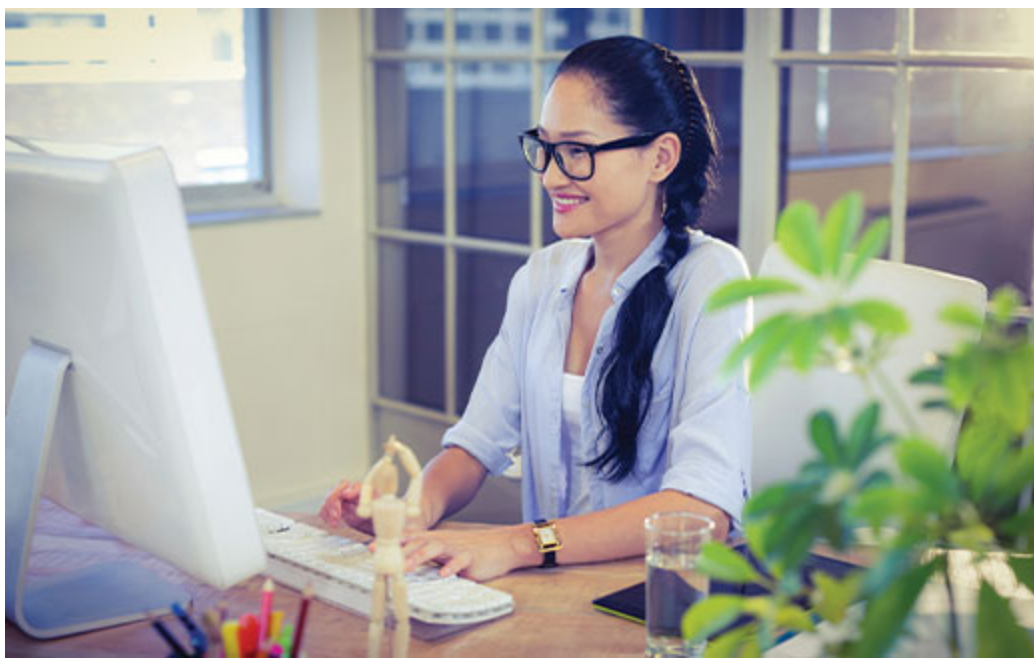


# Access helpful provider resources for claim preparation

 [pages.azblue.com/Claim-prep-guidelines-and-required-data-elements---MAR-2021.html](https://pages.azblue.com/Claim-prep-guidelines-and-required-data-elements---MAR-2021.html)

[Sign in – Secure Provider Portal](#) 



The Blue Cross<sup>®</sup> Blue Shield<sup>®</sup> of Arizona (BCBSAZ) Provider Operating Guide includes a section on [claim submission](#). In the second half of this section (on pages 16-16 through 16-31), you'll find guidelines and our required data elements for preparing claims. Although the requirements are explained in reference to paper forms, the requirements also apply to electronic 837 data elements. We return claims with missing or invalid data in required fields.

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**Prepare to be inspired: [See our Front Line Heroes Award winners!](#)**

Except for atypical providers (as defined by HIPAA) who are not eligible to obtain NPI numbers, we require NPI and tax ID numbers on all claims. Omitting this information can delay claim processing and result in a returned claim. The NPI and ITN submitted on claims must match the information on file in our system. Please use the [Provider Information Change Form](#) to notify us of updates to your provider information.

## **NUCC manual for professional claims**

The National Uniform Claim Committee issues an annually updated [1500 Health Insurance Claim Form Reference Instruction Manual](#) that offers helpful information about how to complete each field on the form. In addition to the manual, the committee also publishes a [crosswalk](#) showing how the 1500 form maps to the data elements in an 837P electronic transaction.

## **Electronic data interchange standards**

Another great resource for electronic claim submission is the [HIPAA Transaction Standard – BCBSAZ Companion Guide](#). It lists BCBSAZ-specific requirements needed to process certain scenarios in electronic transactions. These requirements are in addition to the guidelines in the ASC X12N TR3 adopted for use under HIPAA. The guide is intended to assist you in implementing electronic transactions that meet our claim processing standards by identifying relevant structural and data-related information and recommendations.

For more information about claim submission or to schedule a virtual staff training, please contact your [provider liaison](#) or call Provider Partnerships at 602-864-4231 or 1-800-232-2345, ext. 4231.

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- [Thanks for heroic efforts on COVID-19 fronts](#)
  - [Annual HEDIS medical records retrieval begins](#)
  - [May 1: Annual update of BCBSAZ fee schedules](#)
  - [Claim prep guidelines and required data elements](#)
  - [Engage patients in diabetes self-management](#)
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