CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-08 Medicare Program Integrity	Centers for Medicare & Medicaid Services (CMS)
Transmittal 154	Date: JULY 28, 2006
	Change Request 5059

SUBJECT: Coding Change to MCS to Accept NPI From PECOS Extract File

I. SUMMARY OF CHANGES: The NPI is a new data element which will be collected as a part of the Medicare enrollment process as of May 15, 2006. The Medicare Claims System (MCS) must make necessary coding changes to be able to accept the NPI from the daily PECOS extract file as of January 1, 2007.

NEW / REVISED MATERIAL

EFFECTIVE DATE: JANUARY 1, 2007

IMPLEMENTATION DATE: JANUARY 1, 2007

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE	
N/A		

III. FUNDING:

No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2007 operating budgets.

IV. ATTACHMENTS:

One-Time Notification Attachment

*Unless otherwise specified, the effective date is the date of service.

Attachment – One-Time Notification

Pub. 100-08 Transmittal: 154 Date: July 28, 2006 Change Request 5059

SUBJECT: Coding Change to MCS to Accept NPI From PECOS Extract File

I. GENERAL INFORMATION

A. Background: Provider Enrollment Chain and Organization System (PECOS) Release 4.3 (currently scheduled for January 2007) will complete necessary coding changes to PECOS to enable the National Provider Identifier (NPI) to be transmitted, via the daily PECOS extract file, to the Medicare Claims System (MCS). Currently, MCS is not coded to accept this new Medicare Identifier from the (PECOS) extract.

B. Policy: Collection and retention of CMS 855 enrollment data has been cleared through a Paperwork Reduction Act Notice in the "Federal Register". The authority for the various types of data to be collected is found in multiple sections of the Social Security Act and Code of Federal Regulations. Specifically in Sections 1816, 1819, 1833, 1834, 1842, 1861, 1866 and 1891 of the Act and 42 CFR Subchapter E.

II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement "Should" denotes an optional requirement

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)								
		F I	R H H I	C a r r i e r	D M E R C		mtain M C S	Systemers V M S	С	Other
5059.1	The MCS shall conduct all necessary analysis to identify all coding changes that will be required for the MCS in order for them to accept the validated NPI from the daily data extract sent from PECOS to MCS.			X			X			PECOS
5059.2	The MCS shall implement all necessary coding changes to enable the system to accept the validated NPI from the PECOS daily extract file.			X			X			PECOS
5059.2.1	The MCS shall conduct all necessary testing to validate effective implementation of coding changes.			X			X			PECOS

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)								
Number		FI	R H H I	C a r r i e	D M E R C	Sha	<u> </u>	Systemers V M S	C W F	Other
5059.3	The MCS shall place the validated NPI from PECOS on the MCS Master Provider File.			X			X			PECOS
5059.4	The MCS shall ensure that the validated NPI from PECOS is not editable by their end users on any MCS interface screen.			X			X			
5059.5	The MCS shall ensure that the validated NPI from PECOS can not be overwritten from any other data source.			X			X			PECOS

III. PROVIDER EDUCATION

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)								
		F I	R H H I	C a r r i e r	D M E R C	F I		•	С	Other
	None.									

IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions:

X-Ref Requirement #	Instructions
5059.1	Utilize the attached updated PECOS Provider Enrollment Export
	layout for analysis and design.

B. Design Considerations: N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements

C. Interfaces: Updated PECOS Provider Enrollment Export Layout File

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: N/A

F. Testing Considerations:

- Testing should validate that MCS can continue to accept an extract file from PECOS and process successfully.
- The MCS test region should retrieve the export data created from PECOS, load the data into the MCS test region and validate that the data was applied to MCS successfully.
- The Part B data centers should retrieve the export data created from PECOS, load the data into their MCS test region and validate that the data was applied to MCS successfully.

V. SCHEDULE, CONTACTS, AND FUNDING

Effective Date*: January 1, 2007 Implementation Date: January 1, 2007	No additional funding will be provided by CMS; contractor activities are to be carried out
Pre-Implementation Contact(s): Alisha Banks (410) 786-0671 Alisha.Banks@cms.hhs.gov	within their FY 2007 operating budgets.
Post-Implementation Contact(s): Alisha Banks (410) 786-0671 Alisha.Banks@cms.hhs.gov	

^{*}Unless otherwise specified, the effective date is the date of service.

Attachment





	File Header Record Layout		
Description	Field Name	Length Default Va	 Start Position
Record Type	HEADER-REC-TYPE	2 "FH"	0
Carrier ID	HEADER-CARRIER-ID	5	2
Create Year	HEADER-CREATE-CCYY	4	7
Create Month	HEADER-CREATE-MM	2	11
Create Day	HEADERCREATE-DD	2	13
Filler	FILLER	806	15
		Total Length	821

	File Trailer Record Layout			
Description	Field Name	Length	Default Val.	Start Position
Record Type	FILE-RECORD-TYPE	2	! "FT"	0
Carrier ID	TRAILER-CARRIER-ID	5	5	2
Create Date	FILE-RECORD-COUNT	7	,	7
Filler	FILLER	807	,	14
		Total Length		821

Enrollmen	t Base Record Layout		
Description	Field Name	Length Default Va	 Start Position
Record Type	BASE-REC-TYPE	2 "00"	0
Carrier ID	BASE-CARRIER-ID	5	2 7
Create Date	BASE-CREATE-DT	8	7
PAC ID	BASE-PAC-ID	10	15
Enrollment ID	BASE-ENROLLMENT-ID	15	25
Organization Information			
Legal Business Name	BASE-LBA-NAME	70	40
DBA Name	BASE-DBA-NAME	70	110
TIN Name	BASE-ORG-TIN	9	180
Individual Information			
First Name	FIRST-NAME	25	189
Middle Name	MIDDLE-NAME	25	214
Last Name	LAST-NAME	35	239
Name Suffix	NAME-SUFFIX	10	274
Credentials	CREDENTIALS	10	284
SSN	SSN-IND	9	294
Legal Business Name	LEGAL-BUSINESS-NAME-IND	60	303
TIN	TIN-IND	9	363
Supplier Information			
Supplier Type	SUPPLIER-TYPE	2	372
Non-Physician Information			374
Non Physician Speciality	NON-PHYSICIAN-TYPE	2	374
Undefined Specialty	NP-SPECIALTY-TXT	60	376
Specialty Effective Date	NP-SPECIALTY-EFF-DT	8	436
Specialty End Date	NP-SPECIALTY-END-DT	8	444
Correspondance Address			
Foreign Code	COR-ADR-FOREIGN-CD	1	452
Line 1 Street Address	COR-ADR-LN1	55	453
Line 2 Street Address	COR-ADR-LN2	55	508
City	COR-ADR-CITY	30	563
State	COR-ADR-STATE	2	593
Foreign-State	COR-ADR-FOREIGN-STATE	30	595
Zip-Code	COR-ADR-ZIP	15 " "	625
Foreign Postal Code	COR-ADR-POSTAL-CD	15	640
Country	COR-ADR-COUNTRY	30	655
Start Date	COR-ADR-START-DT	8	685
Phone	COR-ADR-PHONE	20	693
Fax	COR-ADR-FAX	20	713
Email	COR-ADR-EMAIL	80	733
End Date	COR-ADR-END-DT	8	813
	•	Total Length	821

Enrollment Child	Record Layout		
Description	Field Name	Length Default Val.	Start Position
Record Type	RECORD-TYPE	2 see list *	0
Carrier ID	CARRIER-ID-CHILD	5	2
Create Date	CREATION-DATE-CHILD	8	7
PAC ID	CHILD-PAC-ID	10	15
Enrollment ID	ENROLLMENT-ID-CHILD	15	25
Child Record Information (See Layouts Below)	CHILD-DETAIL	501	40
Filler	FILLER	280	541
		Total Length	821

*Record Type Values
*01" -- HOSPITAL-DEPARTMENTS
*02" -- SPECIALTY
*03" -- MEDICARE-IDENTIFICATION
*04" -- PRACTICE-LOCATION
*05" -- EMPLOYER
*06" -- MEMBERS
*07" -- GROUPS
*08" -- ENROLLMENT STATUS
*09" -- UPIN
*10" -- PAY-TO
*11" -- PAR STATUS





Hospital Department Child Record Layout					
Description	Field Name	Length	Default Val.	Start Position	
Hospital Department Pin	HSP-DPT-PIN	10		0	
Department Specialty	HSP-DPT-SPECIALTY-CD	2		10	
Department Name	HSP-DPT-NAME	150		12	
Filler	FILLER	33	9	162	
		Total Length	า	501	

Physician Specialty Child Record Layout					
Description	Field Name	Length	Default Val.	Start Position	
Physician Specialty	SPECIALTY-PHY-CD	2		0	
Undefined Specialty	SPECIALTY-UNDFN-TXT	60		2	
Effective Date	SPECIALTY-EFF-DT	8		62	
End Date	SPECIALTY-END-DT	8		70	
Primary/Secondary	SPECIALTY-PRIMARY-SW		1	78	
Filler	FILLER	42	2	79	
		Total Lengtl	n	501	

Medicare ID Child Record Layout					
Description	Field Name	Length Default Val	. Start Position		
Medicare ID Type	MEDICARE-ID-TYPE	2	0		
Medicare ID	MEDICARE-ID	15	2		
End Date	MEDICARE-ID-END-DT	8	17		
Filler	FILLER	476	25		
		Total Length	501		

NPI will be sent via the Medicare ID child record. The NPI will appear in the Medicare ID field and the Medicare ID Type will be "NP".

Practice Location Child Record Layout					
Description	Field Name	Length Default Val	. Start Position		
Practice Location Name	PRACTICE-NAME	35	0		
Foreign/Domestic Code	FOREIGN-DOMESTIC-CODE-PRACTICE	1	35		
Line 1 Street Address	PRACTICE-STR-ADR-LN1	55	36		
Line 2 Street Address	PRACTICE-STR-ADR-LN2	55	91		
City	PRACTICE-CITY	30	146		
State	PRACTICE-STATE	2	176		
Foreign State	PRACTICE-FOREIGN-ST	30	178		
Zip Code	PRACTICE-ZIP-CODE	15	208		
Telephone	PRACTICE-TELEPHONE	20	223		
Email	PRACTICE-EMAIL	80	243		
Fax	PRACTICE-FAX	20	323		
Foreign Postal Code	PRACTICE-POSTAL-CODE	15	343		
Country	PRACTICE-COUNTRY	30	358		
NPI Identification Number	NPH-1D	15	388		
NPI Indicator	NPI-IND	1	403		
Filler	FILLER	14	404		
Start Date	PRACTICE-START-DATE	8	418		
End Date	PRACTICE-END-DATE	8	426		
Claim Systems PIN	CLAIM-SYS-PIN-PRACTICE	10	434		
CLIA Number	CLIA-NUMBER-PRACTICE	15	444		
FDA-Mammography Number	FDA-MAMMOGRAPHY-PRACTICE	15	459		
RRB Indicator	RRB-INDICATOR-PRACTICE	1	474		
RRB PIN	RRB-PIN-PRACTICE	10	475		
Create Date	CREATE-DATE-PRACTICE	16	485		
		Total Length	501		

The NPI and the NPI Indicator will be sent via the Practice Location child record in place of the County field.

Description	Field Name	Length Default Val.	Start Position
PAC-ID	PROVIDER-PAC-ID-EMPLOYER	10	. (
Enrollment ID	ENROLLMENT-ID-EMPLOYER	15	10
SSN	SSN-EMPLOYER	9	25
TIN	TIN-EMPLOYER	9	34
Individual Name	INDIVIDUAL-NAME-EMPLOYER	85	43
Legal Business Name	LEGAL-BUSINESS-NAME-EMPLOYER	70	128
Effective-Date	EFFECTIVE-DATE-EMPLOYER	8	198
End Date	END-DATE-EMPLOYER	8	206
Filler	FILLER	287	214
		Total Length	501

Member Child Record Layout					
Description	Field Name	Length Default V	/al. Start Position		
SSN	SSN-MEMBERS	9	0		
Name	PRACTITIONER-NAME-MEMBERS	85	9		
PAC ID	PROVIDER-PAC-ID-MEMBERS	10	94		
Enrollment ID	ENROLLMENT-ID-MEMBERS	15	104		
Effective Date	EFFECTIVE-DATE-MEMBERS	8	119		
End Date	END-DATE-MEMBERS	8	127		
Filler	FILLER	366	135		
		Total Length	501		

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Group Child Record Layout					
Description	Field Name	Length	Default Val.	Start Position	
TIN	TIN-GROUPS	9)	0	
Legal Business Name	LEGAL-BUSINESS-NAME-GROUPS	70)	9	
PAC ID	PROVIDER-PAC-ID-GROUPS	10		79	
Enrollment ID	ENROLLMENT-ID-GROUPS	15	5	89	
Effective Date	EFFECTIVE-DATE-GROUPS	8	3	104	
End Date	END-DATE-GROUPS	8	3	112	
Filler	FILLER	381		120	
		Total Length		501	

Enrollment Status Child Record Layout					
Description	Field Name	Length	Default Val.	Start Position	
Enrollment Status Code	ENROLLMENT-STATUS-CODE		2	0	
Enrollment Status Reason Code	ENROLLMENT-STATUS-REASON	3		2	
Effective Date	ENROLLMENT-STATUS-EFF-DT		8	5	
End Date	ENROLLMENT-STATUS-END-DT		8	13	
Filler	FILLER	48	30	21	
		Total Lengt	th	501	

UPIN Child Record Layout			
Description	Field Name		Position
Record Code	UPN-REC-CD	1	(
Record Status	UPN-PHY-STAT	1	
Group/Individual Name			
Name	UPN-GRP-NAME	43	2
Individuals redefine UPN-NAME			
Last Name	UPN-LNAME	20	2
First Name	UPN-FNAME	14	22
Middle Name	UPN-MNAME	6	36
Suffix	UPN-SNAME	3	42
Pay-To Address	UPN-BLG-ADR	25	45
Pay-To City	UPN-BLG-CITY	15	70
Pay-To State	UPN-BLG-STATE	2	85
Pay-To Zip	UPN-BLG-ZIP	9	87
Practice Location Address	UPN-BUS-ADR	25	96
Practice Location City	UPN-BUS-CITY	15	121
Practice Location State	UPN-BUS-STATE	2	136
Practice Location Zip	UPN-BUS-ZIP	9	138
Licensing State	UPN-STATE-LIC	2	147
State License Number	UPN-STATE-LIC-NUM	12	149
Date of Birth	UPN-DOB	8	161
Medical School	UPN-MED-SCHOOL	5	169
Year of Graduation	UPN-GRD-YR	4	174
Date of Death	UPN-DEATH-DT	8	178
UPIN Credentials	UPN-CRDNTLS	3	186
Specialty Code	UPN-PRMRY-SPC	2	189
Board Certified	UPN-PRMRY-BD-CERT	1	191
Specialty Code	UPN-SEC-SPC	2	192
Board Certified	UPN-SEC-BD-CERT	1	194
Sanction Code	UPN-SNCT-CD	1	195
Effective Date	UPN-EFF-DT	4	196
Years Sanctioned	UPN-YRS-SNCT	2	200
Practice Type	UPN-RES-INTRN-CD	1	202
Group Practice Code	UPN-GRP-PRC-IND	1	203
Participation Code	UPN-PRT-IND	1	204
TIN	UPN-TAX-ID	9	205
PECOS UPIN ID Part 2	UPN-PECOS-ID2	2	214
FILLER	FILLER	3	216
Claim System Pin	UPN-PROV-NO	14	219
UPIN 6-Digit Base	UPN-CD	6	233
Error Control Number	UPN-CNTR-NO	10	239
Carrier Number	UPN-CAR-NO	5	249
Error Code	UPN-ERR-CD	15	254
Record Validated by Outside Source	UPN-DOC-VLDNT	1	269
Special Processing Code	UPN-MPIER-UPD-IND	1	270
Special Processing Text	UPN-SPC-PRCS-DATA	20	27
UPIN	UPN-UPIN	10	291
PECOS UPIN ID Part 1	UPN-PECOS-ID1	3	301
FILLER	FILLER	197	304
		Total Length	501

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Pay-to Child Record Layout				
Description	Field Name	Length	Default Val.	Start Position
Foreign/Domestic Code	FOREIGN-DOMESTIC-CODE-PAY	1		0
Line 1 Street Address	PAY-TO-STR-ADR-LINE1	55		1
Line 2 Street Address	PAY-TO-STR-ADR-LINE2	55		56
City	PAY-TO-CITY	30		111
State	PAY-TO-STATE	2		141
Foreign State	PAY-TO-FOREIGN-ST	30		143
Zip Code	PAY-TO-ZIP-CODE	15		173
Foreign Postal Code	PAY-TO-POSTAL-CD	15		188
Country	PAY-TO-COUNTRY	30		203
Start Date	PAY-TO-START-DATE	8		233
End Date	PAY-TO-END-DATE	8		241
Claim Systems PIN	CLAIM-SYS-PIN-PAY	10		249
RRB Indicator	RRB-INDICATOR-PAY	1		259
RRB PIN	RRB-PIN-PAY	10		260
Creation Date	CREATE-DATE-PAY	16		270
Filler	FILLER	215		286
		Total Length		501

Par Status Child Record Layout					
Description	Field Name	Length Default Val	 Start Position 		
Par Status Indicator	PAR-STATUS-INDICATOR	1	0		
Effective Date	PAR-STATUS-EFF-DT	8	1		
End Date	PAR-STATUS-END-DT	8	9		
Filler	FILLER	484	17		
		Total Length	501		

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