August 18, 2020



# **Provider Memorandum**

# Ordering, Referring, Prescribing, and Attending Provider (ORP) - National Provider Identifier (NPI) Requirements Reminder

Effective January 1, 2020, Molina Healthcare of Illinois (Molina) Aligned claims processing requirements with the Department of Healthcare and Family Services (HFS) regulations for the inclusion of the Ordering, Referring, and Prescribing (ORP) National Provider Identifier (NPI) on required claims.

As described in a February <u>Memo</u>, Molina will require the following information for claims with dates of service on or after January 1, 2020:

- Claims for services that require an ORP Provider will be required to include both the name and NPI of the practitioner who ordered, referred, or prescribed the service.
- The ORP Provider's NPI must be enrolled in and active with the Illinois Assistance Program through the Illinois Medicaid Program Advanced Cloud Technology (<u>IMPACT</u>).
- Please note that it is the responsibility of the <u>rendering</u> service Provider to validate that the ORP is active and registered in IMPACT.
- This requirement also applies to claims in which Medicare is the primary payer.

Effective with dates of service on or after January 1, 2020 (excluding pharmacy claims), Molina will reject claims if the required ORP information is missing or invalid, or if the ORP is not enrolled in IMPACT.

**Effective with claim receipt dates beginning January 1, 2020 (pharmacy only)**, Molina will reject pharmacy claims submitted through the pharmacy system at point-of-sale if the prescribing practitioner identified on the pharmacy claim is not enrolled in IMPACT.

Provider Type	Provider Description	Claim Format	COS	ORP Requirements	
10	Physician	837P	001	Required when CPT is consultation 99241-99245 and 99251-99255	
12	Optometrist	837P	001, 003	Required when CPT is consultation and when POS is 31, 32, or 33 and procedure code is between 99201 – 99499	
13	Podiatrist	837P	004	Required when POS 31, 32, 33/LTC; also required when CPT is consultation	
16	Advanced practice nurse	837P	057	Required when CPT is consultation	
22	Physical therapist	837P	011	Always	
23	Occupational therapist	837P	012	Always	
24	Speech pathologist	837P	013	Always	
25	Audiologist	837P	014	Always	

# Listed below are the claims that will require an ORP on the claims:

Provider Type	Provider Description	Claim Format	COS	ORP Requirements		
25	Audiologist - equipment	837P	041, 048	Always		
030, 031, 032	Hospital billing fee-for- service	837P	001, 011, 012, 013, 030	Always		
040, 043, 048	FQHC/ERC/RHC	837P	026	Required when CPT is consultation		
51	Community health agency	837P	011, 012, 013	Always required when billing for physical, occupational, and/or speech therapies		
52	Certified health dept	837P	011, 012, 013	Always required when billing for physical, occupational, and/or speech therapies		
57	Home nursing agency	837P	066	Always		
61	Independent laboratory	837P	043	Always		
62	Optical supply companies	837P	045	Always		
63	Durable medical equipment & supplies	837P	041, 048	Always		
64	Imaging: Portable X-ray	837P	044	Always		
64	Imaging centers	837P	001	Always		
65	Independent diagnostic testing facilities	837P	101	Always		
30, 31, 32	Hospital, psych hospital, rehab hospital	8371		An attending Provider name and NPI is always required on an institutional claim form, and will be validated to ensure the NPI is both registered in IMPACT and active on the date of service. ORP is required when the ordering or referring Provider is different from the attending Provider. If an ORP is not required on the claim, we encourage you <b>not</b> to send an ORP.		
50	Home health	8371	066	Always		
52	Home health	8371	066	Always		

#### Molina requires claims to follow HIPAA 5010 ASC/X12 format:

- For professional claims on an 837P
  - Referring Provider is required when submitted at claim level 2310A or service line 2420F; qualifier DN.
  - Ordering Provider is required at service line level 2420E: qualifier DK.
  - If a paper HCFA is needed, the ORP name should be in box 17, the qualifier in box 17a, and the NPI should be in box 17b.
- For institutional claims on an 8371
  - ORP info should be submitted in loop 2310F with the NM1-09 containing the referring Provider NPI and the NM1-01 DN qualifier.
  - Line level referring Provider could be specified in loop 2420D.
  - The attending Provider should be in loop 2310A.
  - If a paper UB04 claim is needed, attending Provider information will be in form locator 76.
  - If a paper UB04 claim is needed, ORP information should be included in form locator 78.

# **Claim Denials**

Claims will be denied for the following reasons:

- If the ORP or any of the ORP information is missing:
  - Name
  - Qualifier
  - NPI
- If the claim contains any invalid ORP information:
  - Wrong loop/segment
  - Name and NPI not active or enrolled in IMPACT
- If the attending Provider is missing or incorrect:
  - Missing from 837I/UB04 claims
  - Invalid/inactive with IMPACT
  - A facility instead of an individual

### CARC/RARC Codes

Scenario	Remit	CARC	CARC Description	RARC	RARC Description	CAGC
Prescribing	N31	16	Claim/service lacks information or has submission/billing error(s)	N31	Missing/incomplete/invalid prescribing Provider identifier	со
Referring	N286	16	Claims/service lacks information or has submission/billing error(s)	N286	Missing/incomplete/invalid referring Provider primary identifier	со
Ordering	N265	16	Claims/service lacks information or has submission/billing error(s)	N265	Missing/incomplete/invalid ordering Provider identifier	СО
Attending	MCP116	16	Attending Provider is not eligible to provide direction of care	N253	Missing/incomplete/invalid attending Provider identifier	со

# **Pharmacy Denials**

Claims will be denied at the pharmacy with the following reject message:

 Reject 889 – Prescriber not enrolled in State Medicaid Program. For enrollment, contact (877) 782-5565.

#### Questions

Providers who have questions, concerns, or would like additional training—including how to use the Molina Provider Portal—may contact their Provider Network Manager or email the Provider Network Management department <u>MHILProviderNetworkManagement@MolinaHealthcare.com</u>.

For help identifying your Provider Network Manager, visit Molina's Service Area page at <u>MolinaHealthcare.com</u>.

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