# Applying for the NPI Without an SSN

All incoming residents and fellows need to obtain a National Provider Identifier (NPI) by July 1st. We strongly advise that you apply for the NPI number no later than April 15st to ensure that you receive a number before July 1st.

A US issued Social Security Number (SSN) or US issued Individual Taxpayer Identification Number (ITIN) is usually required to obtain an NPI. However, most incoming international House Staff with not have an SSN or ITIN because these documents are issued only to persons present in the USA and/or under specific visa circumstances. International House Staff apply for an SSN once they have evidence of employment authorization (EAD, H-1B, etc) and proof of legal presence in the USA.

CMS has granted an exception for international residents to apply for the NPI before they obtain an SSN. Below are the steps that the international residents will need to follow in order to obtain the NPI.

An international resident without an SSN will have to provide CMS with these documents:

1) the completed, signed and dated NPI Application/Update Form (CMS-10114);

2) a copy of two acceptable proofs of identification (e.g., birth certificate, passport – the identifying page, US issued drivers, or US issued State identification); and

3) a brief letter explaining why the applicant has no SSN. Click here for sample Letter of Explanation.

The letter, completed application form and a copy of two proofs of identification must be mailed to the NPI Enumerator at the mailing address below:

#### NPI Enumerator 7125 Ambassador Rd, Ste 100 Windsor Mill, MD 21244

## I. Completing the NPI Application/Update Form (CMS-10114)

**Please note**: Sections 2B and 4B are for organizations and should not be completed by providers applying as individual providers. All other sections are applicable to individual providers and sections marked as required must be completed.

When the NPI is assigned in the system, a letter will be mailed to you at the business mailing address you provide in the application. Please ensure you provide the mailing address of your program.

Finally, please remember to sign and date your application. The NPI Enumerator will return all applications that are not signed, dated or properly completed.

### **II. Two Proofs of Identification** (in lieu of the SSN):

US-issued identification is typically required as one of proofs of identification; however, an exception is being made for international residents and fellows. The Letter of Explanation will assist the NPI Enumerator with identifying those providers who have been granted the exception.

If the international resident does not have an SSN or ITIN, then a copy of two proofs of identification must accompany the NPI Application/Update form. Below are the acceptable proofs of identification:

□ passport biographical data page (the page with your photo and personal information)

 $\Box$  US driver's license (if one has been issued)

US issued State identification card (if one has been issued)

\* Please provide an English translation of all documents that are not in the English language.

### **III. Letter of Explanation**

The Letter of Explanation should include a brief description of the residency program and the anticipated start and end dates of the program. The letter must also include an acknowledgement of the fact that the provider understands that the resident/applicant will need to keep the NPI Enumerator informed of any changes to the information provided within 30 days from the effective date of the change. A sample Letter of Explanation is below.

### IV. Paper Application Tips (Tips for Expediting NPI Issuance)

1. Remember to select an entity type:

a. Entity type 1, health care providers who are individuals, need to complete sections 2A, 3, 4A, and 5. b. Entity type 2, health care providers who are organizations or subparts, need to complete sections 2B, 3, 4B,

and 5.

2. Do not staple the application pages together.

3. Remember to print legibly or type your application.

4. Include an original signature of the health care provider and a telephone number on the application. Do not send a photocopy of the signature or an application with a stamped signature. The name in the signature must match the name of the provider.

5. If you do not submit your social security number on a paper application, you must submit a photocopy of two of the following documents with your application: driver's license, State-issued ID, identifying page of your passport, or a birth certificate.

### SAMPLE LETTER OF EXPLANATION [remove this line from your letter before printing]

INTERNATIONAL PHYSICIAN NAME INTERNATIONAL PHYSICIAN ADDRESS

CURRENT DATE

#### NPI Enumerator 7125 Ambassador Rd, Ste 100 Windsor Mill, MD 21244 RE: REQUEST FOR NPI NUMBER FOR PHYSICAN WITHOUT SSN [NAME OF INTERNATIONAL MEDICAL GRADUATE]

Dear NPI Enumerator:

I am requesting an NPI number and my completed CMS10114 application is attached with all supporting documents. Please note that I do not have a US Social Security Number as I have not yet met the immigration requirements needed to obtain one.

#### [CHOOSE ONE OPTION BELOW AND DELETE THE OTHERS]

- I will not meet those requirements until I am admitted into the United States by US Customs & Border Protection, and I intend to arrive in the USA on [date of arrival].
- I have applied for an SSN and am still awaiting a response from the Social Security Administration on my application.
- I am in the USA but cannot apply for an SSN until I obtain employment authorization from USCIS. I expect to have employment authorization by July 1st but must have an NPI number by that date in order to properly begin my residency program.

I will be a Resident/Fellow with University of Maryland Medical Center [NAME OF RESIDENCY/FELLOWSHIP PROGRAM]. The program will begin on [MONTH DATE, YEAR] and end on [MONTH DATE, YEAR]. A brief description of the residency program is below:

### [ADD BRIEF DESCRIPTION OF RESIDENCY/FELLOWSHIP PROGRAM HERE]

As a provider, I fully understand that I will need to keep the NPI Enumerator informed of any changes to the information provided on the NPI Application within 30 days of the date the changes take effect. I also understand that I must provide the NPI Enumerator with my SSN within 30 days of the date it is received.

Thank you for your favorable review of my NPI application and supporting documents. Please feel free to contact me should you have additional questions or concerns.

Sincerely yours, [NAME OF INTERNATIONAL PHYSICIAN]