Policy Title:	Rendering Provider National Provider Identifier (NPI) Requirements
Department:	Payment Strategy & Optimization - Reimbursement Policy
Policy Number:	CH-MCR-RP-083
Issue Day:	7/1/2026
Next Review Date:	Revision Dates:

Clover

Approved By:		
Rachel Jones		7/16/26
Department Head Name, Title		*Date*

REFERENCE:	https://npiregistry.cms.hhs.gov/search https://www.cms.gov/regulations-and-guidance/guidance/manuals/downloads/clm104c26.pdf

Purpose:
To outline the mandatory billing requirements established by Clover Healthcare for submitting "clean" medical claims. Specifically, this policy provides standardized guidelines on the correct usage, identification, and placement of National Provider Identifier (NPI) numbers (Type 1 and Type 2) and taxonomy codes to prevent claim denials and billing errors.

Scope:
This policy applies to all healthcare professionals and organizational entities submitting either paper (CMS-1500) or electronic (837P) claims to Clover Healthcare.

Policy:
Clover Healthcare's updated NPI reimbursement policy is fundamentally necessary to guarantee **accurate claim processing** and ensure strict compliance with **CMS guidelines, HIPAA regulations, and standard commercial payer practices**. By mandating the use of specific 10-digit National Provider Identifiers (NPIs)—explicitly distinguishing between the individual **Rendering Provider** (Type 1) and the organizational **Billing Provider** (Type 2)—the policy eliminates ambiguity regarding who performed a service versus who is billing for it. This level of detail is critical

for optimal claim routing and appropriate reimbursement, specifically preventing improper billing, such as advanced practice professionals inappropriately billing under a supervising physician. Ultimately, this structured requirement safeguards healthcare billing integrity and serves as a vital **member protection** measure, ensuring patients are never subjected to balance billing due to administrative claim denials stemming from missing NPI data.

Definitions:

NPI: National Provider Identifier (Healthcare)

In the U.S. healthcare and insurance systems, an NPI is a unique, 10-digit identification number issued to healthcare providers by the Centers for Medicare and Medicaid Services (CMS).

Procedure:

Claim Submission Requirements:

Clover Healthcare considers a claim "clean" only when it includes all necessary data elements. Claims missing required NPIs will be denied as billing errors.

- **Rendering Provider NPI (Type 1):** The individual health care professional who performed the service must be identified by their individual Type 1 NPI.
    - **Paper Claims:** The Rendering Provider's NPI must be entered in Box 24J of the CMS-1500 form.
    - **Electronic Claims (837P):** The Rendering Provider's NPI must be submitted in the appropriate electronic segment (Loop 2310B, Segment: NM1, Data Element: NM109).
- **Billing Provider NPI (Type 1 or 2):** The group, clinic, or organizational entity submitting the claim must include its organizational Type 2 NPI if one exists. If the individual is a solo practitioner and does not have a Type 2 billing NPI, then their individual Type 1 NPI can be submitted as a billing NPI as long as the entity type is appropriately identified (see Type Identification section below).
    - **Paper Claims:** The Billing Provider's NPI must be entered in Box 33a of the CMS-1500 form.
    - **Electronic Claims (837P):** The Billing Provider's NPI must be submitted in the appropriate electronic segment (Loop 2010AA, Segment: NM1, Data Element: NM109).
- **Billing Provider NPI Type Identification:** The billing NPI type must be identified accurately depending on the entity type in the appropriate electronic segment (Loop 2010AA, Segment: NM1, Data Element: NM85).
    - **Type 2:** Group, Clinic, or Organizational entity identified with a “2” in the NM1*85 Ref loop
    - **Type 1:** Individual (Solo practice) provider identified with a “1” in the NM1*85 Ref loop
- **Taxonomy Codes:** We ask that the Billing taxonomy code and the health care provider’s registered Rendering taxonomy code be submitted along with the NPI. To ensure the performing provider's specialty is properly recognized, please include the Rendering taxonomy code whenever a Rendering NPI is utilized.

Advanced Practice Health Care Providers

Clover Healthcare requires the following:

- Services rendered by an Advanced Practice Health Care Provider (e.g., Nurse Practitioners [NP], Physician Assistants [PA], and Clinical Nurse Specialists [CNS]) must be reported using the provider's own unique Type 1 NPI in the Rendering Provider field, provided they are eligible to bill directly under applicable state law.
- These providers must not bill under a supervising physician's NPI unless the services strictly meet CMS "Incident-To" billing guidelines.

Group Practices

- In accordance with CMS regulations, group practices must use their organization's Type 2 NPI to identify themselves as the Billing/Pay-To Provider.
- Even if the group practice is the billing entity, the individual members of the group (physicians or other practitioners) must obtain and use their individual Type 1 NPIs to identify themselves as the Rendering Providers on the claim.
- Physicians in the same group practice who are in the same specialty are treated as a single physician for Same Day/Same Service billing purposes.

Enforcement and Rejections

- **Incomplete Claims:** Claims submitted without a valid Rendering Provider NPI or Billing Provider NPI are considered unclean. These claims are subject to processing denial. Exclusions to this rule include but are not limited to:
  - Independent Laboratories
  - Ambulatory Surgical Centers (ASC)
  - Durable Medical Equipment (DME) Suppliers
  - Ambulance
  - Pharmacy
- **Taxonomy Code Recommendation:** We strongly suggest including the corresponding taxonomy codes on all submissions. Providing this information promotes optimal claim routing and highly accurate processing.
- **Member Protection:** Under the terms of the provider agreement, providers may not balance bill Clover Healthcare members for services denied due to missing, invalid, or incomplete NPI data.

Related Policies:

Attachments:

New, Revised or Reviewed/ No Changes	Previous Policy Name, If Applicable/Description of Changes	Department Lead Approval (Name)	Date Department Lead Approved	Date Policy Committee Approved
New		Rachel Jones	7/15/26	7/16/26