

## Provider Validation Requirements for Taxonomy Submission CMS-1500: CHC Connect Portal

Providers treating Empower members must be enrolled with Arkansas Medicaid and must have an active Arkansas Medicaid ID, registered taxonomy, NPI and full physical billing address on file with both Arkansas Medicaid and Empower in order to receive reimbursement.

Empower will be validating data via front-end claim edits. If the data submitted on the claim does not match the data registered with Arkansas Medicaid, claims will reject and providers will need to resubmit with corrected data.

## **Atypical Validation**

Medicaid ID Billing Address (zip 5+4)

Provider types- 06,15,23,27,32 6,39,50,51,52,53,54,55,56,57,67, 70,71,72,73,74,75,82,83,84,85,86 87, 95\*

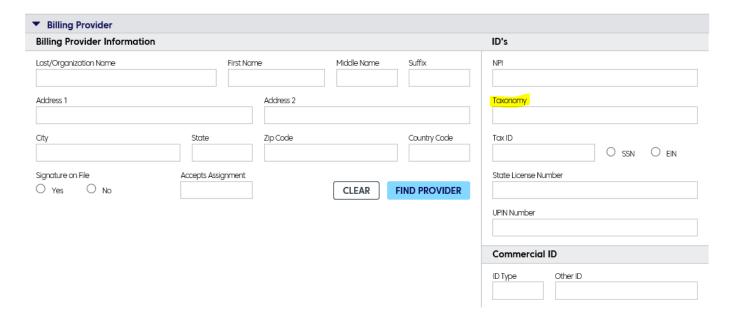
\*PT 95 with NW, NT, NU, NV specialties require NPI

## **Standard Validation**

NPI Taxonomy Billing Address (zip 5+4)

## Taxonomy Submission CMS - 1500: CHC Connect Portal

Taxonomy details are stored under the "Claim Details" tab for both Billing and Rendering providers





▼ Rendering Provider					
Rendering Provider Information				ID's	
Last/Organization Name	First Name	Middle Name	Suffix	NPI	
		CLEAR	FIND PROVIDER	Taxonomy	
				ID Type	Other ID
				ID Type	Other ID
				ID Type	Other ID
				ID Type	Other ID