

PROVIDER QUICK POINTS

PROVIDER INFORMATION

December 23, 2020

Validation of National Drug Codes Submitted with Medical Drug Claims

Starting January 4, 2021, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will be validating all National Drug Codes (NDCs) electronically submitted with procedure codes on the Minnesota Department of Human Services (DHS) list. This will be completed upon submitting the claim to Availity®, Blue Cross's exclusive clearinghouse. If an invalid NDC code is submitted for a medical drug, the claim will be rejected with the message below. When this happens, providers should resubmit the claim for processing with the correct coding.

- The National Drug Code (NDC) is required with the corresponding procedure code submitted.

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 Minnesota DHS requirement and Medicare will continue to follow the Centers for Medicare & Medicaid Services (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, ICD10-CM, ICD-10-PCS), only valid codes for the date of service may be submitted or accepted.

Questions?

If you have questions for a member enrolled in a Minnesota Health Care Programs (MHCP) plan, please contact provider services at **1-866-518-8448**. Please contact provider services at **(651) 662-5200** or **1-800-262-0820** for all other questions.

HCPCS stands for Healthcare Common Procedure Coding System

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