CMS Manual System

Pub 100-08 Medicare Program Integrity

Department of Health & Human Services (DHHS)

Centers for Medicare & Medicaid Services (CMS)

Transmittal 141

Date: FEBRUARY 24, 2006

CHANGE REQUEST 4191

SUBJECT: Modification to the UPIN Process

I. SUMMARY OF CHANGES: This change request publishes material from the Medicare Carriers Manual, Part 4, Professional Relation, sections 1000 - 1015, that was inadvertently omitted from the Internet Only Manual.

MANUALIZATION/CLARIFICATION:
EFFECTIVE DATE : Not Applicable
IMPLEMENTATION DATE : Not Applicable

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:
R = REVISED, N = NEW, D = DELETED

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
N	14/Table of Contents
N	14/14.1/National Registry of Physicians/Health Care Practitioners/Group Practices
N	14/14.1.1/Ongoing Data Collection on Physicians/Health Care Practitioners/Group Practices Applications
N	14/14.1.2/Physicians/Health Care Practitioners/Group Practices Record-Required Information and Format
N	14/14.1.3/Maintaining Physician/Health Care Practitioner/Group Practices Memberships
N	14/14.1.4/Validation of Physician/Health Care Practitioner/Group Practice Credentials, Certification, Sanction, and License Information for Prior Practices

N	14/14.1.5/UPIN Cross-Referral Requirement
N	14/14.2/Maintenance of the Registry
N	14/14.2.1/General
N	14/14.2.2/Add Records
N	14/14.2.3/Adding Physician/Health Care Practitioner/Group Practice Setting
N	14/14.2.4/Update Records
N	14/14.2.5/Rejections
N	14/14.2.6/Exceptions
N	14/14.2.7/Batching Procedures
N	14/14.3/Privacy Act Requirements
N	14/14.3.1/Release of UPINs
N	14/14.3.2/Release of UPINs to Physicians, Nurse Practitioners, Clinical Nurse Specialists, and Physician Assistants
N	14/14.4/Automatic Notifications
N	14/14.5/UPIN Directory
N	14/14.6/UPINs for Ordering/Referring Physicians
N	14/14.6.1/CWF Edits and Claims Processing Requirements
N	14/14.6.2/Surrogate UPINs
N	14/14.6.3/Carrier Registry Telecommunications Interface
N	14/14.7/General
N	14/14.7.1/AGNS/CD
N	14/14.7.2/File Transfer
N	14/14.7.3/Registry Customer Information Control System
N	14/14.7.4/T-Mail
N	Exhibits/39/Carrier Record Requirements
N	Exhibits/40/UPIN Carrier Record Layout
N	Exhibits/40.1/Trailer Record Data Elements
N	Exhibits/41/List of Medical School Codes
N	Exhibits/41.1/List of Medical Schools in the U.S.
N	Exhibits/41.2/Directory of Podiatric Medical Colleges
N	Exhibits/41.3/American Optometric Association Council on Optometric Education
N	Exhibits/41.4/List of Chiropractic Schools in the U.S.
N	Exhibits/42/Sanction Codes

| N | Exhibits/Exhibit 5 |

III. FUNDING:

No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2006 operating budgets.

IV. ATTACHMENTS:

Business Requirements

Manual Instruction

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

Attachment - Business Requirements

Pub. 100- 08	Transmittal: 141	Date: February 24, 2006	Change Request 4191

SUBJECT: Modification to the UPIN Process

I.   GENERAL INFORMATION

A.   Background: Convert publishes material from the Medicare Carriers Manual, Part 4, Professional Relation, sections 1000 - 1015, to the Program Integrity Manual, chapter 14, that was inadvertently omitted from the Internet Only Manual

B.   Policy: Section 1833(q) of the Social Security Act requires that all physicians that meet the 1861(r) definition of a physician must have a UPIN and all claims for services ordered or referred by one of these physicians include the names and UPINs of the ordering/referring physician.

C.   Provider Education: None.

II.   BUSINESS REQUIREMENTS

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

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)								
		FI	RHHI	Carrier	DMERC	Shared System Maintainers				Other
						FISS	MCS	VMS	CWF	
4191.1	Contractors and maintainers shall be in compliance with the instructions in Pub 100-04, Medicare Carriers Manual, Part 4, sections 1000 - 1015 which is being convert to the Program Integrity Manual, chapter 14.			X			X			

III.   PROVIDER EDUCATION

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)					
		FI	RHH	Car	DME	Shared System Maintainers	Other

					F I S S	M C S	V M S	C W F	
	None								

IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

X-Ref Requirement #	Instructions

B. Design Considerations: N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements

C. Interfaces: N/A

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

E. Dependencies: N/A

F. Testing Considerations: N/A

V. SCHEDULE, CONTACTS, AND FUNDING

Effective Date*: Not Applicable **Implementation Date:** Not Applicable **Pre-Implementation Contact(s):** Gerald Wright (410) 786-5798 **Post-Implementation Contact(s):** Your regional office contact	**No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2006 operating budgets.**

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

Medicare Program Integrity Manual
Chapter 14 - Physician Identification and Registration

Table of Content
(Rev. 141, 02-24-06)

14.1 - National Registry of Physician/Health Care Practitioner/Group Practices
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

A system of physician identifiers is mandated by §9202 of the Consolidated Omnibus Budget Reconciliation Act of 1985. It requires a unique identifier for each physician who provides services for which Medicare payment is made. An identifier is assigned to each physician regardless of his or her practice configuration, i.e, each physician whether practicing solo, in a partnership, in a group, or in any other configuration is assigned a unique number which remains constant throughout his or her Medicare affiliation. The Unique Physician/Practitioner Identification Number (UPIN) is established in a national Registry of Medicare Physician Identification and Eligibility Records (MPIER).

The notice of the system of records for the UPIN Registry is being changed to include health care practitioners and group practices.

§ 1833(e) of the Social Security Act provides authority for actions and procedures that gather information... "No payment shall be made to any provider of services or other person under this part unless there has been furnished such information as may be necessary in order to determine the amounts due such provider or other person under this part for the period with respect to which the amounts are being paid or for any prior period." The Registry is being expanded to include health care practitioners and group practices to facilitate this requirement.

A physician is a doctor of medicine or osteopathy, dental medicine, dental surgery, podiatric medicine, optometry, or chiropractic medicine legally authorized to practice by the State in which he/she performs such function or action as defined in §1861(r) of the Social Security Act.

A health care practitioner includes, but is not limited to, physician assistant, certified nurse-midwife, qualified psychologist, nurse practitioner, clinical social worker, physical therapist, occupational therapist, respiratory therapist, certified registered nurse anesthetist, or any other practitioner as may be specified by the Secretary as defined in §1842(b)(4)(I) of the Social Security Act. Included are anesthesia assistant, independent billing psychologist, independent billing audiologist, certified clinical nurse specialist, family nurse practitioner, clinical psychologist, certified registered nurse practitioner and licensed clinical social worker. The following medical suppliers/entities are also included mammography screening center, ambulance service supplier, portable X-ray supplier, independent physiological laboratory.

A group practice is a group of two or more physicians and non-physician practitioners legally organized in a partnership, professional corporation, foundation, not-for-profit corporation, faculty practice plan, or similar association, (A) in which each physician who is a member of the group provides substantially the full range of services which the physician routinely provides (including medical care, consultation, diagnosis, or treatment) through the joint use of shared office space, facilities, equipment, and personnel;

(B) for which substantially all of the services of the physicians who are members of the group are provided through the group and are billed in the name of the group and amounts so received are treated as receipts of the group; 8 in which the overhead expenses of and the income from the practice are distributed in accordance with methods previously determined by members of the group; and (D) which meets such other standards as the Secretary may impose by regulation to implement §1877(h)(4) of the Social Security Act. The group practice definition also applies to health care practitioners.

A UPIN is to be assigned to all physicians, health care practitioners, and group practices who bill or perform services for Medicare payment. A UPIN has two fields, a randomly assigned unique 6-digit alpha/numeric base number to uniquely identify the practitioners and group, and a 4-digit location identifier to identify the billing and business practice setting. The 4-digit identifiers are to be assigned regardless of an affiliation with an individual practice, partnership or group practice, including hospital based locations.

Do not transmit 10-digit UPINs to physicians, health care practitioners and medical groups, use them on the claim form or change your processing system to use them as primary provider numbers. Ten-digit UPINs will be used internally to link existing numbering systems and facilitate the integration of Medicare to a new national provider number system .. Do not release ten-digit UPINs at this time. Release 6-digit UPINs only.

A practice setting is the address where services are performed or an address where payment is sent if different from where the service was performed. Send group practice membership information to the Registry. The file will cross-refer members to the group practice. (See § 14.12.)

Examples of the Registry UPIN records for physician/health care practitioner, and group practices:

Physician/Health Care Practitioner in solo practice only:

Dr. Jones in solo practice
A11111 (base)   0001 (location)

Physician/Health Care Practitioner in group practice only:

Dr. Sebron in group practice only
D22222 (base)   0001 (location)

Physical Therapist in group practice only:

Betty West Physical Therapist
R22222 (base)   0001 (location)

Group Practice in multiple location:

Red Medical Group Practice at 2 locations
W11111 (base)   0001 (location No. 1)
W11111 (base)   0002 (location No. 2)

Physician/Health Care Practitioner in Solo and Group Practice:

Dr. Smith
22222 (base)   0001 (solo location)
W11111 (base)   0002 (group location No. 2)
W11111 (base)   0003 (group location No. 3)
Group Practice Membership File:

Red Medical Group Practice

W11111 (base)   0001 (group location No. 1)
Dr. Sebron   D22222 (group member)
Dr. Smith   A22222 (group member)
W11111 (base)   0002 (group location No. 2)
Betty West, P.T.   R22222 (group member)

Provide a CMS specialty code for all physicians, health care practitioners, and group practices. (See MCM Part 3 §2207.) Also provide specific data elements for each physician health care practitioner and group. (See Exhibit 1 and 1A.) In addition to the current data field requirements, collect and maintain the complete billing/practice address including the 9 digit zip code for all physician, health care practitioner and group practice billing/practice settings, and the tax identification numbers (TIN): employee identification number (EIN) or social security number (SSN) will be added for all physicians, health care practitioners, and group practices.

Provide SSNs or TINs that physicians, health care practitioners and medical groups report to IRS and the 1099 program in field 32 and the personal SSN for physicians and health care practitioners in field 41 of the UPIN record layout.

National Heritage Insurance Company (NHIC) is the Registry carrier that establishes and maintains the Registry of physicians/health care practitioners/group practices receiving Part B Medicare payment. NHIC'mailing address is:

> *The Registry*
> *Nationa Heritage Insurance Company*
> *1055 West 7th Street*
> *Los Angeles, CA 90017*

14.1.1 - Ongoing Data Collection on Physician/Health Care Practitioner/Group Practices Applications
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

Validate information submitted by physicians/health care practitioners/group practices. Verify State licensure with the appropriate State licensing board, and certifications with certification boards. Physicians/health care practitioners eligible for Medicare payment should be licensed/registered by the State in which they provide services. As required by State law, validate all credentials and State licenses/certificates/registrations for all physicians, health care practitioners, and groups receiving a UPIN.

Collect certain data from each physician/health care practitioner/group practice in order to assure accurate identification. Collect the data (see §1001.1) when the physician/health care practitioner/group practice applies for a UPIN. Verify physician/health care practitioner status for prior practices with the carrier serving the prior practice.

The Registry will assist in processing all local carrier Provider Identification Numbers (PIN) to UPINs with a locator identifier. All physicians, health care practitioners, and groups will receive a UPIN. The UPIN identifies each physician/health care practitioner/group for all billing/practice settings (e.g., independent practice, partnerships or hospital-based settings.)

14. 1.2 - Physicians/Health Care Practitioners/Group Practices Record Required Information and Format
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

Minimum data requirements establish the basic data set needed for the Medicare Physician Identification and Eligibility Record (MPIER) at the Registry. Data fields are modified to include health care practitioners, group practices, tax identification numbers and addresses for all billing/practice settings. The record layout is a 306 bytes.

Physicians and health care practitioners must be assigned a UPIN before being added to the group practice membership file. Every physician/health care practitioner/group practice must apply individually for a UPIN. Each group practice must provide the name and UPIN of each group member affiliated with their group.

For each physician/health care practitioner/group practice who applies for a UPIN, collect the following: (See Exhibit 1A)

> o   *Full professional name: last, first, middle name/initial and any suffix (e.g., Jr, Sr, III,); Group Practice name, if applicable;*

> o   *Addresses: (collect all billing and physical practice sites (business), including the 9 digit zip code);*

> o   *State in which the Physician/Health Care Practitioner is licensed or practicing (2 digit abbreviation, alpha);*

> o   *State license, registration, or certification number;*

> o   *Date of Birth (MM,DD,YYYY);*

o   Credentials (2-3 position) if credential is not listed below, notify the Registry

MD   =   Medical Doctor
DO   =   Doctor of Osteopathy
CH   =   Chiropractor
DDM   =   Doctor of Dental Medicine
DDS   =   Doctor of Dental Surgery
DPM   =   Podiatrist
OD   =   Doctor of Optometry
CSW   =   Clinical Social Worker
PSY =   Psychologist
PA   =   Physician Assistant
PT   =   Physical Therapist
CNS   =   Clinical Nurse Specialist
CNM   =   Certified Nurse Midwife
CP   =   Clinical Psychologist
CNA   =   Certified Registered Nurse Anesthetist
AA   =   Anesthesia Assistant
NP   =   Nurse Practitioner
OT   =   Occupational Therapist
GRP   =   Group Practice;
MSC   =   Mammography Screening Center
AMB   =   Ambulance Service Supplier
PXS   =   Portable X-Ray Supplier
IPL   =   Independent Physiological Laboratory
AU   =   Audiology
IDF   =   Independent Diagnostic Testing Facility
LAB   =   Laboratory
PHS = Public Health Services
ASC = Ambulatory Surgical Center

o   Medical health professional school (name, State, and zip code);

o   Year of medical school graduation (YYYY);

o   Tax Identification Number (i.e. Social Security Number in Field 41/ Tax
Identification Number in Field 32 used by provider when reporting to IRS);

o   Specialty and Board Certification Status (primary and secondary, collect all);

o   Resident/Intern status (only physicians);

o   Previous practice in another State;

o   UPIN of previous Medicare affiliation; and

o   Physician/health care practitioner/group practices participation indicator
(collect all).

14.1.3 - Maintaining Physician/Health Care Practitioner/Group Practices Memberships
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

Add all physicians/health care practitioners in any practice setting (e.g., solo, partnership, clinic, hospital-based) and maintain up-to-date files of physicians/health care practitioners and group practices. Update the Registry with any changes in the group membership (additions or deletions).

To assure accurate and up-to-date information of group membership and physician setting:

o   Notify all group practices that the group is responsible for informing you of changes in its membership. As members (physicians/health care practitioners) join or leave the group, the group should submit written notification to you including all pertinent data (See Exhibit 1 A); and

o   Identify any additions or deletions to maintain a comprehensive listing of group membership. Collect the required data for each Physician/Health Care Practitioner added to the group.

o   If no claims have been submitted within one year, deactivate the record by sending an update to the Registry.

14.1.4 - Validation of Physician/Health Care Practitioner/Group Practice Credentials, Certification, Sanction, and License Information for Prior Practices
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

Validate credentials of all physicians/health care practitioners and group practices participating in Medicare, as appropriate. Ensure that the physician/health care practitioner/group practice submitted data is accurate, current and complete. Ensure that the physician/health care practitioner/group practice is eligible for Medicare payment regardless of whether the physician/health care practitioner/group practice is in a solo practice or member of a group. At a minimum:

o   Verify all physician/health care practitioner/group practice membership submitted data with the appropriate State licensing boards to ensure the provider is registered and licensed to practice;

o   Collect prior Medicare utilization information concerning the physician/health care practitioner/group practice in order to determine if the provider should be placed on pre-payment review for aberrant practices; and

o   Verify that the physician/health care practitioner/group practice is not sanctioned by checking the Medicare/Medicaid Sanction-Reinstatement Report.

14.1.5 - UPIN Cross-Referral Requirement
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

Using the cross-walk developed by the Registry, track the local PIN in your provider file, or any other internal number used in claims processing, to the provider's TIN (EIN/SSN), and the UPIN and location identifier(s). Each time you receive records from the Registry conduct a match of your provider file with Registry records to ensure that there is a one for one match of carriers' PINs to their respective 10 digit UPIN. Gaps and discrepancies must be resolved with the Registry immediately. Cross-refer your carrier assigned provider identification number and tax identification number (EIN/SSN) within your provider file to each assigned UPIN. Use the UPIN when communicating with the Registry.

14.2 - Maintenance of the Registry
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

Maintenance of the Registry's Medicare Physician Identification Eligibility Record (MPIER) is the process to keep current all data that pertain to a specific physician/health care practitioner/group practice record, i.e., adds, corrections of exceptions, and updates. In order to ensure the integrity of the Registry, perform routine maintenance on your physician/health care practitioner/group practice record and promptly submit notification to the Registry of any additions, corrections and updates.

14.2.1 - General
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

The Registry's MPIER must reflect the identical information for critical data elements as in your provider file. Therefore, when you make changes in your provider file, specifically the data required in Exhibits 1 and 1A, submit them to the Registry for update to the MPIER file.

Three records require changes to your physician/health care practitioner/group practice file:

   o   Adds: Submission of a new physician/health care practitioner/group practice or new practice setting for a previously established physician/health care practitioner/group practice.

   o   Updates: A revision to any of the required data elements of an established record on the MPIER of a physician/health care practitioner/group practice assigned a UPIN.

   o   Exceptions: Correction and resubmission of records returned to you for development.

You may submit maintenance records on a daily or weekly basis. No maintenance record can be older than 5 working days from the date of the update in your system.

14.2.2 - Add Records
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

The conditions are:

o   *Physician/health care practitioner/group practice enrolling as a new provider.*

o   *Physician/health care practitioner/group practice adding a new practice setting.*

For record layout specifications and minimum requirements, see Exhibit 2. When submitting an add record, submit the entire 300 byte record with the current valid information for each data element. Use Record Status Code 1 for medical doctor, Record Status Code 2 for other doctors, Record Status Code 3 for health care practitioners, Record Status Code 4 for group practice, and Record Status Code 5 for adding members to a group practice.

For all physicians/health care practitioners, the name, address, date of birth and State license are used for matching against the AMA physician extract file and other professional association files, as applicable to verify the physician/health care practitioner's identity. For groups, the name, address, and tax identification number are to be used for verification.

The data elements comprising name, address, date of birth, credentials, tax identification number, State licensed and State license number are used in a matching process to validate information submitted to the Registry for health care practitioners.

For identification of other doctors and health care practitioners the name, date of birth, SSN number, billing address and credentials are compared across all carrier records to verify identity.

Use name, tax identification number, street and city address data elements (including 9 digit zip) for physicians, health care practitioners, and group practices, when possible, to resolve any discrepancy about identity.

To establish a group practice UPIN provide:

o   *Record Code 1 in Field 1;*

o   *Record Status 4 in Field 2;*

o   *Group Practice in Field 21*

o   *Tax Identification Number in Field 32*

o   *Your assigned PIN in Field 33; and*

o   *Your carrier number in Field 36.*

For record layout specifications and minimum requirements, see Exhibit 2. When submitting an add record, submit the entire 300 byte record with the current valid information for each data element.

Groups practices must obtain a UPIN before members can be added. The physicians/health care practitioners must be assigned a UPIN before being added to the

group practice:

To add a membership to a group practice, provide:

- o *Record Code 1 in Field 1;*

- o *Record Status 5 in Field 2;*

- o *Group Practice Indicator 1 in Field 30*

- o *Tax ID of Group in Field 32;*

- o *Carriers Assigned PIN in Field 33;*

- o *Physician/health care practitioner UPIN in Field 34; and*

- o *SSN of the individual physician/health care practitioner and 10 digit UPIN for the group location in Field 40.*

14.2.3 - Adding Physician/Health Care Practitioner/Group Practice Setting
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

To add a practice setting to an established UPIN (base number), provide:

- o *Record Code "1" in Field 1;*

- o *The physician/health care practitioner/group practice provider number in Field 33, a different local PIN for the new location (Create a new PIN to satisfy this requirement);*

- o *UPIN in Field 34;*

- o *Your carrier number in Field 36;*

- o *Y in Field 39; and*

- o *All other data elements for the specific MPIER record including the revised information in the appropriate fields.*

14.2.4 - Update Records
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

Update on the Registry MPIER file any changes to your provider file involving the following elements, and update your provider file with any changes made to the Registry.

FIELD NUMBER ITEM

3. Last Name (Groups will use fields 3-thru 6)
4. First Name
5. Middle Name/Initial
6. Name Suffix
7. Street (Billing Address)
8. City (Billing Address)
9. State (Billing Address)
10. ZIP Code (Billing Address/9 digits)
11. Street (Business Address)
12. City Business Address)
13. State Business Address)
14. ZIP Code(Business Address/9 digits)
15. State Licensed or Operating in
16. Physician/Health Care Practitioner State License/Registration Number
17. Date of Birth
18. Medical School Graduated
19. Medical School Year Graduated
20. Date of Death
21. Credentials (2-3 positions)
22. Primary Specialty Code
23. Primary Board Certification Indicator
24. Secondary Specialty Code
25. Secondary Board Certification Indicator
26. Type of Sanction Code
27. Effective Date of Sanction
28. Number of Sanctioned Years
29. Deactivate Resident/Intern Practice OPT out Code
30. Group Practice Indicator
31 Physician /Health Care Practitioner Participation Indicator
32. Tax Identification Number
33. Carrier Provider Number
40. Social Security Number - Special Processing Data

Provide:
  o   Record Code 5 in Field 1;
  o   Physician/health care practitioner/group practice provider number in Field 33;
  o   UPIN in Field 34;
  o   Your carrier number in Field 36; and
  o   All other data elements for the specific MPIER record including the revised information in the appropriate fields. Record layout specifications are in Exhibit 2. Submit the entire 306 byte record with the current valid information.

A. Deactivate a Practice Setting\

Deactivate any practice setting which has not had any activity after 1 year. To deactivate a practice setting for an established, provide:

  o   Record Code 5 in Field 1;

- o   *D in Field 29;*
- o   *UPIN in Field 34;*
- o   *Your carrier number in Field 36; and*
- o   *All other data elements for the specific MPIER record including the revised information in the appropriate fields.*

If a Group Practice goes out of business, generate an update record using Record Code 5 and update Field 29, with a "D" = Deactivate to reflect the appropriate status. Deactivating a group member will remove the physician/health care practitioner from the group membership file.

B.   Special Processing

Certain update records, including name change to an MPIER setting, require special processing by the Registry because they affect key matching fields.

C.   Name Changes

For name changes, provide:

- o   *Record Code 5 in Field 1;*

- o   *The physician/health care practitioner/group practice updated name information in Fields 3, 4, 5, 6 (New Name);*

- o   *The Physician/Health Care Practitioner/Group Practice provider number in Field 33;*

- o   *UPIN in Field 34;*

- o   *Your carrier number in Field 36;*

- o   *1 in Field 39;*

- o   *The physician/health care practitioner/group practice OLD name (last name for individuals, complete name for group practices) in Field 40.*

Submit a name change for each practice setting on the MPIER. If there are changes to other data elements for this record, submit another update record after the name change has been processed. The Registry cannot accept a name change update with other fields being updated in the same record.

D.   Option Out of the Medicare Program

If a physician decides to opt out of the Medicare program, provide:

- o   *Record Code 5 in Field 1;*

o   The letter O in Field 29;

o   UPIN in Field 34;

o   Your carrier number in Field 36; and

o   All other data elements for the specific MPIER record including the revised information in the appropriate fields.

14.2.5 - Rejections
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

The Registry can accept only records which meet record layout requirements and specifications. Records which do not meet the requirement are rejected and returned when any of the following conditions exist:

o   Records are not readable by the Registry computers;

o   Incorrect record code;

o   Incorrect or missing carrier ID number;

o   Invalid physician/health care practitioner/group practice status code;

o   Alpha character in numeric field;

o   Missing date of birth, medical school code, medical school year graduated, State license/registration number, or tax identification number; and

o   9 digit zip code not included.

An entire transmission is rejected if more than 10 percent of the records contain the above errors, or:

o   A transmission format violation exists, e.g., no trailer record; or

o   Trailer record count does not equal number of records.

If less than 10 percent contain errors, the transmission is accepted, but the erroneous records
are rejected.

The Registry notifies you by telephone and follows up with TMAIL when all, or part, of a magnetic tape transmission is rejected. The Registry does not follow up on File Transfer reject.
Use your Physician Registry Telecommunication Guide for further instructions. The record code remains unchanged if record (s) is rejected.

Exception code "99" is recorded on all rejected records in Field 37. If the entire transmission
is rejected, no specific exception code is assigned. The Registry does not maintain any
suspense or pending files for records that reject during pre-edit processing.

Correct and re-submit rejected records within seven calendar days.

14.2.6 - Exceptions
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

Records that contain acceptable data in all required fields (See Exhibits 1 and 1A), but
cannot enter the MPIER for any reason are considered exceptions. They are held in
suspense until all discrepancies are resolved and a UPIN is assigned. Validate all
exception codes received from MPIER. The exception message "needs validation" means
the required field is missing information, requires verification, information has been
changed or the information is not consistent with other fields. See the Registry's
telecommunication guide for additional instructions. Record Code "2" in Field is for
exceptions to Adds. Record Code "6" in Field is for exceptions to updates. Each exception
contains a specific code in Field 37. Five (5) data elements of three digits (characters)
have been assigned. The three digit codes are:

First digit: 0 or 9 used for internal processing at the Registry. Second & third digit: Field
Number of your record.

Exception Code	*Cause*
001	*Record Code missing or needs validation*
002	*Record Status Code needs validation*
003	*Last Name needs validation*
004	*First Name needs validation*
005	*Middle Name/Initial needs validation*
006	*Name Suffix, e.g., "JR.", needs validation*
007	*Billing Address needs validation*
008	*City of Billing Address needs validation*
009	*State of Billing needs validation*
010	*ZIP Code of Billing Address needs validation*
011	*Business Street Address needs validation*
012	*City of Business Address needs validation*
013	*State of Business needs validation*
014	*ZIP Code of Business Address needs validation*
015	*State Licensed in needs validation*
016	*State License/Registration number needs validation*
017	*Date of Birth needs validation*
018	*School Graduated needs validation*
019	*School Year Graduated needs validation*
020	*Date of Death needs validation*
021	*Credentials, e.g., "MD", needs validation*
022	*Primary Specialty Code needs validation*
023	*Primary Board Certification needs validation*

024   Secondary Specialty Code needs validation
025   Secondary Board Certification needs validation
026   Type of Sanction Code needs validation
027   Effective Date of Sanction needs validation
028   Sanction years needs validation
029   Deactivate/Resident/Intern Practice Code needs validation
030   Group Practice Indicator needs validation
031   Physician/Health Care Practitioner Participation Indicator needs
032   Tax Identification Number needs validation
033   Carrier Provider Number needs validation
034   UPIN is missing or needs validation
035   NHIC (TA) number needs validation
036   Incoming carrier number needs validation
038   Record State Licensure Validation Field needs validation
039   Special Processing Indicator missing or needs validation

o   You may need to contact the physician/health care practitioner/group practice to collect missing information or to verify information. Contact the physician/health care practitioner/group practice directly, either by correspondence or by phone. Verify the full data set for the physician/health care practitioner/group practice, not just missing elements. Ask the physician/health care practitioner/group practice if he/she/it has practiced/operated under another name, or in another State.

When contacting the physician, health care practitioner and group practice directly for data, use the following language:

"We are required by §9202 of the Consolidated Omnibus Budget Reconciliation Act of 1985 and §1833(e) of the Social Security Act to uniquely identify each health care provider who provides services for which payment is made under Medicare. We do not have enough information about you. As part of an update and recertification of our provider files, we re asking for this data. In order to assure your continued eligibility for Medicare Part B payment, please respond fully to the enclosed request within 30 days"

When you uncover new or different information, do not overlay the information unless you are sure that the original submission was incorrect. For example, if the date of birth had transposed digits, correct the field. The Registry records should reflect the way you are paying the physician/health care practitioner/group practice.

If you find a physician/health care practitioner/group practice who has practiced under another name, or if you are unsure how to code an exception correction, call the Registry at (213) 742-3024.

Submit each corrected record as it is completed. Do not retain the records until the entire batch is resolved.

Add Exceptions

Returned Add records are identified by:

- o Record Code 2 in Field 1;
- o No UPIN in Field 34;
- o NHIC's Number in Field 35; and
- o Error Code (s) identified in Field 37.

Provide on the resubmitted record:

- o Record Code 2 in Field 1;
- o NHIC number in Field 35;
- o Correct or validate all Fields identified in Error Code Field 37; and
oAll other data elements for the specific MPIER record including the revised information in the appropriate field.

Update Exceptions

Returned update records are identified by:

- o Record Code 6 in Field 1;
- o UPIN in Field 34;
- o Assigned NHIC's Number in Field 35; and
- o Error Code (s) identified in Field 37.

Provide on the resubmitted record:

- o Record code 6 in Field 1;
- o Carrier's provider number in Field 33;
- o UPIN in Field 34;
- o NHIC's Number in Field 35;
- o All other data elements for the specific MPIER record including the revised information in the appropriate field.

Correct and re-submit exception records within fifteen calendar days.

14.2.7 - Batching Procedures
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

Submit maintenance records to the Registry by telecommunications (see §1010.1) or by mail. Determining which method to use is based upon the volume of records and which media best meets your needs.

Preparing Physician/Health Care Practitioner/Group Practice Records

On Diskette - The file must contain fixed records in ASCII format and have an external label. Each diskette should contain no more than 1200 records each. Label files of multiple diskettes, 1 of X, 2 of X, etc. Diskette File Name: UPIN89.PHY

On Magnetic Tape/Tape Cartridge - Prepare the file using an IBM standard label with data set name: UPIN 94. PHYDATA. INIT. Physician/health care practitioner/group practice

data files must contain fixed formatted records. Each tape must have an external label.

Use the following hardware considerations:

> *Tape configuration of 3480 cartridge or 9 track/6250*
> *Block data record as follows: Physician/Practitioner data file. - 23400*

NOTE: *Data Set names other than the above will be rejected and may require resubmission.*

Preparation of the Record Transmittal

Send each shipment of magnetic tape(s) or diskette(s) with a Record Transmittal. Prepare it in triplicate. Send the original and one copy with the shipment. Retain the other.

Completion of the Record Transmittal (See Exhibit 5)

Item A

1. *Carrier Number: Enter your identification number. Show all five digits.*

2. *Carrier Identification: Your name and return address. Enter the full name and address of person to whom questions may be addressed.*

3. *Date Prepared: Enter the date (MM,DD,YYYY) the file was prepared. This date should agree with the creation date in the related trailer record (Position 7-14). (See Exhibit 2.)*

4. *Date Shipped: Enter the date (MM,DD,YYYY) the data was shipped.*

    o *UPIN Data Records: If tape(s), enter all volume serial numbers; if diskette(s), enter all identifying data on the diskette external label.*

    o *Total Records: Enter the total number of records.*

    o *Type Records: Indicate the type of records on the file; MDs/DOs, other Doctors, Health Care Practitioners or Group Practices. Do not enter records for adding members to a practice with the initial record to establish the group MPI.*

Item C

1. *The Registry notifies you if your data processes successfully.*

2. *If the Registry is unable to accept your file, e.g., the data set name, or the record format is incorrect or density is not compatible with The Registry's system, the entire file is rejected. The reason for the rejection is listed. Make the corrections and resubmit the tape within 7 working days. Identify the resubmitted file with the same information as the original. Write the word "resubmittal" on the top right-hand corner of the form. Use the space at the bottom for the name and phone number of a contact person that is able to*

answer questions about the resubmittal.

<u>Shipment of UPIN Physician/Health Care Practitioner/Group Practice Data to the Registry</u>

Mail delivery is preferred. However, if you are located near Los Angeles may find other service faster and more economical. For mailing purposes, the addresses are:

> *Overnight Express: Regular Mail:*
> *The Registry   The Registry*
> *National Heritage Insurance   National Heritage Insurance*
> *Company   Company*
> *1055 West 7ᵗʰ Street   1055 West 7ᵗʰ Street*
> *Los Angeles, CA 90017-2211 Los Angeles, CA 90017-0575*

Prepare the tape(s) or diskette(s) for mailing. Note that the package contains a magnetic tape or diskette, and mark it "MAGNETIC MEDIA." Provide for backup data until you receive an acknowledgment that the Registry has received and processed your data.

14.3 - Privacy Act Requirements
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

The CMS has established a Privacy Act system of records titled the "Medicare Physician Identification and Eligibility System" (MPIES). The information in the MPIES is subject to the provisions of the Privacy Act. A system of records notice, specifying the purpose for collecting the information maintained in this system and routine uses which permit disclosure without the prior written consent of the individual to whom the record pertains, is being published in the <u>Federal Register.</u>

Without the written consent of the physician, health care practitioner, or group practice, information in this system of records can only be released if at least of 12 disclosure provisions apply and one of these provisions is for routine use.

If you receive a request far UPIN information (other than the UPIN Directory), even if a routine use exists which would permit disclosure, forward the request to:

> *Center for Medicare and Medicaid Services*
> *Office of Financial Management*
> *Division of Provider and Supplier Enrollment*
> *C3-02-16*
> *7500 Security Blvd.*
> *Baltimore, Md. 21244*

14.3.1 - Release of UPINs
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

In accordance with §4164 of the Omnibus Budget Reconciliation Act (OBRA) 1990, CMS has published a UPIN Directory of all physician registered with a carrier and with the Registry. Businesses or persons providing services or items for which payment can be made

under Medicare may request a copy of the UPIN Directory from the carrier. Release of the UPIN Directory meets the requirements of the Privacy Act and satisfies the health care industry's need to identify referring and ordering physician. (See §14.8.)

14.3.2 - Release of UPINs to Physicians, Nurse Practitioners, Clinical Nurse Specialists, and Physician Assistants
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

The Registry will not issue the UPINs directly to physicians. Notify physicians, nurse practitioners, clinical nurse specialists, (certified nurse midwives via the UPIN Directory) Clinical Nurse and physician assistants of their base 6-digit UPIN only. Do not release the 4-digit location identifiers. Mail UPINs to each physician, clinical nurse specialist, nurse practitioner, and physician assistant no later than 5 days after receipt from the Registry.

14.4 - Automatic Notifications
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

The Registry alerts you if a record on the MPIER requires investigation and research. Notifications are sent through the Registry telecommunication system to your output file as Record Code 7. The Notification Code is displayed in Field 37 as an alpha code. Confirm and verify your file to determine if the notifications and records you submitted are valid. Act on all automatic notifications (except code X - recision/denial) within 30 calendar days. The conditions for which the Registry sends you notification are:

A. Deceased Physician/Health Care Practitioner-Notification Code D

Verify information regarding the alleged death of a physician/health care practitioner with the State Licensure Board, Medical Trade Association, or other outside entity.

If the physician/health care practitioner is deceased, generate an update record for each practice setting using Record Code 5 and update Field 20, "Date of Death," with the appropriate dates, and Field 29, "DRIP," with a "D" for deactivate for every practice setting.

If the physician/health care practitioner is not deceased, notify the Registry via a letter or TMAIL. Identify the source of your information.

B. Intern or Resident - Notification Code I or R

Validate the entire record.

Ensure that the practice setting for the physician is not associated with a teaching hospital.

If the physician is a resident/intern, update your file. Generate an update record using Record 5 and update Field 29, Deact/Res/Int/Prac code reflecting the appropriate status.

If the physician is not a resident/intern, notify the Registry via letter or TMAIL that the physician's status is incorrect. Provide the source of your information.

C. Sanctioned Notification - Code S

Verify your provider file against the Medicare/Medicaid Sanction - Reinstatement Report from OIG to determine if the physician/health care practitioner/group practice is listed.

If you determine that the provider is not listed in the Medicare/Medicaid Sanction - Reinstatement Report (i.e., the Registry has incorrectly matched the OIG sanction information to the MPIER), notify the Registry via letter or TMAIL that the provider's status is incorrect. Identify the source of your information.

A listing containing exclusion and reinstatement/withdrawal actions taken by OIG is distributed to you on a monthly basis.

If the physician/health care practitioner/group practice is sanctioned, determine if the sanction has been applied to all of your in-house provider files. Check all physician/health care practitioner/group practice records, practice settings and group affiliation for prior sanctioned information, and waiver letters. Make sure the Registry is notified of all sanction information. Make necessary corrections to your provider file to ensure that the physician/health care practitioner/group practice does not receive payment during their sanction period.

A provider may apply for reinstatement at the expiration of the sanction period or any time thereafter. Refer all requests for reinstatement to Office of Investigation and Financial Operation (OIFO). Furnish information, as requested, regarding the subject requesting reinstatement. OIG notifies you of all reinstatements Sanctioned information is updated on all in-house provider files.

Generate an update on your provider file record and update Fields 26, 27 and 28 for all MPIER settings which require changes. Use a Record Code 5.

D. Fraud Notification - Code F

In suspected fraud, the Registry notifies you by letter and asks for verification of the physician's information provided to you. Verify the information with your local State Licensing Board or Medical Trade Association. Take appropriate action based on the finding. Notify all entities involved, i.e., ROs, CO, and the Registry. The Registry takes appropriate action based on your response.

E. UPIN Rescission/Denial - Notification Code X

Two situations related to UPIN assignment are covered under Record Code 7:

- o UPIN request has been denied; and
- o UPIN assignment is being rescinded.

In both situations, the Registry provides you a complete explanation for the action via letter or TMAIL.

F. Physician OPT OUT

Validate the entire record. If the physician opted out of the Medicare program, update your file. Generate an update record using Record 5 and update Field 29, Deact/Res/Int/Prac code for each practice setting reflecting the appropriate status.

14.5 - UPIN Directory
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

§ 4164 of OBRA 1990 required CMS to publish a directory of all UPINs assigned to physicians who provide services for which payment is made under Part B of Medicare. The UPIN directory is used by laboratories, suppliers, and physicians who are required to identify the referring or ordering physician on the Medicare claim form.

The Privacy Act system of records titled the "Medicare Physician Supplier Master File" (No. 09-70-0518) has been revised to notify the public that the release of UPINs satisfies the requirements of OBRA and will be accomplished through the publication of a UPIN directory.

The CMS published the directory using the Registry's national master file of UPINs as source data. The Government Printing Office (GPO) printed the directory and bulk shipped the documents to you for distribution to laboratories, suppliers and physicians who require them for claims submission.

The directory includes the following information for each physician and non-physician practitioner:

- *o Full name;*
- *o Credentials (e.g., MD, DDS,);*
- *o UPIN;*
- *o State;*
- *o ZIP code;*
- *o Carrier assigned provider number; and*
- *o Specialty code.*

All practice settings on the UPIN master file are included except those having deactivation or date of death indicators or those submitted by the Railroad Retirement Board (RRB). The directory will be sorted alphabetically by physician name within each carrier number.

The directory is issued loose leaf style and 3-hole punched to fit a standard binder. Each document is shrink wrapped and placed within an individual mailing envelope or container. The mailing envelope or container is printed with a fourth class postage.

The GPO printer packed the volumes within the mailing envelope or container for drop shipment to you.

Distribute directories <u>upon request</u> and <u>free of charge</u> to physicians, health care practitioners, group practices, durable medical equipment suppliers, laboratories, hospitals, ESRD facilities, radiology and other imaging centers, physical therapy facilities, consulting physicians and billing services submitting claims for these entities. Limit

distribution to one copy per requestor. Refer persons requesting more than one copy or other persons (e.g., professional associations, other third party payers and the public at large) to GPO for purchase information.

The UPIN information is available for sale from GPO, Superintendent of Documents, on electronic media or hard copy. The specifications for the electronic media UPIN directory are standard 6250 BPI, EBCDIC or ASCII with IBM standard labels. The package includes a description of the data, file specifications and record layout. The price of the electronic media file is $125. The Electronic Media UPIN directory is available only as a national file. The price of the hard copy varies depending on the size of the individual document.

Payment may be made by VISA or MasterCard or by check or money order made payable to Superintendent of Documents. Mail orders for electronic media files are sent to:

> Superintendent of Documents
> U.S. Government Printing Office
> Attention: Electronic Products Sales Coordinator
> P.O. Box 37082
> Washington, D.C. 20013-7082.

Mail orders for hard copy volume(s) are sent to:

> Superintendent of Documents
> U.S. Government Printing Office
> Attention: Sales Service Coordinator
> Washington, D.C. 20013-7082.

To order a directory by phone, call 202-512-1800 between 8:00 a.m. and 5:00 p.m. (Eastern Standard Time) Monday-Friday. Tapes and hard copy volume(s) are sent by registered mail or may be picked up at 45 G Street, N.W., Washington D.C.

The UPIN master file was used to create the UPIN directory. CMS periodically publishes supplements to the directory with additions and updates of physician identification information.

Notify the provider community about the release of the UPIN directory in your provider bulletin and provide procedures for obtaining copies. Entities that wish to obtain a copy of the directory may submit their requests to you.

Publication of the UPIN directory satisfies the needs of laboratories, suppliers, physicians and others to comply with implementation of UPIN billing requirements for referring and ordering physicians.

Privacy Act regulations preclude denial of individual requests for UPINs. Make requestors aware that UPINs can be found in the directory. Advise requestors, who do not agree to await issuance of the directory, that their request for UPINs will be fulfilled as soon as possible (on a flow basis in hard copy format) as your priority workload permits. However,

do not deny such requests outright.

14.6 - UPINs for Ordering/Referring Physicians
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

Section 1833(q) of the Act requires that all physicians that meet the §1861(r) definition of a physician must have a UPIN and <u>all</u> claims for services ordered or referred by one of these physicians include the names and UPINs of the ordering/referring physician.

Effective January 1, 1992, a physician or supplier that bills Medicare for a service or item must show the name and UPIN of the ordering/referring physician on the claim form, if that service or item was the result of an order or referral from a physician. If the ordering physician is also the performing physician, the physician must enter his/her name and assigned UPIN as the ordering physician. If the ordering/referring physician is not assigned a UPIN, the biller may use a surrogate UPIN, e.g., until an application for a UPIN is processed and a UPIN assigned. (See §14.9.2.) Process physicians requests for UPINs timely.

14.6.1 - CWF Edits and Claims Processing Requirements.
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

If any procedure codes (HCPCS) associated in your claims processing system with CWF Type of Service (TOS) codes: 3 (consultative services), 4 (diagnostic radiology), 5 (diagnostic laboratory) (field 59, position 247 of the CWF Part B record) or durable medical equipment, orthotics and prosthetics, are shown on the claim form, the name of the physician who ordered or referred the item or service must be shown in Item 17. The ordering/referring physician's assigned or surrogate UPIN is to be entered in Item 17a of Form CMS-1500. The first position of the UPIN must always be alpha, the second and third positions must be either alpha or numeric and the last 3 positions must be numeric. For electronic claims, enter the name and UPIN in Record/Field, EAO-20.0, positions 80-94 of the Electronic Media Claims format. Only the 6-digit base number of the UPIN will be required for CWF edits for referring and ordering. Do not use the 4-digit location identifier.

A.   The following guidelines apply to those services that are edited by CWF

   o *If the service is a diagnostic laboratory or radiology service, the assigned UPIN of the ordering/referring physician must be shown in item 17a on Form CMS-1500;*

   o *If the performing physician is also the ordering physician, the physician must enter his/her name and UPIN in items 17 and 17a of Form CMS-1500, confirming that the service is not the result of a referral from another physician;*

   o *If the referring physician is practicing in a veteran hospital and his or her UPIN is unavailable the biller must enter the physician name and UPIN EME000 in items 17 and 17a of Form CMS-1500, confirming that the service is not the result of a referral from another physician;*

   o *If the service is a consultative service, the name and UPIN of the referring*

physician or other person meeting the statutory definition of a physician must be shown on Form CMS-1500 in items 17 and 17a if the referring physician UPIN is unavailable the billing physician can enter his or her name and UPIN;

o If the service was referred by other limited licensed practitioner, the name and UPIN of the physician supervising the limited licensed practitioner must be shown on Form CMS-1500 in items 17 and 17a;

o If the service was the result of a referral from a person _not_ meeting the statutory definition of a physician or a limited licensed practitioner (for example, a pharmacist, psychologist), the billing physician must enter his or her name and UPIN in items 17 and 17a, i.e., the physician completes Form CMS-1500 as though the service was initiated by the patient; and

o If durable medical equipment, prosthetics and orthotics are ordered, the name and UPIN of the ordering physician must be on Form CMS-1500 in items 17 and 17a.

B. Deny, return or reject assigned claims requiring, but not containing, the name and UPIN of the ordering/referring physician depending on your system's capability and the cost effectiveness of the three options. If the claim is denied, afford the claimant the opportunity to appeal. Develop unassigned claims requiring a UPIN.

Use the following Remittance Advice message to inform physician and suppliers of the reason for the claim being returned or denied:

"Your claim for (specify service/item) cannot be processed due to the lack of an ordering/referring physician's (specify missing information, i.e., name, UPIN, or both)."

14.6.2 - Surrogate UPINs
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

Providers/suppliers that submit claims for items or services are responsible for ensuring that the name and UPIN of the ordering/referring physician are obtained and submitted on Form CMS-1500. The UPIN directory is the primary source for physician names and UPINs. However, some situations may exist in which physicians are not yet issued UPINs. In these instances, surrogate UPINs are to be used.

Surrogate UPINs are temporary and are to be used only until UPINs are assigned in accordance with the following conditions:

A. Physician with Military, Department of Veterans Affairs and Public Health Service

Physician/health care practitioners serving in the military or with the Department of Veterans Affairs or the Public Health Service are not exempt from the requirement to obtain a UPIN, particularly if they expect to provide services to Medicare beneficiaries or refer beneficiaries for other services. Until a UPIN is assigned, they are to use the following surrogate UPINs:

o   PHS000- Physicians serving in the Public Health Service, including the Indian Health Service.

o   RES000 Billers are to use the six (6) surrogate UPIN RES000 for a physician meeting the description of "intern, resident or fellow in MCM, Part 3 § 2020.8a if the individual does not have a UPIN.

B.   Retired Physicians

These physicians are not issued UPINs and are to use the surrogate RET000. Retired physicians who are assigned a UPIN must use the assigned UPIN.

C. Surrogate UPIN OTH000

No longer accept the Surrogate UPIN OTH000 on any claims. Effective for dates of service April 1, 2006 and later, DME suppliers, physicians, non-physician practitioners and billers must submit the UPIN assigned to the ordering or referring physician. Effective, for dates of service April 1, 2006 and later, contractors shall return, as unprocessable, all claims submitted with Surrogate UPIN OTH000.

 Return as unprocessable any claims submitted with Surrogate UPIN OTH000 effective for dates of services April 1, 2006 and later.

If a provider can not be assigned a UPIN in a timely manner, OFM will grant an emergency UPIN on a case by case bases.

Notify suppliers, physicians, or billers if their use of surrogates is excessive.   If surrogate UPINs are over utilized , the Part B contractor via the UPIN Registry will confirm that a UPIN has not been assigned to the ordering/referring physician. Confirm that a UPIN is not assigned to the ordering/referring physician. If one is assigned, notify the physician of the assigned UPIN. If a UPIN is not assigned, notify the physician of the need to file an application for a UPIN.

14.6.3 - Carrier Registry Telecommunication Interface
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

The Registry has established a telecommunications network between the Registry, you, and the AMA to ensure that its data files are current and information can be exchanged quickly and effectively. The network functions include file transfer, Registry Customer Information Control System (RCICS), and other software and hardware components with the capability of rapid data exchange. These instructions are not a substitute for information found in the Telecommunication Guide published by the Registry in February and May 1989. For complete instructions, refer to the Registry Telecommunications Guide.

14.7 - General
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

The Registry provides the software interface, installation instructions, and data

*communication support needed to initiate, develop, and maintain your remote
telecommunication link.   The Registry is accessible through the Medicare Data
Communications Network using the AT&T Global Network Service/Connect:Direct
(AGNS/CD). AGNS/CD enables many varieties of terminals and computers to exchange
information.*

*The Registry provides the capability for on-line transfer of files between you and the
Registry through the use of AGNS/CD which runs and executes at the Registry mainframe
level. CD is a software package, which runs on the mainframe. Advantis is now called
AGNS and is a communication network. The AGNS will replace Tymmnet network. CD
uses the AT&T network to transmit files from mainframe to mainframe.   This transmission
is controlled by JCL on the mainframe and whatever scheduling package is used at your
data center. The file transfer is sent through The AGNS/CD in the mainframe. You are
notified when the file transfer is completed. Once completed, the transfer request is
terminated.*

*The RCICS enables you to make on-line inquiries directly to the Registry and to view all
records you submitted to the Registry on its Suspense and UPIN file. RCICS enable you to
access through your terminal/desktop computer. The <u>Network Hardware/Software
Component</u> requires mainframe access using TN 3270 connection.*

14.7.1 - AGNS/CD
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

*Allows on-line contact with the Registry's mainframe computer. The Registr provides
AGNS/CDaccess along with a Registry Telecommunications Guide. Installation
instructions for the AGNS/CD are in the Guide.*

*The features of AGNS/CD provide a faster and more secure transmission of information. It
also provides automatic scheduling/transmission of uploads/downloads. The AGNS/CDis
mainframe to mainframe software and allows unlimited users and access to the Registry.
Consult your telecommunication system/data specialist regarding your current
connectivity. They are responsible for developing your connectivity.*

A.   AGNS/CD Security

*The system provides network access security by requiring entry of both an identification
number (ID) and password.*

*Once network access is achieved, you are directed to the next layer of security, application
access verification. You cannot sign onto the Registry system until you have entered a valid
ID and password that is recognized. This means that persons not defined to the Registry
system cannot access other applications as valid users. You can use the AGNS to gain
access to RCICS, where you will have to enter your ID and password.*

*The Registry will not assist you in gaining access to the AGNS at your data center since
your method may be different from others. Once you get the VTAM sign on screen for
RCICS, the Registry can assist you in signing on. The Registry will work with you to set up
and test CD transmissions.*

B.   Registry Password and IDs

The Registry assigns log on IDs and passwords to all Registry users for UPIN application .

14.7.2 - File Transfer
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

You can transmit information from the Registry (downloading) and to the Registry (uploading). Downloading transfers a program or data file from the Registry's central computer to your terminal/desktop computer. Uploading transfers a file from your terminal/desktop computer to the Registry's central computer.

Use file transfer for data submission. The Registry accepts data submissions other than by file transfer (i.e., magnetic tape, diskettes) only on an exception basis. For further information, contact the Registry.

Records, which have been transmitted using file transfer, are processed by the Registry's system on the same day received. To verify if your physician/health care practitioner/group practice data were transmitted, review your records on the Carrier Output File and the MPIER File for availability of data returned to your system. If there is no evidence that records were initiated through the Registry system, notify the Registry via telephone. File transfer hours are 4 a.m. to 5 p.m., Monday through Friday (Pacific Coast Time).

The Registry provides an electronic version of the Carrier Workload Report to assist you in monitoring the flow of data in and out of the Registry. This monthly management report can be downloaded from the Registry upon request. The report provides the number of add, exception and update records processed by the Registry for a given time frame. Refer to the Registry Telecommunications Guide for additional information.

14.7.3 - Registry Customer Information Control System
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

A mainframe RCICS session is used for handling on-line transactions to display records on the Suspense file, UPIN file, and the Audit Trail and Output records. RCICS allows on-line access to all transactions submitted to the Registry. Use the following transaction codes:

R140 Suspense File Display - Displays details of all records on the Suspense File. The file includes all pending records, which failed the on-line edits or are awaiting further development by you, the AMA or the Registry.

R150 MPIER File Display - Displays all records listed on the MPIER file (assigned UPINs). It includes individual physician/health care practitioners/group practice ecords consisting of the assigned UPIN, professional data and the physician/health are ractitioner/group practice's medical practice. All practice settings for each physician/health care practitioner/group practice reside on the MPIER File. The physician/health care practitioner/group practice record is placed on the MPIER File when the UPIN is assigned.

R160 UPIN Bulletin Board - *A one-way message board from the Registry. Although the UPIN Bulletin Board is similar to T-MAIL in its usage, it is a one-way information source used only to notify you of procedural or policy changes affecting data submission and processing.*

R170 UPIN Error Code Display - *Displays a detailed description of error codes, definition of the related record layout field, and how to resolve the error.*

R251 Carrier Return Display - *Displays the output records ready for pickup. The output consists of accepted records with UPINs, and excepted and rejected records with an error coded appended.*

R252 Carrier Summary Report - *Displays a total count of all records on your output file, since your last record pickup. It includes assigned UPINs, rejections, exceptions and invalid records.*

R253 Suspense Exception Display - *Displays all records listed on the suspense file in sequential order. It includes add and update exceptions.*

R340 Suspense History Display - *Displays the final version of a suspense record prior to its placement on the MPIER.*

The RCICS hours are 7 a.m. to 5:00 p.m. (Pacific Coast Time) Monday through Friday.

14.7.4 - T-Mail
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

Facilitates the flow of information between you and the Registry. It provides a means to transmit, receive, and file messages. Lengthy, detailed or technical messages can be sent directly instead of through third parties. Messages can be sent regardless of the time difference.

The Registry assigns a T-MAIL ID and password. T-MAIL passwords do not expire. However, the Registry occasionally changes passwords for security reasons.

A menu lists all options and expedites transmission of your message.

T-MAIL displays messages posted to you and allows you to send a response. If more than one T-MAIL message is posted, they are displayed in the sequence they are sent. You can select a specific T-MAIL message. They remain on your menu until you purge them.

T-MAIL hours are 4 a.m. - midnight (Pacific Coast Time) Monday through Friday.

Medicare Program Integrity Manual
Exhibits

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Exhibit 39 - Carrier Record Requirements

(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

Carrier Record Requirements

Field Number	Item	M.D.s/D.O.s Record	Other Doctor's Record
1.	Record Code	Required	Required
2.	Record Status	Required	Required
3.	Last Name	Required	Required
4	First Name	Required	Required
5.	Middle Name/Initial	Required	Required
6.	Name Suffix	Required	Required
7.	Street (Billing Address)	Required	Required
8.	City (Billing Address)	Required	Required
9.	State (Billing Address)	Required	Required
10.	ZIP Code (Billing Address/ show 9 digits)	Required	Required
11.	Street (Business Address)	Required	Required
12.	City (Business Address)	Required	Required
13.	State (Business Address)	Required	Required
14.	ZIP Code (Business Address/ show 9 digits)	Required	Required
15.	State Licensed In	Required	Required
16.	Physician/Health Care Practitioner State License number	Required	Required
17.	Date of Birth	Required	Required
18.	Medical School Graduated	Required	Required
19.	Medical School Year Graduated	Required	Required
20.	Date of Death	If Available	If Available
21.	Credentials	Required	Required
22.	Primary Specialty Code	Required	Required
23.	Primary Board Certification Indicator	If Available	If Available
24.	Secondary Specialty Code	If Available	If Available
25.	Secondary Board Certification Indicator	If Available	If Available
26.	Type of Sanction Code	If Available	If Available
27.	Effective Date of Sanction	If Available	If Available
28.	Number of Sanctioned Years	If Available	If Available
29.	Deactivate Resident/Intern Practice/Opt Out code	Required	Required
30.	Group Practice Indicator	Required	Required
31.	Physician/Health Care Practitioner Participation Indicator	Required	Required
32.	Tax Identification Number	Required	Required
33.	Carrier Provider Number	Required	Required
34	Registry's Assigned UPIN	N/A	N/A
35.	NHIC Number	N/A	N/A
36.	Incoming Carrier Number	Required	Required
37.	Registry Assigned Error Codes/ Notification Codes	Required	Required
38.	Record Validation Field	N/A	N/A
39.	Special Processing Indicator	N/A	N/A
40.	Special Processing Data	N/A	N/A
41.	Individual Social Security Number Required *	N/A	Required

42. Filler

N/A = Not Applicable on initial data submission
* Health Care Practitioners Only

Exhibit 40 - UPIN Carrier Record Layout
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

UPIN CARRIER RECORD LAYOUT

Fld. No.	Position	No. of Cols.	Item	Description	Comments
1.	001	1	Record Code	1 = Add	
		9		2 = Add Develop/Return	
				3 = Assigned UPIN	
				4 = Registry Usage	
				5 = MPIER Update	
				6 = Update Develop/Return	
				7 = Notifications	
2.	002	1	Record Status		
				1 = Medical Doctor	
		9		2 = Other Doctor	
				3 = Non Physician/Practitioner	
				4 = Group Practice	
3.	003-022	20	Last Name	Physician/Health Care Practitioner's	Left justify
		X(20)		Professional Last Name. Valid Characters A-Z and Blanks.	Use Fields 3, 4, 5, and 6 for group name
4.	023-036	14	First Name	Physician/ Practitioner's	Left justify
		X(14)		Professional First Name. Valid Characters A-Z and Blank.	
5.	037-042	6	Middle Name/Initial	Physician/Health Care Practitioner's	Left justify
		X(06)		Professional Middle Name or Initial. Valid Characters A-Z and Blank.	
6.	043-045	3		Name Suffix Practitioner's Name Suffix. Example: JR, SR, III. Valid Characters A-Z and Blank.	Physician/Health Care Left justify
		X(03)			

NOTE: *For "9" numeric fields, show zeroes if blank. For all "X" alpha numeric fields, if no infor leave field blank*

Fld. No.	Position	No. of Cols.	Item	Description	Comments
7.	046-070	25	Street X(25)	Billing Street Address	Left justify
8.	071-085	15	City X(15)	City of Billing Address	Left justify
9.	086-087	2	State X(02) Office	State of Billing Address	Standard U.S. Post Office State abbreviations
10.	088-096	9	ZIP Code 9(09)	ZIP Code of Billing Address zip code	Must report 9 position
11.	097-121	25	Street X(25)	Business Street Address	The practice or physical site address. Left justify
12.	122-136	15	City X(15)	City of Business Address	Left justify
13.	137-138	2	State X(02)	State of Business Address	Standard U.S. post office State abbreviations.
14.	139-147	9	ZIP Code 9(09)	ZIP Code of Business Address	Must report position zip code
15.	148-149	2	State Licensed or Operating In X (02)	State in which the Physician Health Care Practitioner is Licensed or This Practice Setting.	Standard U.S. office State abbreviations.
16.	150-161	12	Physician/ Health Care Practitioner State License/ Registration Number X (12)	The State License Number or Registration Number for this Practice Setting	Right justify and precede with zeroes.

No.

Fld. No.	Position	No. of Cols.	Item	Description	Comments
17.	162-169	8	Date of Birth 9(08)	(MMDDYYYY)	**
18.	169-173	5	Medical School Graduated Code X(05)	Medical School Code	Refer to Exhibit 3.
19.	174-177	4	Medical School Year 9(04)	(YYYY) Year of Graduated	Graduation
20.	178-185	8	Date of Death 9(08)	(MMDDYYYY)	**
21.	186-188	3	Credentials X (03)		MD= Medical Doctor DO= Doctor of Osteopathy CH= Chiropractor DDM=Doctor of Dental Medicine DDS=Doctor of Dental Surgery DPM=Podiatrist OD= Doctor of Optometry CSW=Clinical Social Worker PT= Physical Therapist CP= Clinical Psychologist CNA=Certified Nurse Anesthetist AA= Anesthesia Assistant NP= Nurse Practitioner OT= Occupational Therapist GRP= Group Practice (USE ONLY WITH RECORD STATUS 5) RNA=Certified Registered Nurse Anesthetist PSY= Psychologist PA= Physician Assistant RN= Registered Nurse LPN= Licensed Practical Nurse CNM= Certified Nurse Midwife MSC= Mammography Screening Center AMB= Ambulance Service Supplier IDF=Independent Diagnostic Screening facility CNS = Clinical Nurse Specialist AU= Audiologist PXS= Portable X-Ray Supplier IPL= Independent Physiological Laboratory

Fld.	No. of

No.	Position	Cols.	Item	Description	Comments
22.	189-190	2	Primary Specialty 9(02)	Specialty Code Code Specified In Part 4 of MCM §2207	
23.	191	1	Primary Board Certification Indicator X(01)	Y or N or U for Unknown	
24.	192-193	2	Secondary Specialty Code 9(02)	Secondary Specialty Code For This Practice Setting.	
25.	194	1	Secondary Board Certification Indicator X(01)	N = No U = Unknown	Y = Yes
26.	195	1	Type of Sanction Code X(01)	Exhibit 4	Refer to
27.	196-199	4	Effective Date of Sanction 9(06)	(MMYY) Windowing	
28.	200-201	2	Number of Sanctioned Yrs 9(02)	Length of Sanction 01-99	
29.	202	1	Deactivate Resident/Intern Practice Code X(01)	D =Deactivate R =Resident I =Intern P =Practice O =OPT Out	
30.	203	1	Group Practice Indicator 9(01)	1 =Group 4 =Solo	
31.	204	1	Physician/Health Care Practitioner/ Group Practice Participation Indicator X(01)	Y =Yes The participation N = No decision is the latest recorded.	
32.	205-218	14	Tax Identification Employer Identification no. X(14)		Any number Number you assigned or SocialSecurity Number which permits Identifying cross-referencing Records ForOne Individual

Fld. No.	Position	No. of Cols.	Item	Description	Comments

Fld. No.	Position	No. of Cols.	Item	Description	Comments
33.	219-232	14	Carrier Provider Number X(14) (Use UPIN for Record Status 5 only)		The Number You Have Provided The Physician/ Practitioner For Billing Medicare.
34.	233-238	6	Registry's Numbert the Assigned UPIN Registry X(06)t	Leave blank	This spaced reserved for UPIN assignment
35.	239-248	10	NHIC Number 9(10)	Exception Turnaround Numbering	Assigned by Registry and correction process
36.	249-253	5	Incoming Carrier Number 9(05)	CMS Contractor Number; Multi-state Contractor Use The Distinct Number of Each Jurisdiction.	
37.	254-268	15	Registry Assigned Error Codes Or Notification Codes X(15)	Leave blank.	Used for Registry error resolution/ auto notification
38.	269	1	Record Validation Field X(1)	Y = Yes N = No	Indicate that you have validated the record with State Licensure Board
39.	270	1	Special Processing X(1)		Used to indicate special processing record is being submitted.
				Acceptable Values: Y = Indicates additional settings being added. 1 = Indicates change to Providers Name.	Record Code "1" with Upin

Record Code "5" OLD LAST NAME in Field |

40.	271-290	20	Special Processing Data X(20)		Used to cross check the change to a Provider's name or Provider Number.
			Name Change	Include the Providers <u>LAST</u> name only as it appears on the MPIER prior to the change.	Record Code "5" Providers NEW name in Fields 3,4, 5, 6. UPIN Field 34.
			Provider Number Change	Include the Carrier assigned Number as It appears on the MPIER prior to to the change.	Record Code "5" Includes the NEW provider Number in Field 33 UPIN in Field 34.
			Idividual Social Security Number	Physician/ Health Care Practitioner Personnel SSN	Record returned To you will contain the 10-digit UPIN
41.	292-301	10	10 Digit X(10)	Physician/ Health Care Practitioner/ Group	Record will Contain - Digit UPIN 10-digit UPIN
42	302-306	5	5 Digit X(5)	Filler	Return record

NOTE: For "9" numeric fields, show zeroes if blank. For all "X" alpha numeric fields, if no information leave field blank.

40.1 - Trailer Record Data Elements
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

Fld. No.	Position	No. of Cols.	Item	Description	Comments
1.	001	1	Record Code 9(01)	9 = Trailer Record	
2.	002-006	5	Incoming Carrier Number 9(05)		HCFA Contractor Number; Multistate Contractors Use The Distinct Number Of Each Jurisdiction.
3.	007-014	6	File Creation 9(06)	(MMDDYYYY) Month, Day, And Year Of File Creation.	
4.	015-029	15	Number of Records Sent 9(15)	Total Number Of Records On The File. Not Include The Trailer Record.	Right justified and precede Do with zeroes.
5.	030-306	273	Filler X(277)		

NOTE: For "9" numeric fields, show zeroes if blank. For all "X" alpha numeric fields, if no information leave field blank.

Exhibit 41 - List of Medical School Codes
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

List of Medical School Codes

1. U.S. Medical and Osteopathic schools and codes are in Exhibit 3A.
2. U.S. Podiatric Medical Colleges and codes are in Exhibit 3B.
3. U.S. Optometric schools and codes are in Exhibit 3C.
4. U.S. Chiropractic schools and codes are in Exhibit 3D.
6. Use 99999 for any foreign school.
5. For graduates of the following types of schools, code the corresponding code listed below:

CODE	TYPE OF SCHOOL
10000	(DDM)
20000	(DDS)
60000	Nursing
70000	All Other Health Care Practitioner

Exhibit 41.1 - List of Medical School in the U.S.
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

LIST OF MEDICAL SCHOOLS IN THE U.S.

ALABAMA
00102 University of Alabama School of Medicine, Birmingham, AL 35294
00104 Birmingham Medical College
00106 University of South Alabama College of Medicine, Mobile, AL 37788

ARIZONA
00301 University of Arizona College of Medicine, Tucson, AZ 85724

ARKANSAS
00401 University of Arkansas College of Medicine, Little Rock, AR 77205
00402 College of Physicians and Surgeons, Little Rock, AR 77205

CALIFORNIA
00501 Cooper Medical College, San Francisco, CA 94143
00502 University of California, San Francisco School of Medicine, San Francisco, CA 94143
00504 California Eclectic Medical College, Los Angeles, CA 90033
00505 Hahneman Medical College of the Pacific, San Francisco, CA 94305

00506 University of Southern California School of Medicine, Los Angeles, CA 90033
00507 College of Physicians and Surgeons of San Francisco, CA
00508 Oakland College of Medicine and Surgery
00509 College of Physicians and Surgeons, Los Angeles, CA 90024
00511 Stanford University School of Medicine, Palo Alto, CA 94305
00512 Loma Linda University School of Medicine, Loma Linda, CA 92350
00513 Pacific Medical College, Los Angeles
00514 University of California, UCLA School of Medicine, Los Angeles, CA 90024
00515 University of California, California College of Medicine, Irvine, CA 92717
00516 University of California, Irvine, California College of Medicine Irvine, CA 92717
00517 University of California, Irvine, California College of Medicine, Irvine, CA 92717
00518 University of California, San Diego School of Medicine, La Jolla, CA 92093
00519 University of California, Davis School of Medicine, Davis, CA 95616
00576 College of Osteo of the Pacific, Pomona, CA 91766

COLORADO
00702 University of Colorado School of Medicine, Denver, CO 80262
00705 Denver and Gross College of Medicine Denver, CO 80262

CONNECTICUT
00801 Yale University School of Medicine, New Haven, CT 06510
00802 University of Connecticut School of Medicine, Farmington, CT 06032

DISTRICT OF COLUMBIA
01001 George Washington University School of Medicine, Washington, DC 20037
01002 Georgetown University School of Medicine, Washington, DC 20007
01003 Howard University College of Medicine, Washington, DC 20059

FLORIDA
01102 University of Miami School of Medicine, Miami, FL 33101
01103 University of Florida College of Medicine, Gainesville, FL 32610
01104 University of South Florida College of Medicine, Tampa, FL 33612
01175 Southeastern College of Osteo Medicine, Miami, FL 33162

GEORGIA
01201 Medical College of Georgia, Augusta, GA 30912
01205 Emory University School of Medicine, Atlanta, GA 30322
01209 Georgia College of Eclectric Medicine and Surgery, Atlanta, GA 30314
01211 Atlanta College of Physicians and Surgeons, Atlanta, GA 30322
01212 Atlanta School of Medicine Atlanta, GA 31207
01218 Hospital Medical College Eclectric, Atlanta, GA 31207
01219 Southern College of Medicine and Surgery, Atlanta, GA 30314
01221 Morehouse School of Medicine, Atlanta, GA 31207
01222 Mercer University School of Medicine, Macon, GA 31207

HAWAII
01401 University of Hawaii John A. Burns School of Medicine, Honolulu, HI 96822

ILLINOIS
01601 Rush Medical College of Rush University, Chicago, IL 60612
01602 University of Chicago, Pritzker School of Medicine, Chicago, IL 60637
01604 The Hahneman Medical College and Hospital, Chicago, IL 60637
01605 College of Medicine and Surgery, Chicago, IL 60658
01606 Northwestern University Medical School, Chicago, IL 60611
01608 Bennett Medical College, Chicago, IL 60639
01609 Northwestern University Women Medical School, Chicago, IL 60637
01610 Chicago Homeopathic Medical College, Chicago, IL 60612
01611 University of Illinois at Chicago Health Science Center, Chicago, IL 60612
01613 Harvey Medical College, Chicago, IL 60637
01614 National Medical University, Chicago 60639
01615 Hering Medical College, Chicago, IL 60638

ILLINOIS
01616 Jenner Medical College, Chicago, IL 60637
01617 Illinois Medical College, Chicago, IL 60637
01618 Dunham Medical College, Chicago, IL 60637
01619 American Medical Missionary College, Battle Creek, Chicago, IL 60637
01622 Chicago College of Medicine and Surgery

01623 Dearborn Medical College, Chicago, IL 60637
01642 University of Health Sciences/ Chicago Medical School, North Chicago, IL 60064
01643 Loyola University of Chicago, Stitch School of Medicine, Maywood, IL 60153
01644 The General Medical College, Chicago, IL 60615
01645 Southern Illinois University School of Medicine, Springfield, IL 62708
01675 Chicago College of Osteopathy, Chicago, IL 60615

INDIANA
01705 Physiological Medical College of Indiana, Indianapolis, IN 46202
01708 Medical College of Indiana, Indianapolis, IN 46224
01709 Central College of Physicians and Surgeons, Indianapolis, IN 46223
01717 Eclectic Medical College of Indiana, Indianapolis, IN 46224
01718 Indiana Medical College, Indianapolis, IN 46224

INDIANA
01719 School of Medicine of Purdue University, Indianapolis, IN 46202
01720 Indiana University School of Medicine, Indianapolis, IN 46223

IOWA
01801 College of Physicians and Surgeons, Keokuk, IA 52632
01803 University of Iowa College of Medicine, Iowa City, IA 52242
01804 State University of Iowa College of Homeopathic Medicine, Iowa City, IA 52242
01806 Drake University College of Medicine, Des Moines, IA 50311
01808 Sioux City College of Medicine, Sioux City, IA 50312
01810 Keokuk Medical College, College of Physicians and Surgeons, Keokuk, IA 52632
01875 University of Osteopathic Medicine and Health Sciences, Des Moines, IA 50312

KANSAS
01902 University of Kansas School of Medicine, Kansas City, KS 66103
01903 Kansas Medical College, Topeka, KS 66606
01904 College of Physicians and Surgeons, Kansas City, KS 66110
01907 Western Eclectic College of Medicine and Surgery, Kansas City, KS 66102

KENTUCKY
02001 Kentucky School of Medicine, Louisville, KY 40292
02002 University of Louisville School of Medicine, Louisville, KY 40292
02004 Louisville Medical College, Louisville, KY 40292
02005 Hospital College of Medicine, Louisville, KY

KENTUCKY
02006 Louisville National Medical College, Louisville, KY 40292
02008 Southwestern Homeopathic Medical College and Hospital, Louisville, KY 40546
02009 Kentucky University Medical Department, Louisville, KY 40292
02011 Louisville Hospital Medical College, Louisville, KY 40292
02012 University of Kentucky College of Medicine Lexington, KY 40536

LOUISIANA

02101 Tulane University School of Medicine, New Orleans, LA 70112
02104 Flint Medical College of New Orleans University, New Orleans, LA 70112
02105 Louisiana State University School of Medicine in New Orleans, New Orleans, LA 70112
02106 Louisiana State University School of Medicine in Shreveport, Shreveport, LA 71130

MAINE
02201   Bowdoin Medical School, Brunswick-Portland ME 04003
02275   University of New England, College of Osteo Medicine, Biddeford, ME 04005

MARYLAND
02301 University of Maryland School of Medicine, Baltimore, MD 21201
02303 College of Physicians and Surgeons of Baltimore, Baltimore, MD 21201
02304 Baltimore Medical College, Baltimore, MD 21201
02305 Womans Medical College of Baltimore, Baltimore, MD 21201
02306 Baltimore University School of Medicine, Baltimore, MD 21201
02307 Johns Hopkins University School of Medicine, Baltimore, MD 21205
02308 Atlantic Medical College, Baltimore, MD 21201
02309 Maryland Medical College, Baltimore, MD 21201
02311 Maryland College of Eclectic Medicine and Surgery, Baltimore, MD 21201
02312 Uniformed Services University of the Health Sciences, Bethesda, MD 20014

MASSACHUSETTS
02401 Harvard Medical School, Boston, MA 02115
02405 Boston University School of Medicine, Boston, MA 02118
02406 College of Physicians and Surgeons, Boston, MA 02111
02407 Tufts University School of Medicine, Boston, MA 02111
02415 Middlesex University School of Medicine, Waltham, MA 02154
02416 University of Massachusetts Medical School, Worcester, MA 01605

MICHIGAN
02501 University of Michigan Medical School, Ann Arbor, MI 48109
02505 University of Michigan Homeopathic Medical School, Ann Arbor, MI 48209
02507 Wayne State University School of Medicine, Detroit, MI 48201
02508 Michigan College of Medicine and Surgery, Detroit, MI 48201
02512 Michigan State University College of Human Medicine, East Lansing, MI 48824
02576 Michigan State University College of Osteopathic Medicine, East Lansing, MI 48824

MINNESOTA
02604 University of Minnesota Medical School, Minneapolis, MN 55455
02605 Minneapolis College of Physicians and Surgeons
02607 University of Minnesota, Duluth School of Medicine, Duluth, MN 55812
02608 Mayo Medical School, Rochester, MN 55905

MISSISSIPPI
02701 University of Mississippi School of Medicine, Jackson, MS 39216
02702 Mississippi Medical College, Meridian, MS 39305

MISSOURI
02801 Missouri Medical College, St. Louis, MO 63110
02802 Washington University School of Medicine, St Louis, MO 63110

02803 University of Missouri, Columbia School of Medicine, Columbia, MO 65212
02805 Homeopathic Medical College of Missouri, St. Louis, MO 63141
02807 St. Louis College of Physicians and Surgeons
02808 Kansas City Medical College
02810 National University of Arts and Sciences Medical Department, St. Louis, MO 63110
02820 University Medical College of Kansas City Kansas City, MO 64111
02822 Ensworth Medical College, St. Joseph, MO 64507
02826 Kansas City Homeopathic Medical College
02828 Barnes Medical College, St. Louis, MO 63110
02830 Woman's Medical College, Kansas City, MO 63111
02833 Eclectic Medical University, Kansas City, MO 63111
02834 Saint Louis University School of Medicine, St Louis, MO 63104
02835 Southwest School of Medicine and Hospital, Kansas City, MO 63111
02843 Kansas City College of Medicine and Surgery
02844 Kansas City University of Physicians and Surgeons
02845 Mid West Medical College, Kansas City, MO (See 02843)
02846 University of Missouri, Kansas City School of Medicine, Kansas City, MO 64108
02878 The University of Health Sciences, College of Osteo Medicine, Kansas City, MO 64124
02879 Kirksville College of Osteopathic Medicine, Kirksville, MO 63501

NEBRASKA
03004 Lincoln Medical College, Eclectic, Lincoln, NE 68501
03005 University of Nebraska College of Medicine, Omaha, NE 68105
03006 Creighton University School of Medicine, Omaha, NE 68178
03007 Nebraska College of Medicine, Lincoln, NE 69508

NEVADA
03101 University of Nevada School of Medicine, Reno, NV 89507

NEW HAMPSHIRE
03201 Dartmouth Medical School, Hanover, NH 03756

NEW JERSEY
03305 UMDNJ-New Jersey Medical School, Newark, NJ 07103
03306 UMDNJ-Robert Wood Johnson Medical School, Piscataway, NJ 08854
03375 UMDNJ New Jersey School of Osteo Medicine, Camden, NJ 08103

NEW MEXICO
03401 University of New Mexico School of Medicine, Albuquerque, NM 87131

NEW YORK
03501 Columbia University College of Physicians and Surgeons, New York, NY 10032
03503 Albany Medical College of Union University, Albany, NY 12208
03506 State Univesity of New York at Buffalo School of Medicine, Buffalo, NY 14214
03508 State University of New York Downstate Medical Center, Brooklyn, NY 12203
03509 New York Medical College, Valhalla, NY 10595
03510 Bellevue Hospital Medical College, New York, NY 10016
03511 New York Medical College and Hospital for Women, New York 10025
03513 Eclectic Medical College of the City of New York
03515 State University of New York Health Science Center of Syracuse, Syracuse, NY 13210

03519 New York University School of Medicine, New York, NY 10016
03520 Cornell University Medical College, New York, NY 10021
03543   Fordham University School of Medicine, New York, NY 10027
03545 University of Rochester School of Medicine and Dentistry, Rochester, NY 14642
03546 Albert Einstein College of Medicine of Yeshiva University, New York, NY 10461
03547 Mount Sinai School of Medicine of City University of New York, New York NY 10029
03548 State University of New York at Stony Brook, School of Medicine, Stony Brook, NY 11794
03575 New York College of Osteo Medicine of New York Institute of Technology, Old Westbury, NY 11568

NORTH CAROLINA
03601 University of North Carolina at Chapel Hill School of Medicine, Chapel Hill, NC 27514
03603 Leonard Medical School, Raleigh, NC 27604
03604 North Carolina Medical College, Charlotte, NC 28223
03605 Bowman Gray School of Medicine of Wake Forest University, Winston-Salem, NC 27103
03607 Duke University School of Medicine, Durham, NC 27710
03608 East Carolina University School of Medicine, Greenville, NC 27834

NORTH DAKOTA
03701 University of North Dakota School of Medicine, Grand Forks, ND 58201

03801 Medical College of Ohio, Cincinnati, OH 44115
03802 Eclectic Medical College, Cincinnati, OH 44115
03803 Starling Medical College, Columbus, OH 45210
03806 Case Western Reserve University School of Medicine, Cleveland, OH 44206

OHIO
03808 Cincinnati College of Medicine and Surgery
03809 Miami Medical College, Cincinnati, OH 44106
03811 University of Wooster Medical Department, Cleveland, OH 44206
03819 Toledo Medical College
03823 Cleveland Medical College, Homeopathic Cleveland, OH 45210
03825 Ohio Medical University Columbus, OH 45210
03826 Cleveland Pulte Medical College
03840 Ohio State University College of Medicine, Columbus, OH 43210
03841 University of Cincinnati College of Medicine, Cincinnati, OH 45267
03843 Medical College of Ohio at Toledo, Toledo, OH 43699
03844 Northeastern Ohio Universities College of Medicine, Rootstown, OH 44272
03845 Wright State University School of Medicine, Dayton, OH 45401
03875 Ohio University of Osteo Medicine, Athens, OH 45701

OKLAHOMA
03901 University of Oklahoma College of Medicine, Oklahoma City, OK 73190
03905 Oral Roberts University School of Medicine, Tulsa, OK 74171
03979 Oklahoma College of Osteopathic Medicine and Surgery, Tulsa, OK 47127

OREGON
04001 Williamette University Medical Department, Salem, OR 97304
04002 Oregon Health Sciences University School of Medicine, Portland, OR 97201

PENNSYLVANIA
04101 University of Pennsylvania School of Medicine, Philadelphia, PA 19104
04102 Jefferson Medical College of Thomas Jefferson University, Philadelphia, PA 19107
04107 Medical College of Pennsylvania, Philadelphia, PA 19129
04109 Hahnemann University College of Medicine, Philadelphia, PA 19102
04111 Medico Chirurgical College of Philadelphia, Philadelphia, PA 19102
04112 University of Pittsburgh School of Medicine, Pittsburgh, PA 15261
04113 Temple University School of Medicine, Philadelphia, PA 19140
04114 Pennsylvania State University College of Medicine, Hershey, PA 17033
04177 Philadelphia College of Osteopathic Medicine, Philadelphia, PA 191431

PUERTO RICO
04201 University of Puerto Rico School of Medicine, San Juan, PR 00936
04202 Ponce School of Medicine, Ponce, PR 00732
04203 Universidad Central del Caribe Escuela de Medicina, Cayey, PR 00633
04204 University De Ciencias Med San Juan Bautista, Hato Rey, PR 00917

RHODE ISLAND
04301 Brown University Program in Medicine, Providence, RI 02912

SOUTH CAROLINA
04501 Medical University of South Carolina College of Medicine, Charleston, SC 29425
04504 University of South Carolina School of Medicine, Columbia, SC 29208

SOUTH DAKOTA
04601 University of South Dakota School of Medicine, Vermillion, SD 57069

TENNESSEE
04701 University of Nashville Medical Department
04705 Vanderbilt University School of Medicine, Nashville, TN 37232
04706 University of Tennessee College of Medicine, Memphis, TN 38163
04707 Meharry Medical College School of Medicine, Nashville, TN 37208
04708 Memphis Hospital Medical College
04709 Chattanooga Medical College
04710 Lincoln Memorial University Medical Department, Knoxville, TN 37920
04711 University of the South Medical Department, Sewanee, TN 37375
04713 Knoxville Medical College
04714 University of West Tennessee College of Medicine and Surgery, Memphis, TN 37402
04715 College of Physicians and Surgeons, Memphis, TN 37208
04720 East Tennessee State University, Quillen-Dishner College of Medicine, Johnson City, TN 37614

TEXAS
04802 University of Texas Medical Branch at Galveston, Galveston, TX 77550
04803 Fort Worth School of Medicine
04804 Baylor College of Medicine, Houston, TX 77030
04805 Physiological Medical College of Texas, Dallas, TX 76203

04806 Southern Methodist University Medical Department, Dallas, TX
04807 Gate City Medical College, Dallas, TX 76204
04812 University of Texas Southwestern Medical School at Dallas, Dallas, TX 75235
04813 University of Texas Medical School at San Antonio, San Antonio, TX 78284
04814 University of Texas Medical School at Houston, Houston, TX 77225
04815 Texas Tech University Health Science Center School of Medicine,Lubbock, TX 79430
04816 Texas A & M University College of Medicine, College Station, TX 77843
04878 Texas College of Osteopathic Medicine, Lubbock, TX 79430

UTAH
04901 University of Utah School of Medicine, Salt Lake City, UT 84132

VERMONT
05002 University of Vermont College of Medicine, Burlington, VT 05405

VIRGINIA
05101 University of Virginia School of Medicine, Charlottesville, VA 22908
05104 Medical College of Virginia Commonwealth University School of Medicine, Virginia, Richmond, VA 23298
05106 University College of Medicine, Richmond, VA 23298
05107 Eastern Virginia Medical School, Norfolk, VA 23501

WASHINGTON
05404 University of Washington School of Medicine, Seattle, WA 98195
05415 Washington College of Physicians and Surgeons, Seattle, WA 98196

WEST VIRGINIA
05501 West Virginia University School of Medicine, Morgantown, WV 26506
05502 Marshall University School Medicine, Huntington, WV 25701
05575 West Virginia School of Osteopathic Medicine, Lewisburg, WV 24901

WISCONSIN
05602 Wisconsin College of Physicians and Surgeons, Milwaukee, WI 53226
05603 Milwaukee Medical College
05605 University of Wisconsin Medical School, Madison, WI 53706
05606 Medical College of Wisconsin, Milwaukee, WI 53226

Exhibit 41.2 - Directory of Podiatric Medical Colleges
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

DIRECTORY OF PODIATRIC MEDICAL COLLEGES

30000   California College of Podiatric Medicine
                1210 Scott St., San Francisco, CA 94120

30100   Dr. William M. Scholl School of College of Podiatric Medicine
                1001 North Dearborn St., Chicago, IL 60610

30200   New York College of Podiatric Medicine
                53 East 124th St., New York, NY 10035

30300   Ohio College of Podiatric Medicine
                10515 Carnegie Ave., Cleveland, OH 44106

30400   Pennsylvania College of Podiatric Medicine
                Eighth at Rale St, Philadelphia, PA 19107

30500   Barry University School of Podiatric Medicine
                11300 Northeast Second Ave., Miami Shores, FL 33161

30600   College of Podiatric Medicine and Surgery,
                University of Osteopathic Medicine and Health Sciences
                3200 Grand Ave., Des Moines, IA 50312

List of Accredited Professional Optometric Degree Programs
June 1986

40000 University of Alabama in Birmingham
       School of Optometry
       Birmingham, AL 35292

40010 University of California
       School of Optometry
       Minor Hall
       Berkley, Ca 94720

40020 Ferris State College
       College of Optometry
       Big Rapids, MI 49307
AMERICAN OPTOMETRIC ASSOCIATION
COUNCIL ON OPTOMETRIC EDUCATION

40030 University of Houston
       College of Optometry
       Houston, TX 77004
40040 Illinois College of Optomery
       3241 South Michigan Avenue
       Chicago, IL 60616

40050 Indiana University
       School of Optometry
       Bloomington, IN 47405

40060 Inter-American University of Puerto Rico
       School of Optometry
       San Juan, PR 00936

40070 University of Missouri
       St. Louis, MO 63121

40080 University of Montreal
       School of Optometry
       Montreal, P.Q.
       Canada H3C 3J7

40090 New England
College of Optometry
Boston, MA 02115

40100 Berkeley Northeastern State University
       College of Optometry
       Tahlequah, Ok 74464

40110 State University of NY
       State College of Optometry
       New York, NY 10010

40120 The Ohio State University
       College of Optometry
       Columbus, OH 43210

40130 Pacific University
       College of Optometry
       Forest Grove, OR 97116

40140 Pennsylvania College of Optometry
       Philadelphia, PA 19141

40150 South California College of Optometry
       Fullerton, CA 96231
40160 Southern College of Optometry
       Memphis, TN 38104

40170 University of Waterloo
       School of Optometry
       Waterloo, Ontario
       Canada N2L 3G1

Exhibit 41.4 - List of Chiropractic Schools in the U.S.
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

List of Chiropractic Schools in the U.S

Code

50010	Adio Institute of Straight Chiropractic Levittown, PA 19056 Changed name to Pennsylvania College of Straight Chiropractic - (1984)
50020	Atlantic States Chiropractic Institute Brooklyn, NY 10021 Merged with Columbia Institute of Chiropractic
50030	Bebout College of Chiropractic Indianapolis, IN 46224
50040	Booker T. Washington Chiropractic College Kansas City, MO 66103 50050
50050	Logan College Oklahoma City, OK 73190 Formerly Carver-Denny Chiropractic College Merged with Logan College of Chiropractic - (1958)
50060	Los Angeles College of Chiropractic Formerly California Chiropractic College (1963) Los Angeles, CA 90024
50065	Central States College of Physiatrics and Chiropractic Eaton, OH 45320
50070	Canadian Memorial Chiropractic College Toronto, Ontario M4G 3E6 50080
50080	Chiropractic Institute of New York New York, NY 10022
50090	Crisco Chiropractic College (Proposed) Crisco, TX 77650

* Schools in business since 1950
**Schools not listed use code 5000

50100	Cleveland Chiropractic College Los Angeles, CA 90004
50110	Cleveland Chiropractic College Kansas City, MO 64131
50120	Columbia College of Chiropractic Baltimore, MD 21201
50130	Columbia College of Chiropractic Alameda, CA 94501
50140	Columbia College of Chiropractic and Naturopathy Sacramento, CA 95860
50150	Columbia Institute of Chiropractic New York, NY 10025
50160	Hollywood College of Chiropractic Hollywood, CA 90024
50170	Lafayette Institute Philadelphia, PA 19104
50180	Life Chiropractic College San Lorenzo, CA 94580
50190	Lincoln Chiropractic College Marietta, GA 30060
50200	Reaver School of Chiropractic Dayton, OH 45401
50210	Restview Chiropractic College University of Chiropractic Seattle, WA 98196
50220	San Francisco College of Chiropractic San Francisco, CA 94128 Formerly West Coast Chiropractic College; Name changed to Metropolitan College of Chiropractic - 1944
50230	Sherman College of Straight Chiropractic, Spartanburg, SC 29304
50240	Western States College of Chiropractic, Portland, OR 97230
50250	University of Pasadena, College of Chiropractic, Pasadena, CA 91108
50260	University of Natural Healing Arts, Denver CO 80262
50270	National College of Chiropractic, Lombard IL 60148
50280	New York Chiropractic College, Glen Head, NY 11545
50290	Northwestern College of Chiropractic, Bloomington, MN 55431
50300	Palmer College of Chiropractic – West, Sunnyvale, CA 94087
50310	Palmer College of Chiropractic, Davenport, IA 52803

Sanction Codes *

CODE   **DESCRIPTION**

A - 1128(a)(1) -   Program-related conviction
B - 1128(a)(2) -   Conviction for patient abuse or neglect
C - 1128(b)(1) -   Conviction relating to fraud
D - 1128(b)(2) -   Conviction relating to obstruction of an investigation
E - 1128(b)(3) -   Conviction relating to controlled substances
F - 1128(b)(4) -   License revocation or suspension
G - 1128(b)(5) -   Suspension or exclusion under a Federal or State health care program
H - 1128(b)(6) -   (Formerly 1862(d)(1)(B) and (C)) - Excessive claims or furnishing of
                        unnecessary or substandard items or services
I -   1128(b)(7) -   Fraud, kickbacks and other prohibited activities
                        (including 1162(d)(1A))
J - 1128(b)(8) -   (Formerly 1128(b) - Entities owned or controlled by a sanctioned
                        individual
K - 1128(b)(9)   Failure to disclose required information
L - 1128(b)(10) -   Failure to supply requested information on subcontractors and suppliers
M -1128(b)(11) -   Failure to provide payment information
N - 1128(b)(12) -   Failure to grant immediate access
O - 1128(b)(13) -   Failure to take corrective action
P - 1128(b)(14) -   Default on health education loan or scholarship obligations
Q - 1128Aa   -   (Formerly 1128(c) - Imposition of a civil money penalty or assessment
R - 1156(b)   -   (Formerly 1160) - PRO recommendation
U -   -   UNKNOWN (Physician is sanctioned, but type of sanction unknown)

* If a physician has more than one sanction, show the code of the sanction with the longest
duration.

Exhibit 43 - Exhibit 5
(Rev. 141, Issued: 02-24-06; Effective/Implementation: N/A)

_____

A.

UPIN Carrier Data Transmittal
_____

Deliver to: 1. Carrier Number:
                                                 2. *Name and Address of Carrier
_____

UPIN Records Included in this Transmittal
_____

3. Date Prepared: 4. Date Shipped:
_____

B. 1 UPIN Data Records: Tape Diskette
Volume Serial Number: _____

                        _____

                        _____

                        _____

                        _____

                        _____

_____

B. 2   Total Records
_____

B. 3   Type Records:
        Medical Doctor/D.O. Records
        Other Doctor Records
_____

C. 1
    We have successfully processed the above file
    (no reel will be returned).
_____

C. 2
    We are unable to accept your UPIN Data Records.
    See below for information on reason for return.
_____

Reason for return:
_____

* Enter complete name and address of persons to whom all questions may be addressed.
_____