



P R O V I D E R B U L L E T I N

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To: All Hospitals and Ambulatory Surgical Centers

**Subject: Federal Deficit Reduction Act of 2005, National Drug
Codes Required for Billing Procedure Codes on
Institutional Outpatient Claims**

Overview

The Federal Deficit Reduction Act of 2005 mandates that all State Medicaid Programs, including Indiana Health Coverage Programs (IHCP) require the submission of National Drug Codes (NDCs) on claims submitted with certain procedure codes for physician-administered drugs. This mandate affects all providers who submit claims for procedure-coded drugs both electronically and on paper. Because the State may pay up to the 20 percent Medicare B co-payment for dual-eligible individuals, the NDC is also required on Medicare crossover claims for all applicable procedure codes.

As referenced in provider bulletin *BT200713*, this requirement was implemented on August 1, 2007, for Professional claims submitted via the CMS-1500, Web interChange, and electronic 837P. This bulletin is notification of the requirement for NDC submission on Institutional Outpatient claims to be implemented on January 1, 2008.

While it is expected that providers make all possible efforts to comply, the Office of Medicaid Policy and Planning (OMPP) will seek a federal waiver to temporarily delay the implementation date of this requirement. Further notification will be forthcoming.

Please contact your vendor to make the necessary software changes.

Reimbursement Policy

IHCP is not changing reimbursement policy pertaining to procedure coded physician administered drugs at this time. Claims for such drugs will continue to be priced by using the submitted procedure code and procedure code units. The sole exception is that manually priced "J" and "Q" codes will be priced by using the submitted NDC.

Remittance Advice

The remittance advice (RA) will not display the NDC submitted on the claim. A comprehensive list of edits is listed on page 15 of this bulletin. Providers may contact EDS customer assistance toll-free at 1-800-577-1278, access the Web or utilize the 276/277 transactions to obtain additional information regarding denied claims.

Procedure Codes and Revenue Codes

Claims billed with revenue codes 630 (for compounds only), 634, 635, and 636 along with the following list (Table 1) of procedure codes will require the submission of the product NDC, NDC quantity, and NDC unit of measure (UOM) along with the procedure code and procedure code billing units. On a quarterly basis (January, April, July, and October), or as determined by the OMPP, this list will be reviewed and updated. The following list of procedure codes includes codes reviewed by the Medical Policy Department prior to October 1, 2007, but does not guarantee coverage of a particular procedure code. Please refer to the IHCP Fee Schedule for current procedure code coverage policies: http://www.indianamedicaid.com/ihcp/Publications/MaxFee/fee_schedule.asp.

Table 1 – Procedure Codes

Code	Procedure	Code	Procedure
B4164	Parenteral nutrition solution: carbohydrates (dextrose), 50% or less (500 ml = 1 unit) - homemix	J0130	Injection, abciximab, 10 mg
B4168	Parenteral nutrition solution; amino acid, 3.5% (500 ml = 1 unit) - homemix	J0132	Injection, acetylcysteine, 100 mg
B4172	Parenteral nutrition solution; amino acid, 5.5% through 7% (500 ml = 1 unit) - homemix	J0133	Injection, acyclovir, 5 mg
B4176	Parenteral amino acids 7% through 8.5% (500 ml = 1 unit)	J0135	Injection, adalimumab 20 mg
B4178	Parenteral nutrition solution: amino acid, greater than 8.5% (500 ml = 1 unit) - homemix	J0150	Injection, adenosine for therapeutic use, 6 mg
B4180	Parenteral nutrition solution: carbohydrates (dextrose), greater than 50% (500 ml = 1 unit) - homemix	J0152	Injection, adenosine for diagnostic use, 30 mg
B4185	Parenteral nutrition solution: per 10 grams lipids	J0170	Injection, adrenalin, epinephrine, up to 1 ml ampule
B4189	Parenteral nutrition solution: with electrolytes, 10 to 51 grams of protein - premix	J0190	Injection, biperiden lactate, 5 mg
B4193	Parenteral nutrition solution: with electrolytes, 52 to 73 grams of protein - premix	J0200	Injection, alatrofloxacin mesylate, 100 mg
B4216	Parenteral nutrition; additives (vitamins, elements, heparin, electrolytes) - homemix per day	J0205	Injection, alglucerase, per 10 units
B5000	Parenteral nutrition solution: with electrolytes, renal (amirosyn-rf, nephramine, renamin) - premix	J0207	Injection, amifostine, 500 mg
B5100	Parenteral nutrition solution: with electrolytes, hepatic (freamine hbc, hepatamine) - premix	J0215	Injection, alefacept, 0.5 mg
B5200	Parenteral nutrition solution: with electrolytes, stress (branch chain amino acids) - premix	J0256	Injection, alpha 1-proteinase inhibitor-human, 10 mg
J0120	Injection, tetracycline, up to 250 mg	J0270	Injection, alprostadil, per 1.25 mcg
J0128	Injection, abarelix 10 mg	J0275	Alprostadil urethral suppository
J0129	Injection, abatacept, 10 mg	J0278	Injection, amikacin sulfate, 50 mg

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Code	Procedure	Code	Procedure
J0280	Injection, aminophyllin, up to 250 mg	J0540	Injection, penicillin G benzathine and penicillin G procaine, up to 1,200,000 units
J0282	Injection, amiodarone hydrochloride, 30 mg	J0550	Injection, penicillin G benzathine and penicillin G procaine, up to 2,400,000 units
J0285	Injection, amphotericin B, 50 mg	J0560	Injection, penicillin G benzathine, up to 600,000 units
J0287	Injection, amphotericin B lipid complex, 10 mg	J0570	Injection, penicillin G benzathine, up to 1,200,000 units
J0288	Injection, amphotericin B Chloesteryl Sulfate Complex, 10 mg	J0580	Injection, penicillin G benzathine, up to 2,400,000 units
J0289	Injection, amphotericin B liposome, 10 mg	J0583	Injection, bivalirudin, 1 mg
J0290	Injection, ampicillin sodium, up to 500 mg	J0585	botulinum toxin type A, per unit
J0295	Injection, ampicillin sodium/sulbactam sodium, per 1.5 g	J0587	botulinum toxin type B, per 100 units
J0330	Injection, succinylcholine chloride, up to 20 mg	J0592	Injection buprenorphine hydrochloride, 0.1 mg
J0348	Injection, anidulafungin, 1 mg	J0594	Injection, busulfan, 1 mg
J0350	Injection, anistreplase, per 30 units	J0595	Injection, butorphanol tartrate, 1 mg
J0360	Injection, hydralazine hcl, up to 20 mg	J0600	Injection, edetate calcium disodium, up to 1000 mg
J0364	Injection, apomorphine hcl, 1 mg	J0610	Injection, calcium gluconate, per 10 ml
J0365	Injection, aprotinin, 10,000 kiu	J0620	Injection, calcium glycerophosphate and calcium lactate, per 10 ml
J0380	Injection, metaraminol bitartrate, per 10 mg	J0630	Injection, calcitonin-salmon, up to 400 units
J0390	Injection, chloroquine hcl, up to 250 mg	J0636	Injection, calcitrol, 0.1mcg
J0395	Injection, arbutamine hcl, 1 mg	J0637	Injection, caspofungin acetate, 5 mg.
J0456	Injection, azithromycin, 500 mg	J0640	Injection, leucovorin calcium, per 50 mg
J0460	Injection, atropine sulfate, up to 0.3 mg	J0670	Injection, mepivacaine hcl, per 10 ml
J0470	Injection, dimercaprol, per 100 mg	J0690	Injection, cefazolin sodium, up to 500 mg
J0475	Injection, baclofen, 10 mg	J0692	cefepime hcl for Inject, 500 mg
J0476	Injection, baclofen, 50 mcg for intrathecal trial	J0694	Injection, cefoxitin sodium, 1 gm
J0480	Injection, basiliximab, 20 mg	J0696	Injection, ceftriaxone sodium, per 250 mg (Rocephin)
J0500	Injection, dicyclomine hcl, up to 20 mg	J0697	Injection, sterile cefuroxime sodium, per 750 mg
J0515	Injection, benztropine mesylate, per 1 mg	J0698	cefotaxime sodium, per gram
J0520	Injection, bethanechol chloride, Mytonachol or Urecholine, up to 5 mg,	J0702	Injection, betamethasone acetate and betamethasone sodium phosphate, 3 mg
J0530	Injection, penicillin G benzathine and penicillin G procaine, up to 600,000 units	J0704	Injection, betamethasone sodium phosphate, per 4 mg

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Code	Procedure	Code	Procedure
J0706	Injection, caffeine citrate, 5 mg	J1000	Injection, depo-estradiol cypionate, up to 5 mg
J0710	Injection, cephapirin sodium, up to 1 g	J1020	Injection, methylprednisolone acetate, 20 mg
J0713	Injection, ceftazidime, per 500 mg	J1030	Injection, methylprednisolone acetate, 40 mg
J0715	Injection, ceftizoxime sodium, per 500 mg	J1040	Injection, methylprednisolone acetate, 80 mg
J0720	Injection, chloramphenicol sodium succinate, up to 1 g	J1051	Injection, medroxyprogesterone, 50mg
J0725	Injection, chorionic gonadotropin, per 1,000 USP units	J1055	Injection, medroxyprogesterone acetate for contraceptive use, 150 mg
J0735	Injection, clonidine hydrochloride, 1 mg	J1056	Injection, medroxyprogesterone acetate/estradiol cypionate, 5 mg/25 mg
J0740	Injection, cidofovir, 375 mg	J1060	Injection, testosterone cypionate and estradiol cypionate, up to 1 ml
J0743	Injection, cilastatin sodium imipenem, per 250 mg	J1070	Injection, testosterone cypionate, up to 100 mg
J0744	ciprofloxacin IV infusion, 200 mg	J1080	Injection, testosterone cypionate, 1 ml, 200 mg
J0745	Injection, codeine phosphate, per 30 mg	J1094	Injection, dexamethasone acetate, 1 mg
J0760	Injection, colchicine, per 1 mg	J1100	Injection, dexamethasone sodium phosphate, 1 mg
J0770	Injection, colistimethate sodium, up to 150 mg	J1110	Injection, dihydroergotamine mesylate, per 1 mg
J0780	Injection, prochlorperazine, up to 10 mg	J1160	Injection, digoxin, up to 0.5 mg
J0795	Injection, corticorelin ovine triflutal, 1 mcg	J1162	digoxin immune fab (ovine), per vial
J0800	Injection, corticotropin, up to 40 units	J1165	Injection, phenytoin sodium, per 50 mg
J0835	Injection, cosyntropin, per 0.25 mg	J1170	Injection, hydromorphone, up to 4 mg
J0850	Injection, cytomegalovirus immune globulin intravenous (human), per vial	J1180	Injection, dyphylline, up to 500 mg
J0878	Injection, daptomycin, 1 mg	J1190	Injection, dexrazoxane hydrochloride, per 250 mg
J0881	Injection, darbepoetin alfa, non-esrd, 1 mcg	J1200	Injection, diphenhydramine hcl, up to 50 mg
J0882	Injection, darbepoetin alfa, esrd use, 1 mcg	J1212	Injection, dimethyl sulfoxide (DMSO), 50%, 50 ml
J0885	Injection, epoetin alfa, non-esrd, 1,000 U	J1230	Injection, methadone hcl, up to 10 mg
J0886	Injection, epoetin alfa, esrd, 1,000 U	J1240	Injection, dimenhydrinate, up to 50 mg
J0894	Injection, bicitabine, 1 mg	J1245	Injection, dipyridamole, per, 10 mg
J0895	Injection, deforoxamine mesylate, 500 mg	J1250	Injection, dobutamine hcl, per 250 mg
J0945	Injection, brompheniramine maleate, per 10 mg	J1260	Injection, dolasetron mesylate, 10 mg
J0970	Injection, estradiol valerate, up to 40 mg	J1265	dopamine injection, 40 mg

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Code	Procedure	Code	Procedure
J1270	Injection, doxercalcif, 1 mcg	J1550	Injection, gamma globulin, IM, 10 ml
J1320	Injection, amitriptyline HCL, up to 20 mg	J1565	Injection, respiratory syncytial virus immune globulin, intravenous, 50 mg
J1324	Injection, enfuvirtide, 1 mg	J1566	immune globulin, powder, 500 mg
J1325	Injection, epoprostenol, 0.5 mg	J1567	immune globulin, liquid, 500 mg
J1327	Injection, eptifibatide, 5 mg	J1570	Injection, ganciclovir sodium, 500 mg
J1330	Injection, ergonovine mal, up to 0.2 mg	J1580	Inj., garamycin, gentamicin, up to 80 mg
J1335	Injection, ertapenem sodium, 500 mg	J1595	Injection, glatiramer acetate, 20 mg
J1364	Injection, erythromycin lact, per 500 mg	J1610	Injection, glucagon hcl, per 1 mg
J1380	Injection, estradiol valerate, up to 10 mg	J1626	Injection, granisetron hcl, 100 mcg
J1390	Injection, estradiol valerate, up to 20 mg	J1630	Injection, haloperidol, up to 5 mg
J1410	Injection, estrogen conjugated, per 25 mg	J1631	Injection, haloperidol dece, per 50 mg
J1430	ethanolamine oleate, 100 mg	J1640	Injection, hemin, 1 mg
J1435	Injection, estrone, per 1 mg	J1642	Injection, heparin sodium, (heparin lock flush), per 10 units
J1436	Injection, etidronate disodium, per 300 mg	J1644	Injection, heparin sod, per 1,000 units
J1438	Injection, etanercept, 25 mg	J1645	Injection, dalteparin sodium, per 2500 IU
J1440	Injection, filgrastim (G-CSF), 300 mcg	J1650	Injection, enoxaparin sodium, 10 mg
J1441	Injection, filgrastim (G-CSF), 480 mcg	J1652	Injection, fondaparinux sodium, 0.5 mg
J1450	Injection, fluconazole, 200 mg	J1655	Injection, tinzaparin sodium, 1000 IU
J1451	Injection, fomepizole, 15 mg	J1670	Injection, tetanus immune globulin, human, up to 250 units
J1452	Injection, fomivirsen sodium, intraocular, 1.65 mg	J1675	Injection, histrelin acetate, 10 micrograms
J1455	Injection, foscarnet sodium, 1,000 mg	J1700	Injection, hydrocortisone ace, up to 25 mg
J1457	gallium nitrate, 1 mg	J1710	Injection, hydrocortisone sodium phosphate, up to 50 mg
J1458	Injection, galsulfase, 1 mg	J1720	Injection, hydrocortisone sodium succinate, up to 100 mg
J1460	Injection, gamma globulin, IM, 1 ml	J1730	Injection, diazoxide, up to 300 mg
J1470	Injection, gamma globulin, IM, 2 ml	J1740	Injection, ilbandronate sodium, 1 mg
J1480	Injection, gamma globulin, IM, 3 ml	J1742	Injection, ibutilide fumarate, 1 mg
J1490	Injection, gamma globulin, IM, 4 ml	J1745	Injection, infliximab, 10 mg
J1500	Injection, gamma globulin, IM, 5 ml	J1751	Iron dextran 165 injection, 50 mg
J1510	Injection, gamma globulin, IM, 6 ml	J1752	Iron dextran 267 injection, 50 mg
J1520	Injection, gamma globulin, IM, 7 ml	J1756	Injection, iron sucrose, 1 mg
J1530	Injection, gamma globulin, IM, 8 ml	J1785	Injection, imiglucerase, per unit
J1540	Injection, gamma globulin, IM, 9 ml	J1790	Injection, droperidol, up to 5 mg

Table 1 – Procedure Codes

Code	Procedure	Code	Procedure
J1800	Injection, propranolol hcl, up to 1 mg	J2210	Injection, methylergonovine maleate, up to 0.2 mg
J1810	Injection, droperidol and fentanyl citrate, up to 2 ml ampule	J2248	Injection, micafungin sodium, 1 mg
J1815	Injection, insulin, 5 units	J2250	Injection, midazolam hcl, per 1 mg
J1817	Insulin for administration. through DME (for example an insulin pump), per 50 units	J2260	milrinone lactate, per 5 mg
J1825	Injection, interferon beta 1-a, 33 mcg	J2270	Injection, morphine sulfate, up to 10 mg
J1830	Injection, interferon beta-1b, per 0.25 mg	J2271	Injection, morphine sulfate, 100 mg
J1835	Injection, itraconazole, 50 mg	J2275	Injection, morphine sulfate, (preserv. free, sterile solution), per 10 mg
J1840	Injection, kanamycin sulfate, up to 500 mg	J2278	Injection, ziconotide injection, 1 mcg
J1850	Injection, kanamycin sulfate, up to 75 mg	J2280	Injection, moxifloxacin, 100 mg
J1885	Injection, ketorolac trometh, per 15 mg	J2300	Injection, nalbuphine hcl, per 10 mg
J1890	Injection, cephalothin sodium, up to 1 g	J2310	Injection, naloxone hcl, per 1 mg
J1931	Injection, laronidase, 0.1 mg	J2315	Injection, naltrexone depot Form, 1 mg
J1940	Injection, furosemide, up to 20 mg	J2320	Injection, nandrolone dec, up to 50 mg
J1945	Injection, lepirudin, 50 mg	J2321	Inj., nandrolone decanoate, up to 100 mg
J1950	Injection, leuprolide acetate (for depot suspension), per 3.75 mg	J2322	Injection, nandrolone dec, up to 200 mg
J1955	Injection, levocarnitine, per 1 gm	J2325	nesiritide injection, 0.1 mg
J1956	Injection, levofloxacin, 250 mg	J2353	Injection, octreotide, depot IM 1 mg
J1960	Injection, levorphanol tartrate, up to 2 mg	J2354	Injection, octreotide, non-depot form for subcutaneous or intravenous injection, 25 mcg
J1980	Injection, hyoscyamine sulfate, up to 0.25 mg	J2355	Injection, oprelvekin 5 mg
J1990	Injection, chlorthalidone hcl, up to 100 mg	J2357	Injection, omalizumab, 5 mg
J2001	Injection, lidocaine hcl for intravenous infusion, 10 mg	J2360	Injection, orphenadrine citrate, up to 60 mg
J2010	Injection, lincomycin hcl, up to 300 mg	J2370	Injection, phenylephrine hcl, up to 1 ml
J2020	Injection, linezolid , 200 mg	J2400	Injection, chlorprocaine hcl, per 30 ml
J2060	Injection, lorazepam, 2 mg	J2405	Injection, ondansetron hcl, per 1 mg
J2150	Injection, mannitol, 25% in 50 ml	J2410	Injection, oxymorphone hcl, up to 1 mg
J2170	Injection, mecasermin, 1 mg	J2425	palifermin injection, 50 mcg
J2175	Injection, meperidine hcl, per 100 mg	J2430	Injection, pamidronate disod, per 30 mg
J2180	Injection, meperidine and promethazine hcl, up to 50 mg	J2440	Injection, papaverine hcl, up to 60 mg
J2185	Injection, meropenem, 100 mg	J2460	Injection, oxytetracycline hcl, up to 50 mg

Table 1 – Procedure Codes

Code	Procedure	Code	Procedure
J2469	Injection, palonosetron hcl, 25 mcg	J2780	Injection, ranitidine hydrochloride, 25 mg
J2501	Injection, paricalcitol, 1 mcg	J2783	Injection, rasburicase, 0.5 mg
J2503	pegaptanib sodium injection, 0.3 mg	J2788	Injection, rho immune globuline, human minidose, 50 mcg
J2504	pegademase bovine, 25 IU	J2790	Injection, rho (D) immune globulin, human, full dose, 300 mcg
J2505	Injection, pegfilgrastim, 6 mg	J2792	Injection, rho (D) immune globulin, IV, human, solvent detergent 100 IU
J2510	Injection, penicillin G procaine, aqueous, up to 600,000 units	J2794	risperidone, long acting, 0.5 mg
J2513	pentastarch 10% solution, 100 ml	J2795	Injection, ropivacaine hydrochloride, 1 mg
J2515	Injection, pentobarbital sod, per 50 mg	J2800	Injection, methocarbamol, up to 10 ml
J2540	Injection, penicillin G potassium, up to 600,000 U	J2805	sincalide injection, 5 mcg
J2543	Injection, piperacillin sodium/tazobactam sodium, 1 gm/0.125 gm (1.125 gm)	J2810	Injection, theophylline, per 40 mg
J2545	Injection, pentamidine isethionate, inhalation solution, per 300 mg, administered through a DME	J2820	Injection, sargramostim, 50 mcg
J2550	Injection, promethazine hcl, up to 50 mg	J2850	Inj., secretin synthetic human, 1 mcg
J2560	Injection, phenobarbital sodium, up to 120 mg	J2910	Injection, aurothioglucose, up to 50 mg
J2590	Injection, oxytocin, up to 10 units	J2916	Injection, sodium ferric gluconate complex In sucrose Injection, 12.5 mg
J2597	Injection, desmopressin acetate, per 1 mcg	J2920	Injection, methylprednisolone sodium succinate, up to 40 mg
J2650	Injection, prednisolone acetate, up to 1 ml	J2930	Injection, methylprednisolone sodium succinate, up to 125 mg
J2675	Injection, progesterone, 50 mg	J2940	Injection, somatrem, 1 mg
J2680	Injection, fluphenazine dec, up to 25 mg	J2941	Injection, somatropin, 1 mg
J2690	Injection, procainamide hcl, up to 1 g	J2950	Injection, promazine HCL, up to 25 mg
J2700	Injection, oxacillin sodium, up to 250 mg	J2993	Injection, reteplase, 18.1 mg
J2710	Injection, neostigmine methylsulfate, up to 0.5 mg	J2995	Injection, streptokinase, per 250,000 IU
J2720	Injection, protamine sulfate, per 10 mg	J2997	Injection, alteplase recombinant, 1 mg
J2725	Injection, protirelin, per 250 mcg	J3000	Injection, streptomycin, up to 1 g
J2730	Injection, pralidoxime chloride, up to 1 g	J3010	Injection, fentanyl citrate, 0.1 mg
J2760	Injection, phentolamine mes, up to 5 mg	J3030	Injection, sumatriptan succinate, 6 mg
J2765	Injection, metoclopramide hcl, up to 10 mg	J3070	Injection, pentazocine, 30 mg
J2770	Injection, quinupristin/dalfopristin, 500 mg (150/350)	J3100	Injection, tenecteplase, 50 mg

Table 1 – Procedure Codes

Code	Procedure	Code	Procedure
J3105	Injection, terbutaline sulfate, up to 1 mg	J3400	Inj., triflupromazine hcl, up to 20 mg
J3110	Injection, teriparatide, 10 mcg	J3410	Injection, hydroxyzine hcl, up to 25 mg
J3120	Injection, testosterone enanthate, up to 100 mg	J3411	thiamine hcl, 100 mg
J3130	Injection, testosterone enanthate, up to 200 mg	J3415	Injection, pyridoxine hcl, 100 mg
J3140	Injection, testosterone suspension, up to 50 mg	J3420	Injection, vitamin B-12 cyanocobalamin, up to 1,000 mcg
J3150	Injection, testosterone propionate, up to 100 mg	J3430	Injection., phytonadione (vitamin K), per 1 mg
J3230	Injection, chlorpromazine hcl, up to 50 mg	J3465	Injection, voriconazole, 10 mg
J3240	Injection, thyrotropin alpha, 0.9 mg, provided in 1.1 mg vial	J3470	Injection, hyaluronidase, up to 150 units
J3243	Injection, tigecycline, 1 mg	J3471	ovine, up to 999 USP units, 1 USP unit (hyaluronidase)
J3246	Injection, tirofiban hcl, 0.25 mg	J3472	ovine, 1000 USP units (hyaluronidase)
J3250	Inj., trimethobenzamide hcl, up to 200 mg	J3473	Injection, hyaluronidase, recom, 1 USP
J3260	Injection, tobramycin sulfate, up to 80 mg	J3475	Injection, magnesium sulfate, per 500 mg
J3265	Injection, torsemide, 10 mg/ml	J3480	Injection, potassium chloride, per 2 mEq
J3280	Injection, thiethylperazine maleate, up to 10 mg	J3485	Injection, zidovudine, 10 mg
J3285	treprostinil injection, 1 mg	J3486	Injection, ziprasidone mesylate, 10 mg
J3301	Injection, triamcinolone acetonide, per 10 mg	J3487	Injection, zoledronic acid, 1 mg
J3302	Injection, triamcinolone diac, per 5 mg	J3490	Unclassified drugs
J3303	Injection, triamcinolone hex, per 5 mg	J3520	edetate disodium, per 150 mg
J3305	Injection, trimetrexate gluc, per 25 mg	J3590	Unclassified biologics
J3310	Injection, perphenazine, up to 5 mg	J7030	Infusion, normal saline solution, 1,000 ml
J3315	Injection, triptorelin pamoate, 3.75 mg	J7040	Infusion, normal saline solution, sterile (500 ml = 1 unit)
J3320	Injection, spectinomycin dihydrochloride, up to 2 g	J7042	5% dextrose/normal saline (500 ml = 1 unit)
J3350	Injection, urea, up to 40 g	J7050	Infusion, normal saline solution, 250 ml
J3355	urofollitropin, 75 iu	J7060	5% dextrose/water (500 ml = 1 unit)
J3360	Injection, diazepam, up to 5 mg	J7070	Infusion, D-5-W, 1,000 ml
J3364	Injection, urokinase, 5,000 IU vial	J7100	Infusion, dextran 40, 500 ml
J3365	Injection, IV, urokinase, 250,000 IU vial	J7110	Infusion, dextran 75, 500 ml
J3370	Injection, vancomycin hcl, 500 mg	J7120	Ringer's lactate infusion, up to 1,000 ml
J3396	verteporfin, 0.1 mg	J7130	hypertonic saline solution, 50 or 100 mEq, 20 ml vial

Table 1 – Procedure Codes

Code	Procedure	Code	Procedure
J7187	Injection, Von Willebrand Factor Complex, human, ristocetin cofactor, per IU VWF:RCO	J7509	methylprednisolone, Oral, per 4 mg
J7189	Factor VIIa, 1 mcg	J7510	prednisolone, Oral, per 5 mg
J7190	Factor VIII (anti-hemophilic factor (human), per IU	J7511	lymphocyte immune globulin, antithymocyte globulin, rabbit, Parenteral, 25mg
J7191	Factor VIII (anti-hemophilic factor (porcine)), per IU	J7513	daclizumab, Parenteral, 25 mg
J7192	Factor VIII (anti-hemophilic factor recombinant)), per IU	J7515	cyclosporine, Oral, 25 mg
J7193	Factor IX (antihemophilic factor, purified, non-recombinant), per IU	J7516	cyclosporine, Parenteral, 250 mg
J7194	Factor IX complex, per IU	J7517	mycophenolate mofetil, oral, 250 mg
J7195	Factor IX (antihemophilic factor, recumbinant), per IU	J7520	sirolimus, Oral, 1 mg
J7197	antithrombin III (human), per IU	J7525	tacrolimus, Parenteral, 5 mg
J7198	anti-Inhibitor, per IU	J7599	Immunosuppressive drug, not otherwise classified
J7199	hemophilia clotting factor, not otherwise classified	J7620	ipratro-albuterol non-compounded, 2.5 mg/0.5 mg (3ml)
J7302	levonorgestrel -releasing intrauterine system 52mg	J7644	ipratropium brom inh sol u d, 1 mg
J7303	contraceptive supply, hormone containing vaginal ring, each	J7674	methacholine chloride administered as inhalation solution through a nebulizer, per 1 mg
J7304	contraceptive supply, hormone containing patch, each	J7699	NOC drugs, inhalation solution administered through DME
J7306	levonorgestrel (contraceptive)iImplant system, including implants and supplies	J7799	NOC drugs, other than inhalation drugs, administered through DME
J7308	aminolevulinic acid hcl for topical administration, 20%, single unit dosage form (354 mg)	J8499	Prescription drug, Oral, non-chemotherapeutic, NOS
J7310	ganciclovir, 4.5 mg, long-acting implant	J8501	Oral, aprepitant, 5 mg
J7500	azathioprine, Oral, 50 mg	J8510	busulfan, Oral, 2 mg
J7501	azathioprine, Parenteral, 100 mg	J8521	capecitabine, Oral, 500mg
J7502	cyclosporine, Oral, 100 mg	J8530	cyclophosphamide, Oral, 25mg
J7504	lymphocyte immune globulin, anti-thymocyte globulin, equine, Parenteral, 250 mg	J8540	Oral, dexamethasone, 0.25 mg
J7505	muromonab-CD3 Parenteral, 5 mg	J8560	etoposide, Oral, 50 mg
J7506	prednisone, Oral, per 5 mg	J8600	melphalan, Oral, 2 mg
J7507	tacrolimus, Oral, per 1 mg	J8610	methotrexate, Oral, 2.5 mg

Table 1 – Procedure Codes

Code	Procedure	Code	Procedure
J8650	nabilone, Oral, 1 mg	J9100	cytarabine, 100 mg
J8700	temozolmide, Oral, 5 mg	J9110	cytarabine, 500 mg
J8999	Prescription drug, Oral, chemotherapeutic, NOS	J9120	dactinomycin, 0.5 mg
J9000	doxorubicin hcl, 10 mg	J9130	dacarbazine, 100 mg
J9001	doxorubicin hcl, all lipid forms, 10 mg	J9140	dacarbazine, 200 mg
J9010	alemtuzumab, 10 mg	J9150	daunorubicin hcl, 10 mg
J9015	aldesleukin, per single use vial	J9151	daunorubicin citrate, liposomal formulation, 10 mg
J9017	arsenic trioxide, 1 mg	J9160	denileukin diftitox, 300 mcg
J9020	asparaginase, 10,000 units	J9165	diethylstilbestrol disphosphate, 250 mg
J9025	azacitidine injection, 1 mg	J9170	docetaxel, 20 mg
J9027	clofarabine injection, 1 mg	J9175	Elliotts b solution per ml, 1 ml
J9035	Injection, bevacizumab, 10 mg	J9178	Injection, epirubicin hcl, 2 mg
J9040	bleomycin sulfate, 15 units	J9181	etoposide, 10 mg
J9041	Injection, bortezomib 0.1 mg	J9182	etoposide, 100 mg
J9045	carboplatin, 50 mg	J9185	fludarabine phosphate, 50mg
J9050	carmustine, 100 mg	J9190	flurouracil, 500 mg
J9055	Injection, cetuximab, 10 mg	J9200	floxuridine, 500 mg
J9060	cisplatin, powder or solution, per 10 mg	J9201	gemcitabine hcl , 200 mg
J9062	cisplatin, 50 mg	J9202	goserelin acetate implant, per 3.6 mg
J9065	Injection, cladribine, per 1 mg	J9206	irinotecan, 20 mg
J9070	cyclophosphamide, 100 mg	J9208	ifosfamide, per 1 gm
J9080	cyclophosphamide, 200 mg	J9209	mesna, 200 mg
J9090	cyclophosphamide, 500 mg	J9211	idarubicin hcl, 5 mg
J9091	cyclophosphamide, 1 g	J9212	Injection, interferon alfacon-1, recombinant 1 mcg
J9092	cyclophosphamide, 2 g	J9213	interferon alfa-2A, recombinant, 3 million units
J9093	cyclophosphamide, lyophilized, 100 mg	J9214	interferon alfa-2B, recombinant, 1 million units
J9094	cyclophosphamide, lyophilized, 200 mg	J9215	interferon alfa-N3, (human leukocyte derived), 250,000 IU
J9095	cyclophosphamide, lyophilized, 500 mg	J9216	interferon gamma-1B, 3 million units
J9096	cyclophosphamide, lyophilized, 1 g	J9217	leuprolide acetate (for depot suspension), 7.5 mg
J9097	cyclophosphamide, lyophilized, 2 g	J9218	leuprolide acetate, per 1 mg
J9098	cytarabine liposome, 10 mg	J9219	leuprolide acetate implant, 65 mg

Table 1 – Procedure Codes

Code	Procedure	Code	Procedure
J9225	histrelin implant, 50 mg	J9999	NOC, antineoplastic drug
J9230	mechlorethamine hcl, (nitrogen mustard), 10 mg	Q0164	prochlorperazine maleate, 5 mg, Oral
J9245	Injection, melphalan hcl, 50 mg	Q0165	prochlorperazine maleate, 10 mg, Oral
J9250	methotrexate sodium, 5 mg	Q0166	granisetron hcl, 1 mg, Oral
J9260	methotrexate sodium, 50 mg	Q0167	dronabinol, 2.5mg, Oral
J9261	Injection, nelarabine, 50 mg	Q0168	dronabinol, 5mg, Oral
J9263	Injection, oxaliplatin, 0.5 mg	Q0169	promethazine hcl, 12.5 mg, Oral
J9264	paclitaxel injection, 1 mg	Q0170	promethazine hcl, 25 mg, Oral,
J9265	paclitaxel, 30 mg	Q0171	chlorpromazine hcl, 10 mg, Oral
J9266	pegaspargase, per single dose vial	Q0172	chlorpromazine hcl, 25 mg, Oral
J9268	pentostatin, per 10 mg	Q0173	trimethobenzamide hcl, 250 mg, Oral
J9270	plicamycin, 2.5 mg	Q0174	thiethylperazine maleate, 10 mg, Oral
J9280	mitomycin, 5 mg	Q0175	perphenazine, 4 mg, Oral
J9290	mitomycin, 20 mg	Q0176	perphenazine, 8 mg, Oral
J9291	mitomycin, 40 mg	Q0177	hydroxyzine pamoate, 25 mg, Oral
J9293	Injection, mitoxantrone hcl, per 5 mg	Q0178	hydroxyzine pamoate, 50 mg, Oral
J9300	gemtuzumab ozogamicin, 5 mg	Q0179	ondansetron hcl 8 mg, Oral
J9305	Injection, pemetrexed, 10 mg	Q0180	dolasetron mesylate, 100 mg, Oral
J9310	rituximab, 100 mg	Q0515	Injection, sermorelin acetate, 1 mcg
J9340	thiotepa, 15 mg	Q2004	Irrigation solution for treatment of bladder calculi, for example renacidin, per 500 ML
J9350	topotecan, 4 mg	Q2009	Injection, fosphenytoin, 50 MG
J9355	trastuzumab, 10 mg	Q2017	Injection, teniposide, 50 mg
J9357	valrubicin, Intravesical, 200 mg	Q3025	interferon beta-1A for IM use, 11 mcg
J9360	vinblastine sulfate, 1 mg	Q3026	interferon beta-1A for Sub-Q use, 11 mcg
J9370	vincristine sulfate, 1 mg	Q4079	Injection, natalizumab, 1 mg
J9375	vincristine sulfate, 2 mg	Q4081	Injection, epoetin alfa, 100 units (for ESRD on dialysis)
J9380	vincristine sulfate, 5 mg (Oncovin) IV	Q4087	Injection, immune globulin, (Octagam), IV, non-lyphilized, (for example liquid) 500 mg
J9390	vinorelbine tartrate, per 10 mg	Q4088	Inj., immune globulin, (Gammagard), IV, non-lyphilized, (for example liquid) 500 mg
J9395	Injection, fulvestrant, 25 mg	Q4089	Injection, rho(d) immune globulin (human), (Rhophylac), IV, 100 IU
J9600	porfimer sodium, 75 mg	Q4090	Injection, hepatitis B immune globulin (Hepagam B), IM, 0.5 ml

Table 1 – Procedure Codes

Code	Procedure	Code	Procedure
Q4091	Inj., immune globulin, (Flebogamma), IV, non-lyophilized, (for example liquid) 500 mg	Q4095	Injection, zoledronic acid (Reclast), 1 mg
Q4092	Injection, immune globulin, (Gamunex), IV, non-lyophilized, (for example, liquid), 500 mg	Q9956	Injection, octafluoropropane microspheres, per ml
Q4093	Albuterol, all formulations, administered through dme, concentrated form, per 1 mg (albuterol) or per 0.5 mg (levalbuterol)	Q9957	Injection, perflutren lipid microspheres, per ml
Q4094	Albuterol, all formulations, administered through dme, unit dose, per 1 mg (albuterol) or per 0.5 mg (levalbuterol)	90378	respiratory syncytial virusImmune globulin (RSV-IGIM), for IM use, 50 mg each

Billing Instructions

About the NDC

Each medication listed under Section 510 of the *U.S. Federal Food, Drug, and Cosmetic Act* is assigned a unique 11-digit, three-segment number. This number, known as the National Drug Code (NDC), identifies the labeler or vendor, product, and package size. The first segment, known as the labeler code, is assigned by the Food and Drug Administration (FDA). A labeler is any firm that manufactures, repacks, or distributes a drug product. The second segment, known as the product code, identifies a specific drug, strength, and dosage form of that drug. The third segment, known as the package code, identifies the package size. Additional information regarding NDCs can be accessed at <http://www.fda.gov/cder/ndc/>.

In order to meet the new billing requirement, NDCs listed on a claim must contain 11 digits and must be configured in what is referred to as a '5-4-2' format. The first segment must include five digits, the second segment must include four digits, and the third segment must include two digits. For example, 12345-1234-12 is a correctly configured NDC.

The NDC on the product label might not contain 11 digits if the labeler dropped leading zeros in a segment. For example, the NDC 12345-0678-09 contains leading zeros at the beginning of both the second and third segments. A labeler might drop one or both leading zeros when labeling the product and use the code 12345-678-09, 12345-0678-9 or 12345-678-9. To ensure proper payment of the claim, the appropriate number of zeros must be added at the beginning of *each* segment to ensure that the NDC is shown in the '5-4-2' format. See the example below.

The NDC can be found on the product as demonstrated below:

Table 2 – NDC Configuration

NDC From Label	IHCP Required Format
65293-001-01	65293- 0001 -01
0703-8771-03	00 703-8771-03
00002-1420-1	00002-1420- 01

Note: The NDC on the label is not configured in the '5-4-2' format. In this example, a zero should be placed at the beginning of the second segment of the NDC. Therefore the correct configuration is 65293-0001-01.



Only the NDC as specified on the label of the product that is administered to the member is to be billed to the program. If an NDC requires configuration as explained in this bulletin, the properly configured NDC should be billed. It is not permissible to bill the program with any NDC other than as stated herein. For example, do not pre-program your billing system to automatically utilize a certain NDC for a procedure code that does not accurately reflect the product that was administered to the member.

About the NDC Quantity

The procedure code billing units and NDC quantity do not always have a one-to-one relationship. The NDC quantity is based upon the strength of the drug administered per unit and the designated strength of the procedure code. The NDC quantity billed must reflect the procedure code quantity billed on the claim. See the table below for examples.

Table 3 – Examples of Procedure Code Quantity to NDC Quantity

Procedure Code	Procedure Code Description	Procedure Code Strength or Amount	Procedure Code Quantity Billed	NDC Dose/Volume	NDC Quantity Billed	NDC Unit Qualifier
J9035	Injection, Bevacizumab, 10mg	10mg	1	100mg/4ml	0.4	ML
J2505	Injection, Pegfilgrastim, 6mg	6mg	1	6mg/0.6ml	0.6	ML
J9355	Trastuzumab, 10mg	10mg	1	440mg	0.023	UN
J9265	Paclitaxel 30mg	30mg	1	100mg/16.7ml	5.01	ML
J7030	Infusion, Normal Saline Solution, 1000ml	1000ml	1	1000ml	1000	ML

Reporting NDC Information on the UB-04 Paper Claim Form

The following information was published on the National Uniform Billing Committee (NUBC) website, "Medicaid Drug Rebate Reporting" document.

http://www.nubc.org/public/whatsnew/Medicaid_Drug_Rebate_Reporting.pdf

For complete billing instructions for the UB-04 form, refer to provider bulletin [BT200702](#). Please note, the procedure code billing units, as well as the NDC quantity, are required. To report the NDC on the UB-04 claim form, enter the following information into Form Locator 43, Revenue Description field:

1. Enter the NDC qualifier of N4 in the first 2 positions on the left side of the field.
2. Enter the NDC 11-digit numeric code in the '5-4-2' format. Do not include hyphens.
3. Enter the NDC Unit of Measurement Qualifier.
 - F2 – International Unit
 - GR – Gram
 - ML – Milliliter
 - UN – Unit
4. Enter the NDC Quantity (administered amount) with up to three decimal places such as 1234.567.

The information in the Revenue Description field is entered without delimiters, such as commas or hyphens, and any unused spaces for the quantity are left blank.

The Description Field on the UB-04 is 24 characters in length. An example of the completed information is shown below.

N	4	1	2	3	4	5	6	7	8	9	0	1	U	N	1	2	3	4	.	5	6	7	
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	--

42 REV. CD.	43 DESCRIPTION	44 HCPCS / RATE / HPPS CODE	45 SERV. DATE	46 SERV. UNITS	47 TOTAL CHARGES	48 NON-COVERED CHARGES	49
636	N450242006001ML 0.4	J9035	01/07/08	1	78.95		

837I

Electronic Batch and Institutional Outpatient Medicare Crossover formats have designated fields for the procedure code, procedure code units, NDC, NDC quantity, and unit of measure. Please refer to the Companion Guide for additional information:

http://www.indianamedicaid.com/ihcp/TradingPartner/tp_companion_guides.asp

Compounds – Outpatient/Outpatient Crossover and Professional

When billing compounds, each ingredient within the compound that has a representative procedure code should be billed along with revenue code 630, instead of revenue code 636, on institutional outpatient/outpatient crossover claims. Each procedure code billed requires the submission of the NDC, NDC quantity, and unit of measure.

For special situations where Providers are billing two or more of the same procedure code for the same member on the same date of service, they must submit the claim on the paper UB-04 form through written correspondence for special batching.

EDS Provider Written Correspondence
P.O. Box 7263
Indianapolis, IN 46207-7263

Multiple NDCs – Outpatient/Outpatient Crossover

At times it may be necessary for providers to report multiple NDCs for a single procedure code. For example, if a provider administers 150mg of Synagis, they would most likely use a 50mg vial plus a 100mg vial. These two vials have separate NDCs but one procedure code. For codes that involve billing multiple NDCs for a single procedure code, providers must submit the claim on the paper UB-04 form through written correspondence for special batching.

EDS Provider Written Correspondence
P.O. Box 7263
Indianapolis, IN 46207-7263

Editing and Auditing the NDC

The following edits will be activated as a part of claims processing:

- EOB 0217 – NDC number is missing – An NDC number must be eleven numeric characters. For further information, see the Pharmacy Chapter in your Provider Manual. Please provide and resubmit.
- EOB 0218 – NDC number is not in a valid format – An NDC number can be up to eleven numeric characters. For further information, see the Pharmacy Chapter in your Provider Manual. Please verify and resubmit.
- EOB 0219 – The quantity dispensed or administered information is missing. It should indicate the quantity of the item dispensed as well as the unit of measure (F2, GR, UN or ML). Please provide and resubmit.
- EOB 4003 – Less than effective drugs are not covered under Indiana Health Coverage Program.

Note: Further information of how drugs are determined to be less than effective can be found at the following Web site: http://www.cms.hhs.gov/MedicaidDrugRebateProgram/12_LTEIRSDrugs.asp.

A list of non-covered, less than effective drugs (DESI) can be found at the following Web site: <http://www.cms.hhs.gov/MedicaidDrugRebateProgram/downloads/desi.pdf>

- EOB 4004 – This NDC is not on file. Please verify that the NDC was filed correctly.
- EOB 4007 – Non-covered NDC due to CMS termination. Claims with an NDC that has been terminated by CMS will not be reimbursable.
- EOB 4300 – Invalid NDC to procedure code combination.

- EOB 0810 – NDC Unit Qualifier (unit of measure) is missing.
- EOB 1016 – This manufacturer does not participate in the drug rebate program.

Claims with an NDC from a non-rebating manufacturer will be denied and are not reimbursable.

Note: CMS maintains a list of rebating labelers that can be found at the following Web site:
http://www.cms.hhs.gov/MedicaidDrugRebateProgram/10_DrugComContactInfo.asp. Providers can also contact their wholesaler or drug supplier to determine if products supplied are from CMS rebating labelers.

Contact Information

If you have questions about this bulletin, please contact EDS Customer Assistance at (317) 655-3420 in the Indianapolis local area, or toll-free at 1-800-577-1276.

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