

## **Reporting and Editing the Provider Fields Effective with October 2006 Discharges**

### **Reporting the provider fields**

Effective with October 2006 discharges hospitals are required to submit provider fields in the 1600-character UB-92 record differently. **Both the profession code + TN license number combination and the UPIN or NPI are required to be reported for each provider associated with the discharge.** Each provider field in the 1600-character record currently has 22 positions that will allow for the new format (12 positions for the profession code + license number combination and the remaining 10 positions allow for the UPIN or NPI).

In the current format for discharge claims reporting, each discharge record may have up to 3 providers reported:

- Attending physician (provider)
- Other physician (provider) 1
- Other physician (provider) 2

If there are less than 3 providers involved in the case, one or both of the Other Physician (Provider) fields may be left blank however, every record **must have** the Attending Physician (Provider) code provided.

Implementation of the new provider code format begins with October 2, 2006 discharges. For October 1, 2006 discharges, HIDI will accept either the old provider code format (state license number or UPIN) or the new provider code format (below).

If a hospital has to resubmit data for discharges that occurred prior to October 2 **AFTER** the new provider code format goes into effect, the provider codes in the resubmitted data may be in the old format or the new format.

### **New Format for physician (provider) codes effective with October 2, 2006 discharges (both a. and b. must be present for each provider reported.):**

#### **a. PROCODE + TN LICENSE NUMBER:**

- The 1<sup>st</sup> and 2<sup>nd</sup> positions = Profession code  
2 alpha characters: MD, DO, DS, NP, MW, PA, DP, **PS, DC**, or UK  
MD = Doctor of Medicine  
DO = Doctor of Osteopathy  
DS = Dentist  
NP = Nurse Practitioner  
MW = Nurse Midwife  
PA = Physician Assistant  
DP = Doctor of Podiatry  
**PS = Licensed Psychologist (added Jan 2007)**  
**DC = Doctors of Chiropractic Medicine (added Jan 2007)**  
UK = UNKNOWN

- The 3<sup>rd</sup> – 12<sup>th</sup> position = TN Medical License Number (10 numbers – right justified, left zero filled)
- Default Code for unknown ProCode+TN Lic # = UK9999999999 (UK followed by ten 9s). UK can only be used with ten 9s to indicate unknown.

**b. UPIN OR NPI:**

- The 13<sup>th</sup> – 22<sup>nd</sup> position = UPIN or NPI
  - UPIN = 1 alpha character followed by 5 numbers (left justify and leave blank spaces to the right)
  - NPI = 10 numbers
- Default Code for unknown UPIN/NPI = OTH000 (alpha OTH followed by 3 zeroes). Left justify and leave blank spaces to the right.

If a provider code is reported in ProCode-TN Lic #, there must also be a code reported in the UPIN/NPI portion of the provider field and vice versa (one portion cannot be blank while the other portion is complete). If this “imbalance” occurs, the record will be flagged with a Fatal error due to the missing portion of the field.

<b>a. ProCode+TN Lic #</b>	<b>Action Needed</b>
Valid format and # on file	None
Valid format but # NOT on file	Generate Warning Error*
Invalid format	Generate Fatal Error
Missing or blank	Generate Fatal Error

\* For Q1 2007 data, the Technical Subcommittee has recommended that records be flagged as Fatal if more than 30% of a hospital’s discharges get Warnings due to the pro code + license number not being on the license number files provided by the Dept of Health. Each hospital should review their reports for Q4 2006 data to see what impact this action will have on the hospital.

<b>b. UPIN/NPI</b>	<b>Action Needed</b>
Valid format and # on file	None
Valid format but # NOT on file	Generate Warning Error*
Invalid format	Generate Fatal Error
Missing or blank	Generate Fatal Error

\* For Q1 2007 data, the Technical Subcommittee has recommended that records be flagged as Fatal if more than 30% of a hospital’s discharges get Warnings due to the UPIN # not being on the UPIN files used by HIDI to edit the data. Each hospital should review their reports for Q4 2006 data to see what impact this action will have on the hospital.

## **Editing the provider fields – FAQs**

1. How do I submit provider information if the profession code-state license number is unknown but the UPIN or NPI is provided?  
*Report ProCode+Lic # as UK9999999999 and report the known UPIN/NPI.*
2. How do I report the license number if the provider is only licensed in another state (not licensed in Tennessee)?  
*Report ProCode+Lic# as UK9999999999. The only license number files available are those from the Tennessee Department of Health for providers who are licensed to practice in Tennessee. You may report the UPIN or NPI for the “other state” provider if it is known. If it is not known, report that portion of the field as OTH000 (alphabetic OTH followed by 3 zeroes).*
3. What if the UPIN or NPI is unknown but the profession code-state license number is provided?  
*Report the known ProCode+Lic # and submit the UPIN/NPI as OTH000.*
4. What if the profession code and license number combination don't match the license files provided by TDH?  
*This will generate a Warning until 30% of your records have this condition. Effective with processing for first quarter 2007 discharges, if a hospital has 30% or more of the records with this condition (number not on file) these warnings will become Fatal errors.*
5. What if a UPIN is reported and it meets the format for a valid UPIN but the number is not found on the UPIN list HIDI uses to edit data?  
*This will generate a Warning until 30% of your records have this condition. Effective with processing for first quarter 2007 discharges, if a hospital has 30% or more of the records with this condition (number not on file) these warnings will become Fatal errors.*
6. From Oct 2006 to May 2007 the UPIN or the NPI may be used in the 13<sup>th</sup>-22<sup>nd</sup> position of each field. Does this mean hospitals can report the UPIN for some providers and the NPI for others or should the total submission be one or the other?  
*Hospitals may report the UPIN for some providers and the NPI for others in the same data file submitted to HIDI.*
7. Will there be a ‘total field default’ code to use if a provider sends a patient to the hospital for diagnostic services (i.e., MRI, CT scan, etc.) but the reporting hospital doesn't know the doctors license number or UPIN/NPI?  
*The ‘total field default’ code will be UK9999999999OTH000. Be aware that limitations will eventually be placed on the percent of records that may contain total field default codes to prevent their overuse. The percent will probably be different for inpatient discharges and outpatient discharges (outpatient discharges may allow a higher percentage of records to contain the total field default code).*