Practice Trends

-Managing Your Dermatology Practice-

NPI's Time Has (Almost) Come

fter numerous assurances that there would be absolutely no extensions, the Centers for Medicare and Medicaid Services has extended the May 23 deadline and is now giving physicians and other entities an extra year to obtain a National Provider Identifier number. My advice, however, is that you get yours as soon

as possible to avoid any last-minute disruptions to your practice.

Medicare has been accepting the National Provider Identifier (NPI) since October, but as of next year, that is all they will accept; your so-called Medicare legacy identifier will be history.

The NPI came into being as part of the 1996 Health Insurance Portability and Accountability Act (HIPAA).

The idea was to provide a single, unique health identifier for each physician, health plan, and employer, eliminating all the various PINs, UPINs, and other unique and incompatible identifier numbers used by various plans (SKIN & ALLERGY NEWS, March 2007, p. 10). The ultimate goal is to more efficiently coordinate claims filing and payment, a welcome improvement for us all, should it work.

A popular rumor—that only physi-

cians who participate in Medicare would need an NPI—is not true. All physicians will have to have the number, because the NPI will replace all other identification numbers issued by all third-party payers that fall under HIPAA's jurisdiction.

Some plans, classified as "small" (under 1 million subscribers) by HIPAA, al-

ready had an extra year to become NPI compliant, and that is sure to create some confusion. I suggest you communicate individually with each of your payers, regardless of size, to ensure you will have no problems.

One poorly understood aspect of the NPI transition is the "taxonomies," or "specialty types," which are associated with the NPI application process. (Most of

the questions I'm receiving concern these.) Taxonomies are supplemental codes that categorize the scope of your office's clinical services.

Most dermatology offices will select the taxonomy code for general dermatology—207N00000X—but if your office provides specialized services, there are additional codes that may be required. These include:

- ► Dermatologic Surgery (207NS0135X)
- ► Dermatopathology (207ND0900X)
- ► Mohs Surgery (207ND0101X)

- ► Pediatric Dermatology (207NP0225X)
- ► Dermatologic Immunology (207NI0002X)

Select all of the additional codes that apply to your particular practice situation. Be aware that others may apply as well. There is a Web site devoted to outlining and explaining the taxonomy codes: http://codelists.wpc-edi.com/mambo_taxonomy_2.asp.

When applying, be sure to include in your application as many of the numbers to be replaced as possible, such as your Medicare and Medicaid numbers and all identifiers used by various plans to which you belong.

Until the deadline, you are supposed to use *both* numbers—your NPI and the identifier you are using now—on all claims, so that there will be as little confusion as possible when the deadline passes.

Even if you already have your NPI, you must make sure you have made all the necessary changes to your practice to ensure a smooth transition. CMS lists seven steps:

- 1. Apply for an NPI at https://nppes.cms.hhs.gov/.
- **2.** Update your practice software, including billing applications, to incorporate your NPI.
- **3.** Share your NPI with other providers, health plans, clearinghouses, and any other entity that may need it for billing purposes.
- **4.** Communicate with all of your health

plans and clearinghouses; make sure they are all as prepared for the NPI transition as you are.

- **5.** Test your systems to make sure they can process claims and any other HIPAA-related transactions with the NPI.
- **6.** Educate your staff thoroughly on the NPI transition.
- **7.** Implement use of your NPI in all your business practices.

Most importantly, if you have electronic medical records and/or billing software, contact your software vendors as soon as possible to ensure that upgrades incorporating your NPI into all electronic transactions are available and will be installed prior to next year's deadline.

Alert vendors will have already provided these updates automatically, but don't count on that: Some vendors, especially those with relatively few medical clients, may be unprepared for, or even unaware of, the necessary changes. Or if your guarantee or software support contract has expired, you may have to remind the vendor to install the upgrades—and pay for them.

If your vendor is no longer in business, you will have to find an independent consultant to make the changes.

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FYI

Warning: Don't Buy Accutane Online

The Food and Drug Administration has launched a special Web page to warn consumers against purchasing isotretinoin (Accutane, and its generic versions) online. The site warns that the drug should only be taken under the close supervision of a doctor, and that online purchases of drugs may not come from legitimate pharmacies. For further information, visit www.fda.gov/buyonline/accutane.

Prescription Programs Fact Sheet

The National Council on Patient Information and Education is distributing a fact sheet to advise consumers who lack health insurance or prescription drug coverage about prescription assistance programs and prescription savings/discount programs that can help them to obtain the medications they need. For more information, visit www.talkaboutrx.org/documents/paps.pdf.

Free Prescription Savings Card

The Together Rx Access Card is for people who are legal residents of the United States, are not eligible for Medicare, do not have prescription drug coverage, and meet certain household income levels. Most cardholders will save 25%-40% on more than 300 brand-name prescription products. Savings also are available on a range of generic products. For more information, visit www.togetherrxaccess.com.

PRODUCTS

MetroGel Kit Includes Coupons

MetroGel 1%, FDA approved for the topical treatment of rosacea, is now available in a kit that includes a 60-g tube of MetroGel 1% (metronidazole) plus a 4-fluid ounce bottle of Cetaphil Gentle Skin Cleanser, a coupon for future Cetaphil purchases, and a patient education brochure that discusses triggers for rosacea. For more information, contact Galderma by calling 866-735-4137.

Treatment for Hard-to-Reach Acne

ClindaReach is indicated for the treatment of acne vulgaris in hard-to-reach places, such as the back. Each package contains an ergonomically designed applicator wand with a multidirectional pivotal head, and medicated pads containing clindamycin phosphate topical solution 1%. For more information, contact DUSA Pharmaceuticals Inc. by visiting www.dusapharma. com/news_index.html.

Billing Management Service

Catalisse Inc. offers an outsourced medical billing service that includes charge entry and payment posting, electronic billing and paper claims, secondary submissions, patient bills generation, followup with payers including appeals, accounts receivable reporting, and 60- to 90-day accounts cleanup. For more information, contact Catalisse Inc. by visiting www.catalisse.net.

Sunscreen Stops UVA and UVB

Luca sunscreen is the first to support a claim of being both UVA and UVB protective by having a wavelength value printed on the bottle of 383 nm, the highest value to be reported in the United States. Luca sunscreen is available for both children and adults; is hypoallergenic, water resistant, and fragrance free; and provides sun protection for up to 6 hours. For more information, visit www.lucasunscreen.com.

OTC Acne Treatment Devices

The Zeno PRO and Zeno MD are two new versions of the Food and Drug Administration—approved over-the-counter treatment device for mild to moderate acne. The Zeno PRO is a 90-treatment count device, and Zeno MD is a 150-treatment count device. Each device works by killing *Propionibacterium acnes* with heat up to 118.5°F for 2.5 minutes in an individual pimple. For more information, contact Tyrell Inc. by calling 888-469-9366.

Adjustable Acne Formulations

AcneRecovery is an over-the-counter line of acne treatment products. The repair lotion contains salicylic acid, the concentration of which can be adjusted by the patient from 0.5% to 2%. The treatment lotion contains benzoyl peroxide with concentration ad-

justable from 2% to 7%. The lotions, as well as a face wash, also contain botanicals. For more information, visit Trienelle SkinCare Inc., by contacting www.trienelle.com.

Combination Gel for Acne Vulgaris

Ziana (clindamycin phosphate 1.2% and tretinoin 0.025%) gel is now available for once-daily topical treatment of acne vulgaris in children who are 12 years of age or older. The gel has an alcohol-free aqueous base. The manufacturer expects to begin shipping the product to wholesalers in the fourth quarter of 2006. For more information, contact Medicis Pharmaceutical Corp. by visiting its Web site at www.medicis.com.

New Impetigo Treatment Kit

A new kit containing a 30-g tube of 2% mupirocin ointment (Centany) and Johnson & Johnson gauze pads is available for the treatment of impetigo related to *Staphylococcus aureus* and *Streptococcus pyogenes*. For more information on the Centany kit, contact OrthoNeutrogena by visiting www.orthoneutrogena.com.

SilkPeel for Sun-Damaged Skin

A new treatment is available for sundamaged skin. The 30-minute SilkPeel both exfoliates and infuses skin with concentrated serums via a wand that is used across the face. For more information on this skin treatment system, visit www.silkpeel.com.