Revised: Taxonomy Codes Required on Professional Claims

Effective January 1, 2020, taxonomy codes will be required when submitting professional claims for all HAP and HAP Empowered lines of business. This is consistent with National Uniform Billing Guidelines and is critical for accurate and timely claims processing.

Taxonomy codes should be submitted as follows:

- **On a CMS-1500 claim form:**
  - Rendering
    - Box 24i should contain the qualifier ZZ
    - Box 24j should contain the taxonomy code
  - Billing
    - Box 33b should contain the qualifier along with the taxonomy code
  - Referring
    - If a referring provider is indicated in box 17 on the claim, then Box 17a should contain the qualifier of ZZ along with the taxonomy code in the next column.

- **Electronic submission**
  Follow the 5010 Implementation Guide for submitting a PRV segment at the billing or rendering level. Please see details below.

  - Billing
    PRV01 = BI
    PRV02 = PXC
    PRV03 = <taxonomy code>

  - Rendering
    PRV01 = PE
    PRV02 = PXC
    PRV03 = <taxonomy code>

Claims may deny if the taxonomy is missing or incorrect.