Claims clarification: Taxonomy codes required

The District requires all health care professionals who serve UnitedHealthcare Community Plan members in the District to include **provider taxonomy codes** for billing.

In addition, when appropriate, supervising, ordering and prescribing provider taxonomy codes must be included for claims to be considered. This helps to meet the requirements of the Affordable Care Act, the Centers for Medicare & Medicaid Services (CMS) and the District. We'll reject claims submitted without the correct taxonomy codes.



We're here to help

If you have questions, please call us at **866-242-7726,** 8 a.m.-6 p.m. CT, Monday-Friday.



What you need to know

All the required information provided needs to match the current care provider enrollment information on file with the District. If no information is included in the appropriate field, the claim will be rejected and require correction by the care provider before the claim will be accepted. If the taxonomy code of the billing care provider submitted on your claim doesn't match as registered with the District in the care provider enrollment profile, the claim will be denied. If the claim is denied, you'll have the opportunity to correct your information.

The care billing provider is the practice submitting the bill

- When the billing care provider identifier is a group practice, the claim must include the performing provider identifier for the care provider who performed the service
- If you're a billing care provider, you'll 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 won't have enough room to enter the full code if you add spaces or hyphens, and the system won't recognize them.

You'll also need to include the following information on your claim:

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



Taxonomy billing			
CMS billing form		Provider type Billing	
CMS 1500	Paper	Block 33b	
	Electronic	Loop	Segment
		2000A	
CMS 1450 (UB-04)	Paper	Blocks 81A-81D	
	Electronic	Loop	Segment
		2000A	



Learn more

See the **District Billing manuals** for more information about NPI and taxonomy codes.

