

# EL PASO FIRST

## Health Plans, inc.

### Memo

To: Our Valued Providers  
 From: El Paso First Health Plans  
 Date: September 4, 2014  
 Re: Clinician Administered National Drug Code (NDC) Billing Requirements

Claims will deny or reject if billing requirements are not included on all medical claims for clinician administered drugs provided in an outpatient setting. A summary of the existing and new billing requirements for clinician administered drugs are outlined below. Please carefully review the list to ensure all required fields are completed when submitting a claim.

- NDC.** Each NDC must be reported as an 11-digit code unique to the manufacturer of the specific drug or product administered to the member, using a 5-4-2 format (*i.e.*, 5 digits, followed by 4 digits, followed by 2 digits [9999999999]). Some NDCs may be in a 10-digit format. The chart below illustrates how to convert the code into 11-digits. (*Hyphens in the example below are for illustration only.*)

| 10-Digit Format on Package | 10-Digit Format Example | 11-Digit Format | 11-Digit Format Example |
|----------------------------|-------------------------|-----------------|-------------------------|
| 4-4-2                      | 9999-9999-99            | 5-4-2           | 09999-9999-99           |
| 5-3-2                      | 99999-999-99            | 5-4-2           | 99999-0999-99           |
| 5-4-1                      | 99999-9999-9            | 5-4-2           | 99999-9999-09           |

- NDC and HCPCS Match.** *Effective for dates of service on or after 09/01/2014, a valid relationship must exist between the NDC and HCPCS code.* The numeric value submitted for the NDC must match the HCPCS for the performed service. Providers are encouraged to consult with applicable resources to identify the appropriate crosswalk for the NDC and HCPCS code match.

*Example: Injection for Rocephin*

| HCPCS | HCPCS DESCRIPTION                         | NDC           | Generic Name       | Name                 |
|-------|---|---------------|--------------------|----------------------|
| J0696 | Injection, ceftriaxone sodium, per 250 mg | 00004-1963-01 | CEFTRIAZONE SODIUM | ROCEPHIN 500 MG VIAL |
| J0696 | Injection, ceftriaxone sodium, per 250 mg | 00004-1964-04 | CEFTRIAZONE SODIUM | ROCEPHIN 1 GM VIAL   |

- 3) **NDC Unit Quantity.** The unit quantity of each NDC must be a numeric value greater than zero. In most cases, the NDC quantity will be different from the HCPCS billed units.
- 4) **NDC Unit of Measurement.** The unit of measurement for each NDC must be submitted (i.e. F2=International Unit, GR=Gram, ML=Milliliter, UN=Unit).

**Points to remember: Claims will deny or reject for the following:**

- **Missing NDC**
- **NDC is invalid for the corresponding HCPCS code**
- **NDC is not 11 characters long**

Providers may resubmit claims with the appropriate NDC code when a claim is denied with denial reason M119: missing, incomplete, invalid, withdrawn National Drug Code (NDC).

| CMS1500 Submitting Specifications |                                  |   |  |
|-----------------------------------|----------------------------------|---|--|
| Block No.                         | Description                      | Guidelines  | EDI Loop/Segment Value   |
| 24A                               | DOS                              | In the shaded area, enter the NDC qualifier of the N4 and the 11-digit NDC number (number on package or container from which the medication was administered). Do not enter hyphens or spaces within this number Example: N400409231231 | Loop 2410<br>LIN03 NDC (11-digit format)                         |
| 24D                               | Procedures, services or supplies | Required: In the shaded area, enter a 1-through 12 digit NDC quantity of units. A decimal point must be used for fractions of a unit.   | Loop 2410<br>CTP 04 quantity<br>CTP 05 composite unit of measure |

| UB04 Format Specification |                  |  |   |  |                                  |  |  |  |  |  |  |
|---------------------------|------------------|--|---|--|----------------------------------|--|--|--|--|--|--|
| Field Locator             | Description      |  | Guidelines  |  | EDI Loop/Segment Value           |  |  |  |  |  |  |
| 43                        | Revenue code and |  | In the Revenue code description enter N4 and the 11-digit NDC number (number on |  | Loop 2410<br>LIN03 NDC (11-digit |  |  |  |  |  |  |

|  |             |   |  |
|--|-------------|---|--|
|  | description | package or container from which the medication was administered).<br>Required: Unit of measurement code and the unit quantity with the floating decimal for fractional units (limited to 3 digits) can also be submitted, however, are not required.<br>Do not enter hyphens or spaces within this number Example: N400409231231GR0.025 | format)<br>CTP 04 quantity<br>CTP 05 composite unit of measure |
|--|-------------|---|--|

| 42 REV. CD. | 43 DESCRIPTION     | 44 HCPCS / RATE / HPPS CODE | 45 SERV. DATE | 46 SERV. UNITS | 47 TOTAL CHARGES | 48 NON-COVERED CHARGES | 49 |
|-------------|--------------------|-----------------------------|---------------|----------------|------------------|------------------------|----|
| 250         | N458468012201ML 10 | J1270                       | 010508        | 20             | 311.80           |                        |    |
|             |                    |                             |               |                |                  |                        |    |
|             |                    |                             |               |                |                  |                        |    |
|             |                    |                             |               |                |                  |                        |    |
|             |                    |                             |               |                |                  |                        |    |

**Below are links to various resources:**

- Texas Medicaid/CHIP Vendor Drug Program NDC to HCPCS crosswalk <http://txvendordrug.com/formulary/clinician-administered-drugs.shtml>
- The Noridian crosswalk can be accessed at: [www.dnepdac.com/crosswalk/index.html](http://www.dnepdac.com/crosswalk/index.html)
- The Medicare Part B APS can be accessed at: <http://www.cms.gov/Medicare/Medicare-Fee-For-Service-Part-B-Drugs/McrPartBDrugAvgSalesPrice/2013ASPFiles.html>
- HCPCS codes requiring an NDC for billing is found at [www.tmhp.com/Pages/Topics/NDC.aspx](http://www.tmhp.com/Pages/Topics/NDC.aspx)

Providers can contact El Paso First Provider Relations Department at 915-532-3778 ext. 1507.

For additional information, please contact TMHP Contact Center at 1-800-925-9126 or refer to the TMHP Provider Manual.