MEMORANDUM FOR ASSISTANT SECRETARY OF THE ARMY (M&RA)  
ASSISTANT SECRETARY OF THE NAVY (M&RA)  
ASSISTANT SECRETARY OF THE AIR FORCE  
(M&RA)

SUBJECT: The Health Insurance Portability and Accountability Act National Provider Identifier Enumeration Process for Military Health System Organizational (Type 2) Health Care Providers

This policy memorandum establishes the plan for enumerating organizational (Type 2) health care providers within the Military Health System (MHS) as required by the Health Insurance Portability and Accountability Act (HIPAA) (Public Law 104-191) National Provider Identifier (NPI) final rule (45 Code of Federal Regulations, Part 162). In order to institutionalize this policy within the Department of Defense (DoD), a DoD Instruction will follow. The HIPAA NPI final rule establishes the NPI as the standard and unique provider identifier. The NPI is to be used throughout the entire United States health care system to identify health care providers in HIPAA covered standard electronic transactions. The NPI is a ten-position numeric identifier that does not contain intelligence about the provider. The purpose of the NPI is to improve effectiveness and efficiency of the health care industry by enabling more efficient electronic transmission of certain health information.

Under provisions of the NPI final rule, those organizational health care providers conducting HIPAA covered standard electronic transactions are considered “covered providers.” They must obtain and use an NPI by May 23, 2007. While “covered providers” are required to obtain and use the NPI, all health care providers as defined by section 1861 (u) of the Act, or a provider of medical or other health services as defined in section 1861 (s) of the Act are eligible to be assigned NPIs and, therefore, may also obtain an NPI.

The NPI final rule also established two categories of health care providers for enumeration purposes. Examples of Entity Type 1 providers are individuals, such as physicians, nurses, dentists, and pharmacists. Examples of Entity Type 2 providers are organizational providers such as hospitals, laboratories, pharmacies, clinics, and groups. This policy memorandum addresses the requirements related to Entity Type 2 (organizational) providers. A separate policy to address enumeration of Entity Type 1 (individual) providers was signed on January 26, 2005.

HA POLICY: 05-012
The policy guidance outlining responsibilities of the Military Departments’ Surgeons General, military treatment facilities (MTFs), and TRICARE Management Activity’s (TMA’s) Pharmacy Operations regarding enumeration of MHS organizational providers is found at attachment 1. An example of MTFs requiring an NPI Type 2 is contained in attachment 2.

My point of contact for this initiative is Lt Col Jeanne Yoder, who may be reached at (703) 681-3492 or Jeanne.Yoder@tma.osd.mil.

Attachments:
As stated

cc: Assistant Secretary of Defense (Reserve Affairs)
Surgeon General of the Army
Surgeon General of the Navy
Surgeon General of the Air Force

William Winkenwerder, Jr., MD

HA POLICY: 05-012
Policy Guidance for National Provider Identifier (NPI) Enumeration of Military Health System (MHS) Type 2 (Organizational) Providers

The following paragraphs outline the responsibilities of the Military Departments Surgeons General, Military Treatment Facilities (MTFs) and TRICARE Management Activity’s (TMA’s) Pharmacy Benefit Operations regarding compliance with the NPI final Rule. These responsibilities were developed through analysis of the NPI final rule and the Military Health System’s (MHS) current business processes by the NPI Integrated Project Team which included representatives from the Military Departments and TMA.

Types of Organizational Providers Required to Obtain NPIS:

Enumeration of MHS organizational providers will take place in a phased approach beginning with the types of facilities listed below. This list is based on current business processes and the need to identify MHS organizational providers when conducting business using HIPAA electronic standard transactions. An example of MTFs (and their associated provider taxonomies) needing to obtain an NPI Type 2 due to HIPAA electronic transactions for billing is attached. The first phase includes enumeration of the following:

- MTFs with legislative authority to bill including Defense Health Program (DHP) funded facilities and aero medical evacuation system.
- MTF pharmacy dispensing locations that currently have a National Council for Prescription Drug Programs (NCPDP) Provider Identification number.

As future business processes are developed, it may be necessary to reevaluate the need to enumerate additional facilities or subparts of a facility. For example, it is possible that future business requirements for conducting or receiving electronic referrals using the HIPAA standard will require the need to identify clinics, subparts or other facilities; therefore the need to implement subsequent phases of enumeration for additional organizational MHS providers is possible and should be anticipated. Any future guidance regarding additional enumeration of MHS organizational providers as a result of changes to business processes will be provided by the business process owners.

Enumeration Responsibilities:

The responsibilities for enumerating of MHS organizational providers will be shared among TRICARE Management Activity’s Uniform Business Office (UBO), TMA’s Pharmacy Program Office, the Military Departments and MTFs.

TMA UBO Responsibilities:
- Provide guidance to the Military Departments by August 1, 2005 on how to complete the application to apply for an NPI for the MTFs.
Military Department Responsibilities:
- Ensure that current and future MHS organizational providers fitting the description above obtain NPIs.

MTF Responsibilities:
- Designate an entity within each MTF that will be responsible for submitting the initial NPI application and any future NPI data updates to the National Plan and Provider Enumeration System (NPPES).
- MTFs should begin submitting NPI applications to the NPPES starting October 1, 2005.
- Ensure that once received, NPIs are submitted to the appropriate MHS data base / repository prior to May 23, 2007.
- Ensure that if any data submitted on the original NPI application changes that an update is submitted to the NPPES and the TMA database / repository within 30 days of the change.

TMA Pharmacy Program Office Responsibilities:
- Ensure that NPIs are obtained for all current and future pharmacy dispensing locations by either submitting NPI applications for each dispensary location to the NPPES or by coordinating with the NCPDP organization in submission of a batch file by the NCPDP to the NPPES.
- NPI applications for MHS pharmacy dispensing locations should be submitted to the NPPES after July 1, 2005.
- Ensure that once received, NPIs for pharmacy dispensing locations are submitted to the TMA central database of record prior to May 23, 2007.
- Ensure that if any data submitted on the original NPI application changes that an update is submitted to the NPPES and the TMA database / repository within 30 days of the change.
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Example of ITS expressed in each unit type.