


STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES
Med-QUEST Division
Health Coverage Management Branch
P. O. Box 700190
Kapolei, Hawaii 96709-0190

May 8, 2006

MEMORANDUM

ACS M06-06

TO: Fee-For-Service Providers

FROM: Angie Payne, Acting Med-QUEST Division Administrator 

SUBJECT: **NATIONAL PROVIDER IDENTIFIER INFORMATION**

As you are aware the Health Insurance Portability and Accountability Act (HIPAA) of 1996 mandated the adoption of a National Provider Identifier (NPI) by May 23, 2007. Providers were able to begin applying for their NPI from May 23, 2005.

The current goal for the Medicaid Fee-For-Service (FFS) program is to allow for **optional** NPI submissions on claims and other affected transactions beginning January 1, 2007. The Med-QUEST Division (MQD) will **require** the use of the NPI on claim submissions (both paper and electronic) **effective May 23, 2007** for those providers required to obtain a NPI.

There are several types of providers that are not eligible to secure a NPI even though they are providing services to the Medicaid population. Attached to this notice is a list of provider types and an indicator signifying whether the provider type will be required to submit a claim using an NPI when conducting business with MQD through its Fiscal Agent - Affiliated Computer Services (ACS). Any claim submitted by a provider who is required to have a NPI with an ID number other than the NPI on file at MQD after May 23, 2007, will be denied.

In efforts to transition to the NPI numbers and to allow MQD time to input all the NPIs into the system, we are requesting that providers begin submitting their NPI information to MQD at this time. In submitting your NPI to MQD, please attach a copy of the confirmation document issued by the NPI Enumerator. You may submit your information to:

Department of Human Services
Med-QUEST Division-HCMB
Provider Relations
P.O. Box 700190
Kapolei, HI 96709-0190

The claims system is not currently prepared to accept claims with the NPI so **do not submit claims with your NPI until instructed by MQD.**

Further information on the National Plan and Provider Enumerator System (NPPES) and information on how to obtain a NPI can be found at the Centers for Medicare and Medicaid Services (CMS) website at: <https://nppes.cms.hhs.gov>.

Should you have any questions regarding this memorandum, please contact Mr. Gary Ojiri, Acting Contract Supervisor in the Health Coverage Management Branch of the Med-QUEST Division at 692-8161.

Attachment

HPMMIS FEE-FOR-SERVICE PROVIDER TYPES REQUIRING A NATIONAL PROVIDER IDENTIFIER (NPI)

HPMMIS Provider Type Code	Description	NPI Required NA=Not Applicable Y= Yes
A7	Respite	NA
C2	Federally Qualified Health Center (FQHC)	Y
D1	Dentist- Endodontist	Y
D2	Dentist-Pedodontist	Y
D3	Dentist-Oral Surgeon	Y
D4	Clinic-Dental Services	Y
H1	DD/MR	NA
01	Group Payment ID	NA
02	Hospital	Y
03	Pharmacy	Y
04	Laboratory	Y
05	Clinic	Y
06	Emergency Transportation	Y
07	Dentist	Y
08	MD-Physician	Y
10	Podiatrist (EPSDT Services Only)	Y
11	Psychologist	Y
13	Occupational Therapist	Y
14	Physical Therapist	Y
15	Speech/Hearing Therapist	Y
16	Chiropractor	Y
17	Naturopath	Y
18	Physicians Assistant	Y
19	Registered Nurse Practitioner	Y
22	Nursing Home	Y
23	Home Health Agency	Y
24	Personal Care Attendant	NA
25	Group Home (Developmentally Disabled)	NA
27	Adult Day Health	NA
28	Non-emergency Transportation Providers	NA
29	Community/Rural Health Center	Y
30	DME Supplier	Y
31	DO-Physician Osteopath	Y
33	Rehabilitation Center	Y
34	Case Management Services	NA
35	Hospice	Y
37	Homemaker	NA
38	<i>Developmentally Disabled Day Care</i>	NA

HPMMIS Provider Type Code	Description	NPI Required NA=Not Applicable Y= Yes
39	Habilitation Provider	NA
40	Attendant Care	NA
41	Dialysis Clinic	Y
43	Ambulatory Surgical Center	Y
46	Nurse (Private RN/LPN)	Y
49	<i>Assisted Living Center</i>	NA
50	Adult Foster Care	NA
51	Behavioral Health Counselor	NA
52	Mental Health Clinic	NA
57	Residential Trtment Facility	NA
59	Dental Lab	Y
62	Audiologist	Y
63	Drug & Alcohol Rehab	Y
64	<i>Detox Center</i>	Y
69	Optometrist	Y
70	Home Delivered Meals	NA
71	Psychiatric Hospital	Y
73	Out-of-State Enc or 1 Time FFS Provider	
75	MHS Social Worker	NA
77	<i>Mental Health Rehabilitation</i>	Y
78	Mental Health Residential Trtment Ctr	Y
79	Vision Center	Y
80	<i>DHS MHS Provider</i>	NA
85	Licensed Clinical Social Worker (LCSW)	Y
86	Licensed Marriage & Family Therapist (LMFT)	Y
90	QMB Only Provider	NA
97	Air Transportation	NA
98	Case Manager	Y
99	EVS/Non-Service Provider	NA