

National Drug Code (NDC): How to submit your pharmacy claims using the NDC codes. (IHS/638 Providers only)

May 10, 2018



NDC Definition

The National Drug Code (NDC) is the number which identifies a drug. The NDC number consists of **11** digits, broken into 3 sections in a 5-4-2 format.

- The first 5 digits identify the labeler code representing the manufacturer of the drug and are assigned by the Food and Drug Administration (FDA).
- The next 4 digits identify the specific drug product and are assigned by the manufacturer.
- The last 2 digits define the product package size and are also assigned by the manufacturer.



Effective July 1, 2016

IHS and Tribally operated 638 facilities must submit the NDC information on any outpatient pharmacy claims to receive the All Inclusive Rate (AIR).

All pharmacy claims must be submitted on a UB-04 Claim form with Revenue Code 0519 and the National Drug Code (NDC).

- \rightarrow The AIR must be billed on the 1st Line with revenue code 0519 and 1 unit.
- → Subsequent lines with NDCs can be billed with \$0.00 and 1 unit to avoid inflating the total AIR for the outpatient pharmacy claim.



Where can the NDC code be found?

The NDC code is found on the drug container, i.e. vial, bottle, tube. The NDC code used during billing must be the actual NDC code numbers on the package or container from which the medication was administered.

Claims may not be submitted for one manufacturer when a different manufacturer's product was administered. It is considered a <u>fraudulent</u> billing practice to bill using an NDC other than the one assigned to the drug administered.

AHCCCS Pharmacy Information can be found at the following link: https://www.azahcccs.gov/PlansProviders/Pharmacy/



NDC Units of Measure Qualifier

NDC units are based on the numeric quantity <u>administered</u> to the patient and the unit of measurement. The Units of Measurement Qualifier codes are as follows:

NDC Unit of Measure Qualifiers:

F2 = International Unit

GR = Gram usually

ML = Milliliter

UN = Unit (each)

The NDC quantity given, administered amount, with up to three decimal places (i.e., 1234.456). Any unused spaces are left blank.



NDC Billing Format

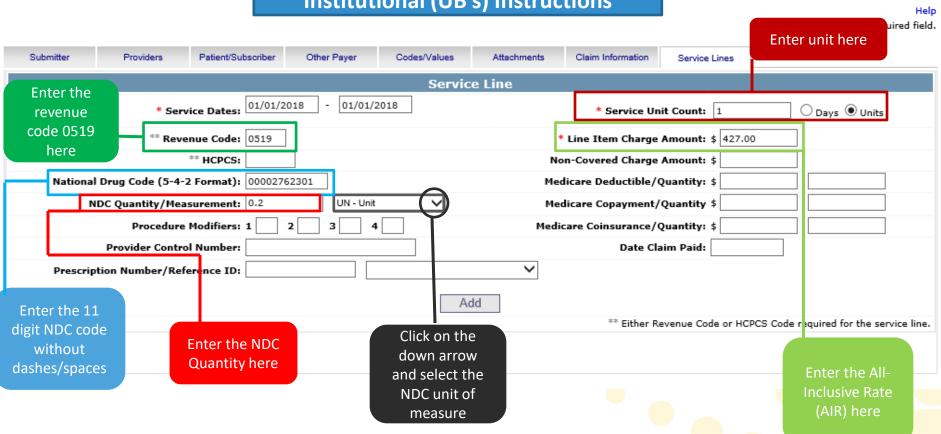
There will be times when the NDC code will be less than 11 digits. In this case, add a leading zero (0) to the beginning section of the missing digit when billing using the NDC code.

	< 11 digits	Labeler code	Drug Product	Product Package
Example 1	2345-1234-12	02345	1234	12
Example 2	12345-234-12	12345	0234	12
Example 3	12345-1234- <mark>2</mark>	12345	1234	02



Institutional Claim Submission

NDC AHCCCS Online Claims Submission Institutional (UB's) Instructions





Common Pharmacy Billing Errors

An invalid and or non-covered NDC code on the first line will cause the **entire** claim to deny.

Invalid NDC codes: If the NDC code on each line does not follow the standard NDC format (i.e. typo) the <u>entire</u> claim will deny even if the first line contains a valid/covered NDC code.

Exception: Anticoagulants do not have NDC codes. They must be billed using a valid corresponding diagnosis code for the drug.

Claims for Title XXI (KidsCare) recipients:

Must be submitted to OptumRx as described in Chapter 10 of the IHS/Tribal Provider Billing Manual.



Example 1

LN	Rev Code	NDC Code	Measurement	Quantity	Service Unit Count	Charges	Service Dates
L1	0519	00074455219	UN	30	1	427.00	02/01/18
L2	0519	00063053551	UN	30	1	0.00	02/01/18

- Line 1 billed with a valid AHCCCS covered NDC code and the AIR
- Line 2 billed with a valid AHCCCS covered NDC code

Conclusion: Claim will pay the AIR on line 1.



Example 2

LN	Rev Code	NDC Code	Measurement	Quantity	Service Unit Count	Charges	Service Dates
L1	0519	00074455219	UN	30	1	427.00	02/01/18
L2	0519	00603053550	UN	30	1	0.00	02/01/18

- Line 1 billed with a valid AHCCCS covered NDC code and the AIR
- Line 2 billed with a non-covered NDC code.

Conclusion: Claim will pay the AIR on line 1.



Example 3

LN	Rev Code	NDC Code	Measurement	Quantity	Service Unit Count	Charges	Service Dates
L1	0519	00603053550	UN	30	1	0.00	02/01/18
L2	0519	00074455219	UN	30	1	427.00	02/01/18

- Line 1 billed with an invalid or a non-covered NDC code
- Line 2 billed with a valid AHCCCS covered NDC code and the AIR

Conclusion: The entire claim will deny.



Paper Claims

For *paper* claims providers must enter the qualifier "N4" followed by a valid 11-digit. NDC (no dashes or spaces) when billing a medication, vaccine and for the limited diabetic supplies billable followed by the NDC Units of Measure Qualifier, and the NDC Quantity.

Example:

	42. REV. CD.	43. DESCRIPTION	44. HCPCS/RATES
1	0519	N400074115278 ML10	
2			
3			

Note: HCPCS/Rates are not required for NDC lines on outpatient pharmacy clinic claims.



Questions?

Please feel free to contact us at:

ProviderTrainingFFS@azahcccs.gov





Thank You.



