Denti-Cal Bulletin

HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) NATIONAL PROVIDER IDENTIFIER (NPI) UPDATE

Preventing Denti-Cal NPI Registration Form Errors

Denti-Cal is currently processing the NPI Registration Forms submitted by providers. During the registration process, Denti-Cal is finding multiple errors on the registration forms. To better assist providers in correctly filling out the registration form, please ensure the following fields are completed accurately:

♦ <u>Medi-Cal, Denti-Cal, or CHDP Provider Number field</u>. Providers must enter the B, G, Y, D, H, or Z provider number in this field. For example: B12345 01.

♦ <u>Provider Name</u>. Providers must enter the provider name that corresponds with the Provider Number and NPI submitted on the form. If the NPI is for a corporation or group practice, the name in the Provider field should indicate the *corporation* or *group name*.

♦ <u>NPI</u>. Providers *MUST* enter the 10-digit NPI here. For example: 1234567890.

♦ <u>Provider Identification Number (PIN) OR last 4 digits of Taxpayer Identification Number (TIN) OR last 4 digits of Social Security Number (SSN)</u>. Please make sure to enter a 6-digit PIN, or the last four digits of a TIN, *or* SSN. Only billing providers can enter a PIN. For example: 123456. All other providers will need to submit either the last four digits of their TIN or SSN.

In addition, please remember the following:

♦ The National Plan and Provider Enumeration System (NPPES) confirmation document <u>must</u> be attached to the registration form. *<u>The registration form will be returned if the NPPES confirmation document is not attached</u>*.

♦ The NPI on the NPPES confirmation document **<u>MUST</u>** match the NPI on the registration form *<u>or the registration form will be returned</u>*.

♦ A separate NPI registration form is required for each existing Denti-Cal provider number. *Providers with multiple Denti-Cal provider numbers must submit a separate NPI Registration Form for each Denti-Cal billing provider number, as well as for the Denti-Cal rendering provider number.*

♦ Complete ALL fields where an asterisk (*) is displayed. *<u>This is required information. Registration forms will be returned if incomplete</u>*.

♦ It is not necessary to complete the Medicare NPI Information and the Non-Physician Medical Practitioner Information sections of the form. *<u>These sections do not apply to Denti-Cal providers</u>*.

♦ An original signature is required *or the registration form will be returned*.

♦ Mail the completed registration form to the Denti-Cal address located at the bottom of the registration form.

For more information on NPI or a copy of the registration form, please visit the Denti-Cal Web site at www.denti-cal.ca.gov, or call the Denti-Cal Telephone Service Center at (800) 423-0507.