

# Claims clarification: Taxonomy codes required

## UnitedHealthcare Community Plan in Texas is sharing this information from the Texas Health and Human Services Commission so you know what the state requires

As a reminder, all healthcare professionals who serve UnitedHealthcare Community Plan members in Texas need to include the provider NPI and taxonomy codes for billing and rendering providers to be considered for payment.

In addition, when appropriate, supervising, ordering and prescribing provider NPI and taxonomy codes must be included for claims to be considered. This helps meet requirements of the Affordable Care Act, the Centers for Medicare & Medicaid Services (CMS) and the Texas Health and Human Services Commission. Claims submitted without the correct taxonomy codes will be denied.

### Next steps

Care providers need to include the following information on their claims:

- The taxonomy code for both the rendering and billing provider, as registered with the Texas Medicaid & Healthcare Partnership (TMHP) in the provider enrollment profile
  - The rendering provider is the person providing the care.
  - For institutional claims, this includes the attending physician.
    - As defined in the Texas Medicaid Provider Manual, the attending provider is the individual that is responsible for the care and treatment of the member or is normally expected to certify and re-certify the medical necessity for services provider. The rendering provider is the individual providing the care.
    - If the attending physician and rendering physician are the same, **only** the attending physician needs to be filled out.



### Learn more

If you have questions, please call us at **888-887-9003**, from 8 a.m. – 6 p.m. CT, Monday – Friday. Thanks.

- The billing provider is the practice submitting the bill. When the billing provider identifier is a group practice, the claim must include the performing provider identifier for the physician who performed the service.
- If you're a billing provider, you need to add qualifiers at the beginning of your taxonomy code on claim forms. The qualifier you add depends on your care provider type, the services you offer, the claim type and submission method.

- For professional claims use:

- “ZZ” for a paper CMS 1500 form in block 33b
- “PXC” for 5010A1 electronic submissions in loops 2000A, segment PRV03

- Do not include spaces or hyphens in your taxonomy codes. Claim processing only accepts a set number of alphabet characters or digits for your code. You will not have enough room to enter the full code if you add spaces or hyphens, and the system won't recognize them.

- National Provider Identifier (NPI) number for both the rendering and billing provider
- Address associated with the taxonomy and NPI numbers

Help ensure all the required information provided matches the current provider enrollment information on file with TMHP.

If the information submitted on your claim doesn't match what you have on file with TMHP, the claim will be denied. If the claim is denied, you'll have the opportunity to correct your information.

Taxonomy billing							
CMS billing form		Provider type					
		Rendering		Billing		Attending	
CMS 1500	Paper	Block 24J		Block 33b		N/A	
	Electronic	Loop	Segment	Loop	Segment	Loop	Segment
		2310B	PRV03	2000A		N/A	
CMS 1450 (UB-04)	Paper	Block 78-79		Blocks 81A-81D		Block 76	
	Electronic	Loop	Segment	Loop	Segment	Loop	Segment
		2310D If rendering provider is not the same as the attending provider.	PRV03	2000A		2310A	PRV03

## Learn more

For more information about NPI numbers and taxonomy codes for Texas Medicaid claims, go to [tmhp.com](http://tmhp.com) > Medicaid Provider Manual > **Vol. 1 Claims Filing**.

For more instructions on what to include on CMS 1500 claim forms, manuals are available at [nucc.org](http://nucc.org) > 1500 Claims Form > 1500 instructions > 1500 Claim Reference Instruction Manual > **Version 8.0 7/20 1500 Instruction Manual**.