

PROVIDER ALERT

STATE OF CONNECTICUT
DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES
General Assistance Behavioral Health Program (GABHP)

IMPORTANT PROGRAM UPDATE

Issued on June 5, 2007

Implementation of HIPAA National Provider Identification Numbers

To improve the efficiency and effectiveness of health care systems, Congress enacted the Health Insurance Portability and Accountability Act (HIPAA) of 1996. This legislation included a series of “administrative simplification” provisions that required development of national standards for electronic health care transactions and code sets and identifiers to be used in those transactions. The final phase of this administrative simplification process is the implementation of National Provider Identification (NPI) numbers. Health plans accepting electronic transaction files, such as batch claims submission files, must comply with the Federal guidelines. Compliance means that all managed care organizations must use the NPI for all HIPAA transactions. The GA Behavioral Health Program is actively working to implement these changes.

What does this mean for GA-contracted provider organizations?

1. **(If your agency does not yet have an NPI number)** All GA Behavioral Health Program contracted providers will be required to obtain at least one NPI number. The application process is quickest and most efficient if obtained from the Internet-based application. The quickest method for accessing the web-based application is through www.cms.hhs.gov/NationalProvdentStand/. If you are an agency that has multiple service locations contracted with GA, we suggest that you obtain a NPI number for each of these contracted locations. If your agency does not have the capacity to obtain an NPI number via the Internet, the application form may be requested via telephone at (800) 465-3203 (or TTY at 1-800-692-2326) or via mail at: NPI Enumerator, P.O. Box 6059, Fargo, ND 58108-6059.
2. **(If your agency has obtained the NPI number[s])** Providers who have already obtained the NPI number(s) for their organization should submit the number(s) to the ASO’s Provider Relations Department via fax at (860) 704-6145 using the form included in this Provider

Alert. Each provider must submit a separate form for each of their contracted service locations, and must complete all sections of the form.

3. **ALL GA Behavioral Program contracted providers must submit their NPI numbers to the ASO no later than Friday, July 13, 2007 using the form attached to this Provider Alert.** The form will also require providers to identify the following information for each contracted service location: Facility/Agency Name; current GA BHP Provider and Vendor identification numbers (CTGA and B numbers); service location address, including the 9-digit zip code for the location; NPI number; and Taxonomy Code defining the location. All sections of this form must be completed.
4. The 837 Health Care Claim Companion Guide is currently being revised and the new version is expected to be released and posted on the ABH website by August 15, 2007. The revised 837 Health Care Claim Companion guide will be posted on the Internet at www.abhct.com/resources/GABHP/ or by contacting the Provider Relations Department at (800) 606-3677, Option 3.
5. If you are a provider submitting claims on paper, please be aware that there have been revisions made to the nationally standardized UB-92 and CMS-1500 forms. The GA Behavioral Health Program Tips for Completing the CMS 1500 and Tips for Completing the UB92 are currently being revised and will be posted on the ABH website by August 15, 2007. These guides can be accessed via the Internet at www.abhct.com/resources/GABHP/ or by contacting the Provider Relations Department at (800) 606-3677, Option 3.
6. All providers should continue to use the current GA BHP Provider and Vendor identification numbers to submit claims until instructed otherwise. Future Provider Alerts will provide additional information regarding the timelines for conversion to the use of NPI numbers.
7. The ASO, Advanced Behavioral Health, will be offering the ability to submit test batch claims files on or after January 2, 2008 to those Providers who wish to submit electronic batch submission claims files. If your agency is interested in submitting a test file, please contact Provider Relations at (800) 606-3677, Option 3.

**GA BEHAVIORAL HEALTH PROGRAM
NPI Provider Information**

PLEASE COMPLETE THIS ENTIRE FORM FOR EACH GABHP CONTRACTED SERVICE LOCATION SITE

Facility/Agency Name:					
Service Location Address:					
	CITY/TOWN:		9-Digit Zip Code:		--
GA Provider ID #:		CTGA	Vendor ID#:	B	
National Provider ID#:					
Taxonomy Codes: (PLEASE SELECT ANY CHOICES THAT APPLY TO THIS LOCATION)					
<input type="checkbox"/>	Ambulatory – Clinic/Center	261Q00000X	A facility or distinct part of one used for the diagnosis and treatment of outpatients; "Clinic/Center is irregularly defined, sometimes being limited to organizations serving specialized treatment requirements or distinct client/patient groups		
<input type="checkbox"/>	General Acute Care Hospital	282N00000X	A health care organization with an organized medical staff that provides medical nursing and related services 24 hours/day, 7 days/week		
<input type="checkbox"/>	Hospital Unit – Psychiatric	273R00000X	A distinct unit of a hospital that provides acute or long-term care to emotionally disturbed individuals (Used for DMHAS Levels of Care MH IV.2 & Pilot II.0)		
<input type="checkbox"/>	Hospital Unit – Substance Use Disorders	276400000X	A distinct part of a hospital that provides medically monitored, interdisciplinary addiction-focused treatment to individuals who have psychoactive substance use disorders (Used for DMHAS Levels of Care SA IV.2 and Pilot II.0)		
<input type="checkbox"/>	Hospital – Psychiatric	283Q00000X	An organization including a physical plant and personnel that provides multidisciplinary diagnostic and treatment mental health services to individuals requiring the safety, security and shelter of the inpatient or partial hospitalization settings		
<input type="checkbox"/>	Substance Abuse Rehabilitation Facility	324500000X	A facility or distinct part of a facility that provides a 24-hour therapeutically planned living and rehabilitative intervention environment for the treatment of individuals with disorders in the abuse of drugs, alcohol and other substances.		
Agency Contact Name:				Agency Contact Phone:	

**FAX THE COMPLETED FORM TO: Advanced Behavioral Health, Inc.
(860) 704-6145**

PLEASE COMPLETE ALL SECTIONS OF THIS FORM