



February 20, 2007

Parham
FEB 20 2007 @ HHS R116.
Received 2/20/07 @ CMS
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CMS
Office of Strategic Operations and Regulatory Affairs
Division of Regulations Development – A
Attn: William N. Parham, III, Room C4-26-05
7500 Security Boulevard
Baltimore, Maryland 21244-1850
ATTN: CMS-10114

Re: Agency Information Collection Activities: Proposed Collection: National Provider Identifier (NPI) Application and Update Form and Supporting Regulations in 45 CFR 142.408, 45 CFR 162.406, 45 CFR 162.408.

**“COM019* Centers for Medicare and Medicaid Services
[Document Identifier CMS 10098 and CMS-10114]**

This letter presents the comments and recommendations of the Federation of American Hospitals (“FAH”) to proposals regarding the collection of the **National Provider Identifier (NPI) Application and Update Form and Supporting Regulations in 45 CFR 142.408, 45 CFR 162.406, 45 CFR 162.408.**

The Federation of American Hospitals is the national representative of privately owned or managed community hospitals and health systems throughout the United States. Our members include teaching and non-teaching, short-stay and long-term care hospitals in urban and rural America, and provide a wide range of ambulatory, acute and post-acute services. The FAH greatly appreciates the opportunity to comment on CMS’ proposed collection regarding the National Provider Identifier (NPI) Application and Update Form.

Document Identifier: CMS-10114

1. Section 1 Subsection A4 now allows a provider to reactivate an NPI number. Please provide expanded instructions and examples of situations when CMS would expect to receive a reactivation request of an NPI for a provider. It is currently unclear if this is intended for NPIs to be reactivated after being deactivated in error.

2. Section 1 Subsection B2 on the proposed application requires providers to indicate if the organization is a subpart. However, it is requested that CMS confirm that the “Medicare Expectations of Determination of Subparts by Medicare Organization Health Care Providers Who are Covered Entities under HIPAA” white paper is the guideline providers should use in determining if the entity is a subpart for completion of this field. Additional clarification within the instructions for subparts would be helpful for the industry in determining how to properly complete the question.

In addition, please include the word “organization” after “parent” when asking for the Legal Business Name and TIN in this subsection.

3. Please confirm that CMS does not expect providers to update NPI applications previously applied for with the updated fields and newly adopted requirements.
4. We respectfully request that CMS and the enumerator consider providing an updated NPPES notification letter each time any fields included in the notification letter are updated on the NPI application by the provider. Currently, if a provider updates such information as the legal business name, there is not an automatic deployment of an updated notification letter. This puts an administrative burden on the provider since the notification letter in the provider’s files may no longer contain accurate information. Automatically resending the notification would also decrease the number of phone calls by providers to the enumerator to request an updated letter be deployed.

Again, FAH appreciates the opportunity to comment. If you have any questions, please feel free to contact me at 202-624-1529 or sspeil@fah.org.

Sincerely,



Steven Speil
Senior Vice President, Health Finance and Policy