May 13, 2020

Validation of National Drug Codes Submitted with Medical Drug Claims

Starting June 15, 2020, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will be validating all National Drug Codes (NDCs) electronically submitted on medical drug claims through the Availity® Provider Portal to verify the codes are valid 11-digit codes. If an invalid NDC code is submitted for a medical drug, the claim will electronically bounce back with one of the messages below. When this happens, providers should resubmit the claim for processing with the correct coding.

- NDC code must contain a valid 11 numeric NDC
- NDC must match valid correlating HCPCS code for the medical drug
- NDC Code <value> (2410 LINE03) must be valid for the service line dates submitted
- Units dispensed must be greater than zero, when Product/Service ID qualifier is an unlisted HCPCS code

Members Impacted

As previously announced in Provider Bulletin P47-17, NDC codes must be submitted for all lines of business when drugs are included on all professional (837P) and outpatient institutional (837I) electronic claim transactions. All Commercial and Medicaid lines of business will continue to follow the DHS requirement and Medicare will to continue to follow CMS requirements. Claims submitted without NDC's for Healthcare Common Procedure Coding System (HCPCS) codes that require them will be denied. The HCPCS codes listed in the link below require a valid NDC to be submitted. The list is subject to change.

HCPCS codes impacted can be found on the Minnesota DHS website:
1. Go to the "DHS MHCP Enrolled Providers Prescription Drug Information" section of the MN DHS website, currently found at this link: https://mn.gov/dhs/partners-and-providers/policies-procedures/minnesota-health-care-programs/provider/types/#p
2. Under "Pharmacy", click "Prior Authorization and Other Resources" to locate the ''HCPCS Codes Requiring NDC" list.

Coding requirements reminder

All coding and reimbursements are subject to changes, updates, or other requirements of coding rules and guidelines. All codes are subject to federal HIPAA rules, and in the case of medical code sets (for example, HCPCS, CPT, ICD-10-CM, ICD-10-PCS), only valid codes for the date of service may be submitted or accepted.

Questions?

If you have questions, please contact provider services at **(651) 662-5200** or **1-800-262-0820**.

*HCPCS stands for Healthcare Common Procedure Coding System
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