



TEXAS
Health and Human
Services

School Health and Related Services (SHARS) Policy Updates

Topic Two:

National Provider Identifier (NPI)

Presenters

- ***Leslie Smart, OTR, DSc*** serves as the Medical Benefits Director in the Office of Policy and Program (OPP) in the Medicaid and CHIP Services (MCS) Department of the Texas Health and Human Services Commission (HHSC).
- ***Jennifer Daniels, MPA*** serves as the SHARS Policy Analyst in the OPP in the MCS Department of the Texas HHSC.



TEXAS
Health and Human
Services

Objectives

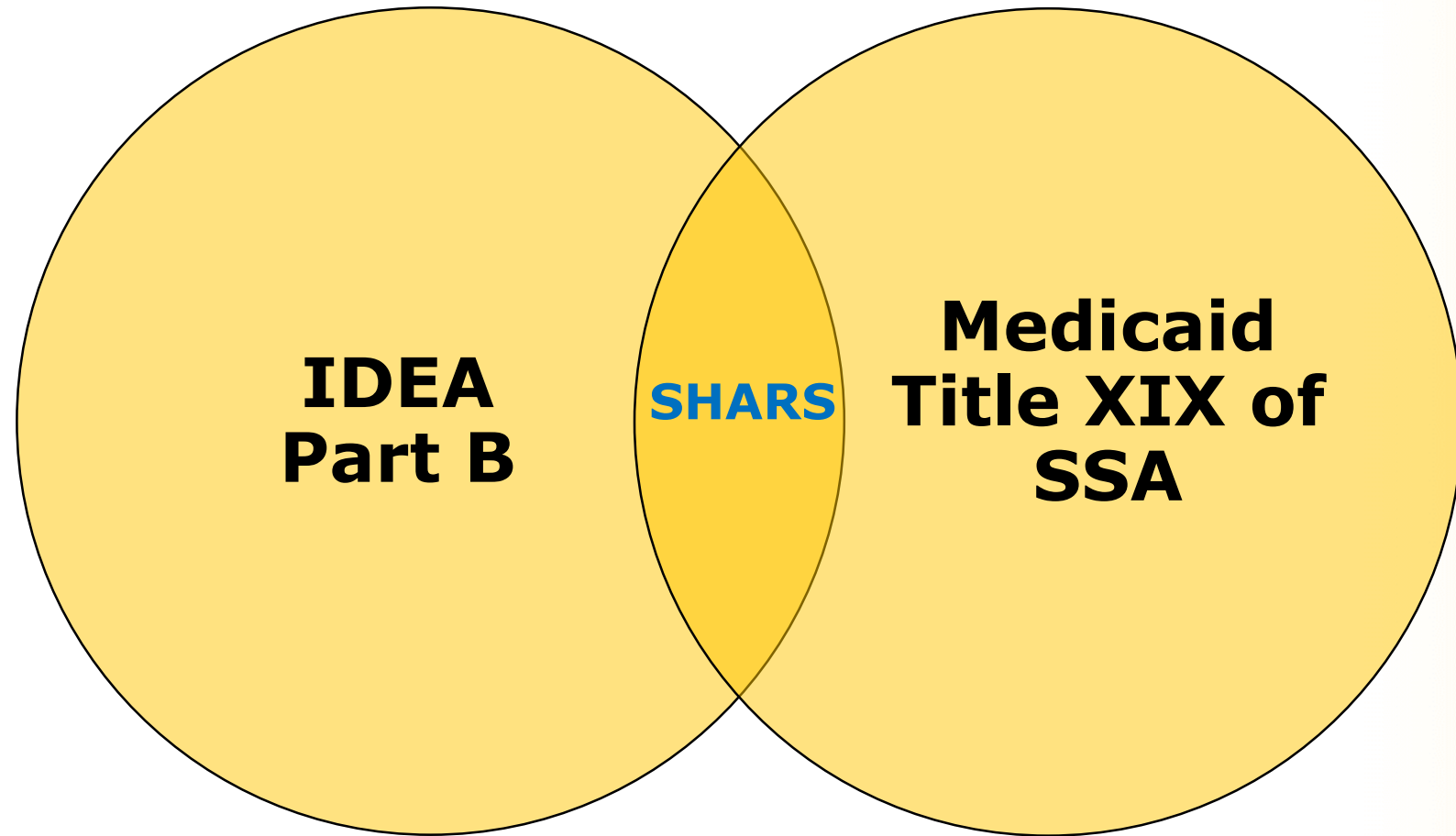
Participants will:

- Identify rationale and key dates for SHARS referring or prescribing provider National Provider Identifier (NPI) requirements
- Learn
 - What an NPI is
 - Which SHARS providers may need an NPI
 - Why an NPI may be needed
 - How to obtain an NPI, if needed
 - Which providers may need to enroll in Medicaid as an individual SHARS provider



TEXAS
Health and Human
Services

Background



Nexus of Two Funding Statutes



TEXAS
Health and Human
Services

Background

On August 13, 2021, a notification was published on TMHP.com to alert the public to SHARS changes pertaining to NPI requirements:

- [SHARS - Updates to Interim Claiming and Cost Reporting Requirements for SHARS Physical Therapy \(PT\), Occupational Therapy \(OT\), Speech Therapy \(ST\), and Audiology Services](#)

On September 14, 2021, an updated notification was published on TMHP.com to alert the public to SHARS changes pertaining to NPI requirements:

- [Update to SHARS - Updates to Interim Claiming and Cost Reporting Requirements for SHARS PT, OT, ST, and Audiology Services](#)



TEXAS
Health and Human
Services

Background

The Centers for Medicare and Medicaid Services (CMS) assesses Texas Medicaid using the Payment Error Rate Measurement (PERM) process to measure improper payments in Texas Medicaid.

- CMS recently conducted a PERM review on claims submitted to Texas Medicaid for SHARS PT, OT, ST, and audiology services
 - Based on findings of this federal review, a referring or prescribing NPI will be required for interim claiming and cost reporting for SHARS PT, OT, ST, and audiology services
 - These policy changes will bring the SHARS program further into compliance with federal standards for Medicaid reimbursement

Note: The SHARS school district billing provider NPI number will still be required when submitting SHARS claims.



TEXAS
Health and Human
Services

Background

Title 42 (Public Health) Code of Federal Regulations (CFR) § 455.440 National Provider Identifier

- The State Medicaid agency must require all claims for payment for items and services that were ordered or referred to contain the National Provider Identifier (NPI) of the physician or other professional who ordered or referred such items or services.

42 CFR § 455.410 Enrollment and Screening of Providers

- (b) The State Medicaid agency must require all ordering or referring physicians or other professionals providing services under the State plan or under a waiver of the plan to be enrolled as participating providers.



TEXAS
Health and Human
Services

Background

42 CFR § 440.110 Physical Therapy, Occupational Therapy, and Services for Individuals with Speech, Hearing, and Language Disorders

- (a)(1) Physical therapy means services prescribed by a physician or other licensed practitioner of the healing arts within the scope of his or her practice under State law and provided to a beneficiary by or under the direction of a qualified physical therapist.
- (b)(1) Occupational therapy means services prescribed by a physician or other licensed practitioner of the healing arts within the scope of his or her practice under State law and provided to a beneficiary by or under the direction of a qualified occupational therapist.



TEXAS
Health and Human
Services

Background

42 CFR § 440.110 Physical Therapy, Occupational Therapy, and Services for Individuals with Speech, Hearing, and Language Disorders

- (c)(1) Services for individuals with speech, hearing, and language disorders means diagnostic, screening, preventive, or corrective services provided by or under the direction of a speech pathologist or audiologist, for which a patient is referred by a physician or other licensed practitioner of the healing arts within the scope of his or her practice under State law.



TEXAS
Health and Human
Services

Key Dates

November 1, 2021

- Texas Medicaid Provider Procedures Manual (TMPPM) will include policy language requiring referring or prescribing provider NPI for SHARS PT, OT, ST, and audiology services
- Grace period begins for **dates of service for** claim submission requirements for referring or prescribing provider NPI

October 31, 2022

- Last **date of service for** grace period for referring or prescribing provider NPI



TEXAS
Health and Human
Services

Key Dates (cont.)

November 1, 2022

- First **date of service** in which claims will deny for missing referring or prescribing provider NPI, for *dates of service on or after November 1, 2022*



TEXAS
Health and Human
Services

Key Terms

Prescription

- A written order for services (such as, PT or OT) from the ordering physician or other eligible prescribing provider

Referral

- A written document requesting evaluation for services (such as, ST or audiology) from the referring physician or other eligible referring provider
 - Medical referral for medical services
 - Different from a referral for the initial evaluation conducted before the Admission, Review, and Dismissal (ARD) committee meeting
 - Needed for SHARS reimbursement under Medicaid



TEXAS
Health and Human
Services

Key Terms

Other eligible prescribing provider (under the delegation of a physician)

- Advanced Practice Registered Nurse (APRN)
- Physician Assistant (PA)

Other eligible referring provider (for ST and audiology only)

- Self-referring speech-language pathologist (SLP)
- Self-referring audiologist (AUD)
- APRN (under the delegation of a physician)
- PA (under the delegation of a physician)



TEXAS
Health and Human
Services

What is a National Provider Identifier (NPI)?

CMS describes the NPI as a Health Insurance Portability and Accountability Act of 1996 (HIPAA) Administrative Simplification Standard which is:

- A 10-digit unique identification number for HIPAA covered health care providers
- To be used by covered health care providers, health plans, and health care clearinghouses in lieu of legacy provider identifiers, such as the Unique Physician Identification Number (UPIN)
- Codified in Title 45 (Public Welfare) CFR Part 162
[Dept. of HHS; HIPAA Administrative Simplification; Standard Unique Health Identifier for Health Care Providers, 69 Fed. Reg. 3434 \(January 23, 2004\) \(PDF\)](#)



TEXAS
Health and Human
Services

Who needs an NPI?

According to CMS, essentially all HIPAA covered health care providers who electronically transmit health information to a health plan, either directly or through a health care clearinghouse need an NPI.

For SHARS, this includes Medicaid-enrolled:

- School districts
- Individual providers who prescribe SHARS PT or OT services, or refer for SHARS ST or audiology services
 - Physician (MD, DO)
 - APRN
 - PA
- Individual SHARS providers who self-refer for ST or audiology
 - SLP
 - AUD



TEXAS
Health and Human
Services

Obtaining an NPI

There is no charge to obtain an NPI.

- Can take anywhere from 24 hours to 30 days to process application
- Bank account information should not be needed
- A taxonomy code is needed
 - [National Uniform Claim Committee \(NCCU\)](#)
 - Physician, APRN, and PA taxonomy code based on subspecialty
 - SLP taxonomy code 235Z00000X
 - AUD taxonomy code 231H00000X



TEXAS
Health and Human
Services

Obtaining an NPI

- **Apply online:**
 - [National Plan & Provider Enumeration System \(NPPES\)](#)
 - [How to Apply for an NPI Online](#) (PDF)
- **Apply by mail:**
 - Download and complete [CMS Form 10114](#) (PDF)
 - Mail completed form to
NPI Enumerator
7125 Ambassador Road Suite 100
Windsor Mill, MD 21244-2751
- **For additional information see:**
 - [CMS NPI How to Apply](#)
 - [CMS NPI What You Need to Know](#) (PDF)



TEXAS
Health and Human
Services

SHARS NPI and Medicaid Enrollment Criteria

Any provider who refers or prescribes SHARS PT, OT, ST, or audiology services needs an individual NPI and needs to be enrolled in Texas Medicaid.

- Includes SLPs and AUDs who self-refer for SHARS speech therapy and audiology services
 - Self-referring for SHARS speech therapy and audiology services is optional
- SHARS speech therapy and audiology services may be prescribed by a Medicaid-enrolled physician, APRN, or PA with a valid NPI to meet this requirement



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Questions & Answers (Q&A)

1)Q: We only use the NPI as the referring provider not bill under personal NPIs, correct? It's billed under the school district?

A: Yes, that is correct. The individual NPI is required for the referring or prescribing provider. The school district will continue to use the district or facility NPI as the billing provider.

2)Q: Will there be a grace period for implementation of the NPI and Medicaid enrollment for related service prescriptions or referrals?

A: Yes, there will be a grace period for implementation of the NPI and Medicaid enrollment for SHARS therapy and audiology service prescriptions or referrals.



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Q&A

3)Q: Why is this NPI requirement being added? What problem is it trying to solve?

A: This NPI requirement is being added due to a Payment Error and Rate Measurement (PERM) review conducted by CMS. This requirement will bring the SHARS program further into compliance with federal standards for Medicaid reimbursement.

4)Q: When is the requirement to include the ordering provider NPI on the claim file?

A: The requirement to include the ordering provider NPI on the claim will be written into policy November 1, 2021, with a one-year grace period, through October 31, 2022. On November 1, 2022, SHARS PT, OT, ST, or audiology claims will deny for missing referring or prescribing provider NPI, for dates of service on or after November 1, 2022.



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Q&A

5)Q: Shouldn't the district name and NPI suffice as the "prescribing/referring provider" based on the educational setting?

A: At this time, the school district's name and NPI is sufficient as the billing provider for SHARS claims. The individual referring or prescribing provider name and NPI will be required to seek Medicaid reimbursement for SHARS OT, PT, ST, or audiology services.

6)Q: In the new update it states that OT must obtain a prescription before the initiation of services can begin. Is this just for billing purposes? Am I understanding this correctly?

A: Yes, the referral and prescription requirement is **only** for the purpose of billing Medicaid for SHARS PT, OT, ST, or audiology services. It does not speak to when those services should be delivered to the student.



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Q&A

7)Q: In the school system, generally the SLP is making the referral for speech therapy. It doesn't make sense for the SLP, who works for the district, to become his or her own individually approved Medicaid provider, but it appears the new policy change would require that. So, does that mean a doctor's prescription would be required in these cases?

A: On next slide



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Q&A

7)A: In SHARS only, Texas Medicaid has previously permitted the SLP evaluation to serve as the referral for ST SHARS services in the school system. Going forward, claims for SHARS ST or audiology will require a referring provider NPI number, either in the form of a self-referral or from a physician, APRN, or PA. If the district opts to continue to allow the ST evaluation to serve as the referral for ST services, the SLP will need to obtain an NPI and enroll with Texas Medicaid as an individual provider. However, a physician, APRN, or PA referral or prescription may be used instead. In that case, the NPI of the Medicaid enrolled physician, APRN, or PA will need to be added to the claim form and documentation will need to be kept in the student's ST file.



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Q&A

8)Q: Where would a speech pathologist go in order to obtain an NPI? What is required in applying for an NPI? What is the turnaround time in applying for an NPI? Is there a cost associated with obtaining an NPI? Why does the NPI application ask to have the speech therapist's personal financial information (i.e., bank information)?

A: Please visit [CMS NPI How to Apply](#) for further directions and application requirements for obtaining an NPI. The turnaround time can be anywhere from 24 hours to 30 days. According to CMS, there is no cost associated with obtaining an NPI. Neither the paper nor the electronic NPI application appear to ask for personal financial or bank information. For further information or clarification, please contact the NPI Enumerator by phone at 1-800-465-3203 or TTY 1-800-692-2326, or by email at customerservice@npienumerator.com.



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Q&A

9)Q: Will any of the following speech pathologists be required to apply for an NPI and be an independent Medicaid provider in order to provide therapy services? SLP assistants, TEA certified SLPs, SLP-interns, state licensed SLPs, or grandfathered SLPs?

A: At this time, none of the SLPs or SLPAs listed will be required to apply for an NPI and be an independent Medicaid provider in order to provide therapy services.

10)Q: Please clarify what specific information must be included in the PT or OT prescription.

A: PT and OT prescriptions are written based on medical criteria. Prescriptions might include specific details about how often services should be provided, or the prescriptions might not include any limitations. The SHARS policy is silent on required elements for the prescription for SHARS PT or OT services, except that the provider may not bill in excess of what is stated on the prescription.



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Q&A

11)Q: For PT and OT, please clarify who falls under the “other eligible prescribing provider” other than a physician.

A: An APRN or PA, under the delegation of a physician.

12)Q: For ST and audiology, please clarify who falls under the “other eligible referring provider” other than a physician.

A: A Self-referring SLP, self-referring audiologist, or an APRN or PA under the delegation of a physician.

13)Q: For PT, OT, ST, and audiology, is the name and NPI of the referring or prescribing provider required on all therapy claims?

A: Yes, the name and NPI of the referring or prescribing provider is required on all SHARS PT, OT, ST, and audiology claims.



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Q&A

14)Q: Do the SLPAs who are providing therapy services need to apply for an NPI number?

A: No, speech-language pathologist assistants (SLPA) providing therapy services do not need to apply for an NPI number for SHARS reimbursement.

15)Q: For speech and audiology, must the individual provider use their own NPI, can the district as a whole use a single NPI?

A: All SHARS claims for ST and audiology must include an individual referring provider NPI along with the school district NPI as the billing provider.



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Q&A

16)Q: Can we send evaluations for speech/audiology to a physician to write a prescription/referral with their NPI (similar to OT/PT) rather than have our speech pathologists obtain an NPI?

A: Yes, evaluations for speech or audiology may be sent to a physician to write a prescription or referral with the physician's NPI. The SLPs or audiologists only need to obtain an NPI if they are self-referring.

17)Q: Can a physician's assistant write prescriptions for OT/PT, or does it have to be an MD?

A: Yes, under the direction of a physician, a physician's assistant can write prescriptions for OT or PT.



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Q&A

18)Q: If a speech therapist obtains their NPI number, can their evaluation still serve as the referral, thus not requiring a physician referral for speech?

A: Yes, the initial ST evaluation may serve as the referral as long as the SLP obtains an NPI and enrolls in Texas Medicaid. If an SLP obtains their NPI number, enrolls in Texas Medicaid, and self-refers for speech therapy services, a physician referral would not be required.

19)Q: What if I obtain an NPI number, but my supervisor does not. My supervisor does not document SHARS, they only supervise my therapy sessions. How will that impact their ability to sign off on my SHARS logs as the supervisor?

A: Currently, the NPI requirement applies to referring or prescribing providers for SHARS PT, OT, ST, and audiology services only. This means that the NPI requirement does not apply to rendering or performing providers. SHARS claims should continue to be submitted with the school district's NPI as the billing provider.



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Q&A

20)Q: Does the actual prescription or referring document have to include the NPI of the provider or does it just need to be indicated on the claim file? If the NPI is required to be on the prescription or referring document, will documents that are within the three-year time period be grandfathered in that do not currently have the number listed?

A: No, the actual prescription or referring document does not need to include the referring or prescribing NPI. The referring or prescribing provider NPI number needs to be indicated on the claim form. However, in the event of an audit, the prescription or referring document must be able to be linked to the referring or prescribing provider NPI number included on the claim form.



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Q&A

21)Q: What happens if I do not apply for an NPI? How will that impact my school district's SHARS program?

A: You are not required to apply for an NPI unless you are prescribing or referring for SHARS PT, OT, ST, or audiology services and seeking Medicaid reimbursement. If you are prescribing or referring SHARS PT, OT, ST, or audiology services and seeking Medicaid reimbursement, if you do not obtain an NPI and include it on the claim form, then the school district's claims for SHARS PT, OT, ST, or audiology services will not be paid for dates of service on or after November 1, 2022.



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Q&A

22)Q: I was asked by a PT this morning "We have a few referrals with physicians adding their UPIN. Is this the same as the NPI number?" Please advise. Is that the same number?

A: The NPI replaced the Unique Physician Identification Number (UPIN) in 2007. The referring or prescribing NPI (not the UPIN) needs to be indicated on the claim form. For further information, please contact the NPI Enumerator.



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Q&A

23)Q: Is the NPI requirement retroactive? Meaning, do we need to submit an NPI for all students moving forward, even students that are currently served through evaluation? Or does this apply to students whose services start after the policy goes into effect?

A: Referrals and prescriptions for SHARS billable services are not retroactive. If there is already a referral/prescription on file for the student and that source already has an NPI, the district may include that NPI on claims going forward.



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Q&A

24)Q: Change in prescriptions for OT & PT - OT & PT prescriptions must include maximum billable amount. Under this requirement, all referrals become null and void on October 1, 2021, as few if any meet this new standard. Again, can HHSC provide a grace period for implementation?

A: There is no requirement for prescriptions to include a maximum billable amount. However, if the prescription does specify an amount, services in excess of that amount are not billable to SHARS. As a reminder, the new policy will be published November 1, 2021.



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Q&A

25)Q: What are the specific requirements to become an independent Medicaid provider? Where do providers complete the enrollment process for Medicaid individual practitioners?

A: Please contact Texas Medicaid and Healthcare Partnership (TMHP) at TMHP.com or 800-925-9126 for further information on enrollment in Texas Medicaid.



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Q&A

26)Q: One thing that has always been on my mind is how school-based OT (ex. writing, playing) can be billed as a medical service especially when we tell parents at ARDs that the school-based OT model is different than the medical model?

A: Per the TMPPM, "SHARS are the services determined by the ARD committee to be medically necessary and reasonable to ensure that children with disabilities who are eligible for Medicaid and who are 20 years of age and younger receive the benefits accorded to them by federal and state law in order to participate in the educational program."



TEXAS
Health and Human
Services

Medicaid Benefit Mailbox Q&A

27)Q: Is there a cost to the SLP or the district with becoming an individual Medicaid provider?

A: Institutional providers, other than SHARS school districts, must submit an application fee as a condition of enrollment in Texas Medicaid. Individual SHARS SLPs are not institutional providers. Please contact TMHP at TMHP.com or 800-925-9126 for further information on enrollment in Texas Medicaid.

28)Q: Will the \$599 fee be waived to enroll for an NPI or reimbursed during the Cost Report?

A: Institutional providers must pay the \$599 application fee as a condition of enrollment in Texas Medicaid. Individual APRNs, PAs, SLPs, physicians, or audiologists are not institutional providers. Please contact TMHP for further information.



TEXAS
Health and Human
Services

Future Webinars

As a registered attendee of this webinar, you are pre-registered for:

- **SHARS Policy Updates Topic Three: Documentation Requirements**

Wednesday, October 13, 2021

2:00 – 3:00 pm CDT



TEXAS
Health and Human
Services

Future Webinars

HHSC will continue holding webinars as needed, registration instructions will be provided at a later date.

- Future topics may address:
 - Standard billing practices
 - Additional questions received through the Medicaid Benefit Request mailbox
 - Future SHARS medical policy amendments



TEXAS
Health and Human
Services

External Stakeholder Feedback

SHARS medical policy updates impact a wide range of SHARS providers, third-party vendors, and members of the public.

- External stakeholder feedback is important
 - Direct all medical policy inquiries to MedicaidBenefitRequest@hhsc.state.tx.us
 - Direct all rates and reimbursement inquiries to ProviderFinanceSHARS@hhs.texas.gov



TEXAS
Health and Human
Services



TEXAS
Health and Human
Services

Thank you

Leslie Smart, OTR, DSc
Medical Benefits Director

Jennifer Daniels, MPA
SHARS Policy Analyst

MedicaidBenefitRequest@hhsc.state.tx.us



TEXAS
Health and Human
Services

Additional Resources

42 CFR Chapter IV Subchapter C Medical Assistance Programs



TEXAS
Health and Human
Services

TITLE 42—Public Health
CHAPTER IV—CENTERS FOR MEDICARE & MEDICAID SERVICES, DEPARTMENT OF
HEALTH AND HUMAN SERVICES

SUBCHAPTER C—MEDICAL ASSISTANCE PROGRAMS

Part	Table of Contents	Headings
430	430.0 to 430.104	GRANTS TO STATES FOR MEDICAL ASSISTANCE PROGRAMS
431	431.1 to 431.1010	STATE ORGANIZATION AND GENERAL ADMINISTRATION
432	432.1 to 432.55	STATE PERSONNEL ADMINISTRATION
433	433.1 to 433.400	STATE FISCAL ADMINISTRATION
434	434.1 to 434.78	CONTRACTS
435	435.2 to 435.1205	ELIGIBILITY IN THE STATES, DISTRICT OF COLUMBIA, THE NORTHERN MARIANA ISLANDS, AND AMERICAN SAMOA
436	436.1 to 436.1102	ELIGIBILITY IN GUAM, PUERTO RICO, AND THE VIRGIN ISLANDS
438	438.1 to 438.930	MANAGED CARE
440	440.1 to 440.395	SERVICES: GENERAL PROVISIONS
441	441.1 to 441.745	SERVICES: REQUIREMENTS AND LIMITS APPLICABLE TO SPECIFIC SERVICES
442	442.1 to 442.119	STANDARDS FOR PAYMENT TO NURSING FACILITIES AND INTERMEDIATE CARE FACILITIES FOR INDIVIDUALS WITH INTELLECTUAL DISABILITIES
447	447.1 to 447.522	PAYMENTS FOR SERVICES
455	455.1 to 455.518	PROGRAM INTEGRITY: MEDICAID
456	456.1 to 456.725	UTILIZATION CONTROL

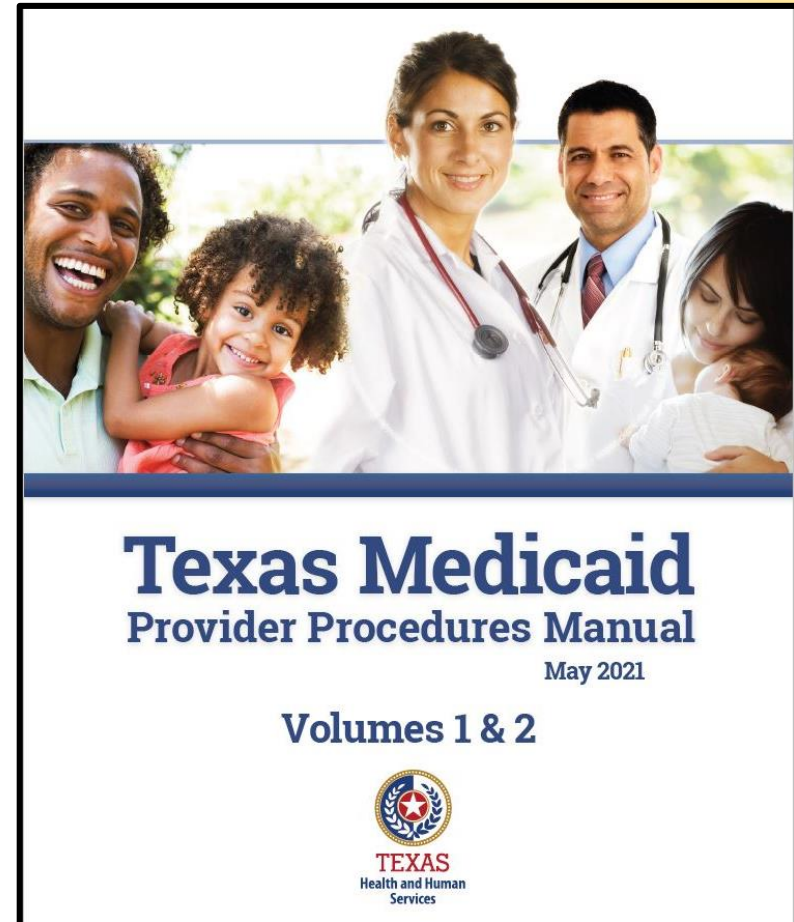
TMPPM

Texas Medicaid Provider Procedures Manual (TMPPM)

- Updated monthly and available at www.tmhp.com
 - Click on 'Resources'
 - Click on 'Provider Manuals'
 - Click on 'Texas Medicaid Provider Procedures Manual'



TEXAS
Health and Human
Services



TMHP Provider Enrollment

[Provider Enrollment Frequently Asked Questions \(FAQ\) \(PDF\)](#)

[Provider Enrollment Tools Quick Reference Guide \(PDF\)](#)

[Provider Types Required to Pay an Application Fee \(PDF\)](#)



TEXAS
Health and Human
Services