

June 17, 2015

Montana Healthcare Programs Notice

Audiologist, Chiropractor, DME, Hearing Aid, Home Infusion Therapy, Lab and Imaging, Occupational Therapist, Physical Therapist, Private Duty Nursing, and Speech Therapist

Effective Immediately

Identification of Ordering and Referring Providers on CMS-1500 and 837P X12 Transactions

Requirements

The Patient Protection and Affordable Care Act and 42 CFR 455.440 mandates that all State Medicaid Programs require the National Provider Identifier (NPI) of any ordering or referring physician or other professional to be specified on any claim for payment that is based on an order or referral of the physician or other health professional.

Montana Medicaid providers are now required to identify ordering or referring physicians or other professionals on claims following the examples below.

Claims Submission CMS-1500

This information is found at NUCC.org. Please see examples provided for protocol.

- Box 17 must include the appropriate qualifier to indicate whether the provider is Referring (DN) or Ordering (DK).
- Box 17b must include the NPI of the referring or ordering provider.

Referring Provider Qualifier – DN

HC-F-10-ENV	17. NAME OF REFERRING PROVIDER OR OTHER SOURCE		17a.	
	DN	Brian Jones, MD.	17b.	NPI 1234567891

Ordering Provider Qualifier – DK

HC-F-10-ENV	17. NAME OF REFERRING PROVIDER OR OTHER SOURCE		17a.	
	DK	Brian Jones, MD.	17b.	NPI 1234567891

Claims Submission 837P X12

837P X12 for Referring Provider

Loop 2310A: NM1*DN*1*JONES*BRIAN****XX*1234567891

837P X12 for Ordering Provider

Loop 2420E: NM1*DK*1*JONES*BRIAN****XX*1234567891

Passport and Team Care

- Box 17 can include name of the provider.
- Box 17a must include the Passport/Team Care referral number, if applicable.

HCF-10-ENV	17. NAME OF REFERRING PROVIDER OR OTHER SOURCE		17a.	9999999
	DN	Brian Jones, MD.	17b. NPI	1234567891

837P X12 for Referring Provider

Loop 2300: REF*9F*999999~

Contact Information

If you have questions regarding the above requirements, please contact Bob Wallace, Physician Services Supervisor, at 406-444-5778 or via e-mail at bwallace@mt.gov; or Dan Peterson, Bureau Chief, Allied Health Services Bureau, at 406-444-4144 or via e-mail at danpeterson@mt.gov.

For claims questions or additional information, contact Provider Relations at 1-800-624-3958 (toll-free, in/out of state) or 406-442-1837 (Helena) or via e-mail at MTPRHelpdesk@xerox.com.

Visit the Montana Healthcare Programs Provider Information website at <http://medicaidprovider.mt.gov/>.