

NDC Codes Required on All Claims For Physician-Administered Drugs

Effective 1/1/2012

Beginning 2012, professional claims submitted to the Medicaid managed care entities containing procedure codes for physician administered drug components must include the NDCs of the drug products administered. Currently, professional claims for drugs administered in physician practice settings are adjudicated by the managed care plans using the “J” and “Q” codes without a NDC. However, the claim systems of the Medicaid Health Plans will be modified in 2012 to deny a professional claim that contains a “J” or “Q” code if it does not include the NDC of the drug product. The reimbursement for these procedure codes paid by the managed care entities will not change.

Please refer to the IHCP Bulletins BT 200713 and BT200731 for instructions on how to complete the CMS 1500 and UB 04 paper claims, as well as, electronic billing. Tables listing the procedure codes can also be found in these bulletins.

If you have questions regarding this billing requirement, please call your MDwise Provider Relations Rep or call MDwise Customer Service at 1-800-356-1204 or (317) 630-2831.