

A message from the Department of Medicaid Services (DMS).

Please be advised of the 60-Day Notice for the following changes:

DMS will begin identifying 340B claims using claim level identification, effective 01/01/2020. The following fields will need to be sent on any applicable MCO encounter files:

<b>NCPDP Field Value</b>	<b>NCPDP Field Value Description</b>	<b>340B Claim Identifier</b>
420-DK	Submission Clarification Code	20

  

<b>CMS-1500 Field Number</b>	<b>CMS-1500 Field Value</b>	<b>CMS-1500 Field Description</b>	<b>340B Claim Identifier</b>
24 D	Procedures, Services, or Supplies	CPT/HCPCS Modifier	UD

  

<b>837P Loop/data element</b>	<b>Electronic Claims Field Description</b>	<b>340B Claim Identifier</b>
Loop 2400 SV101-3, SV101-4, SV101-5 and SV101-6	Modifier 1, Modifier 2, Modifier 3, Modifier 4	UD

  

<b>UB-04 Field Number</b>	<b>Field Description</b>	<b>340B Claim Identifier</b>
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*A message from the Department of Medicaid Services (DMS).*

44 HCPCS/Rate/HIPPS Code JG, TB, AY \*

**837I Loop/ data segment Field Description 340B Claim Identifier**

Loop 2400, SV202-2 HCPCS/Rate/HIPPS Code JG, TB, AY \*  
(SV202-1=HC/HP)

\*Note these modifiers are captured for Medicare claims and need to be submitted when present on crossover claims, where applicable.