Using Organizational (Type 2) National Provider Identifiers (NPIs) in HIPAA standard electronic transactions

When using Organizational (Type 2) NPIs to identify providers or facilities, depending on how the NPI was enumerated, you may receive a response different from what you expect. The following chart offers suggestions on how to use Organizational NPIs to get the response you expect. Where appropriate, we'll suggest using an Individual (Type 1) NPI.

Transaction type	Scenario	What we'll do	What we suggest
Claims (837)	A health care provider has multiple Organizational (Type 2) NPIs and uses one or more of them in claims.	We'll use the taxpayer identification number (TIN) and provider name and address to identify the billing provider. If needed, we'll also use the NPI to identify the billing provider.	Use the most appropriate Organizational NPI for the billing provider on claims. Exception: If you've told us to return a specific NPI on your electronic remittance advice (ERA) files, we'll return that one; otherwise, we'll return the billing provider NPI you used on the claim.
Claim Status Inquiry and Response (276/277)	A health care provider has multiple Organizational (Type 2) NPIs. The provider submits an Organizational NPI in a claim. The provider later requests claim status using the same Organizational NPI and can't find claims.	We may select a provider record associated with a different NPI. If no claims are associated with that record, we won't return any claims records.	For professional claims, submit Claim Status Inquiry transactions using the provider's Individual (Type 1) NPI. Or use the NPI associated with the entire organization.
Eligibility and Benefits Inquiry and Response (270/271)	A health care provider organization, including individual providers with different reimbursement levels, is enumerated with a single Organizational (Type 2) NPI and is used in the eligibility transaction.	We'll return a response with several levels of benefits instead of a specific level that would apply to an individual provider.	Submit eligibility inquiries using the provider's Individual (Type 1) NPI.





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Transaction type	Scenario	What we'll do	What we suggest
Precertification Add (278)	The requesting provider shares a single NPI with multiple providers or specialties. Or the requesting facility shares a single Organizational (Type 2) NPI with multiple facilities, departments or specialties. Or the admitting or attending provider or facility shares a single Organizational (Type 2) NPI with multiple providers, specialties, departments or facilities.	We'll select one provider record for processing and response. The record we select may not be the intended facility, department or specialty, resulting in an unexpected provider name returned in the response.	Use an Individual (Type 1) NPI, if available, for attending and admitting providers. The requesting provider/facility name returned in the response won't affect the validity of the Precertification Add request. If you're using a Type 2 NPI, include the Facility/Group name as well.
Precertification Inquiry (278)	The inquiring entity shares a single Organizational (Type 2) NPI with multiple facilities, departments or specialties.	We'll select one provider record from among those linked to the Organizational NPI to compare with the member's precertification history. The record we select may not be the intended facility, department or specialty. As a result, we might not return any matching records.	Inquire using the Individual (Type 1) NPI, if available, of one of the attending, admitting or primary care providers. Or use the reference number you received during your Precertification Add request.



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Transaction type	Scenario	What we'll do	What we suggest
Referral Add (278)	A referring provider shares a single NPI with multiple providers or specialties. Or the "referred to" organization shares a single Organizational (Type 2) NPI with multiple departments or specialties.	We'll select one provider record for processing and response. The selected record may not be the intended facility, department or specialty. This could result in an unexpected provider name returned in the response.	Use the Individual (Type 1) NPI for the referring provider (such as a primary care physician [PCP] or gynecologist). Or use the Individual (Type 1) NPI of any provider in the appropriate specialty affiliated with the organization to which the member is being referred. Or submit a referral to a specialty/taxonomy code.
Referral Inquiry (278)	The inquiring entity shares a single Organizational (Type 2) NPI with multiple facilities, departments or specialties.	We'll select one provider record from among those linked to the Organizational NPI to compare with the member's referral history. The record we select may not be the intended facility, department or specialty. As a result, we might not return any matching records.	Use the Individual (Type 1) NPI of any provider in the appropriate specialty affiliated with the organization to which the patient was referred. Or use your Aetna provider ID number (PIN) if your system offers this option. Referral Inquiry isn't a HIPAA-mandated transaction. It doesn't require an NPI for provider identification purposes.

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