



RESOURCE AND PATIENT MANAGEMENT SYSTEM

Manually Adding Provider Taxonomy

837 Testing and Production Procedures

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1.0 Manually Adding provider taxonomy

1.1 HIPAA Requirement

This section will assist the user in adding HIPAA provider taxonomy codes into the Resource Patient Management System (RPMS) for electronic claims submission in the Third Party Billing system. The Third Party Billing system utilizes these codes when sending an electronic 837 Claim file to a payer and must be in place in order to send a successful file.

1.2 Background

Provider taxonomy codes are used in transactions as specified in the Health Insurance Portability and Accountability Act (HIPAA). The taxonomy codes were created to identify and code an external provider table that would be able to standardize provider types and provider areas of specialization for all medical related providers. CMS' intent was to provide a single coding structure to support work on the National Provider System, while X12N needed a single common table for trading partner use.

A companion document/taxonomy manual is available and may be obtained from http://www.wpc-edi.com/hipaa/HIPAA_40.asp. This document provides a listing of taxonomies and their code structures and is recommended to have while entering these codes into RPMS.

1.3 Code Structure

The Provider Taxonomy is a unique alphanumeric code, ten characters in length. The code list is structured into three distinct levels including Provider Type, Classification, and Area of Specialization as described below.

Level I, Provider Type: a major grouping of service(s) or occupation(s) of health care providers. For example: Allopathic & Osteopathic Physicians, Dental Providers, Hospitals, etc.

Level II, Classification: a more specific service or occupation related to the Provider Type. For example, the Classification for Allopathic & Osteopathic Physicians is based upon the General Specialty Certificates as issued by the appropriate national boards. The following boards will however, have their general certificates appear as Level III areas of specialization strictly due to display limitations of the code set: Medical Genetics, Preventive Medicine, Psychiatry & Neurology, Radiology, Surgery, Otolaryngology, and Pathology.

Level III, Area of Specialization: a more specialized area of the Classification in which a provider chooses to practice or make services available. For example, the Area of Specialization for provider type Allopathic & Osteopathic Physicians is based upon the Subspecialty Certificates as issued by the appropriate national boards.

The Provider Taxonomy Code List allows a single provider (individual, group, or institution) to identify their specialty category. Taxonomy codes are divided into two different groups:

Individual or group codes - classify the type of provider or group using the different level codes. The following displays an entry from the Provider Taxonomy manual:

VERSION 3.1		
Level I	Allopathic & Osteopathic Physicians A broad category grouping state licensed providers in allopathic or osteopathic medicine whose scope of practice is determined by education.	
Level II	207P00000X	Emergency Medicine Active Definition to come...
Level III	207PE0004X	Emergency Medical Services Active Definition to come.
	207PT0002X	Medical Toxicology Active Definition to come...
	207PP0204X	Pediatric Emergency Medicine Active Definition to come.
	207PS0010X	Sports Medicine Active Definition to come...
	207PE0005X	Undersea and Hyperbaric Medicine Active A specialist who treats decompression illness and diving accident

Note that when you enter the provider taxonomy into RPMS, it is helpful to enter the Level II description. For example, if the provider is an Emergency Room Physician, you may enter **'Emergency'** into RPMS and the system will display the following:

14	Physicians (M.D. and D.O.) Physician/Osteopath Emergency Medicine
----	---

The system is case-sensitive when entering the provider taxonomy. Please make sure the provider name is being entered correctly with *lowercase letters*. For more specific categories, such as SPORTS MEDICINE, the user can enter 'Sports' and the system will attempt to locate all Sports Medicine providers.

Non-Individual taxonomies – provide a classification for healthcare facilities, agencies, nursing units and suppliers and various vendors. These codes are categorized the same way the Individual or Group codes are classified using the same Level I through Level III codes.

The following provides a sample of a Non-Individual taxonomy:

VERSION 3.1	
Ambulatory Health Care Facilities	
A facility or distinct part of one that provides services on an outpatient basis in a fixed location or specifically designed mobile unit. An Ambulatory Care Facility does not provide overnight accommodations.	
261Q00000X	Clinic/Center Active A facility or distinct part of one used for the diagnosis and treatment of outpatients. "Clinic/Center" is irregularly defined, sometimes being limited to organizations serving specialized treatment requirements or distinct patient/client groups (e.g., radiology, poor, and public health).
261QM0855X	Adolescent and Children Mental Health New An entity, facility, or distinct part of a facility providing diagnostic, treatment, and prescriptive services related to mental and behavioral disorders in children and adolescents. Services may be provided to parents and family members of the patient in the form of conjoint, group, or individual therapy, and education and/or training.
261QA0600X	Adult Day Care Active Definition to come...

The taxonomy codes are published twice a year on July 1st (which become effective October 1) and January 1st (which become effective April 1st). ITSC will provide the updates to be installed into RPMS under the AUT namespace. This means that the Taxonomy updates will be maintained separately.

1.4 Adding Taxonomies to RPMS

Taxonomies can be added into RPMS using VA FileMan and the User Management options in the Kernel Menu. If you do not have access to these options, you may have to have your site manager help you.

1.5 Individual or Groups

Individual or group codes are set up individually by provider and would need to be set up for all billable providers. This is will have to be set up in VA FileMan. It's recommended to start out by inputting your most common providers. This also affects the secondary providers (i.e. RN's, Pharmacists, etc.) that your facilities may have on a claim. Use the following steps to add the provider taxonomy into the provider file:

1. Access VA FileMan.
2. Choose ENTER OR EDIT FILE ENTRIES and press <return>.
3. The system will prompt for the following: "INPUT TO WHAT FILE:" Type **NEW PERSON** and press <return>.

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4. The system will prompt for “EDIT WHICH FIELD: ALL//”. Type **PERSON CLASS** and press <return>.
5. The system will prompt for “EDIT WHICH PERSON CLASS SUB-FIELD: ALL//”. Press <return>.
6. The system will then prompt for “THEN EDIT FIELD:”. Press <return> at this prompt.

```
Select VA FileMan Option: ENTER or Edit File Entries

INPUT TO WHAT FILE: NEW PERSON// NEW PERSON      (646 entries)
EDIT WHICH FIELD: ALL// PERSON CLASS      (multiple)
  EDIT WHICH PERSON CLASS SUB-FIELD: ALL//
THEN EDIT FIELD:
```

7. The system will then prompt for the name of the provider. Enter the provider name using the format of Last name, First name. Press <return>.

```
Select NEW PERSON NAME: CURESME,THOMAS
```

8. The system will then prompt for the user to enter the Person Class. The user will need to enter the appropriate taxonomy code for their provider.

```
Select NEW PERSON NAME:      KILDARE,RACHEL V
Select Person Class: emergency
  1  EMERGENCY  Emergency Medical Service Providers
                    Emergency Medical Technician, Paramedic
  2  EMERGENCY  Emergency Medical Service Providers
                    Emergency Medical Technician, Intermediate
  3  EMERGENCY  Emergency Medical Service Providers
                    Emergency Medical Technician, Basic
  4  EMERGENCY  Nursing Service Providers
                    Registered Nurse
                    Emergency
  5  EMERGENCY  Physicians
                    Allopathic/Osteopathic, Physician
                    Emergency Medicine
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 5  Physicians
                    Allopathic/Osteopathic, Physician
                    Emergency Medicine
Are you adding 'Physicians' as a new PERSON CLASS (the 1ST for this NEW
PERSON)? No// YES  (Yes)
Effective Date: OCT 15,2003// 010101  (JAN 01, 2001)
Expiration Date:
```

9. The system will prompt for an effective date. Enter the date the provider's credentials became effective. Press <return>.
10. The system will prompt for an expiration date. Leave this field blank unless the credentials expired for that provider. Press <return>.
11. Once the information has been entered, press <return> and the information will be stored. The user has the option to enter another providers' taxonomy.

1.6 Non-Individual

Non-Individual codes are for your general location and would need to be set up for all billing locations. This is set up in VA Fileman under the Location File. Use the following steps to add the provider taxonomy into the location file.

1. Access VA FileMan.
2. Choose ENTER OR EDIT FILE ENTRIES and press <return>.
3. The system will prompt for the following: "INPUT TO WHAT FILE:" Type **LOCATION** and press <return>.
4. The system will prompt for "EDIT WHICH FIELD: ALL//". Type **CLASS** and press <return>.
5. The system will prompt for "EDIT WHICH CLASS SUB-FIELD: ALL//". Type **CLASS** and press <return>. This allows you to only edit the class field.
6. The system will then prompt for "THEN EDIT CLASS SUB-FIELD:". Just hit <return> at this prompt.

```
Select option: ENTER OR EDIT FILE ENTRIES

INPUT TO WHAT FILE: LOCATION//
EDIT WHICH FIELD: ALL// CLASS      (multiple)    <-Type 'CLASS' here
  EDIT WHICH CLASS SUB-FIELD: ALL// CLASS        <-Type 'CLASS' here
  THEN EDIT CLASS SUB-FIELD:
THEN EDIT FIELD:
```

7. The system will then prompt the user for "Select LOCATION NAME:". Type the appropriate location name. If more than one location entry appears, the system will then display all available locations from the Location File. Choose your location if a list appears then press <return>.

8. The system will prompt “Select BEGIN DATE: <date>”. A date should already be established. DO NOT MODIFY THIS ENTRY. Press <return> to go to the next prompt.
9. The system will prompt for “CLASS”. You may use the Health Care Provider Taxonomy manual provided on the WPC website or type in double question marks (??) to get a listing of the location taxonomy codes. Type in the appropriate class code that best defines your facility. Once entered, press <return>.

```
Select LOCATION NAME: MAJOR MED C      AREANAME      SERVICEUNIT 01      NM      PHS
808401
      ...OK? Yes//      (Yes)      <-Choose your location here

Select BEGIN DATE: JAN 1,1960//      <return>
CLASS:      <-Type in the classification
of your facility
```

1.7 Billing and the Claim Editor

Once the provider and location taxonomy codes have been entered, they may be used right away. The user will not see any of the codes in the claim editor. They may access the Provider Inquiry (PRTM) option the Table Maintenance to view these codes.

1.8 Troubleshooting

The following are some of the most common RPMS Third Party Billing errors and how they can be corrected:

Question #1

- q. I am getting an error in the claim editor on Page 4 that displays “ERROR 191 – MISSING PROVIDER TAXONOMY”. How can I correct this? Should I be concerned?
- a. This error occurs on the provider page in the claim editor and can be corrected by adding the provider taxonomy into the provider file. Also, if the mode of export is the 837, the system will do a check for the taxonomy code. If this is missing, then Error 191 will occur. Please follow the steps above to resolve this.

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```
~~~~~ PAGE 4 ~~~~~
Patient: PATIENT,DEMO      [HRN: 99999]      Claim Number: 3141
..... (PROVIDER DATA)
.....

          PROVIDER              NUMBER              DISCIPLINE
          =====              =====              =====
(attending)PHYSICIAN,DEMO      I00991              PHYSICIAN
-----
WARNING:190 - MISSING PROVIDER TAXONOMY
-----
Desired ACTION (View/Next/Jump/Back/Quit): N//
```

Question #2

- q. When I am submitting my claims electronically, I am using the 837 format. But when I am sending them, my batch gets rejected with an error code that states the 'PRV' segment is not populated. What does that mean?
 - a. This could mean that the taxonomy codes were not set up prior to creating the electronic batch. Add the taxonomy codes and re-create your file. Re-send the batch.

2.0 Contact Information

If you have any questions or comments regarding this distribution, please contact the ITSC Service Center by:

Phone: (505) 248-4371 or
(888) 830-7280

Fax: (505) 248-4363

Web: <http://www.rpms.ihs.gov/TechSupp.asp>

Email: ITSCHelp@mail.ihs.gov