



ALCOHOL, DRUG & MENTAL HEALTH SERVICES
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Provider Relations
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NATIONAL PROVIDER IDENTIFIER (NPI)

INDIVIDUAL PROVIDER INSTRUCTIONS AND INFORMATION

The NPI is a ten digit number assigned to you or your organization by the Federal Government Center for Medicare and Medicaid Services (CMS) using the National Plan & Provider Enumeration System (NPPES).

There are two (2) types of National Provider Identifiers:

Type 1 Individual NPI: An NPI number is assigned to physicians, psychologists, psychiatrists, counselors, dentists, nurses, chiropractors, and others. All individual staff persons who provide direct services to clients, that is, services where the client is identified, must obtain an NPI. Alameda County Behavioral Health Care Services, as directed by the California Department of Mental Health, is requiring all staff to apply for a Type 1 NPI, obtain the number and submit a copy of the NPI confirmation notice to Provider Relations as soon as possible. This identifier will remain with the individual for his/her entire career and can be used across all county plans or health care entities.

Type 2 Organizational NPI: Organizations such as Mental Health providers are required by law to obtain at a minimum one Organizational NPI. The California State Department of Mental Health is requiring all providers to obtain one Type 2 NPI for every Medi-Cal provider number assigned to their organization. *NOTE: Your agency administrator will obtain the organizational NPI number(s), the individual provider is responsible for obtaining their own Type 1 NPI number.*

Both NPI types must be included on all health care claims to Medi-Cal, Medicare and Insurance carriers after May 23, 2007.

In order for ACBHCS to avoid delays in our established claiming schedule, we will need to receive your Type 1 and Type 2 NPIs by June 1, 2007.

We encourage organizations to assist their staff in obtaining and reporting the individual NPI numbers to ACBHCS Provider Relations. In reporting to Provider Relations please include, the InSyst staff number, staff name, NPI number and taxonomy code.

How to Apply

Use the NPI website: <https://nppes.cms.hhs.gov>.



This is the fastest method to apply and will result in a return e-mail from the NPPES web site as confirmation of the NPI number. Do not use the mail in application. If you anticipate any difficulty in accessing this web site, please request assistance from your manager or call Provider Relations at 1 (800) 878-1313.

WEB Site Information

We have included several pages from the NPPES web site for your reference. The step by step web site instructions will guide you through the navigation of pages. Here are a few of our comments on the screen prints attached.

- Page 1 At the main entry screen click on the first line, Health Care Provider. The other link, the National Provider Identifier, is not activated.
- Page 2 This page also has a link to the Tips (page 3) we suggest you read the Tips on page 3 of the NPPES screen prints. I would especially point out the tip * **Do NOT use the browser's button BACK and FORWARD**, these functions will kick you off of the application. If this happens, log back on and enter the password you created to resume your input. This page also has Additional Resource information. This is also the point of reentry if you need to view your completed application to make changes or corrections. This page has the link to begin the application process, click on Apply Online
- Page 4 We suggest you read the NPI Application Instructions before proceeding to ensure you have all the required information available to complete the application. At the end of this page you will begin the application process.
- Page 5 You will be required to set up a User ID, password, and secret question with an answer. We suggest you print out this page and each completed page of the application during the application process for your records.
- Page 6 . Individuals – Be aware that the contact information on the NPI application will be the person to whom the confirmation notice is e-mailed, please indicate yourself as the contact person to ensure receipt of the confirmation notice.

At the completion of the application you will receive a tracking number, this is NOT your NPI number. The tracking number can be used to track your application in the event you do not receive the number from the enumerator. Normally you will receive a confirmation notice via e-mail from the enumerator within a few days. We recommend that you print a copy of this e-mail confirmation for your records.

How to Report

ACBHCS Provider Relations will require a copy of the confirmation notice. You may forward it to Provider Relations, via e-mail to npi@acbhcs.org or mail to P.O. Box 738, San Leandro, CA 94577-0738 or Fax to (510)567-8081. Be sure that you include your InSyst (PSP) staff number, your name, your NPI and taxonomy code.

ACBHCS will be reporting your NPI number to DMH on your behalf. Provider Relations will also enter your NPI into InSyst (PSP) in the file where your staff number is stored. This will ensure that your NPI appears on all HIPAA compliant claims, such as the Medi-Cal claim.

Taxonomy Codes

We realize that many providers are not familiar with taxonomy codes so we have included a short list of broad categories of taxonomy codes for your reference. You may view a full listing of taxonomy codes, including sub-categories, at www.wpc-edi.com/taxonomy.

Taxonomy Codes Related to Individual Providers (Type 1)

<u>Classification</u>	<u>Code</u>
Psychiatrist	2084P0800X
Psychologist	103T00000X
MFT/IMF	106H00000X
LCSW/ASW	104100000X
Nurse Practitioner	363L00000X
Physician Assistant	363A00000X
Registered Nurse	163W00000X
Licensed Vocational Nurse	164X00000X
Licensed Psychiatric Tech	167G00000X
Counselor	101Y00000X
Case Manager/ Care Coordinator	171M00000X

If you have any questions concerning obtaining your Type 1 NPI number please contact Provider Relations at 1 (800) 878-1313.



National Plan & Provider Enumeration System

1.

Help

National Plan and Provider Enumeration System (NPPES)

The Administrative Simplification provisions of the *Health Insurance Portability and Accountability Act of 1996 (HIPAA)* mandated the adoption of standard unique identifiers for health care providers, as well as the adoption of standard unique identifiers for health plans. The purpose of these provisions is to improve the efficiency and effectiveness of the electronic transmission of health information. The Centers for Medicare & Medicaid Services (CMS) has developed the **National Plan and Provider Enumeration System (NPPES)** to assign these unique identifiers.

If you are a **Health Care Provider**, the National Provider Identifier (NPI) is your standard unique identifier.

If you are a covered **Health Plan**, the National Health Plan Identifier (NPlanID) is your standard unique identifier.

About NPPES....

CMS has contracted with Fox Systems, Inc. to serve as the NPI Enumerator.

The NPI Enumerator is responsible for dealing with health plans and providers on issues relating to unique identification.

The NPI Enumerator may be contacted as follows:



By phone:

1-800-465-3203 (NPI Toll-Free)
1-800-692-2326 (NPI TTY)

By e-mail at:

customerservice@npienumerator.com

By mail at:

NPI Enumerator
PO Box 6059
Fargo, ND 58108-6059



Centers for Medicare & Medicaid Services



Department of Health and Human Services



National Plan & Provider Enumeration System

Home

National Provider Identifier

For Health Care Providers

The Administrative Simplification provisions of the *Health Insurance Portability and Accountability Act of 1996 (HIPAA)* mandated the adoption of a standard unique identifier for health care providers. The National Plan and Provider Enumeration System (NPPES) collects identifying information on health care providers and assigns each a unique **National Provider Identifier (NPI)**.

2.

↓ *Click here*

Need an NPI? → [Apply Online for an NPI](#)
Estimated time to complete the NPI application form is 20 minutes.
[Click here to see tips to expedite your NPI application before you begin your application.](#)

Want to View or Update your NPI data? → [Login](#)

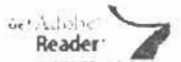
Want to create a Web login for an existing NPI? → [Create Login to View or Update your NPI Data](#)
(This option is only for health care providers previously enumerated via paper or EFI)

Additional Resources:

- [NPI Application / Update Form](#)
- [Application Help](#)
- [Privacy Information](#)
- [Frequently Asked Questions](#)
- [NPI Final Rule - !\[\]\(3d0946c14414af438def0008e8322b30_img.jpg\) \[PDF File\]](#)
- [Contact Information](#)
- [CMS NPI Page](#)

Notes:

To view PDF files, you must have Adobe Acrobat Reader. If you do not already have Acrobat Reader installed, please [Download Acrobat Reader](#) now.





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Tips to Expedite Your NPI Application

Web Application Tips

- User IDs and secret question information cannot be changed. Once you have successfully chosen a User ID and secret question/answer combination and submitted the record, the User ID and secret question/answer combination will remain tied to your record and will not be changed.
- Use the application's navigation buttons, NEXT or PREVIOUS.
- ✘ Do NOT use the browser's buttons, BACK and FORWARD.
- If you have a problem with the system and cannot continue, wait 20 minutes before logging on again.
- Print each page as you complete the application to keep a record of your file.

Paper and Web Application Tips

- Remember to select an entity type:
 - Entity type 1, health care providers who are individuals, need to complete sections 2A, 3, 4A, and 5.
 - Entity type 2, health care providers who are organizations or subparts, need to complete sections 2B, 3, 4B, and 5.
- An EIN must not be entered in the ITIN field on the application of a health care provider who is an individual.
- When you enter your Medicaid number in section 3.c., list the State that assigned the number.
- Post office boxes may not be entered as practice location addresses.

Paper Application Tips

- Do not staple the application pages together.
- Remember to print legibly or type your application.
- Include an original signature of the health care provider and a telephone number on the application. Do not send a photocopy of the signature or an application with a stamped signature. The name in the signature must match the name of the provider.
- If you do not submit your social security number on a paper application, you must submit a photocopy of one of the following documents with your application: driver's license, State issued ID; identifying page of your passport, or a birth certificate.

Selected Glossary

- An EIN is an Employer Identification Number assigned by the Internal Revenue Service (IRS). The EIN is furnished only on an NPI application from providers who are organizations, including groups and subparts.
- An SSN is a Social Security Number assigned by the Social Security Administration. The SSN is furnished only on an NPI application from providers who are individuals. An SSN is required on all web NPI applications and is optional on paper NPI applications.
- An ITIN is an Individual Taxpayer Identification Number assigned by the IRS to individuals who do not qualify for an SSN. The ITIN is furnished only on an NPI application from providers who are individuals.

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National Plan & Provider Enumeration System

Home

Help

NPI Application Instructions

Step 1: Before you begin, make sure you have the following information.

This information will be required to complete the NPI Application Form.

You will not be able to save your work if you quit before you have completed the application form.

• Information Required for Individual Providers

Provider Name
 SSN (or ITIN if not eligible for SSN)
 Provider Date of Birth
 Country of Birth
 State of Birth (if Country of Birth is U.S.)
 Provider Gender
 Mailing Address
 Practice Location Address and Phone Number
 Taxonomy (Provider Type)
 * State License Information
 Contact Person Name
 Contact Person Phone Number and Email

• Information Required for Organizations

* (required for certain taxonomies only)

Organization Name
 Employer Identification Number (EIN)
 Name of Authorized Official for the Organization
 Phone Number of Authorized Official for the Organization
 Organization Mailing Address
 Practice Location Address and Phone Number
 Taxonomy (Provider Type)
 * State License Information
 Contact Person Name
 Contact Person Phone Number and Email

Online Help is available from each page of the Application / Update Form by clicking "Help" at the top right of the page.

If you need additional help or have any questions concerning your application, contact the NPI Enumerator.

NPI Enumerator Contact Information

By phone:

1-800-465-3203 (NPI Toll-Free)

1-800-692-2326 (NPI TTY)

By e-mail at:

customerservice@npienumerator.com

By mail at:

NPI Enumerator

PO Box 6059

Fargo, ND 58108-6059

Step 2: Read the information below.

You must agree to the terms below when you submit your application:

I have read the contents of the application and the information contained herein is true, correct, and complete. If I become aware that any information in this application is not true, correct, or complete, I agree to notify the NPI Enumerator immediately.

I authorize the NPI Enumerator to verify the information contained herein. I agree to keep the NPPES updated with any changes to data listed on this application form within 30 days of the effective date of the change.

I understand that the information provided in this application may be used by other agencies in accordance with privacy regulations.

*I have read and understand the **Penalties for Falsifying Information** on the NPI Application / Update Form as stated in this application. I am aware that falsifying information will result in fines and/or imprisonment.*

Penalties for Falsifying Information on the NPI / Update Form:

18 U.S.C. 1001 authorizes criminal penalties against an individual who in any matter within the jurisdiction of any department or agency of the United States knowingly or willfully falsifies, conceals, or covers up by any trick, scheme or device a material fact, or makes any false, fictitious or fraudulent statements or representations, or makes any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry. Individual offenders are subject to fines of up to \$250,000 and imprisonment for up to five years. Offenders that are organizations are subject to fines of up to \$500,000. 18 U.S.C. 3571(d) also authorizes fines of up to twice the gross gain derived by the offender if it is greater than the amount specifically authorized by the sentencing statute.

Step 3: Begin online application.



National Plan & Provider Enumeration System

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NPI Application Form - Select NPI User ID and Password

* Indicates Required Field

Please enter a user ID and password for future access to NPI:

* **NPI User ID:**

* **NPI Password:**

* **Retype NPI Password:**

* **Select Secret Question:**

* **Answer:**

Note: Password must be 6-12 characters long, contain at least one letter, one number, no special characters, and not be the same as the user ID.

Note:

1. User IDs and secret question information cannot be changed. Once you have successfully chosen a User ID and secret question/answer combination and submitted the record, the User ID and secret question/answer combination will remain tied to your record and will not be changed.
2. Please use the Next button to navigate to the next page in the application.

WARNING: Unauthorized access to this system is forbidden and will be prosecuted by law. By accessing this system, both authorized and unauthorized users are subject to monitoring by system personnel. Anyone using this system expressly consents to monitoring and is advised that if such monitoring reveals possible evidence of criminal activity, system personnel may provide the evidence of such monitoring to law enforcement officials.



National Plan & Provider Enumeration System

INDIVIDUAL 6.
The NPI confirmation notice will be sent to this contact email.

Logoff

Help

Application Sections

NPI Application Form - Contact Person Information

Provider Profile

Mailing Address

Practice Location

Other Identifiers

Taxonomy

Contact Person

Certification

* Indicates Req

Contact Person Name:

*

If you would like to use the Provider as the contact person, click here

Same As Provider

If you would like to designate an alternate contact person, please fill out the following:

Prefix: * First

Middle:

* Last

Credential(s):

Title:

Please Complete The Following Additional Information For The Contact Person:

* Contact Person Phone Number:

Extension:

(Without Dashes)

* Contact Person Email:

* Retype Contact Person Email:

Note: Please use the Previous and Next buttons to navigate between the pages in the applicator