

# Suppress Rendering Provider on Line Items for a Specific Payer

Last Modified on 09/07/2021 8:23 am EDT

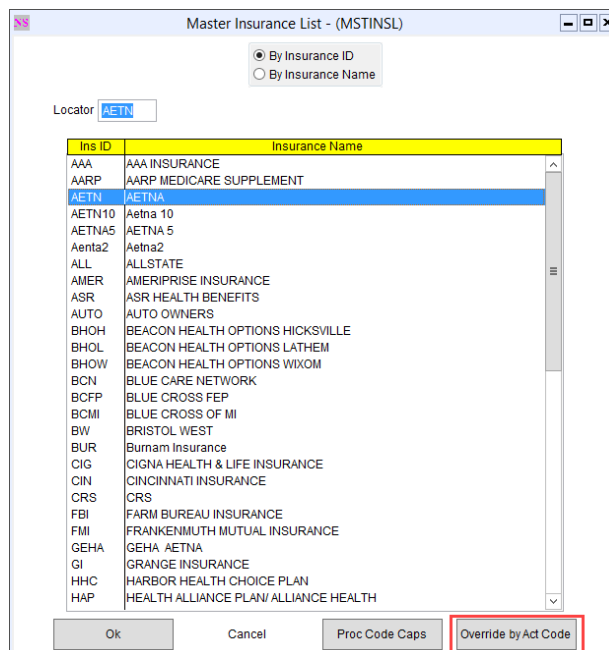
**Path: Maintenance and Setup > Insurance > Insurance**

## About

If an Insurance Payer does not want to see a Rendering Provider on a claim, the suppression of the Rendering Provider can be done through an override in the Billing Engine. Please note you will need to follow the steps below for all Activity Codes that need the change.

## Remove Rendering Provider from Claim

1. Navigate to the Master Insurance List by following the path above.
2. Select an **Insurance Payer** from the list.
3. Click the **Override by Act Code** button.



Ins ID	Insurance Name
AAA	AAA INSURANCE
AARP	AARP MEDICARE SUPPLEMENT
AETN	AETNA
AETN10	Aetna 10
AETNA5	AETNA 5
Aenta2	Aetna2
ALL	ALLSTATE
AMER	AMERIPRISE INSURANCE
ASR	ASR HEALTH BENEFITS
AUTO	AUTO OWNERS
BHOH	BEACON HEALTH OPTIONS HICKSVILLE
BHOL	BEACON HEALTH OPTIONS LATHAM
BHOW	BEACON HEALTH OPTIONS WIXOM
BCN	BLUE CARE NETWORK
BCFP	BLUE CROSS FEP
BCMI	BLUE CROSS OF MI
BW	BRISTOL WEST
BUR	Burnam Insurance
CIG	CIGNA HEALTH & LIFE INSURANCE
CIN	CINCINNATI INSURANCE
CRS	CRS
FBI	FARM BUREAU INSURANCE
FMI	FRANKENMUTH MUTUAL INSURANCE
GEHA	GEHA AETNA
GI	GRANGE INSURANCE
HHC	HARBOR HEALTH CHOICE PLAN
HAP	HEALTH ALLIANCE PLAN/ ALLIANCE HEALTH

4. In the Insurance Override By Activity Code List, click the **Ok** button.
5. Click the **Add** button. The Insurance ID populates with the payer you previously selected.
6. Select an **Activity Code** from the drop-down menu.
7. Select the **Format** and **Format Type 2** (if applicable) from the drop-down menus.
8. Select the **Display HCFA 1500 24J (Professional 837 2310B/2420A loops)** as blank checkbox.

Insurance Override By Activity Code Form - (INSOBYAC)

Insurance ID: AETN (dropdown) AETNA (text field)

Activity Code: GROUP (dropdown) 90835 THERAPY (text field)

Format Type: 1 (dropdown) Outpatient Hospital Invoice-Caid 21 (text field)

Format Type 2: (dropdown) (text field)

Display HCFA 1500 Box 24J (Professional 837 2310B/2420A loops) as blank

Display Name in HCFA 1500 Box 31: (text field)

User Id: (text field) Control Date/Time: (text field)

Buttons: Save, Revert, Delete, Exit (Esc), 0 record loaded (green), Override List

9. Click the **Save** button.