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Sent:	Friday, May 04, 2012 10:22 AM
То:	HRSA-PROVIDERS@LISTSERV.WA.GOV
Subject:	All:Federal Requirement for Ordering, Prescribing, and Referring Providers

Provider Notice #12-26

Dear Provider,

Effective for dates of service on and after July 1, 2012, the Medicaid Program of the Health Care Authority (the Agency) will require:

Any ordering, prescribing, or referring providers to be enrolled as participating providers with the Agency's Medicaid program; and Any claims for payment for items or services that were ordered, prescribed, or referred to contain the National Provider Identifier (NPI) of the provider who ordered or referred such items or services.

Federal Requirement for Ordering, Prescribing, and Referring Providers

The Agency is implementing these requirements in accordance with <u>42 CFR 455.410</u> Enrollment and screening of providers, which states:

State Medicaid agencies must require all ordering or referring physicians or other professionals providing services under the State plan or under a waiver of the plan to be enrolled as participating providers.

Further, <u>42 CFR 455.440</u> National Provider Identifier states:

The State Medicaid agency must require all claims for payment for items and services that were ordered or referred to contain the National Provider Identifier (NPI) of the physician or other professional who ordered or referred such items or services.

Note: Later clarification on the federal rule from the Centers for Medicare and Medicaid Services (CMS) indicated this requirement applies equally to prescribing providers. A separate provider notice will be sent to pharmacy providers detailing this requirement. For a pharmacy to be paid for any prescriptions written by prescribing providers, the prescribers must include their NPI number on the prescription form in order for the pharmacy to include this on the pharmacy-system claim.

Does this Requirement Apply to Managed Care Claims?

No. This requirement applies to fee-for-service claims only. The Agency's managed care organizations (MCOs) (e.g., Healthy Options plans) are specifically exempted from this requirement.

However, if an MCO network provider orders, refers, or prescribes for a client a service or supply that will be paid outside of their MCO (i.e., billed directly to the Agency or via fee-for-service), the ordering, prescribing, or referring provider must be enrolled in the Agency's ProviderOne system.

Does this Requirement Apply to Regional Support Network (RSN) Providers?

Yes. In order for claims to be paid for client services, items, or medications that are billed directly to the Agency (i.e., fee-forservice) RSN providers must be enrolled in the Agency's ProviderOne system. Please be sure to provide the ordering, prescribing, or referring provider's NPI number to the supplier or pharmacy so these claims can be paid.

Does this Requirement Apply to Claims where Medicaid is Not the Primary Insurer?

Yes. If additional payment is then sought from Medicaid as the secondary insurer, the NPI of the ordering, prescribing, or referring

provider must be on the claim for those services.

Note: If the client's primary insurance is Medicare, any ordering or referring provider's NPI is *not* required to be listed on Medicare crossover claims.

Does this Requirement Apply to Claims Ordered or Referred by a Resident in a Teaching Hospital?

The NPI of a resident of the hospital who orders a prescription or other services requiring an order or referral for a Medicaid client must be known in the Agency's claims processing system in order for those services to be paid for. Therefore, **one** of the following must occur:

The resident must use the NPI of their supervising physician for any ordered, prescribed, or referred services;

The hospital must enroll the resident as a performing provider under a group or hospital NPI with an active Core Provider Agreement with the Agency; or

For additional options to enroll residents, the hospital may contact the agency.

Note: If the resident is prescribing a scheduled drug, the supervising physician's NPI number must be supplied to the dispensing pharmacy in order for that drug to be paid for. Institutional NPIs will not be accepted.

How Do I Bill Using the NPI of Referring or Ordering Providers?

To be eligible for reimbursement for services, supplies, tests, etc., ordered or referred by an Agency-enrolled provider, that provider's NPI number must be listed in the following locations:

For 837P and 837I HIPAA transactions, in the appropriate loop (see the HIPAA companion guides for details). For Direct Data Entry (DDE), in the "Referring Provider Information" field or the "Attending Physician Information" field. For CMS-1500 paper claims, in field 17b.

For UB-04 paper claims, in form locator 76 (Note: The Agency prefers electronic billing.).

This information will be added to the Agency's ProviderOne Billing and Resource Guide.

Where Can I Find Out if a Provider is Enrolled with the Agency?

A provider can use the "Provider Inquiry" link in the Provider Portal (click on the hyperlink below) to look up an NPI and ensure a physician or other professional who ordered, prescribed, or referred a client is enrolled with the Agency's Medicaid Program.

https://www.waproviderone.org/

Where Can I Get Additional Information About This Policy?

For additional information, please visit http://hrsa.dshs.wa.gov/.

ProviderOne Billing and Resource Guide Update

The Agency will be updating the *ProviderOne Billing and Resource Guide* with the information in this provider notice. To view the new Guide, go to the Agency's website at: <u>http://hrsa.dshs.wa.gov/download/ProviderOne Billing and Resource Guide.html</u>.

Thank you.

JC-KMS Provider Publications Team Medicaid Program

Health Care Authority

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