



To: Participating Prestige Health Choice Providers

Date: February 12, 2016

Subject: Prestige Requires the Ordering, Referring, or Prescribing Practitioner's Name and NPI on Claims for Specific Services

Summary: Prestige requires the ordering, referring, or prescribing practitioner's name and individual National Provider Identifier (NPI) on all claims submitted for specific services provided pursuant to an order, referral, or prescription. Please prepare now! In the coming months, Prestige will begin rejecting claims that do not meet this requirement.

Change:

To comply with Federal and state requirements prohibiting payment to excluded or sanctioned providers, Prestige:

- Collects the ordering, referring, or prescribing practitioner's name and individual NPI; and,
- Uses the collected names and NPIs to determine whether the ordering, referring, or prescribing practitioner is excluded from participation, or under sanction, by any Federal or state program. Practitioner information is screened against the Office of the Inspector General (OIG) List of Excluded Individuals and Entities (LEIE), the System for Award Management (SAM), and/or state-specific exclusion lists, as applicable.

Affected Claims:

This change affects claims for specific services when the services are provided pursuant to an order, referral, or prescription. The most common types of services affected by this requirement include home health, durable medical equipment, free standing radiology, and labs. Claims for services resulting from a general referral from PCP to Specialist, or from Specialist to Specialist, are not affected by this requirement, unless the referral was written for a specific service. Although rejections will only apply to claims for specific services, providers are encouraged to submit the NPI of the ordering, referring, or prescribing physician whenever applicable.

Action Required:

Providers must include the ordering, referring, or prescribing practitioner's name and individual NPI in the appropriate field(s) as described below:

Paper Claims

- Professional/CMS-1500: Use fields **17 and 17b**.
- Institutional/UB-04: Use field **78**.

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Electronic Claims (EDI)

- Professional: Use loops **2310A/NM1** and **2310A/NM109**.
- Institutional: Use loop **2310C/NM1**.

The submitted NPI must belong to the individual physician or non-physician practitioner (NPP) who is ordering, referring or prescribing. Organizational or group NPIs are not acceptable. Additionally, the ordering, referring, or prescribing practitioner must be eligible to order, refer, or prescribe in accordance with the law and any applicable health care practitioner's practice act.

Prepare now! Please share this important information with the billing staff at your practice or in your organization.

Impact:

In the coming months, Prestige will begin rejecting paper and electronic claims for specific services that are submitted without the ordering, referring, or prescribing practitioner's name and individual NPI. For example, if the billed service requires an ordering, referring, or prescribing practitioner and the ordering, referring, or prescribing practitioner's name and individual NPI are not submitted in the appropriate fields on the claim, the claim will be rejected.

Background:

Federal regulations prohibit Prestige from reimbursing providers for any services ordered, referred, prescribed, or rendered by a provider who is currently terminated or excluded from Federal health care programs (42 CFR § 1001.1902(b)). Prestige is implementing this change as part of our commitment to compliance and to the prevention and detection of fraud, waste, and abuse.

Questions:

If you have questions about this communication, please contact your Provider Account Executive or Provider Services at 1-800-617-5727.