

# NPI CONTINGENCY PLAN

**Organization Name:** PARTNERS National Health Plans of NC, Inc  
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**Plan Last Updated:** March 1, 2008, previous update July 30, 2007

**NPI Contingency Plan Adoption Statement:**

PARTNERS National Health Plans of NC, Inc is officially adopting an NPI Contingency Plan, in accordance with CMS NPI Contingency Guidance and applicable regulations

**Key Contingency Plan Dates:**

PARTNERS National Health Plans of NC, Inc will accept/submit, as applicable, the following identifiers in HIPAA electronic transactions, in the manner and for the purposes specified herein:

**Lists of transactions timetable applies to** *(if one table does not apply to all transactions that your organization performs, please provide additional table(s) as appropriate):* Mark with "X"

X  837P    X  837I     837D    X  835    X  270/271    X  276/277    X  278    X  834

Identifier	Primary Providers (Billing/Pay To; Rendering)	Secondary Providers (Referring, Ordering, Operating, Other)
Legacy ID Only	<ul style="list-style-type: none"> <li>Legacy IDs <b>ONLY</b> will continue to be submitted/accepted through May 22, 2008</li> </ul>	<ul style="list-style-type: none"> <li>Legacy IDs <b>ONLY</b> will continue to be submitted/accepted through May 22, 2008</li> </ul>
NPI+Legacy	<ul style="list-style-type: none"> <li>NPI+Legacy started to be submitted/accepted October 1, 2006</li> <li>NPI+Legacy will continue to be submitted/accepted through May 22, 2008</li> </ul>	<ul style="list-style-type: none"> <li>NPI+Legacy started to be submitted/accepted October 1, 2006</li> <li>NPI+Legacy will continue to be submitted/accepted through May 22, 2008</li> </ul>
NPI Only	<ul style="list-style-type: none"> <li>NPI Only started to be submitted/accepted October 1, 2006</li> <li>NPI Only will be <b>REQUIRED</b> to be sent/received starting May 23, 2008</li> <li>Legacy IDs will <b>NOT</b> be permitted after May 22, 2008</li> </ul>	<ul style="list-style-type: none"> <li>NPI Only started to be submitted/accepted October 1, 2006</li> <li>NPI Only will be <b>REQUIRED</b> to be sent/received starting May 23, 2008</li> <li>Legacy IDs will <b>NOT</b> be permitted after May 22, 2008</li> </ul>

Note: for definition of Primary and Secondary Providers see CMS FAQ 6926 – [http://questions.cms.hhs.gov/cgi-bin/cmshhs.cfg/php/enduser/std\\_alp.php?p\\_sid=\\_2OWAqAi](http://questions.cms.hhs.gov/cgi-bin/cmshhs.cfg/php/enduser/std_alp.php?p_sid=_2OWAqAi)

## **Key Questions and Answers:**

What requirements does the health plan have for sharing NPIs prior to production use?	We have requested that all providers register NPIs directly with Blue Cross Blue Shield of North Carolina (BCBSNC). BCBSNC will share registered NPIs with Partners National Health Plans (PNHP).
When both legacy and NPI are present in the same transaction, which ID is used for processing?	If the NPI is registered with PNHP, PNHP will use the NPI to confirm the internal PNHP mapping. If the NPI and PNHP Provider ID submitted on the transaction agree with the NPI and PNHP Provider ID in the PNHP claims processing system, then PNHP will process using the NPI. If the NPI and PNHP Provider ID submitted on the transaction does not agree with the NPI and PNHP Provider ID in the PNHP crosswalk, then PNHP will fail the transaction with a business edit. If the NPI is not registered with PNHP, PNHP will use the PNHP Provider ID to process the transaction.
How does the health plan recommend providers test transactions with NPI?	PNHP strongly recommends that the provider submit transactions with both the NPI and the current provider identifier. This will allow both the provider and PNHP to verify the mapping of NPI to current PNHP internal Provider identifiers.
What are the timelines and transition requirements for paper claims?	NPIs should NOT be sent on the paper claim forms being phased out. NPIs may be sent on the new UB04 and the new CMS1500. PNHP Provider IDS may be sent on the new forms, as well. PNHP will also accept both the NPI and the PNHP Provider ID on the new forms.

**If you have not registered your NPI(s) with BCBSNC, please contact 1-800-858-5966.**

Blue Medicare HMO and Blue Medicare PPO plans are offered by PARTNERS National Health Plans of North Carolina, Inc., a subsidiary of Blue Cross and Blue Shield of North Carolina (BCBSNC). PARTNERS is a Medicare Advantage organization with a Medicare contract to provide HMO and PPO plans. Plans are administered by BCBSNC. BCBSNC and PARTNERS do not discriminate based on color, gender, religion, national origin, age, race, disability, handicap, sexual orientation, genetic information, source of payment or health status as defined by the Centers for Medicare & Medicaid Services (CMS). All qualified Medicare beneficiaries may apply. You must be entitled to Medicare Part A and enrolled in Medicare Part B and must reside in the CMS-approved service area. You must continue to pay your Medicare Part B premium, if not otherwise paid for under Medicaid or another third party. BCBSNC and PARTNERS are independent licensees of the Blue Cross and Blue Shield Association.