NPI Update: CHDP** *(continued)***Registration**

All covered health care providers must obtain an NPI, as well as register or share their NPI(s) with payers and providers alike. Even providers who do not bill for services need to disclose their NPIs to those providers who do bill (for example, physicians who order lab tests or refer patients for diagnostic testing must be identified on the lab's or testing facility's claims). Providers who plan to retire before the May 23, 2008 NPI compliance date, but have claims that will not be submitted until after the compliance date, still need an NPI. Without an NPI, payment on those claims may be delayed or denied.

Only providers defined by the HIPAA final rule and CHDP policy as "atypical" will continue to use their legacy provider number. For the CHDP program, an "atypical" provider is defined as a Medi-Cal Managed Care Plan at this time. These providers will continue to use their three-digit health plan code when submitting an Information-only PM 160.

A significant number of providers have not registered their NPI(s) with CHDP. Provider claim processing and payment is at risk if registration is not completed immediately. The deadline to register NPIs with CHDP has been extended to **December 14, 2007** to facilitate this effort. Providers who are already registered but need to update any information may do so using the NPI Collection (NPIC) tool only through December 14, 2007. Effective December 15, 2007, providers must submit all information updates to their registered NPI to the CHDP program.

**Subpart Reminders**

Providers who are replacing multiple CHDP provider numbers with one NPI are reminded that the "pay-to" address, EFT account and PIN of the first CHDP number entered during the registration process will, by default, transfer to the new single NPI record. This registration choice also consolidates RADs and 1099 tax forms under the one NPI record. Providers should carefully consider if their business requirements are met using a consolidated model.

**Questions About NPI Registration and Updates**

For questions regarding NPI registration or updating registered NPI information, providers may contact the Medi-Cal Telephone Service Center (TSC) by calling 1-800-541-5555 and selecting language preference (option 11 for English; option 12 for Spanish), option 16 from the main menu, then option 18 from the submenu. For all other questions, providers may call TSC and select the appropriate options.