

PROVIDER BULLETIN

PROVIDER INFORMATION



August 23, 2017

Change to the Requirement to Submit National Drug Codes

Effective for all claims received October 9, 2017, and after, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) National Drug Code (NDC) submittal requirement will follow the Minnesota Department of Human Services (DHS) NDC list rather than the Centers for Medicare and Medicaid Services (CMS) list.

NDC's must be submitted for all lines of business when drugs are included on all professional (837P) and outpatient institutional (837I) electronic claim transactions. Claims submitted without NDC's for Healthcare Common Procedure Coding System (HCPCS) codes that require them will be denied beginning October 9, 2017. The HCPCS codes listed in the link below require a valid NDC to be submitted. The list is subject to change.

The NDC is submitted in the 2400 Loop of the 837P in the LIN segment value in LIN03 and in Loop 2410, LIN segment value in LIN03 on an 837I transaction.

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:
http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs16_138241
2. Under 'Physician Administered Drugs', click 'HCPCS Codes Requiring NDC'

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 service at (651) 662-5200 or 1-800-262-0820.

*HCPCS stands for Healthcare Common Procedure Coding System

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