CareSource | NETWORK *Notification*

Notice Date:	**February 3, 2026**
To:	**Indiana Marketplace and Medicaid Providers**
From:	**CareSource**
Subject:	**NPI for Service and Billing Provider on Professional Claims Submission**

Summary

In alignment with National Uniform Claim Committee (NUCC) guidance and ANSI ASC X12 837 Professional Health Care Claims standards, providers should only report a Service Facility Location National Provider Identifier (NPI) when the NPI is different from the Billing Provider NPI. This change will impact claim submissions originating from paper, direct data entry via the Provider Portal and 837 Professional EDI files.

The NUCC manual indicates the following use for box 32a (Service Facility Location NPI):

TITLE 32a: NPI#

INSTRUCTIONS: Enter the NPI number of the service facility location in 32a.

Only report a Service Facility Location NPI when the NPI is different from the Billing Provider NPI.

DESCRIPTION: The NPI number refers to the HIPAA National Provider Identifier number.

FIELD SPECIFICATION: This field allows for the entry of a 10-digit NPI number.

The TR3 Implementation Guide 005010X222 for Professional Health Care Claims indicates the following use for Service Facility Location (Loop 2310C Segment NM1) and specifically the NPI (Loop 2310C Element NM109).

SITUATIONAL	NM109	67	Identification Code Code identifying a party or other code	X 1	AN	2/80
			SYNTAX: P0809			
			SITUATIONAL RULE: *Required when the service location to be identified has an NPI and is not a component or subpart of the Billing Provider entity.* *If not required by this implementation guide, do not send.*			
			IMPLEMENTATION NAME: **Laboratory or Facility Primary Identifier**			

Loop:	2310C — SERVICE FACILITY LOCATION NAME	Loop Repeat:	1
Segment Repeat:	1		
Usage:	SITUATIONAL		
Situational Rule:	Required when the location of health care service is different than that carried in Loop ID-2010AA (Billing Provider). If not required by this implementation guide, do not send.		
TR3 Notes:	1. When an organization health care provider's NPI is provided to identify the Service Location, the organization health care provider must be external to the entity identified as the Billing Provider (for example, reference lab). It is not permissible to report an organization health care provider NPI as the Service Location if the entity being identified is a component (for example, subpart) of the Billing Provider. In that case, the subpart must be the Billing Provider.		
	2. The purpose of this loop is to identify specifically where the service was rendered. When reporting ambulance services, do not use this loop. Use Loop ID-2310E - Ambulance Pick-up Location and Loop ID-2310F - Ambulance Drop-off Location.		
	3. Information in Loop ID-2310 applies to the entire claim unless overridden on a service line by the presence of Loop ID-2420 with the same value in NM101.		
TR3 Example:	NM1*77*2*ABC CLINIC*****XX*1234567891~		

Impact

This change will affect all professional claims submitted under the specified criteria. Providers must ensure that claim submissions with both a Billing Provider NPI and a Service Facility Location NPI utilize unique values to avoid rejection. Claims submitted with the same NPI for both data points will not be processed, which may lead to delays in reimbursement and impact patient care.

Importance

This initiative enhances the integrity of our claims data, which is vital for effective health care delivery and reimbursement. Accurate and compliant claim submissions help streamline the payment process, reducing administrative burdens and enabling focus on patient care. By clearly differentiating between billing and service facilities, we can better track and manage health care services, ultimately leading to improved patient outcomes. Additionally, this change reinforces our commitment to maintaining high-quality standards in health care services and emphasizes the importance of transparency and accountability in billing practices. As we implement this change, we encourage all providers to make any necessary adjustments in their electronic health records or practice management and billing systems to align with the change, ensuring a smooth transition and continued support for your patients.

Questions?

Please contact Provider Services at the appropriate number below:

- Medicaid: <**1-844-607-2831**, Monday through Friday, 8 a.m. to 8 p.m., Eastern Time (ET)/7 a.m. to 7 p.m. Central Time (CT).>

- Marketplace: <**1-833-230-2101 (TTY: 711)**, Monday through Friday, 8 a.m. to 6 p.m. ET/7 a.m. to 5 p.m. CT.>

PARTNER with **PURPOSE**