

Ordering/Referring/Prescribing Provider

Nurse/Family/Partnership Claim Documentation Training



The Patient Protection and Affordable Care Act (ACA) added requirements for provider screening and enrollment, including a requirement that states require physicians and other practitioners who order, refer or prescribe items or services for Medical Assistance (MA) beneficiaries to enroll as MA providers.

- Medical Assistance Bulletin 99-17-02 :Submission of Claims that Require the National Provider Identifier (NPI) of a Medical Assistance enrolled Ordering, Referring or Prescribing Provider
- The Department of Health and Human Services regulation implementing this requirement can be found at 42 CFR § 455.410.

http://www.dhs.pa.gov/cs/groups/webcontent/documents/bulletin_admin/c_257246.pdf



What's happening now?

- An original prescription from the child's physician, PCP or other prescribing authority is obtained and maintained for the service provided.

What's coming up?

- Nurse Family Partnership claims will be subject to additional editing/auditing to ensure the NPI of the Ordering/Referring/Prescribing provider is included on a claim and that the authorizing physician is registered in PROMISe™



Claims with a
Date of
Service prior
to 4/30/18

- ORP* Documentation Required
- Edits will pay if Missing ORP* data

Claims with a
Date of
Service
on/after
4/30/18

- ORP* Documentation Required
- ORP* Edits will Deny on Errors

*Ordering/Referring/Prescribing



Claims submitted by the following provider types and specialties must include the NPI* of an MA enrolled Ordering/Referring/Prescribing provider when billing the following procedure codes for children eligible for Medicaid.

Provider Type	Provider Specialty	Procedure Codes	ORP Required
08	163	T1002	Yes
16	163	T1002	Yes

*Some claiming formats require the professional license of the Referring Provider



How to obtain the National Provider Identifier (NPI)

National Provider Identifier (NPI) of the Ordering/Referring/Prescribing provider must be included on selected NFP nursing claims.

NFP providers can look-up the Ordering/Referring/Prescribing provider's NPI and Professional License at the NPPES NPI Registry.

- <https://npiregistry.cms.hhs.gov>

Search NPI Records

NPI Number	NPI Type	Taxonomy Description		
<input type="text"/>	Any <input type="button" value="v"/>	<input type="text"/>		
for individuals		for organizations		
First Name	Last Name	Organization Name	Doing Business As	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
City	State	Country	Postal Code	Address Type
<input type="text"/>	Any <input type="button" value="v"/>	Any <input type="button" value="v"/>	<input type="text"/>	Any <input type="button" value="v"/>
<input type="button" value="Clear"/>	<input type="button" value="Search"/>			



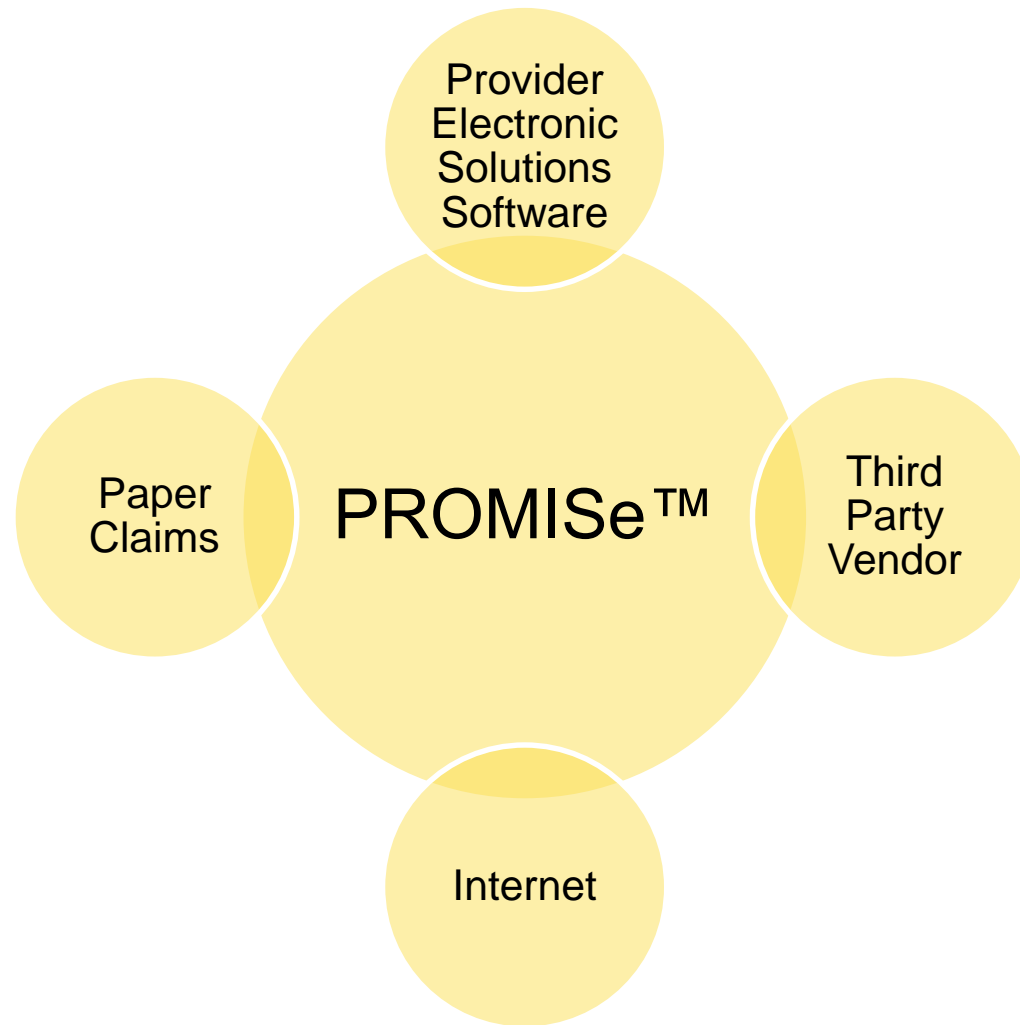
How to obtain the Professional License

Limited claiming formats require the Professional License. Providers who were not successful in obtaining the license through the NPPES (NPI) Registry may also search the Department of State database.

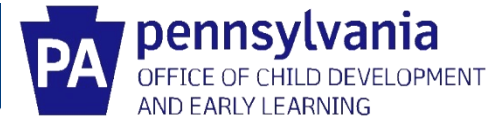
- <https://www.pals.pa.gov/#/page/search>

The screenshot shows the search interface for the Pennsylvania Licensing System Verification service. At the top, there is a navigation bar with 'DEPARTMENT OF STATE' on the left and 'HOME', 'SUPPORT', and 'APPLICATION CHECKLIST' on the right. Below the navigation bar is a welcome message: 'Welcome to the Pennsylvania Licensing System Verification service. By using this service you are able to search for license information on individuals and businesses regulated by the Bureau of Professional and Occupational Affairs. This site is considered a primary source for verification of license credentials provided by the Pennsylvania Department of State.' The main search area has a blue header with a search icon and the text 'Search - Enter one or more fields below.' To the right of this header are four radio buttons: 'Person' (selected), 'Facility', 'Disciplinary', and 'Provider'. Below the header are several search filters arranged in a grid. The first row contains 'Board/Commission' (a dropdown menu with 'Select Board/Commission'), 'License Type' (a dropdown menu with 'Select License'), and 'License Number' (a text input field with 'License Number'). The second row contains 'Name' with three sub-fields: 'Last Name', 'First Name', and 'Middle Name'. The third row contains 'City', 'State' (a dropdown menu with 'State'), and 'Zip' (a text input field with 'Zip'). The fourth row contains 'Country' (a dropdown menu with 'Select County') and 'Country' (a dropdown menu with 'ALL'). At the bottom left of the search area are two buttons: 'Search' and 'Clear'.





Provider Billing Documentation Options – CMS1500



14. DATE OF CURRENT ILLNESS (First symptom) OR INJURY (Accident) OR PREGNANCY (LMP) MM DD YY			15. IF PATIENT HAS HAD SAME OR SIMILAR ILLNESS. GIVE FIRST DATE MM DD YY			16. DATES PATIENT UNABLE TO WORK IN CURRENT OCCUPATION FROM MM DD YY TO MM DD YY					
17. NAME OF REFERRING PROVIDER OR OTHER SOURCE					17a.	18. HOSPITALIZATION DATES RELATED TO CURRENT SERVICES FROM MM DD YY TO MM DD YY					
19. RESERVED FOR LOCAL USE					17b. NPI	19. OUTSIDE LAB? \$ CHARGES <input type="checkbox"/> YES <input type="checkbox"/> NO					
21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY (Relate Items 1, 2, 3 or 4 to Item 24E by Line)						22. MEDICAID RESUBMISSION CODE ORIGINAL REF. NO.					
23. PRIOR AUTHORIZATION NUMBER											
24. A. DATE(S) OF SERVICE From MM DD YY To MM DD YY		B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCCPS MODIFIER		E. DIAGNOSIS POINTER	F. \$ CHARGES	G. DAYS OR UNITS	H. EPSDT Family Plan	I. ID. QUAL	J. RENDERING PROVIDER ID. #
1										NPI	
2										NPI	
3										NPI	
4										NPI	
5										NPI	
6										NPI	
25. FEDERAL TAX I.D. NUMBER			SSN EIN		26. PATIENT'S ACCOUNT NO.			27. ACCEPT ASSIGNMENT? (if gov't. claims, see back) <input type="checkbox"/> YES <input type="checkbox"/> NO		28. TOTAL CHARGE \$	
										29. AMOUNT PAID \$	
										30. BALANCE DUE \$	
31. SIGNATURE OF PHYSICIAN OR SUPPLIER INCLUDING DEGREES OR CREDENTIALS (I certify that the statements on the reverse apply to this bill and are made a part thereof.)					32. SERVICE FACILITY LOCATION INFORMATION			33. BILLING PROVIDER INFO & PH # ()			
SIGNED					a.			b.			
DATE											

PHYSICIAN OR SUPPLIER INFORMATION

NUCC Instruction Manual available at: www.nucc.org
Item 019-9042/12716 Patterson Office Supplies 1.800.637.1140

APPROVED OMB-0938-0999 FORM CMS-1500 (08/05)



Provider Billing Documentation Options – PES

837 Professional

Total Charge .00 OI Amount .00 Billed Amount .00 Services 1

Hdr 1 | Hdr 2 | Hdr 3 | **Hdr 4** | Hdr 5 | Srv 1 | Srv 2 | Srv 3

Referring Provider

Provider ID Location Code NPI

Last/Org Name First Name MI

Rendering Provider

Provider ID Location Code NPI

Last/Org Name First Name MI

Service Facility Location

Facility ID Location Code NPI

Facility Name

Recipient ID	Last Name	First Name	Billed Amount	Last Submit Dt	Status
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Add
Copy
Delete
Undo All
Save
Find...
Print
Close



Provider Billing Documentation Options – Internet

Service Information:

Rendering Provider ID:	<input type="text"/>	NPI:	<input type="text"/>	Release of Medical Data:	<input type="text"/>
	Taxonomy:	Zip:			
Tax ID:	<input type="text"/>			Benefits Assignment:	<input type="text"/>
Referring Provider ID:	<input type="text"/>	NPI:	<input type="text"/>	Patient Signature:	<input type="text"/>
	Taxonomy:	Zip:			
Referral Code:	<input type="text"/>			Pregnancy Indicator:	<input type="text"/>
Place of Service:	<input type="text"/>				
Facility ID:	<input type="text"/>	NPI:	<input type="text"/>		
Facility Name:	<input type="text"/>				
Admission Date:	<input type="text"/>	(MM/DD/YYYY)		Contract Type:	<input type="text"/>
Discharge Date:	<input type="text"/>	(MM/DD/YYYY)		Contract Code:	<input type="text"/>
Special Program Code:	<input type="text"/>				
Billing Note:	<input type="text"/>				

Both the provider's professional license (8 or 9 character) and the NPI are required for Internet claiming.



Providers who submit claims using 3rd party software will need to adjust the information submitted in the 837 transaction. The following Loop and Segment data is required to be compliant with documentation of the Ordering/Referring/Prescribing.

ANSI 837 Loop and Segment
2310A NM109

Information about certification of the 837 transaction can be found:
<http://www.dhs.pa.gov/provider/promise/certification/>



Error Status Codes

ESC	DESCRIPTION	CAUSE	ACTION
1248	REFERRING PROVIDER REQUIRED FOR WAV - DTL	The provider NPI is missing for a service that requires Order/Referring/Prescribing provider information	<ul style="list-style-type: none">Submit the claim again using the NPI of the Ordering/Referring/Prescribing provider
1230	REFERRING PROVIDER'S NPI NUMBER NOT ON FILE	The provider NPI entered on the claim is not an enrolled Pennsylvania Medicaid provider	<ul style="list-style-type: none">Request the Ordering/Referring/Prescribing provider to complete a Pennsylvania Medicaid Enrollment application using the online portal
1247	REFERRING PROVIDER MAY NOT BE CHIP ONLY	The provider NPI entered on the claim is enrolled, but only as a CHIP provider	<ul style="list-style-type: none">Request the Ordering/Referring/Prescribing provider to complete a Pennsylvania Medicaid Enrollment application using the online portal
1249	REFERRING PROV MUST BE AN INDIVIDUAL FOR WAV - DTL	The provider NPI included on the claim represents an office or practice, and not the individual person who is Ordering/Referring/Prescribing	<ul style="list-style-type: none">Submit the claim again using the NPI of the individual person who is Ordering/Referring/Prescribing



Provider Quick Tip 155, titled “Announcing the New Medical Assistance (MA) Enrolled Provider Portal Lookup Function.”

- Quick Tip Link:

http://www.dhs.state.pa.us/cs/groups/webcontent/documents/communication/p_034770.pdf.

- Provider Portal Look-up Link:

<https://promise.dpw.state.pa.us/portal/Default.aspx?alias=promise.dpw.state.pa.us/portal/provider>



Providers are now able to enroll through the electronic provider enrollment application. The benefits of using the secure online portal are:

- Allowing documents, that previously had to be mailed or faxed, to be uploaded directly to the portal
- Permitting providers see the status of their submission
- Decreasing wait time to review applications

Electronic Enrollment Application Link:

<http://www.dhs.pa.gov/provider/promise/enrollmentinformation/index.htm>



DHS Provider Inquiry Unit

- 1-800-537-8862

Provider Assistance Center (PAC)

- 1-800-248-2152
 - For Provider Electronic Solutions software and electronic technical submission questions only

