Clinical Social Work PRACTICEUPDATE

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THE NATIONAL PROVIDER IDENTIFIER AND THE CLINICAL SOCIAL WORKER

The *Federal Register*, issued on January 23, 2004, released the final rule on the Health Insurance Portability and Accountability Act's (HIPAA'S) Standard Unique Health Identifiers for clinical social workers (CSWs) and other health care providers, and announced the adoption of the National Provider Identifier (NPI) as the standard to be used in filing and processing health care claims.

A health care provider is defined in section 1861 of the Act, U.S.C. 1395x(u) as a provider of medical or health services as defined in section 1861(s) of the Act, 42 U.S.C. 1395x(s), and any other person or organization who furnishes bills or is paid for health care in the normal course of business.

Clinical social workers who are private practitioners, meet the "health care provider" definition, transmit health information electronically or use business associations to transmit information electronically on their behalf must comply with HIPAA regulations and obtain NPIs. CSWs who do not utilize electronic standards, and who file paper claims, are also eligible to apply for NPIs, and are encouraged to obtain them.

CATEGORIES OF NPI

An NPI is a 10-digit numeric identifier, with the tenth position being an ISO standard check digit, allowing for 200 million unique numbers. These will uniquely identify and numerate CSWs on the national level.

There are two categories:

- Entity Type Code l is issued to individuals, such as clinical social workers, physicians, nurses, and psychologists.
- Entity Type Code 2 is issued to health care providers that are organizations, including hospitals, home health agencies, and group practices.

GENERAL INFORMATION

The U.S. Department of Health and Human Services (HHS) will exercise responsibility for oversight and management of NPIs. A federally funded National Provider Service is being developed by the Centers for Medicare and Medicaid Services (CMS) and will store identifying and administrative information about clinical social workers. The data base will not contain intelligence information.

The service will also assign the NPI using a different application process than health plans use to enroll providers. It is expected that clinical social workers will need to supply less information to receive NPIs than is typically required by health plans when they apply to become providers.

APPLICATION PROCESS

CSWs may submit paper or electronic applications for NPIs to Health and Human Services, National Provider Services. The application is expected to request information such as name, mailing address, one practice address (physical location), license number, birth date, and gender. Location codes will be not be necessary, since only one location address will be necessary per health provider.

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The National Provider Services will:

- Check data for consistency;
- Standardize addresses;
- Validate social security numbers, if provided; and
- Validate dates of birth, only if social security numbers are validated. If social security numbers are not provided, applications may be delayed, and additional information may be requested to establish uniqueness.

There is no fee required for CSWs to be assigned NPIs or to update NPS data. NPIs and updates retained by HHS will be maintained indefinitely to verify signatures. Medicare providers may not have to apply for NPIs, as their Medicare provider numbers may be used instead.

Upon application, CSWs will receive permanent identifiers. When CSWs close their private practices, their NPIs will be deactivated. If a practice is later reactivated, the previous NPI will be reactivated. If a CSW is sanctioned or barred from one or more health plans, his or her NPI may not be activated. Any changes on the provider application form must be submitted within 30 days.

EFFECTIVE DATE

Clinical social workers may begin applying for NPIs on May 23, 2005. CMS is expected to release information about the application process in 2005. Compliance date is May 23, 2007. All clinical social workers who meet the definition of health care provider are encouraged to apply for a NPI.

BENEFITS

After the compliance date, clinical social workers will no longer have to use and keep track of various identifiers with different plans when conducting standard transactions. Some disruption of claims processes and delayed payments may occur as health plans modify their systems to use the NPI, but there will also be long-term benefits. Overall, the NPI will:

- Simplify health care providers billing systems and processes, and reduce administrative expenses;
- Facilitate and simplify coordination of benefits; and
- Produce faster, more accurate payments.

Additional information about the standard unique health identifiers is available on the Centers for Medicare and Medicaid Services Web site, located at: www.cms.hhs.gov.

RESOURCES

Federal Register. January 23, 2004. Vol. 69, No.15. Gov. Printing Office. Washington Office.

Unique identifiers help facilitate claim processing and prompt payment. Standards for unique identifiers for health plans and claims attachment transactions will be developed in the future.