

Billing with National Drug Codes Overview

- Blue Cross and Blue Shield of Texas reimburses participating provider claims submitted with National Drug Codes in accordance with the NDC Fee Schedule posted on the BCBSTX provider website, bcbstx.com/provider. The NDC Fee Schedule is updated monthly on the first of each month.
- To locate this information:
 - Select **Standards and Requirements**, then select **General Reimbursement Information** and go to **Reimbursement Schedules and Related information (Secure Content)**
 - Enter password, then go to Professional and select **Blue Choice PPOSM, Blue EssentialsSM, Blue PremierSM, Blue Advantage HMOSM, MyBlue HealthSM, Blue High PerformanceSM Schedules**
 - Select the applicable option for the year needed. Then scroll to the **Drugs** section.
- Lower-cost generic medications may be reimbursed with a larger margin compared to higher-cost generic and brand medications.
- The BCBSTX methodology utilized for determining the allowable for Healthcare Common Procedure Coding System (HCPCS) or Current Procedural Terminology (CPT[®]) codes associated with multiple NDCs generally will be equivalent to the lowest NDC allowable associated with the HCPCS or CPT code.
- When drugs are billed under the medical benefit on professional/ancillary/facility electronic (ANSI 837P) and paper (CMS-1500) claims, it is important to include NDCs and related data. Using NDCs on medical claims facilitates more accurate payment and better management of drug costs based on what was dispensed.
- BCBSTX requires inclusion of the NDC along with the applicable HCPCS or CPT code(s) on claim submissions for unlisted or "Not Otherwise Classified" (NOC) professional, ancillary or facility provider administered and supplied drugs. BCBSTX will continue to accept the HCPCS or CPT code elements without NDC information (excluding unlisted or "Not Otherwise Classified" drugs).
- When submitting NDCs on professional/ancillary/facility electronic (ANSI 837P or 837I) and paper (CMS-1500) or UB-04 claims to BCBSTX, you must also include the following related information:
 - The applicable HCPCS or CPT code
 - Number of HCPCS/CPT units
 - NDC qualifier (N4)
 - NDC unit of measure (UN – Unit, ML – Milliliter, GR – Gram, F2 – International Unit)
 - Number of NDC units (up to three decimal places)
 - Your billable charge/price per unit
- Verify with your software vendor to confirm that your Practice Management System accepts and transmits the NDC data fields appropriately. If you use a billing service or clearinghouse to submit electronic claims on your behalf, please check with them to ensure that NDC data is not manipulated or dropped inadvertently.

Billing with National Drug Codes Overview (cont.)

RESOURCES

- **Billing with NDCs- Frequently Asked Questions (FAQs)**
<http://www.bcbstx.com/provider/claims/submit.html>
- National Drug Code (NDC) Units Calculator Via Availity®
<https://www.bcbstx.com/provider/education/education/tools/ndc-units-calculator>
- **Contact Us** - Contact your local BCBSTX Network Management Representative
<https://www.bcbstx.com/provider/contact-us#network-management>

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