

## Appendix A-2

### IHP Roster Submission Process

Integrated Health Partnership (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.

IHPs are to choose either an "all-in" option **or** a "billing provider & treating provider" (or "individual provider") roster option, but **not** both.

**All-In Roster:** IHPs who wish to include all treating providers who bill at participating locations.

IHPs must submit a comprehensive list of "organizational" Billing National Provider Identifiers (NPIs) for their participating locations as defined by where primary care services are billed. The Department of Human Services (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 Billing NPIs for the participating locations change.

**Billing and Treating Provider Roster:** 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 including individual providers' information (including individual Treating Provider NPI) and all relevant IHP billing NPIs. 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.

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 Evaluation and Management (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 in 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 the individual treating 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. Since these providers are not billing to an organizational billing NPI, they no longer effect that IHP's attribution.

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<b>All-in Roster</b>	
<b>Field Name</b>	<b>Field Description</b>
<b>Billing NPI*</b>	The <u>10-digit Billing NPI</u> of <u>each IHP</u> clinic to be considered for attribution purposes. Use * to indicate consolidated NPI
<b>Name</b>	Clinic Name
<b>Measurement ID</b>	Minnesota Community Measurement ID # or Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) #
<b>Address</b>	Street Address of clinic or provider
<b>City, State, Zip</b>	City, state and zip code of clinic or provider
<b>IHP ID/<u>UMPI</u></b>	If applicant is an existing IHP, please include 10-digit alpha-numeric ID (beginning with 'A' and followed by 9 numbers) This is the Unique Minnesota Provider ID (UMPI) that a new IHP is assigned as part of the initial provider enrollment process.
<b>IHP Name</b>	IHP organization name
<b><u>Federal Tax ID/EIN</u></b>	<u>9-digit Federal Tax Identification Number (aka Employer ID Number) of the clinic</u>
<b>Billing and Treating Provider Roster</b>	
<b>Field Name</b>	<b>Field Description</b>
<b>IHP ID/<u>UMPI</u></b>	If applicant is an existing IHP, please include 10-digit alpha-numeric ID (beginning with 'A' and followed by 9 numbers) This is the Unique Minnesota Provider ID (UMPI) that a new IHP is assigned as part of the initial provider enrollment process.
<b>IHP Name</b>	IHP organization name
<b><u>Treating Provider NPI</u></b>	<u>The 10-digit NPI of each <b>treating provider</b> included in the IHP's roster.</u>
<b><u>Federal Tax ID/EIN</u></b>	<u>9-digit Federal Tax Identification Number (aka Employer ID Number) of the clinic</u>
<b>Clinic NPI</b>	10-digit NPI of clinic (billing provider)
<b>Specialty</b>	The corresponding specialty of the treating provider. Either 'SPE' for specialty or 'PCP' for primary care provider. (Note: If not provided, the Specialty field will be assigned based on provider taxonomy code.)
<b>Name</b>	Clinic Name
<b>Measurement ID</b>	Minnesota Community Measurement ID # or Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) #
<b>Address</b>	Street Address of clinic or provider
<b>City, State, Zip</b>	City, state and zip code of clinic or provider

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.

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To provide clarity regarding the NPI and EIN field descriptions:

- For the “All-in-Roster”, IHPs are to provide the Billing NPI\* which is the 10-digit Billing NPI of each IHP clinic to be considered for attribution purposes. Please note that the asterisk symbol (\*) is to be used to indicate a consolidated NPI.
- For the “Billing and Treating Provider Roster”, IHPs are to provide the 10-digit treating provider NPIs for each individual provider included in the IHP's roster. IHPs are also to include the 10-digit Billing NPI for each participating IHP clinic.
- For both the “All-in-Roster” and the “Billing and Treating Provider Roster”, IHPs are to provide the Federal Tax ID/EIN which is the 9-digit Federal Tax Identification Number (aka Employer ID Number) of the clinic.