Claim Rejections due to NPI Requirements

Since the implementation of NPI requirements, some providers are experiencing their claims being rejected. If you are experiencing claims being rejected with reason code 06 “Provider Not Found”, it may be caused by invalid or missing information in a provider loop. To assist in troubleshooting, verify the following:

837 – Professional Claims

2420A loop – Rendering Provider at Service Line Level
The 2420A loop is the lowest provider loop of the claim. This loop is optional, but if present on first service line of claim then this loop will be used to perform a provider lookup within our claim processing system.

Action: If this loop is present, verify that the NPI, Taxonomy Code and TIN numbers are supplied. The NPI number should be present in the NM1 segment with qualifier “82”. The Taxonomy Code should be present in the PRV segment with qualifier “PE”. The TIN number should be present in the REF segment with qualifier EI”.

For example:

```
SV1*HC:99212*70*UN*1***1
DTP*472*RD8*20080530-20080530
NM1*82********XX*1112223333 < === NPI Number
PRV*PE*ZZ*111X00000X < === Taxonomy Code
REF*EI*4333331111 < === TIN Number
```

2310B loop – Rendering Provider at Claim Level
The 2310B loop is the rendering provider loop at the claim level. This loop is optional, but if present and provider loop 2420A is not present, this loop will be used to perform a provider lookup within our claim processing system.

Action: If this loop is present, verify that the NPI, Taxonomy Code and TIN numbers are supplied. The NPI number should be present in the NM1 segment with qualifier “82”. The Taxonomy Code should be present in the PRV segment with qualifier “PE”. The TIN number should be present in the REF segment with qualifier EI”.

For example:

```
NM1*82*1*LASTNAME*FIRST*****XX*1112223333 < === NPI
PRV*PE*ZZ*111X00000X < === Taxonomy Code
REF*EI*4333331111 < === TIN
```
2010AB loop - Pay-To Provider at Provider Level
The 2010AB loop is the pay-to provider loop at the provider level. This loop is situational and only required if the billing and pay-to provider are different. If this loop is present and lower provider loops 2310B and 2420A are not present, this loop will be used to perform a provider lookup within our claim processing system.

Action: If this loop is present, verify that the NPI and TIN numbers are supplied. The NPI number should be present in the NM1 segment with qualifier “87”. The TIN number should be present in the REF segment with qualifier EI”.

For example:
NM1*87*1*LASTNAME*FIRST****XX*1112223333 < === NPI
N3*NPI STREET N4*NPIVILLE*GA*301569160
REF*EI*4333331111 < === TIN

Note: The Taxonomy Code for the pay-to provider goes in loop 2000A, in the PRV segment with qualifier “PT”. i.e. PRV*PT*ZZ*207X00000X

2010AA loop - Billing Provider at Provider Level
The 2010AA loop is the billing provider loop at the provider level. This loop is always required. If the billing provider loop is the only provider loop present, this loop will be used to perform a provider lookup within our claim processing system.

Action: verify that the NPI and TIN numbers are supplied. The NPI number should be present in the NM1 segment with qualifier “85”. The TIN number should be present in the REF segment with qualifier EI”.

For example:
NM1*85*1*LASTNAME*FIRST****XX*1112223333 < === NPI
N3*NPI STREET N4*NPIVILLE*GA*301569160
REF*EI*4333331111 < === TIN

Note: The Taxonomy Code for the billing provider goes in loop 2000A, in the PRV segment with qualifier “BI”. If the pay-to provider is also present, then use qualifier “PT” along with the pay-to provider’s Taxonomy Code.
837 – Institutional Claims

2010AB loop - Pay-To Provider at Provider Level

The 2010AB loop is the pay-to provider loop at the provider level. This loop is situational and only required if the billing and pay-to providers are different. If this loop is present, then this loop will be used to perform a provider lookup within our claim processing system.

Action: If this loop is present, verify that the NPI and TIN numbers are supplied. The NPI number should be present in the NM1 segment with qualifier “87”. The TIN number should be present in the REF segment with qualifier EI”.

For example:

```
NM1*87*1*LASTNAME*FIRST*****XX*1112223333 < === NPI
N3*NPI STREET N4*NPIVILLE*GA*301569160
REF*EI*4333331111 < === TIN
```

Note: The Taxonomy Code for the pay-to provider goes in loop 2000A, in the PRV segment with qualifier “PT”. i.e. PRV*PT*ZZ*207X00000X

2010AA loop - Billing Provider at Provider Level

The 2010AA loop is the billing provider loop at the provider level. This loop is always required. If the billing provider loop is the only provider loop present, this loop will be used to perform a provider lookup within our claim processing system.

Action: verify that the NPI and TIN numbers are supplied. The NPI number should be present in the NM1 segment with qualifier “85”. The TIN number should be present in the REF segment with qualifier EI”.

For example:

```
NM1*85*1*LASTNAME*FIRST*****XX*1112223333 < === NPI
N3*NPI STREET N4*NPIVILLE*GA*301569160
REF*EI*4333331111 < === TIN
```

Note: The Taxonomy Code for the billing provider goes in loop 2000A, in the PRV segment with qualifier “BI”. If the pay-to provider is present, then use qualifier “PT” along with the pay-to provider’s Taxonomy Code.
Other Resources:

If using a Medical Management Software Package:
Contact your software vendor and ask them to verify how your provider information is configured within your software.

If using a clearinghouse:
Contact your Account Representative at the clearinghouse and ask them to verify how your EDI data file looks on their end.

EDI Helpdesk:
If you need additional assistance or have EDI questions, please contact our EDI helpdesk at 800-225-2573 x25525 or EDIBA@centene.com