

Special Bulletin

For professional and facility providers

Updated: June 13, 2023

Important Reminder: Include Rendering Provider Information on All Claims

Highmark is continuing to see a significant volume of claims submitted with **missing or incorrect** rendering provider information. We want to remind you that all claims must contain the correct rendering/servicing provider information, including:

- National Provider Identifier (NPI)
- Provider Taxonomy Code

Failing to provide the correct rendering provider information can result in your claims being delayed or denied unnecessarily.

EXCEPTION: Behavioral Health (BH) Providers Covered Under a Billable Group

*BH providers who are covered under a billable group (not individually credentialed with Highmark Blue Cross Blue Shield of Western New York) and bill using a CMS 1500 claim form must include the NPI number of the billing provider group along with taxonomy code 101YM0800X. **NOTE: The rendering provider loop must remain BLANK.** You do not need to include an NPI number or taxonomy code in this loop.*

Tools for Verifying and Updating Your Provider Information

You can verify your practice information or make changes via the Provider Data Maintenance (PDM) tool on [NaviNet®](#). Refer to the recent Special Bulletin "[New Provider Data Maintenance Tool for Validating and Updating Directory Information](#)," for more specifics on PDM functionalities.

See also the "Reporting Changes in Your Practice" section in the [Highmark Provider Manual](#), **Chapter 3, Unit 3: Professional Provider Guidelines**.

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