

NPIs and Taxonomy Codes: Who? What? When? Where? and Why?

Background

Before the promulgation of the [HIPAA Administrative Simplification: Standard Unique Health Identifier for Health Care Providers](#) final rule in 2004, healthcare providers often had several different billing identification numbers within a health plan, and across the healthcare system. There was no standardization among health plans, and it often led to confusion for providers and insurers in the claims submission process. In response, a multi-stakeholder effort was led by CMS to provide standardization among the public and private sectors. In March 2005, CMS issued a [final rule](#) that obligated healthcare providers to use a unique provider identifier, known as the [National Provider Identifier \(NPI\)](#).

What is an NPI?

A National Provider Identifier or NPI is a Health Insurance Portability and Accountability Act (HIPAA) Administrative Simplification Standard. It is a unique, intelligence-free numeric identifier used to identify healthcare providers in standard transactions, such claims, eligibility inquiries and responses, claim status inquiries and responses, referrals, and remittance advices.

Who must apply for an NPI?

All HIPAA-covered entities: health plans, health care clearinghouses, and health care providers who electronically transmit any health information in connection with transactions for which HHS has adopted standards. For more information, please see this [Dear Provider letter](#) from the CMS Administrator.

How do you apply for an NPI?

There are three ways healthcare providers may apply for an NPI. See [here](#). Providers must select a taxonomy code when completing their application for an NPI.

What is a taxonomy code?

Taxonomy codes are used by healthcare providers to self-identify their specialty based on which taxonomy code best matches their specialty. The Health Care Provider Taxonomy code set is a collection of unique alphanumeric codes, ten characters in length. The code set is structured into three distinct "levels" including Provider Grouping, Classification, and Area of Specialization.

What taxonomy codes are available for Addiction Medicine?

There are several codes available for addiction medicine. Providers should select the one that most closely resembles their area of specialization.

Source: [National Uniform Claim Committee](#)

Status – Effective Date	Description	Specialization
NEW – April 1, 2019	A physician engaged in the subspecialty practice of Addiction Medicine who specializes in the prevention, evaluation, diagnosis,	Addiction Medicine

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	treatment, and recovery of persons with the disease of addiction.	
ACTIVE - 2009	An anesthesiologist who specializes in the diagnosis and treatment of addictions.	Addiction Medicine
ACTIVE - 2009	A family medicine physician who specializes in the diagnosis and treatment of addictions.	Addiction Medicine
ACTIVE - 2007	An internist doctor of osteopathy that specializes in the treatment of addiction disorders. A doctor of osteopathy that is board eligible/certified by the American Osteopathic Board of Internal Medicine can obtain a Certificate of Added Qualifications in the field of Addiction Medicine.	Addiction Medicine
ACTIVE - 2007	A doctor of osteopathy board eligible/certified in the field of Psychiatry by the American Osteopathic Board of Neurology and Psychiatry is able to obtain a Certificate of Added Qualifications in the field of Addiction Medicine.	Addiction Medicine
ACTIVE - 2007	Addiction Psychiatry is a subspecialty of psychiatry that focuses on evaluation and treatment of individuals with alcohol, drug, or other substance-related disorders, and of individuals with dual diagnosis of substance-related and other psychiatric disorders.	Addiction Psychiatry

Why is it important that I select the correct taxonomy code?

In addition to requiring the selection of an appropriate taxonomy code when applying for an NPI, many insurers require the use of taxonomy codes to issue billing credentials, process health insurance claims, and determine network adequacy. Therefore, it is important that providers select the taxonomy code that most closely resembles their specialty to ensure correct payment of claims. To find your taxonomy code, click [here](#).

Do I have to have the definition source's certification in order to choose the code?

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According to the NUCC, “the source of the definition for the provider code is a specific professional organization or credentialing Board. You do not need to have that source's certification to choose the code. The sources for the definitions are only to cite who authored the definition. The definitions were chosen because they were identified as an overall description of the provider.”

Where can I find out more information about taxonomy codes?

National Uniform Claim Committee (maintains code set and applications for new codes):

<http://www.nucc.org/index.php>

CMS: <https://www.cms.gov/medicare/provider-enrollment-and-certification/medicareprovidersupenroll/taxonomy.html>