Taxonomy Validation in Enterprise MMIS

This document outlines the steps to validate your taxonomy within ND Health Enterprise MMIS.
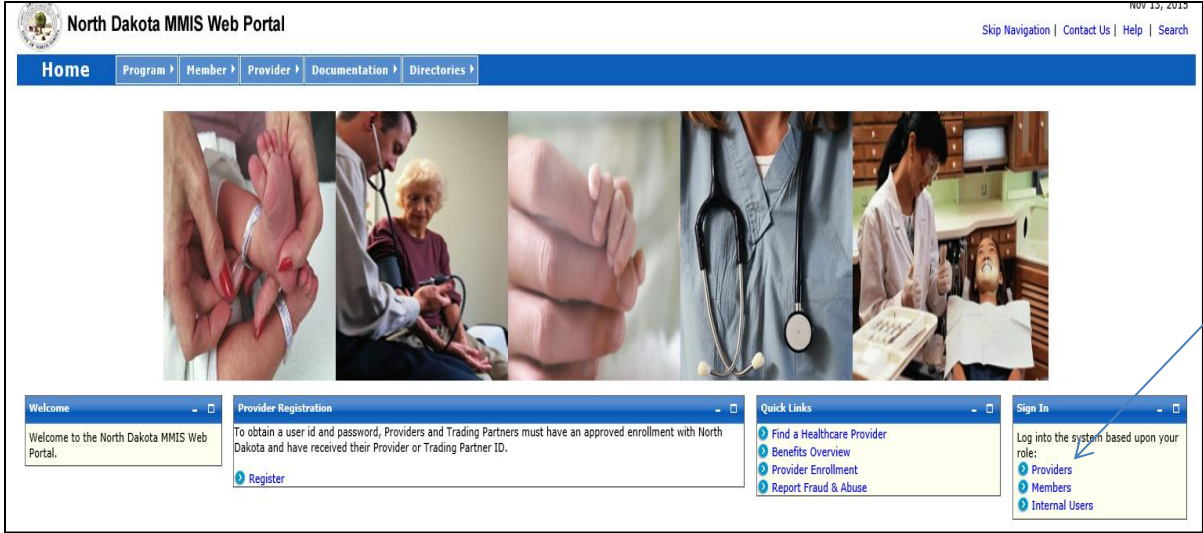
The taxonomy code associated with your North Dakota Medicaid enrollment record is **required.** This requirement excludes Qualified Service Providers (QSP) and "atypical" providers who do not furnish direct healthcare services. Based on a claim service circumstance, the taxonomy code of the referring, attending, operating, or supervising provider may also be required on the claim.

Claims must be submitted with your National Provider Identifier (NPI) and your Taxonomy code combination, exactly matching the ND Medicaid enrollment record. It is important to be aware that ND Medicaid taxonomy may be different than the taxonomy used for other payers. Without the correct NPI and Taxonomy combination **your claims will deny**. Claims that require the taxonomy of the referring, attending, operating, or supervising provider **will also deny** if the taxonomy is missing or invalid.
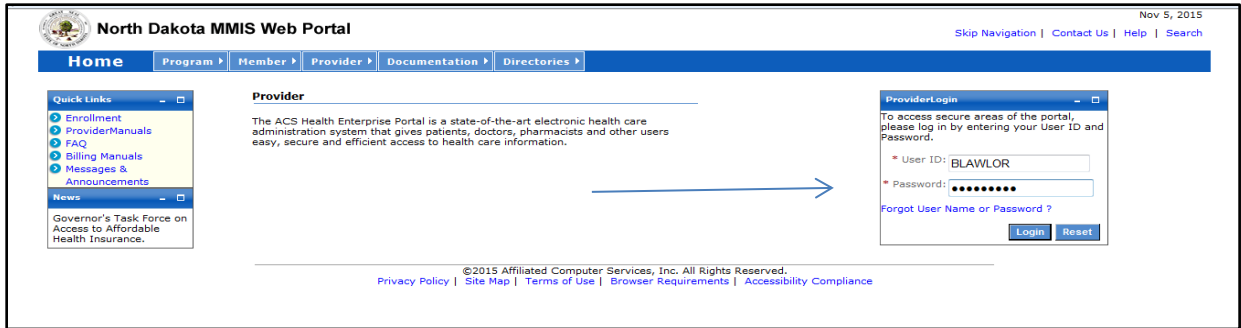
The following steps serve as a guide to validating your North Dakota Medicaid taxonomy as established in ND Health Enterprise MMIS.
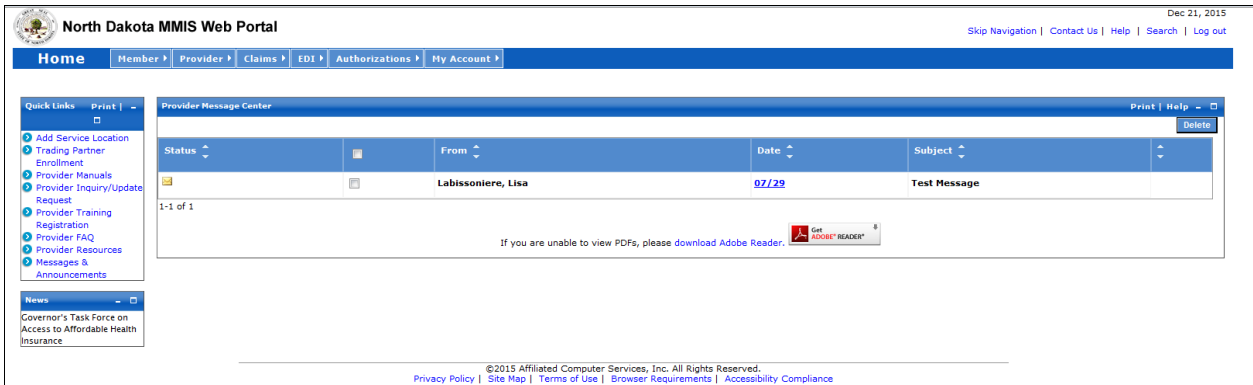
Taxonomy Inquiry Steps

Step 1: *Sign In to the secure web portal as Provider*
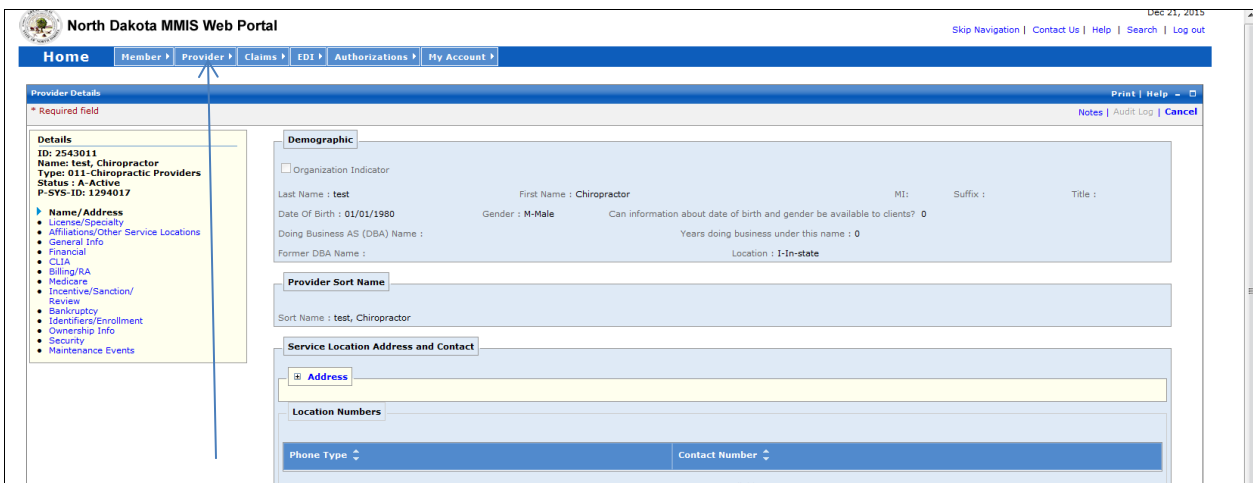
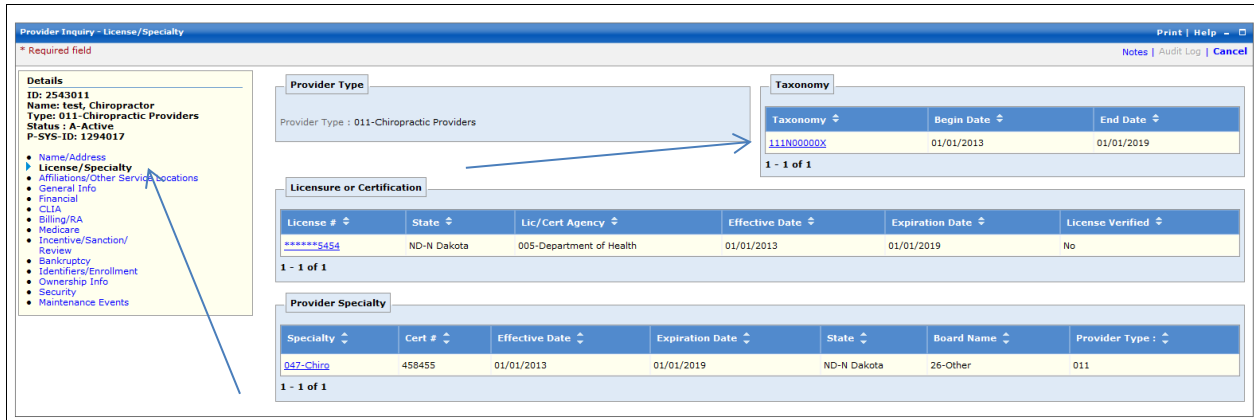**Step 2:** *Enter the User ID and Password*

The provider message center is displayed:

Step 3: *Select Provider Inquiry from the top menu bar on your Home page.*

Step 4: *Select the <u>License/Specialty</u> option from the left navigation pod which will display taxonomy(s):*

Additionally, you can confirm you are using the correct taxonomy code(s) using a searchable (by NPI) list, located at: http://www.nd.gov/dhs/info/mmis/taxonomy.html

It is imperative that all providers verify and confirm that their billing office or billing vendor have the correct taxonomy and NPI information for all <u>individual</u> and <u>group</u> providers in your practice.

The ND Medicaid valid values (standard taxonomy codes by provider type/specialty) are available for Individual and Group Providers.

Provider specific taxonomy code associated with your enrollment record is available for lookup by NPI at:

☐ **Individual Providers:** http://www.nd.gov/dhs/info/mmis/docs/mmis-enrolled-individual-provider-taxonomy-codes.pdf

☐ **Group Providers:** http://www.nd.gov/dhs/info/mmis/docs/mmis-enrolled-group-provider-taxonomy-codes.pdf

Additional information regarding taxonomy & ND Health Enterprise Fact Sheets are posted on the Department's website at http://www.nd.gov/dhs/info/mmis/factsheets.html.

Below tables outline taxonomy requirements for electronic and paper claim submissions. Please ensure the required taxonomy code for the following provider types are included in the fields specified. For instance, when submitting an 837P, the Billing Provider's Taxonomy has to be submitted in Loop 2000A. Please work with your claim billing software to make sure that the Taxonomy is being sent on these claim types in order to avoid denials.

Table 1: Taxonomy Requirements by Claim Form – Electronic Claims

Provider Type	Electronic Claims		
	837P	837I	837D
Billing Provider	Loop 2000A	Loop 2000A	Loop 2000A
Rendering Provider	(Header) Loop 2310B		(Header) Loop 2310B
Rendering Provider	(Line) Loop 2420A -		(Line) Loop 2420A -
Attending Provider		Loop 2310A	
Assistant Surgeon			(Header) Loop 2310D
Assistant Surgeon			(Line) Loop 2420B

Table 2: Taxonomy Requirements by Claim Form – Paper Claims

Provider Type	Paper Claims		
	CMS 1500	UB 04	ADA Dental
Billing Provider	33b	81	52a
Rendering Provider	24j *	78 or 79 *	
Referring Provider	17a *	78 or 79 *	
Attending Provider		76 *	
Operating Provider		77 *	
Other Operating Provider		78 or 79 *	
Ordering Provider	17a *		
Supervising Provider	17a *		
Treating Dentist			56a

*May be situational

For additional assistance:

☐ Questions on the correct loop/segment detail to add taxonomy codes on EDI 837 claims: ndmmisedi@nd.gov

☐ Questions/changes on the taxonomy code assigned to your enrollment record: dhsenrollment@nd.gov