


PROVIDER BULLETIN

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|  AETNA BETTER HEALTH® OF FLORIDA 261 N. University Drive Plantation, FL 33324 www.AetnaBetterHealth.com/Florida | Date: | February 26, 2024 |
| | Purpose: | Educate providers on Provider Taxonomy Requirements on Claims |
| | Subject: | Billing Requirements (Taxonomy, NPI's) |
| | Products: | MMA, LTC, FHK |
| | From: | <u>Provider Relations</u> |

Aetna Better Health® of Florida

Provider Taxonomy Requirements on Claims – **Friendly Reminder**

This notification is to remind all providers that **effective May 1, 2023**, Aetna Better Health® of Florida implemented a new process to improve registry matching logic required by AHCA on all encounter submissions.

NEW PROCESS – Effective 5/1/2023:

ABHFL will reject all claims submitted without taxonomy codes for Billing or Rendering providers NPI's present on the claim.

Aetna Better Health strongly suggests also sending Taxonomy for Referring or Attending Provider NPI's when those provider types are included on the claim submission. Please follow the taxonomy billing guidelines outlined in:

www.wpc-edi.com when submitting EDI 837I/837P Claims

www.nucc.org when submitting Professional CMS-1500 Claim Forms

www.nubc.org when submitting Institutional UB-04 Claim Forms

Providers of Aetna Better Health® of Florida Medicaid patients must be registered with Florida's AHCA using their National Provider Identifier (NPI), Taxonomy Code, Service Address and Billing address. Registration must occur prior to rendering services to the plan's membership.

Active enrollment on the AHCA Provider Enrollment Portal has been enforced by Aetna Better Health® of Florida ("the Health Plan") since October of 2022.

To avoid claim rejections or denials providers should compare the identification values on the claim to the information registered with State of Florida for accuracy, such as:

- Billing: NPI, Taxonomy, Service and Billing Address (ZIP -5 or ZIP -9), Practice Type
- Rendering: NPI, Taxonomy (if Rendering is different from Billing Provider), Practice Type and Practice Affiliations to Billing Provider NPI's
- If Atypical, ensure the Medicaid ID is registered and effective for the date of service, Billing

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Address (ZIP -5 or ZIP -9), Practice Type.

Additional Resources (Ctrl + Click to follow the link)

- [NPI Mapping Logic Fact Sheet](#)
- [Provider Master List Tip Sheet](#)

Here is the link and contact information to the State of Florida Agency for Health Care Administration Provider Enrollment Medicaid Web Portal - [Enrollment | Florida Medicaid Web Portal \(flmmis.com\)](#). Or we encourage providers to call the Agency at 1-800-289-7799, Option 4 for additional information.

Thank you for your continued participation in the Aetna Better Health of Florida network. Please contact our Provider Services line should you have any questions at:

Phone: MMA: [1-800-441-5501](tel:1-800-441-5501) (TTY: [711](tel:711))
LTC: [1-844-645-7371](tel:1-844-645-7371) (TTY: [711](tel:711))
FHK: [1-844-528-5815](tel:1-844-528-5815) (TTY: [711](tel:711))
Email: FLProviderEngagement@aetna.com

Thank you,

Aetna Better Health of Florida

www.aetnabetterhealth.com/florida

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The following page provides some [general taxonomy billing guidance](#) based on the sources cited above.

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General Taxonomy Billing Guidance

EDI Submitters

- Aetna Better Health is requiring taxonomy submissions in:
 - Professional Claim: Loop AND Segment 2310B-PRV or Loop and Segment 2000A-PRV
 - Institutional Claim: Loop and Segment 2000A-PRV

Paper CMS-1500 (v02-12) Forms

- Aetna Better health will require Taxonomy Codes in either Box 24J Shaded area or Box 33

Rendering Provider Taxonomy: Box 24 J Shaded Area

| G. DAYS OFF UNITS | H. SPEC. FREQ. (Per) | I. ID. QUAL. | J. RENDERING PROVIDER ID. # |
|-------------------|----------------------|--------------|-----------------------------|
| | | ZZ | Taxonomy 10#s |
| | | NPI | 10 digit NPI |
| | | NPI | |

REF INFORMATION

Billing Provider Taxonomy: Box 33B

| | |
|--|-----------------------|
| Organization Name 1st line | Street Add (2nd line) |
| Suite (3rd line) and City, state and Zip (Last Line) | |
| 10 digit NPI | ZZ Taxonomy 10#s |

APPROVED OMB-0938-1197 FORM 1500 (02-12)

- In addition, Aetna Better Health highly encourages Taxonomy be submitted in Box 17a with the “ZZ” qualifier when submitting Referring Provider information as seen below.

Referring Provider Taxonomy: Box 17a

| | |
|--|-----------------------|
| 17. NAME OF REFERRING PROVIDER OR OTHER SOURCE | 17a. ZZ Taxonomy 10#s |
| DN Referring Prov LName, FName | 17b. NPI 10 digit NPI |

19. ADDITIONAL CLAIM INFORMATION (Designated by NUCC)

Paper UB-04 Forms

- Aetna Better health will require Taxonomy Codes in **Box 81 is the “B3” qualifier as seen below.**

| | | |
|-------|----|---------------|
| 81CCA | B3 | Taxonomy Code |
| a | | |
| b | | |
| c | | |
| d | | |

8-0997

NUBCTM National Uniform Billing Committee

- In addition, Aetna Better Health highly encourages Taxonomy be submitted in **Box 76 with the “ZZ” qualifier** when submitting Attending Provider information as seen below.

| | | | | |
|--------------|-----|-------|----|---------------|
| 76 ATTENDING | NPI | QUAL | ZZ | Taxonomy Code |
| LAST | | FIRST | | |

National Provider Identifier (NPI) Mapping Logic Fact Sheet

The Agency for Health Care Administration (Agency) will be implementing an updated NPI Mapping Logic on March 1, 2022. This update will impact providers and health plans who have multiple Medicaid provider IDs sharing an NPI and who also submit claims and/or encounters to Florida Medicaid.

Enhancements will be made to the NPI Mapping Logic, which will determine the correct Medicaid provider ID to associate to a claim or an encounter transaction.

| NPI Mapping Logic | | | |
|-------------------|---|---|---|
| 1 | Compare submitted NPI to the NPI on file. <i>Note: The NPI must be active and within the claim's date of service.</i> | If there is only one provider ID on file for the NPI, that provider ID is applied to the claim. | If the submitted NPI does not match any NPIs on file, then a denial edit will post, the logic ends, and no provider ID is applied. |
| 2 | The submitted taxonomy is used to narrow the comparison to those provider IDs within the provider type associated to the taxonomy. <i>Note: The submitted taxonomy can be any taxonomy appropriate to the specialty.</i> | If there is only one provider ID on file for the provider type, then the provider ID is applied to the claim. | If there are multiple provider IDs for the provider type, go to step 3. If no taxonomy is submitted or taxonomy is not associated with the provider types for the NPI, a denial edit will post, the logic ends, and no provider ID is applied. |
| 3 | Compare the submitted ZIP code and ZIP +4 (9 digit) to the service locations' ZIP code and ZIP +4 (9 digit) on file for the provider IDs. | If there is only one match found, then the provider ID is applied. | If there is no match, go to step 4. If there are multiple matches, go to step 5. |
| 4 | Compare the submitted ZIP code (5 digit) to the service locations' ZIP code on file for the provider IDs. | If there is only one match found, then the provider ID is applied. | If there is no match, the process ends, a denial edit will post, the logic ends, and no provider ID is applied. If multiple matches, go to step 5. |
| 5 | Compare the submitted address line(s) to the service location on file. | If there is only one match found, then the provider ID is applied. | If there is no match, the process ends, a denial edit will post, the logic ends, and no provider ID is applied. If there are multiple matches, go to step 6. |
| 6 | Default to applying the lowest numeric provider ID. | A pay edit will post denoting that a default provider ID was applied. | |

Provider Master List (PML) and Pending Provider List (PPL)

The PML and PPL will have updates made to accommodate the new NPI Mapping Logic. Please refer to the [PML](#) and [PPL](#) tip sheets for additional information.

Companion Guides

The Companion Guides have been updated to correlate with the upcoming NPI changes. The following highlights are updates that will be implemented for Dates of Service 03/01/2022 and after:

- Including taxonomy is very important. In most submissions, Florida Medicaid's adjudication will be dependent upon the taxonomy and the taxonomy guide.
- For Physician Group provider submissions, the Address must match the service address on file with Florida Medicaid.
- The billing provider's ZIP +4 must match the service location ZIP code on file with Florida Medicaid.
- In most submissions for a Detail Level Rendering Provider, Florida Medicaid's adjudication will be dependent upon the taxonomy.

Please refer to the [Companion Guides](#) for more detailed information.

Health plans are encouraged to visit the [NPI Crosswalk Enhancement](#) page on the Florida Medicaid Public Web Portal for additional information and updates. This page includes guidance on which providers do not require a unique NPI.

Health plans may contact the health plan support team at healthplan.support@gainwelltechnologies.com with inquiries related to the NPI Mapping Logic.

Statewide Medicaid Managed Care (SMMC) **Provider Master List**

Tip Sheet

The Provider Master List (PML) is a resource available for all Medicaid health plans. The PML contains a listing of all Medicaid providers who are currently enrolled in the Florida Medicaid Program and have an active contract status, within the last 18 months.

Alternatively, the Pending Provider List (PPL) contains a listing of all Medicaid provider applications that are currently pending with Medicaid. Both lists are located on the Florida Medicaid Public Web Portal within the [Managed Care](#) area.

Changes to the PML

The Agency for Health Care Administration (Agency) will be implementing an updated NPI Mapping Logic on March 1, 2022. This update will impact providers and health plans who have multiple Medicaid provider IDs sharing an NPI and who also submit claims and/or encounters to Florida Medicaid. Enhancements will be made to the NPI Mapping Logic, which will determine the correct Medicaid provider ID to associate to a claim or an encounter transaction.

X12 837 transactions for covered services must contain a National Provider Identifier (NPI) for each provider included in a transaction. The NPI information is used to identify the Medicaid provider IDs for each provider listed in a transaction.

For Dates of Service Prior to March 1, 2022, X12 837 transactions submitted to Florida Medicaid, or to a Medicaid health plan, should include the NPI Crosswalk information. The NPI Crosswalk is a combination of NPI + Taxonomy + ZIP+4. A provider's crosswalk information can be verified by referring to the following data fields on the PML:

- NPI*
- NPI Crosswalk – Taxonomy
- NPI Crosswalk – ZIP Code
- NPI Effective Date*
- NPI End Date*
- NPI Crosswalk – Date Used for Claims

NOTE: The requirement to submit the NPI information is not applicable to Web Portal Direct Data Entry (DDE) claims.

For Dates of Service on and after March 1, 2022, X12 837 transactions submitted to Florida Medicaid, or to a Medicaid health plan, should include the NPI and Taxonomy that is appropriate for the provider's specialty type and services billed. The following information can be used to determine if an NPI submitted to the health plan will make either a one-to-one match or a default match to the provider's Medicaid ID for the Date of Service included in the transaction:

- NPI*
- NPI Effective Date*
- NPI End Date*
- NPI Status*
- Taxonomy Code*
- Service Location Address ZIP+4*
- Service Location Address Line 1*

NOTE: These column headers will be notated by the asterisk (*) symbol after the column header on the CSV version of the PML only. The Pipe Delimited version of the PML will not contain this symbol.

Please note, health plans should submit the NPI information as submitted by providers on their encounter transaction and should not modify the data.

Contents of the PML

- All active Medicaid providers and those that are no longer active but were active within the previous 18 months
- Provider Type
- Specialty and Taxonomy
- Service Address
- The National Provider Identifier (NPI), Taxonomy, and ZIP+4 that are associated with each covered health care provider
- Professional or Facility License
- Enrollment Type (Registered, Limited, Enrolled, ROPA)
- Enrollment Status and Dates of Eligibility
- Next Enrollment Revalidation Date

NPI and Taxonomy

A taxonomy is required for provider enrollment and it must be valid for the provider's specialty. X12 837 transactions submitted to Medicaid, or to a Medicaid health plan, with a Date of Service of February 28, 2022, or earlier, should include the NPI Crosswalk information exactly as listed on a provider's record to make a unique match to a provider's Medicaid ID. Submitting different identifiers in a transaction can cause the transaction to reject or deny.

X12 837 transactions with a Date of Service of March 1, 2022, or later, should include the provider's NPI and the taxonomy that is appropriate for the provider's specialty type and services billed. This data set is identified by an asterisk (*) symbol on the column headers of the PML.

The [Florida Medicaid Taxonomy Guide](#) can be used to view a list of taxonomies appropriate for each provider type and specialty type. The guide is available on the [Enrollment Forms](#) page of the Florida Medicaid Public Web Portal for providers to use when registering for an NPI.

Multiple Specialties and the PML

Providers will have one record on the PML for each specialty and for each NPI submitted on the application. This is designed to give visibility to all provider data which may impact the submission of encounter data.

Examples:

- If the provider has one specialty and one NPI, they will have one record on the PML.
- If the provider has one specialty and two NPIs, they will have two records on the PML.
- If the provider has two specialties and one NPI, they will have two records on the PML.
- If the provider has two specialties and two NPIs, they will have four records on the PML.

Note: See the table below for an example of how multiple records may appear on the PML.

| Medicaid ID | Specialty | Taxonomy Code* | NPI* | NPI Crosswalk - Taxonomy | NPI Crosswalk - ZIP Code |
|-------------|---------------------|----------------|------------|--------------------------|--------------------------|
| 111111111 | Pediatrics | 2080P0214X | 5555555555 | 2080P0214X | 32308 1236 |
| 111111111 | Pediatrics, Allergy | 2080P0201X | 5555555555 | 2080P0201X | 32308 1236 |
| 111111111 | Family Practice | 208D00000X | 5555555555 | 208D00000X | 32308 1236 |
| 222222222 | Neurology | 2084A0401X | 9999999999 | 2084A0401X | 33912 4354 |
| 222222222 | Neurology, Children | 2084N0402X | 9999999999 | 2084N0402X | 33912 4354 |
| 222222222 | Neurology | 2084A0401X | 4444444444 | 2084A0401X | 33912 4354 |
| 222222222 | Neurology, Children | 2084N0402X | 4444444444 | 2084N0402X | 33912 4354 |

Florida Medicaid requires a taxonomy to be submitted on all 837 transactions. As such, the taxonomy appears twice on the PML, first associated with the specialty, and secondly, associated with the NPI Crosswalk. Providers and health plans can determine what taxonomy to utilize on an 837 transaction by the claim/encounter's Date of Service:

For Dates of Service of February 28, 2022, or earlier, submissions of X12 837 transactions should use the taxonomy associated with the NPI Crosswalk.

For Dates of Service of March 1, 2022, or later, submissions of X12 837 transactions should use a valid taxonomy associated with the provider's specialty.

ZIP+4

If an NPI Crosswalk ZIP+4 exists for a billing provider, the ZIP+4 is included in the billing provider's 2010AA loop in the X12 837 transaction to ensure the encounters process for the correct unique provider.

For claims with a From Date of Service of February 28, 2022, or prior, the ZIP+4 from the NPI Crosswalk should be used.

For claims with a From Date Service of March 1, 2022, or after, the ZIP+4 associated with the provider service location address should be used.

Note: There is no place in the X12 837 transaction to include the rendering, referring, ordering, or attending provider's ZIP+4. These providers should create a one-to-one match to a specific Medicaid ID using only the NPI and taxonomy, to ensure the encounters process with the correct unique provider ID. Otherwise, a default provider ID based on the NPI will be used to process the encounter.

Date Used for Claims

The "Date Used for Claims" data element will become obsolete for all transactions with a From Date of Service of March 1, 2022, or later.

Updating an NPI

Prior to February 25, 2022, to update an NPI Crosswalk, providers whose Enrollment Type is listed as "Limited," "Enrolled," "Registered," or "ROPA" should submit a completed Florida Medicaid NPI Registration form located on the [Enrollment Forms](#) page in the public Web Portal.



On February 25, 2022, or after, to update a provider NPI, providers should log into the secure Web Portal and select the NPI panel under Demographic Maintenance. All other data elements used for the updated mapping logic are associated with the provider demographics.

PML Duplicate Records

A duplicate record occurs when a provider has two or more provider files under the same tax ID for the same type of service at the same service address. This is most commonly found when a provider is both enrolled in Medicaid and is also registered for overlapping effective dates. In these cases, the registered record should be closed. True duplicates should be resolved to eliminate any conflict between multiple files sharing the same NPI cross-reference.

PML Publication Frequency

The PML updates each evening, Monday through Friday, with the revised list available Tuesday through Saturday. Any changes to provider records completed by close of business Monday through Friday will appear in the next day's posting. Records are removed from the PML after a provider has been inactive for greater than 18 months.

The PML File Layout

| Field | Field Length | Values | Description |
|---------------------------------|--------------|--|--|
| Florida Medicaid Provider ID | 9 | | Provider Medicaid ID |
| Provider Name | 50 | | Provider Name |
| DBA Name | 50 | | Doing Business As Name |
| Provider Type Code | 2 | | Provider Type Code |
| Provider Specialty Code | 3 | | Provider Specialty Code |
| Taxonomy Code* | 10 | | Provider Taxonomy Code associated with the Provider Specialty Code |
| Service Location Address 1* | 60 | | Provider Service Location Address Line 1 |
| Service Location Address 2 | 60 | | Provider Service Location Address Line 2 (Optional) |
| Service Location Address City | 30 | | Provider Service Location City |
| Service Location Address State | 2 | | Provider Service Location State |
| Service Location Address ZIP+4* | 10 | | Provider Service Location ZIP Code |
| Enrollment Type | 10 | ENROLLED, LIMITED, REGISTERED, ROPA | Provider Enrollment Type |
| NPI Type | 1 | 1, 2, or U | The NPI Type values will be: <ul style="list-style-type: none"> • 1 = Individual; or • 2 = Organization; or • U = Unknown |
| NPI* | 10 | | NPI for the provider |
| NPI Crosswalk - Taxonomy | 10 | | Taxonomy on the NPI Crosswalk for the provider |
| NPI Crosswalk - ZIP Code | 10 | | ZIP Code on the NPI Crosswalk for the provider |
| NPI Effective Date* | 10 | | The effective date of the NPI for the provider |

| Field | Field Length | Values | Description |
|--|--------------|-------------------------------------|--|
| NPI End Date* | 10 | | The end date of the NPI for the provider |
| NPI Status* | 1 | A or I | Status of the NPI value will be: <ul style="list-style-type: none"> • A = Active; or • I = Inactive |
| NPI Crosswalk-Date Used for Claims | 18 | DATE OF SERVICE, DATE OF SUBMISSION | The date used for matching a claim NPI to a provider's NPI Crosswalk. |
| Individual or Organizational Provider | 1 | I or O | Indicates if the Medicaid provider was enrolled as: <ul style="list-style-type: none"> • I = Individual; or • O = Organizational Provider. |
| License | 15 | | Provider License Number |
| Current Medicaid Enrollment Status | 1 | A, I, or E | The current enrollment status values: <ul style="list-style-type: none"> • A = Active; or • I = Inactive; or • E = Ineligible. |
| Medicaid Claims Eligibility Effective Date | 10 | | The earliest date a provider was eligible for claims processing. |
| Medicaid Claims Eligibility End Date | 10 | | The last date a provider was eligible for claims processing |
| Next Revalidation Date | 10 | | Next Medicaid Revalidation date |

The asterisk (*) symbol indicates the data element is used for the updated NPI mapping logic. This logic is effective for all transactions with a From Date of Service of March 1, 2022, and after. The asterisk (*) symbol will only be present on the CSV version of the PML.

For More Information

Health plans are encouraged to regularly review the [Managed Care](#) page on the public Web Portal for educational materials and other important information.

For assistance with the PML, including reporting duplicate entries or encounter transactions, contact the Health Plan Support team at healthplan.support@gainwelltechnologies.com.

For all other questions, contact the Medicaid Fiscal Agent at 1-800-289-7799, and select Option 7, for the Provider Services Contact Center or Option 4, for the Provider Enrollment Contact Center.