

# Denti-Cal Bulletin



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## **HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) National Provider Identifier (NPI) Update**

### **Revised Application Form Requirements and Procedures Due to NPI Implementation**

Effective May 23, 2007, applicants and providers will be required to submit their National Provider Identifier (NPI) with each Medi-Cal provider application package. Current Denti-Cal providers will be required to submit both the NPI and any Denti-Cal provider numbers issued previously on any application forms submitted to Denti-Cal.

In accordance with Centers for Medicare & Medicaid Services (CMS) requirements, California Department of Health Services (CDHS) is revising all provider enrollment application forms to accommodate the NPI. Implementation of the NPI by May 23, 2007 is a requirement of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Information in this article is effective May 23, 2007, and published based on the authority granted by *Welfare and Institutions Code* (W&I Code), Section 14043.75(b).

The revised forms listed below are required for all application and disclosure packages received by Denti-Cal on or after May 23, 2007. Application and disclosure packages received before May 23, 2007 are processed under the rules and regulations in effect at the time of receipt. The NPI, if available, should be written on those forms. All references to the forms below in *California Code of Regulations* (CCR), Title 22, Division 3, are amended to refer to the March 2007 version:

- *Medi-Cal Provider Group Application* (DHS 6203)
- *Medi-Cal Provider Application* (DHS 6204)
- *Medi-Cal Disclosure Statement* (DHS 6207)
- *Medi-Cal Provider Agreement* (DHS 6208)
- *Medi-Cal Supplemental Changes* (DHS 6209)
- *Medi-Cal Physician Application/Agreement* (DHS 6210)
- *Successor Liability With Joint and Several Liability Agreement* (DHS 6217)

### **Valid NPI Verification**

Applicants must submit verification of each NPI submitted to Denti-Cal in an application package, including the *Medi-Cal Supplemental Changes* form, if appropriate. Applicants are required to attach a copy of the CMS/National Plan and Provider Enumeration System (NPPES) confirmation letter for each NPI listed in the application package. Denti-Cal will not process an application package without the valid NPI verification.