

## Roster Submission Process

IHP provider rosters are integral to the attribution methodology, so it's essential that they are accurate and remain up to date. Provider Rosters can be submitted in delimited text files or .xls formats. IHPs may follow either of the two roster submission processes that meet the needs of their organization, as long as they remain consistent throughout the contract period.

**Option A:** IHPs who wish to include all treating providers who bill at participating locations.

IHPs must submit a comprehensive list of “organizational” NPIs for their participating locations as defined by where primary care services are billed. DHS will use this list, in conjunction with claims data, to build and maintain a provider roster where all treating providers rendering primary care services at the listed locations will be included. IHPs must send DHS an updated list only if any of the organizational NPIs for the participating locations change.

**Option B:** IHPs who wish to include a specific subset of treating providers who bill at participating locations.

IHPs must submit a roster of their participating primary care and specialty providers. An IHP may submit an updated roster by the last business day of each quarter. The most recently submitted roster remains in effect for an IHP if no updated roster is received.

The minimum necessary fields are bolded below. It is helpful to include the applicable data elements below (provider name, credentials, etc.) in the event it is necessary to address corrections or clarifications when matching to DHS data.

If a provider practices at multiple locations within the IHP, it is only necessary to list the provider once. The provider's E&M services for any location participating in the IHP will be included for attribution.

If all the clinics' (“organizational”) NPIs which make up the participating IHP locations are not represented at least once on the roster, the IHP should include the provider location as a separate provider record (line) on the roster. IHPs should include providers who are part of participating locations as defined on Attachment B of the IHP's contract. If an IHP wishes to expand the list of participating partners or locations, please first contact your DHS IHP Lead.

IHP Rosters should include all providers who were active during the prior year. Each submission is used to update a provider record (based on individual NPI) or add providers to an IHP's roster. Unless inclusion of a provider was a submission error or other special circumstance, providers are not removed from an IHP's roster. Providers who become inactive or leave a participating IHP location are handled through use of the individual + pay-to provider NPI combinations.

### Column Definitions

Column Name	Definition
<b>IHP Organization</b>	<b>The IHP submitting the roster (for example A123456789)</b>
<b>Provider NPI</b>	<b>The NPI of the provider who renders the service for the IHP. Format the NPI as text.</b>

Appendix A2 – Provider Roster Process

Column Name	Definition
Last Name	The last name of the treating provider.
First Name	The first name of the treating provider.
Middle Name	The middle name or initial of the treating provider.
Credentials or Title	Treating Provider’s credentials (MD, PA, CNS, etc.) if available.
Taxonomy Code	<b>This field can only be empty if the IHP has entered a valid value in the “Specialty” field. Otherwise, it must contain the taxonomy code for the provider’s specialty (for example, 207R00000X). The taxonomy code will be used to designate the provider as a primary care provider or a specialty care provider.</b>
Location	The name of the primary location or clinic for the provider.
Address 1	The address of the primary clinic location.
Address 2	
City	
State	
Employer Legal Name	The Group Practice or Legal DBA name for the participating IHP entity through which the provider is employed. This may be the same as the clinic location, or may be a larger provider group. Attribution is not done at this level, but the employer name may be helpful for future aggregated reporting back to the IHP.
EIN (TIN)	The tax identification number for the employer group or clinic receiving payment. Format the tax id as text.
Clinic NPI	<b>The organizational NPI used for billing at the provider’s primary location. Format the Clinic NPI as text. Although listed with a specific provider, all clinic NPI’s on the IHP roster are used in aggregate to ensure that only E&amp;M services occurring at participating IHP entities are included in attribution.</b>
Specialty	<b>An IHP can designate whether the treating provider functions as a primary care provider (“PCP”) or specialty care provider (“SPE”) for this IHP. If a “PCP” or “SPE” is entered in this column, its value will override the mapping based on the provider’s registered or listed taxonomy code. This column can be empty only if the IHP has included the provider’s taxonomy code.</b>

The submission of a Provider Roster must be certified by a delegate of the IHP. The certification can be in the form of an email which identifies the submission date, file or submission name, and an attestation that the data is believed to be accurate and complete based on the best knowledge. The attestation can accompany the roster submission (for example in the email used to submit the roster), or may be submitted separately according to section 3.6.E of the IHP contract.