

**MEDICAID PROVIDER BULLETIN**

October 29, 2014

**Reminder to submit National Drug Code number and units**

Anthem Blue Cross and Blue Shield Medicaid would like to remind you that the appropriate National Drug Code (NDC) and NDC units are required for specific drug claim submissions. Our goal is to ensure that all providers receive the appropriate reimbursement and avoid claim denials. Additionally, claims that are billed with drug revenue codes must be submitted with the appropriate NDC and HCPCS codes. Failure to use the correct NDC number on a claim could result in a delayed or denied claim.

**Provider Action Required**

Paper and electronic claims billed with drug codes must be legible and contain valid NDC numbers, units and HCPCS codes to prevent claim denials.

There are three segments for the NDC identifier. The table below is an example:

Segment 1	Segment 2	Segment 3
12345	1234	12
Identifies the manufacturer that distributes the drug	Identifies the drug strength, dosage and formulation	Identifies the package

**For paper claims billed on a CMS-1500 Form**

HCPCS J3490 should only be billed when a specific code does not exist. You must include the NDC number, name, strength and dosage of each drug administered in box 19 (Reserve for Local Use) on the CMS-1500 Form.

**For electronic claims**

1. Place the NDC information in segment 2410 – Drug Identification Loop.
2. Enter as: LIN01 – Blank; LIN02 – N4; LIN03 – NDC number.

**For billing on UB04 Form**

If you are billing the unlisted drug procedure code J3490, you must list the NDC code in box 43 on the UB04 Form.

**Questions**

If you have questions about this communication, please contact your Provider Relations representative or the Provider Services department at **1-855-661-2028**.

**[www.Anthem.com/KYMedicaiddoc](http://www.Anthem.com/KYMedicaiddoc)**

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