

Draft Letter

(INSERT DATE), 2007

The Honorable Michael Leavitt
Secretary of Health and Human Services
440D Hubert Humphrey Building
200 Independence Avenue, SW
Washington, DC 20201

Dear Secretary Leavitt:

Since Congress reconvened this year I have had the opportunity to talk with a number of people in the healthcare industry about various issues of concern, specifically the impending compliance date for implementation of the National Provider Identifier (NPI). In particular, there is significant concern about ability of the healthcare industry as a whole to be ready by the May 23, 2007 implementation date.

In my discussions with representatives from the healthcare industry, two very significant challenges were outlined. First is the issue of universal enumeration throughout the industry. While many providers have obtained their NPI number, there are still many who have not. In addition, there is still a great deal of confusion throughout the industry over who does and does not have to obtain an NPI number and who to report the number to.

The second issue is the lack of a published NPI dissemination notice and plan, as well as the ability to access the information in the National Plan/Provider Enumeration System (NPPES). Without having this information available to them, providers who have received their NPI number are at risk that they will be unable to complete a clean claim after the May 23rd implementation date. Most providers are struggling with an understanding of both how to share their NPI numbers and to whom they should share them with. The lack of a functioning dissemination system could severely impede healthcare claims from being processed due to an inability for clearing houses and insurance companies to crosswalk the identifiers and pay the claims. Should this occur, it would have devastating financial consequences on the healthcare industry as a whole.

In testimony to the National Committee on Vital and Health Statistics (NCVHS) on January 24, 2007, The Workgroup for Electronic Data Interchange (WEDI) strongly urged the committee to recommend allowing healthcare providers to continue using the legacy identifier along with the NPI number for a minimum of 12 months after the industry has been given access to the NPPES data. The 12 months is necessary to ensure industry wide implementation and ensure that all providers, clearing houses and insurance companies have enough time to successfully crosswalk and test the NPI data prior to mandatory implementation.

I am requesting that you recommend a contingency plan based on the recommendations of WEDI in its February 9, 2007 letter, which I have included for your review. Implementing the recommendations made by WEDI will help to ensure that the NPI implementation process is successful.

Sincerely,

Member of Congress