

# Humana NPI Compliance Contingency Plan

## **Purpose:**

Humana is fully prepared to accept NPI only EDI transactions, although have elected to continue to allow a dual identifier strategy for those who are still working toward NPI adoption. For clarification, dual identifier strategy means the ability to exchange transactions using any of the following numbering schemes.

1. NPI only
2. Legacy identifier + NPI
3. Legacy identifier only

## **Background:**

The Administration Simplification Subtitle section of HIPAA passed in 1996 set forth a requirement that healthcare providers and suppliers apply for and use a National Provider Identifier (NPI) on HIPAA mandated electronic transactions by May 23, 2007. In summary, the NPI is intended to replace all existing legacy identifiers, such as Medicare/ Medicaid numbers, Insurance specific numbers and UPINs, etc. on all inbound / outbound HIPAA standard transactions.

On April 2, 2007 the Centers for Medicare and Medicaid Services (CMS), acting on its delegated authority, issued a contingency plan outlining their intention to continue to allow covered entities an additional 12 – months to come into compliance. The guidance provided is not a change to the May 23, 2007 mandate but an extension to the enforcement provision

The guidance stipulates that CMS will protect covered entities from enforcement penalties provided they demonstrate a good faith effort to move toward compliance. “Good faith effort” being characterized as developing and implementing contingency plans that may include continued acceptance of legacy identifiers for up to 12 months, not to exceed May 23, 2008.

Since enforcement is a complaint driven process, covered entities should have plans of their own to demonstrate they have exercised a good faith effort to come into compliance and failure to comply has been based on reasonable cause and not that of willful neglect.

Because this extension pertains to the enforcement provision only, covered entities may elect to exercise their right to adopt strict enforcement at anytime between mandate and May 23, 2008.

## **Humana’s Contingency Plan**

Today Humana supports several of the HIPAA mandated transactions and has already taken steps to support both a dual identifier strategy as well as NPI only submissions

As a result of the recent enforcement extension guidance coupled with limited adoption rates, Humana has elected to continue with the dual identifier strategy beyond May 23, 2007 with plans to impose mandate before May 23, 2008. At which time legacy identifiers will no longer be accepted on HIPAA standard transactions.

In preparation of enforcing mandate Humana will routinely evaluate the rate of NPI adoption on transactions to determine if there are a sufficient number of NPI only transactions to justify enforcement. Our current target date is November 1, 2007, provided there is adequate evidence to support that there will be minimal disruption to claim and cash flows.

## **837 - Claims**

**Humana encourages all providers not submitting NPIs to begin using them as soon as practical or by the Humana confirmed enforcement date to be communicated via our website.**

Currently Humana allows for NPI only, however the Tax id will be mapped to a different field in accordance with the HIPAA Implementation Guides. If you are currently billing this way please continue to do so.

If you are a group practice or facility and will be changing your billing process to support secondary, non-NPI, identifiers [click here](#) to access the claims quick reference tool or contact your Humana provider relations representative. This will ensure that our systems can support the billing strategy you adopt, determine the correct contract rates and minimize any disruption to your revenue stream.

For practices that submit a Humana 10-digit, alphanumeric, legacy identifier on their claims, please continue to utilize the "Legacy identifier + NPI strategy" (Option 2 above) until you have consulted with your Humana contractor to ensure that dropping the legacy identifier will not adversely affect your operations. Humana has a coordinated outreach process underway.

### **Testing**

Humana does not support a separate testing environment for NPI implementation. For covered entities wanting to test, Humana advises that you send a small batch of claims through your normal production routines with NPI only and monitor the transactions for claim acceptance, contract selection and payment accuracy round-trip.

### **835 – Remittance Advice**

As providers submit claims with the NPI, you will begin to receive the NPI back on their 835 Electronic Remittance Advice. The NPI will be located in the appropriate fields within the 835 remittance advice where the Tax ID or legacy identifier is currently populated. Humana is coordinating outreach to the providers already receiving the Electronic Remittance Advice (835). A quick reference tool that addresses these mapping changes can be accessed on Humana.com at the following link [http://www.humana.com/providers/tools/hippa/national\\_provider\\_identifier.asp](http://www.humana.com/providers/tools/hippa/national_provider_identifier.asp) or by clicking on the Provider home page >Tools and Resources>HIPAA>National Provider Identifier".

### **Web Based Transactions**

The 270 / 271 – Eligibility and 276/ 277 – Claim Status transactions received through Availity, utilize HIPAA standards and we will accept these utilizing the dual identifier strategy.

The 278 – Referral Authorization transactions received through Availity will continue to require the use of "Legacy identifiers + NPI" for an extended period of time until further notice.

Transactions submitted on Humana.com do not currently use NPI but will be modified to include NPI in the near future. Additional information to support when these changes will be implemented will be communicated at [www.humana.com](http://www.humana.com).

### **NCPDP**

Effective May 23, 2007, Humana will allow continued use of the legacy identifier, i.e., National Council for Prescription Drug Programs (NCPDP) number for the provider ID and Drug Enforcement Administration (DEA) number for the prescriber ID. However, we encourage any pharmacy that has received its NPI to begin using the NPI as its provider ID. Any pharmacy that has not obtained an NPI should immediately apply for one and to begin use of the NPI as the provider ID as soon as possible.

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