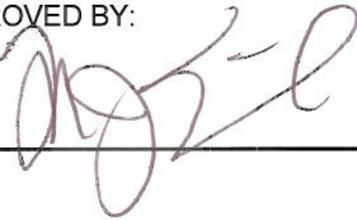




DEPARTMENT OF MENTAL HEALTH POLICY/PROCEDURE

SUBJECT NATIONAL PROVIDER IDENTIFIER (NPI) REQUIREMENTS	POLICY NO. 112.21	EFFECTIVE DATE 09/2008	PAGE 1 of 10
APPROVED BY:  Director	SUPERSEDES N/A	ORIGINAL ISSUE DATE 09/2008	DISTRIBUTION LEVEL(S) 2

PURPOSE

- 1.1 To ensure that all directly operated programs, non-governmental agencies (NGAs), organizational providers, and individual rendering providers, working for or contracted with the Los Angeles County – Department of Mental Health (DMH) have a National Provider Identifier (NPI) before March 1, 2008, for Medicare and before May 23, 2008 for Medi-Cal and other programs so that eligibility for reimbursement is continued.
- 1.2 To establish guidelines for the submission of verifiable NPI information from DMH employees, other DMH work force members, and contract entities, needed to support continued billing under Health Insurance Portability and Accountability Act (HIPAA) requirements.
- 1.3 To establish procedures for obtaining NPIs for new DMH staff (those hired after May 23, 2008).
- 1.4 To establish procedures for obtaining NPIs for new directly operated clinics/programs.
- 1.5 To establish procedures for obtaining NPIs for new contracted operated clinics and programs.
- 1.6 To establish procedures for obtaining NPIs for contract employees hired after May 23, 2008.
- 1.7 To provide general information about NPIs. See Attachment I.
- 1.8 To ensure there is proper internal control over the NPI data submitted to the Integrated System (IS) for active and inactive (terminated) employees.



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POLICY

- 2.1 DMH will comply with HIPAA requirements, as established in the Code of Federal Regulations (CFR) 45, Part 162, to establish NPIs for the following:
 - 2.1.1 Each entity (DMH directly operated program and NGA) must have an NPI as a unique identifier in the National Plan and Provider Enumerator System (NPPES). This is referred to as a Type 2 NPI on the NPPES. The State requires one NPI for each provider number without satellites. Locations identified as satellites must have their own NPI numbers.
 - 2.1.2 Each rendering provider delivering direct billable services must have an NPI as a unique identifier in the NPPES. This is referred to as a Type 1 NPI on the NPPES.
- 2.2 All claims submitted to Federally funded health care and other programs must include the entities' and the rendering providers' NPIs effective March 1, 2008 for Medicare and May 23, 2008 for Medi-Cal and other programs.
- 2.3 System verification required for implementation by the Medicare Intermediary and the State, utilizing NPIs must be completed before March 1, 2008 for Medicare and before May 23, 2008 for Medi-Cal and other providers, to ensure compliant billing transactions can be performed as of the Federal implementation dates.
- 2.4 DMH employees and DMH contractors must provide written proof of their respective individual (Type 1) and organizational (Type 2) NPIs no later than May 13, 2008. Specifically, the DMH employees will submit a copy of their NPI notification. Contractors will only submit a copy of the NPI notification for organizational NPIs (type 2 NPIs). It will be the responsibility of the contractors to maintain copies of their employees' individual NPI notifications for audit purposes.
- 2.5 NPIs are considered to be a condition of employment. A rendering provider or DMH employee who provides billable services must be eligible to bill Federal



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Programs (also see Policy 112.4). Consequences for non-compliance with applying for, obtaining and providing written proof of an NPI may include, but are not limited to, the following:

- 2.5.1 DMH employees may be subject to progressive disciplinary actions that may lead to termination. (See Policy 605.1)
- 2.5.2 Fee-For-Service (FFS) Network Providers may have their contracts terminated for cause as they will not be eligible to bill for services without an NPI.
- 2.5.3 Legal Entity Providers who do not have or are missing individual NPIs will not be able to submit claims to Federally funded health care and other programs. Consequently, their respective contract(s) may be subject to termination.

DEFINITIONS

- 3.1 Employees of DMH, for the purpose of this policy, refer to any full-time or part-time, temporary or permanent employee, i.e., any rendering provider (clinician) who provides clinical or direct billable services to clients. Each requires an NPI.
- 3.2 Other DMH workforce members refer to residents, interns, students, volunteers, and locum tenens.
- 3.3 The term "contractor" refers to a person or entity that is party to a written agreement with the County of Los Angeles to provide goods or services to DMH including, but not limited to, purchase orders, memoranda of understanding and Board approved contracts.
- 3.4 NPI: A number that will serve as a unique identifier at the national level for entities and individuals and is a HIPAA requirement (CFR 45, Part 162), effective January 23, 2005. Eventually, the NPI will replace all other assigned provider numbers.
- 3.5 NPPES is a national database accessible through the internet used for purposes of applying for an NPI. It is the NPPES database by which health care provider organizations and individuals become uniquely identified, formerly known as the



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National Provider System. The NPPES assigns an identifier only and is NOT an enrollment process with any Medicare contractor, Medi-Cal contractor, or third-party payer.

- 3.6 NPI Notification is the e-mail sent that contains the NPI number for either an individual or entity. The date of this notification is considered by DMH to be the effective date of the NPI.

PROCEDURE

4.1 DMH Employees – Employees hired prior to May 23, 2008

- 4.1.1 Each DMH employee or other workforce member who is a rendering provider (clinician) or provides direct billable services is required to have a Type 1, NPI. As of April 16, 2008, this includes employees who claim only Community Outreach Services.
- 4.1.2 See Attachment II for NPI application instructions.
- 4.1.3 DMH employees will provide a copy of his/her NPI notification to the Compliance Program Office.
- 4.1.4 After November 15, 2006, new hires may submit his/her NPI information to Chief Information Office Bureau (CIOB) on a Rendering Provider Form. This form can be found at the following website:

http://dmh.lacounty.info/hipaa/cp_ISForms.htm

NOTE: The NPPES does not recognize an effective date for the NPI. The date to use in completing the Rendering Provider Form is the date of the NPI notification. A copy of the NPI Notification should accompany the Rendering Provider Form.

- 4.1.5 DMH employees are responsible for updating his/her NPI data submitted to NPPES within 30 calendar days of any change(s). Effective January 23, 2005, updating NPI data is a requirement of HIPAA. See requirement (CFR 45, Part 162).
- 4.1.6 Failure to provide an NPI within 30 days of employment will be cause for rejection of a request for employment and/or will be cause for termination of employment with DMH.



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4.2 New Employees (hired after May 23, 2008)

- 4.2.1 It is the responsibility of the hiring manager to identify employees who will be required to have an NPI.
- 4.2.2 If the employee requires an NPI, the hiring manager will send the prospective employee a letter (Attachment III) indicating that the employee will need to submit proof of their NPI within 30 days of his/her hire date to Human Resources. Enclosed with the letter will be a copy of the rendering provider form and instructions for completing the NPI. (Attachments IV and V).
- 4.2.3 A copy of the letter will be forwarded to Human Resources. This copy will be used to determine who is required to provide an NPI. Human Resources will be responsible for ensuring that the employee has an NPI within 30 days of his/her hire date, thus ensuring timely claiming to the Federal and State programs.
- 4.2.4 Upon receipt of the letter requiring an NPI, the new hire will:
 - 4.2.4.1 Apply for an NPI if necessary.
 - 4.2.4.2 If the new hire has an NPI, gather documentation of proof of his/her NPI.
 - 4.2.4.3 Complete the Rendering Provider form. The manager will be responsible for advising the employee of the various codes to be included on the form, as well as ensuring the accuracy of these codes.
- 4.2.5 On the first day of employment, the new hire should provide a copy of his/her NPI documentation and the rendering provider form to his/her supervisor. The supervisor will review the rendering provider form ensuring that it is completed properly, that the NPI on the rendering provider form matches the NPI confirmation. When the supervisor is assured that the form is complete and accurate, the supervisor will sign the form. The rendering provider form and NPI documentation will be forwarded to Human Resources.
- 4.2.6 Upon receipt of the NPI, Human Resources will forward to CIOB the rendering provider form and will place the NPI confirmation in the employee's personnel file.



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Alternate procedure in the event that the rendering provider form is automated; accordingly, this alternate procedure is subject to change. Instructions for the use of the automated rendering provider form will take precedence over these procedures.

The manager will follow the instructions for use of the automated rendering provider form. The NPI confirmation will be forwarded to Human Resources. Human Resources will use the NPI confirmation to verify the NPI has been accurately entered on the IS. Human Resources will file the NPI confirmation in the employee's personnel's file.

- 4.2.7 When an employee terminates services with DMH, managers/supervisors are required to report the termination to CIOB by completing a Rendering Provider form.
- 4.2.8 When an employee transfers to a different clinic, managers/supervisors are required to report the transfer by completing a Rendering Provider form terminating the employee from the clinic from which the employee is departing. Managers/supervisors at the new clinic are required to complete a new Rendering Provider form so that services may be claimed for the new site.

4.3 DMH Directly Operated Clinics and Programs

- 4.3.1 The Chief of Mental Health Programs Evaluation, Compliance Program Office (CPO), or designee, will apply for and obtain entity NPIs for each directly operated clinic no later than October 1, 2006. The State requires an NPI for each provider number.
- 4.3.2 The Chief of Mental Health Programs Evaluation will be responsible for maintaining NPI user IDs and Passwords, as well as a copy of the application and NPI confirmation.
- 4.3.3 After October 1, 2006, as new directly operated clinics and/or programs are added, applications for NPIs will be submitted by the Chief of Mental Health Programs Evaluation (or designee) upon receipt of a Provider File Adjustment Request.
- 4.3.4 It will be the responsibility of Program Managers to ensure that a copy of Provider File Adjustment Requests (PFARs) for directly operated clinics/programs be submitted to the CPO within 15 calendar days of a



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change of clinic/program information. Using the PFAR, the Chief of Mental Health Programs Evaluation (or designee) will ensure the NPPES information is updated within 30 calendar days from the change.

4.4 FFS Network Providers

- 4.4.1 FFS Providers who are individuals will obtain a Type 1 NPI.
- 4.4.2 FFS Providers who are operating as an organizational provider will obtain a Type 2 NPI.
- 4.4.3 See Attachment II for NPI application instructions.
- 4.4.4 FFS Providers are responsible for retaining a copy of their NPI confirmation.
- 4.4.5 FFS Providers are responsible for updating their and/or entity NPI data submitted to NPPES within 30 calendar days of any change(s) occurring. Updating NPI data is a requirement of HIPAA requirement (CFR 45, Part 162), effective January 23, 2005.

4.5 Legal Entity Contractors

- 4.5.1 As of May 23, 2008, all claims will be submitted to the State with organizational and rendering provider NPIs. Each mental health contractor, regardless of program (SD/MC, FFS, COS, etc.), will obtain a Type 2 NPI. The State requires one NPI for each provider number. (Locations identified as satellites each need their own NPI number.)
- 4.5.2 In the event of a new rendering provider, the NPI shall be submitted to the Department using a rendering provider form. NOTE: The NPPES does not recognize an effective date for the NPI. The date to use in completing the Rendering Provider Form is the date of the NPI notification. (See Attachment II for NPI application instructions).
- 4.5.3 Legal Entity Contractors will retain a copy of their employee NPI (Type 1) and organizational (Type 2) NPI confirmation for audit purposes.
- 4.5.4 Legal Entity Contractors are responsible for terminating rendering providers that have been active on the system but are no longer claiming or have terminated employment with the legal entity through the use of a Rendering Provider Form.



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4.5.5 Legal Entity Contractors are responsible for updating entity NPI data submitted to NPPES within 30 calendar days of any change(s) occurring. Updating NPI data is a requirement of HIPAA requirement (CFR 45, Part 162), effective January 23, 2005.

4.6 Legal Entity Contract Employees

4.6.1 All DMH contractor entities shall direct employees who are rendering providers (clinicians) or providers of direct billable services to apply for and obtain an individual NPI.

4.6.2 See Attachment II for NPI application instructions.

4.6.3 Legal Entity Contractors will retain a copy of the employee NPI notification for audit purposes.

4.6.4 Legal Entities will submit rendering provider NPI information to CIOB on a Rendering Provider Form (rev. 3/14). This form can be found at the following web site:

http://dmh.lacounty.info/hipaa/cp_ISForms.htm

NOTE: The NPPES does not recognize an effective date for the NPI. The date to use in completing the Rendering Provider Form is the date of the NPI notification. Copies of NPI notifications for contractor employees should be retained by contractors for audit purposes.

4.6.5 Legal Entity rendering providers are responsible for updating their NPI data submitted to NPPES within 30 calendar days of any change(s) occurring. Updating NPI data is a requirement of HIPAA requirement (CFR 45, Part 162), effective January 23, 2005.

4.6.6 Legal Entities are responsible for submitting a rendering provider form terminating the rendering provider NPI on the IS when the rendering provider terminates employment with the legal entity.

4.7 Chief Information Office Bureau (CIOB)

4.7.1 CIOB will ensure that the IS programmatically validates that the supplied NPI numbers meet federal requirements for field length (10 numeric digits) and comply with the formula for the check digit algorithm.



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- 4.7.2 System verification required for implementation by the Medicare Intermediary and the State, utilizing NPIs must be completed before the March 1, 2008 for Medicare and before May 23, 2008 for Medi-Cal and other providers, to ensure compliant billing transactions can be performed as of the Federal implementation dates.
- 4.7.3 CIOB will operate the IS claiming system in compliance with the HIPAA requirement to submit all electronic billing data in a compliant manner and will include NPI data effective March 1, 2008 for Medicare, and May 23, 2008 for Medi-Cal and other programs.

AUTHORITY

Code of Federal Regulations, Title 45, Part 162, Standard Unique Health Identifier for Health Care Providers (Final Rule), January 23, 2005

REFERENCES

Department of Mental Health Compliance Policies 112.4 and 112.5 require DMH employees and contractors, respectively, to be eligible to provide goods and services to federally funded health care and other programs. These policies mandate that rendering providers and entities not be excluded, debarred or otherwise prohibited from providing services and being reimbursed by Federal funds. This policy specifies a new, mandatory eligibility criterion for billing Federal funds, i.e., rendering providers and entities must have an NPI. Federally funding health care and other programs will not process reimbursement claims after May 23, 2008 without NPI information.

ATTACHMENTS

Attachment I	General Information About NPIs
Attachment II	Instructions for Applying for an NPI
Attachment III	Letter of Instruction to New Hire re: NPI
Attachment IV	Rendering Provider Form
Attachment V	Instructions for Completing the Rendering Provider Form



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REVIEW DATE

This policy shall be reviewed five (5) years from the date of the original issuance.

RESPONSIBLE PARTY

Compliance Officer
Chief Information Office Bureau
Human Resources

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
COMPLIANCE PROGRAM OFFICE
GENERAL INFORMATION ABOUT THE NPI**

The NPI

The NPI is a unique identifier for health care providers for use in the health care system. Congress included provisions to address the need for a standard unique health identifier for health care providers and other health care system needs in the Administrative Simplification provisions of HIPAA. The final rule concerning the NPI was published in the January 23, 2004, Federal Register, and is now part of Title 45, Code of Federal Regulation, Part 162.

The NPI is a 10-position numeric identifier. The NPI number is assigned randomly, and, unlike a Medicare provider number, no one looking at the number can gather any information about the individual to whom it is assigned.

The NPI belongs to the individual care giver and is not tied to a particular practice location or employer. The NPI is assigned for life and is deactivated only under the most extreme circumstances:

- Identity theft where the first NPI has been fraudulently used;
- The provider's death; and
- The provider's retirement.

All health care providers are eligible to be assigned an NPI. Health care providers who submit claims electronically or provide the services which will be billed electronically (covered entities for HIPAA purposes) must have an NPI. The Department of Mental Health is a covered entity and needs to ensure that all health care providers for which it processes claims comply with the NPI Final Rule.

Issuance of an NPI will not eliminate the need to be separately credentialed with each health plan (i.e., Medicare, Medi-Cal, Blue Cross Plans, etc.) before submitting claims to such organizations.

The required and permitted uses of NPIs

The required and permitted uses of NPIs are:

- The NPI is used to identify the provider on certain types of health care related transactions, such as claims for payment or encounter data submitted to a managed care organization. The NPI is used on all such transactions,

regardless of whether the recipient of the data is a government payor, a private insurer, or an employer sponsored health plan.

- The provider is required to disclose its NPI, when requested, to any entity that needs the NPI to identify that provider in a standard transaction.
- The NPI is used to communicate to the National Plan and Provider Enumeration System (NPPES) regarding any changes in its required data elements in the NPPES.

The National Plan and Provider Enumeration System (NPPES)

The NPI application process is the means by which health care provider organizations and individuals become uniquely identified in a national database known as the NPPES, formerly known as the National Provider System. The NPPES assigns an identifier only and is NOT an enrollment process with any Medicare contractor, Medi-Cal contractor, or third-party payer. NPPES is not a claims payment processing system and that is why claims processing information is not captured.

For each NPI application, the applicant will be asked to establish a password to use in accessing the system. The NPPES is not a read only system. People should keep their password secured for their use only, to prevent any unauthorized changes in NPPES data.

Information that is to be captured by NPPES includes:

- The mailing address and one physical location/address for each health care provider.
- An individual, health care provider's license number (if appropriate), the State which issued the license, and the credential designation(s).
- Numbers used to report income taxes.
- Health care taxonomy codes [i.e., codes which disclose the type of health care provider the individual is].

A provider is required to communicate to NPPES any changes in required data elements in the NPPES within thirty days of the change. The provider is liable for civil monetary fines on a per violation basis for failure to comply with the requirement to communicate changes to NPPES within thirty days of the change. Changes in this information do not, however, result in the issuance of a new NPI.

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
COMPLIANCE PROGRAM OFFICE
GENERAL INFORMATION ABOUT THE NPI**

The Application Process

An NPI can be obtained by submitting a web-based application. When a web-based application is filed, the Enumerator's web-based application processing time, including response, is approximately five (5) to twenty (20) business days. The advantage of the web-based application is that there is real-time checking at the end of the application process for gap or missing information which prevents submission of an incomplete application. Without complete information, the web-based application cannot be filed/submitted.

For those who have not yet applied, there is a Centers for Medicare and Medicaid Services application training Viewlet at the following web site:

<http://www.cms.hhs.gov/apps/npi/npiviewlet.asp>

The NPI application web site is:

<https://nppes.cms.hhs.gov/NPPES/Welcome.do>

The estimated time required to complete a web-based application is approximately 20 minutes.

When completing the application, it is important to include all taxonomy codes related to the services you provide.

We recommend you keep a copy of your application and all communication with NPPES. To ensure you have a copy of your application, you must print each screen either as you proceed or before your final submission (attestation of the accuracy of information provider and penalties for fraud). The copy may be needed for clarification purposes or in the event of a compliance audit. Also, print a copy of the page acknowledging your application and providing the tracking number of your application. You will need the tracking number in the event you have to follow-up on your application.

COUNTY OF LOS ANGELES

MARVIN J. SOUTHARD, D.S.W.

Director

ROBIN KAY, Ph.D.

Acting Chief Deputy Director

RODERICK SHANER, M.D.

Medical Director

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DEPARTMENT OF MENTAL HEALTH<http://dmh.lacounty.gov>

550 SOUTH VERMONT AVENUE, LOS ANGELES, CALIFORNIA 90020

Reply To: (213) 639-6391

Fax: (213) 351-2491

Date

Dear _____

New Hire: Mental Health Physician/ Mental Health Non-Physician Provider:

In compliance with the Health Insurance Portability and Accountability Act (HIPAA), the Department of Mental Health (DMH) is requesting you apply for a National Provider Identifier (NPI) in the event that you do not have an NPI. By applying for an NPI and/or providing your NPI to DMH, you are ensuring DMH is able to submit timely HIPAA compliant claims for purposes of obtaining reimbursement for services you provide as an employee of the Department.

This letter explains what the NPI is, what your responsibilities are in regards to the NPI, and how to apply for an NPI.

Please provide DMH with your NPI within thirty (30) days, or less, from your hire date/continuing service date. To provide the Department your NPI, complete the enclosed Rendering Provider Form to the best of your ability. On your first day of employment with DMH provide the completed Rendering Provider Form, along with a copy of your NPI confirmation letter to: _____. The rendering provider form will be reviewed to ensure it is complete and accurate.

NPI

NPI is a unique health identifier for health care providers for use in the health care system, and is a requirement under HIPAA. Congress included provisions to address the need for a standard unique health identifier for health care providers and other health care system needs in the Administrative Simplification provisions of HIPAA. The final rule concerning the NPI was published in the January 23, 2004, Federal Register, 45 CFR, Part 162 .

The NPI is fully portable within the application of the HIPAA legislation. The NPI is assigned for life and is deactivated only under the most extreme circumstances:

- Identity theft where the first NPI has been fraudulently used;
- The provider's death; and
- The provider's retirement.

"To Enrich Lives Through Effective And Caring Service"

All health care providers are eligible to be assigned an NPI. Health care providers that are covered entities, or are employed by a covered entity, are required to apply for and obtain an NPI. A Covered Entity is a health plan, health care clearinghouse, or health care provider, who transmits any health information in electronic form in connection with a transaction. DMH is a covered provider and is required to ensure that all health care providers under its employee comply with the NPI Final Rule.

The NPI is a 10-position numeric identifier, with a check digit in the 10th position, and no intelligence about the health care provider is in the number. No intelligence in the number means that by looking at the number, NPI, no one can tell:

- the location where the provider is practicing;
- the group or organization in which the provider is practicing;
- the provider's taxonomy code;
- if sanction data exists, i.e., there are not any sanction data indicators; and
- any other such information.

The NPI is a number that is assigned randomly.

Issuance of an NPI will not eliminate the need to be separately credentialed with each health plan (i.e., Medicare, Medi-Cal, Blue Cross Plans, etc.).

The required and permitted uses of NPIs

The required and permitted uses of NPIs are:

- NPI is used to identify the provider on all standard transactions that the provider conducts where required.
- The provider is required to disclose its NPI, when requested, to any entity that needs the NPI to identify that covered health care provider in a standard transaction.
- NPI is used to communicate to the National Plan and Provider Enumeration System (NPPES) any changes in its required data elements in the NPPES within thirty days (30) of the change.

NPPES

The NPI application process is the means by which health care provider organizations and individuals become uniquely identified in a national database known as the NPPES, formerly known as National Provider System. The NPPES is an enumeration process only and NOT an enrollment process with any Medicare contractor, Medi-Cal contractor

or third-party payer. NPPES is not a claims payment processing system and that is why claims processing information is not captured.

When applying for an NPI the applicant will need to establish a user ID and a password. The NPPES is not a read only system. One should keep his/her user ID and password secured for his/her use only to prevent any unauthorized changes in NPPES data.

Information that is to be captured by NPPES:

- The mailing address and one physical location address for each health care provider.
- An individual, health care provider's license number (if appropriate), the State which issued the license (multiple occurrences of both data element(s), and the credential designation(s).
- Numbers used to report income taxes will be useful in uniquely identifying health care providers.
- Health care taxonomy codes will also be useful in uniquely identifying health care providers.

A provider is required to communicate to NPPES any changes in its required data elements in the NPPES within thirty (30) days of the change. The provider is liable for civil monetary fines on a per violation basis for failure to comply with the requirement to communicate changes to NPPES within thirty (30) days of the change.

Information changes that do not require the issuance of a new NPI include:

- Name
- Address
- Tax identification numbers
- Healthcare provider taxonomy classification;
- State of licensure
- State license number.

The Application Process

DMH encourages the use of the web application. The Enumerator's web application processing time, including response is approximately five (5) days to twenty (20) business days. The advantage of web-based application is that there is real-time gap or missing information checking at the end of the application process on line. Without complete information, the web application cannot be filed/submitted.

NPI
Date
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Web applications may be obtained through the following address:

<https://nppes.cms.hhs.gov/NPPES/Welcome.do>

The estimated time required to complete a web application is approximately 20 minutes.

When completing the application, it is important to include all taxonomy codes related to the services you provide. The web site above provides a list of taxonomy codes. Should you have questions or need assistance in identifying the taxonomy codes to use, please contact Judith Miller (213) 639-6391.

You need to keep a copy of your application and all communication with NPPES. To ensure you have a copy of your application, you need to print each screen as you proceed or before your final submission (attestation of the accuracy of information provider and penalties for fraud). This information may be needed for clarification purposes or in the event of a compliance audit. Also, print a copy of the page acknowledging your application and the tracking number of your application. You will need the tracking number in the event you need to follow-up on your application.

You may contact Judith Miller at (213) 639-6391 should you have any questions.

Thank you in advance for your cooperation.

Sincerely,

Marvin J. Southard, D.S.W.
Director of Mental Health

MJS: jlm

Enclosures

c: Robin Kay, Ph.D.
Roderick Shaner, M.D.
Susan Moser
Robert Greenless
Judith Miller

Rendering Provider Form

Notes and Instructions

The Rendering Provider Form must be completed for all clinical staff members who are new or are not on the Integrated System. This form is also to be used for clinical staff that have terminated services from a provider location or to update information, i.e., name change, email, phone no., fax no., or expiration dates. When completing this form, please refer to the following guidelines:

- The original form must be completed in its entirety (if applicable), with the authorized manager/designee signature. Fax, photocopies and electronic forms are not acceptable.
- EXCEPTION: Prescription writing physicians/clinicians rendering provider form may be faxed for immediate processing. To initiate this procedure, the contact person must call the CIOB/Help Desk at (213) 351-1335 for fax instructions.
- All information must be current upon submission of this form.
- Be sure all fields are completed accurately and appropriately to avoid delay in the processing of a request.

REQUEST TYPE:

- This section determines the type of request the rendering provider wants to initiate.

GENERAL INFORMATION:

- This section will serve as the rendering provider's identifier.

Last Name – Please print last name.

First Name – Please print first name (Do Not Use Nicknames)

Middle Initial – (If applicable)

Sex – Please mark the appropriate gender.

Ethnicity – This code can be found in the IS Codes Manual.

Staff Code – *For county employee:* This is your 6-digit employee number. *For NGA:* This is your 7-digit staff number consisting of 3 or 4 preceding letters followed by numbers (ex: ABC1234 or ABCD123).

FFS Individual Provider Number – This is your FFS Individual provider number that is associated with the taxpayer ID for this request.

SSN – These are the last 4 digits of your social security number.

Language Code – This code(s) can be found in the IS Codes Manual. A maximum of five language codes can be listed on the form.

DMH Classcode – This is the type of organization to which your home provider belongs.

Tax Payer ID – This is the nine digit federal tax payer ID. (FFS only)

CONTACT & ASSIGNED LOCATION INFORMATION:

- This section outlines the location(s) where the rendering provider is providing the service(s).

Contact Name – This is the designated person in case there are problems with the submitted form.

Contact Phone No. – This is the phone number of the designated contact person.

Contact Email- This is the contact person's email address (Do Not use personal email address)

Contact Fax No. – This is the contact person's fax number.

DMH/NGA Prov No./Rept Unit – This is the 4-digit State provider number or 5-digit (four digit provider number + the alpha code) that is assigned to the facility where services are being provided.

FFS Group/Organization Prov No. – This is the 9-digit number associated to the tax payer ID if this form is to add the rendering provider under a FFS group or organization.

Effective Date – This is the date the rendering provider began delivering services under this provider number.

Termination Date – This is the date the rendering provider stopped delivering services under this provider number.

Locum Tenum – Check this box to indicate the rendering provider is a temporary staff **assigned to a DMH facility**.

Intern – Check this box if the rendering provider is an **Intern with DMH** assigned a unique staff code.

Name of Organization – This is the name of the facility where service(s) is provided.

Service Area – This code can be found in the IS Codes Manual.

MHSA – Check this box to indicate the Mental Health Service Act funding source. **(DMH Providers Only)**

Address, City, Zip – This is the service location's complete address, city and zip code.

TAXONOMY AND LICENSE INFORMATION:

- This section provides evidence of the rendering provider's eligibility.

Description – This is the description associated with the taxonomy code.

Taxonomy – This is the rendering provider's discipline. (If multiple disciplines use additional space provided.) The taxonomy code(s) can be found in the IS Codes Manual.

Professional License # - This is an 8-digit alphanumeric number listed on your professional license.

Effective Date & Expiration Date – These are the effective and expiration dates of your professional license.

DEA License # - This is a 9-digit alphanumeric number listed on your DEA license (if applicable).

Expiration Date – This is the date your DEA license expires.

Medicare Prov No. This is the 6-digit facility Medicare provider number associated with a rendering provider's PPIN Medicare No. (DMH only).

PPIN Medicare No. – This is the 9-digit performing physician identification number that is assigned to a rendering provider delivering services at a specific location. (DMH only)

Expiration Date – This is the date the PPIN number expires.

NPI – This is the 10-digit National Provider Identifier. This number is a unique identifier for use to identify health care providers in HIPAA standard transactions.

NPI Effective Date – This is the date the 10-digit National Provider Identifier became effective.

AUTHORIZED MANAGER NAME AND SIGNATURE:

- This is the manager/designee's name and signature on the Authorization to Sign CIOB Access Form for the above assigned location.