

# PROVIDER UPDATE

An Update for Highmark Delaware Health Options Providers and Clinicians

July 2019

## TAXONOMY REQUIRED ON CLAIMS SUBMISSIONS

To align with DMMA billing guidelines, Highmark Health Options will require a credentialed taxonomy be included for all billing, rendering/performing, and attending providers on an inbound claim.

### ADDITIONAL INFORMATION

- Highmark Health Options is enhancing their claims processing technology to align with the DMMA taxonomy billing requirement.
- This Notice is to inform providers that previously communicated taxonomy requirements will now be a rejection within the claims processing system.
- Claims submitted after October 11<sup>th</sup> 2019 missing any of the required taxonomy value will be rejected back to the provider for correction and resubmission.
- To confirm your Highmark Health Options credentialed taxonomy, log on to NaviNet, click “Provider File Management”, then click “View Group Details”.

If you have questions regarding this claims submission requirement, please contact a Highmark Health Options Provider Services Representative at 844-325-6251.