# Special Bulletin

**For professional and facility providers**     <span style="color:red">**Updated:**</span> **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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