National Drug Code Requirements for Clinician-Administered Drugs Provider Training

Vendor Drug Program
Medicaid and CHIP Division
March 2016
Overview

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- NDC Example
- NDC Format for Submission
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• Deficit Reduction Act of 2005 – Sec. 6002

• Medicaid and the Children with Special Health Care Needs (CSHCN) Services Program may reimburse providers only for clinician-administered drugs and biologicals whose manufacturers participate in the Centers for Medicare & Medicaid Services (CMS) Drug Rebate Program and show as active on the CMS list for the date of service the drug is administered.

• Clinician-administered drugs that do not have a rebate eligible National Drug Code (NDC) are not payable by Texas Medicaid or the CSHCN Services Program.
National Drug Code

• A unique 11 digit, three segment number assigned to drugs by the drug manufacturer.

• Deficit Reduction Act of 2005 (DRA) requires Medicaid agencies to collect NDC numbers on pharmaceuticals.

• All Medicaid fee-for-service, managed care, CSHCN Services Program, and Family Planning providers must submit an NDC for professional or outpatient claims submitted with clinician administered prescription drug procedure codes.

• All drug products administered by a provider in outpatient settings, except for the following:
  • Vaccines,
  • Devices, and
  • Radiopharmaceuticals.
NDC to HCPCS Crosswalk

- Identifies relationships between Healthcare Common Procedure Coding System (HCPCS) codes and NDC.
- Clinician-administered drugs for HCPCS codes listed on the NDC-to-HCPCS Crosswalk must have an appropriate NDC to HCPCS combination for the procedure code to be considered for payment.
NDC to HCPCS Crosswalk

• Published monthly, and as needed, at TxVendorDrug.com/formulary/clinician-administered-drugs.shtml

• Providers who believe that NDCs are missing for a specific HCPCS procedure code should send an email to vdp_cad@hhsc.state.tx.us to request research be performed. Email should include:
  • Procedure code in question
  • Corresponding NDCs that are believed to be missing from crosswalk
  • Dates of service
Provider Types

• Provider types impacted by the NDC requirement include:
  • Primary Care Providers
  • Specialty Care Providers
  • Outpatient Hospital Departments
  • Federally Qualified Health Centers
  • Rural Health Centers
  • All other outpatient providers administering drugs to patients
The NDC is found on the drug container (i.e. vial, bottle, or tube). The NDC submitted to Medicaid must be the actual NDC number on the package or container from which the medication was administered.
NDC Location

• Found on the package or vial from which the medication is administered.

• Could be displayed in a 9 or 10-digit format on the package or vial.
NDC Format for Submission

• Three segments:
  • Labeler: 5-digit code assigned by the Food and Drug Administration (FDA) and identifies the drug manufacturer.
  • Product: 4-digit code assigned by the drug manufacturer and identifies the specific product.
  • Package: 2-digit code assigned by the manufacturer and identifies the package size.
NDC Format

• Correct format for claim submission:
  • xxxxx-xxxx-xx (11 digits, 5-4-2)

• Other formats:
  • xxxx-xxxx-xx (10 digits, 4-4-2)
  • xxxxx-xxx-xx (10 digits, 5-3-2)
  • xxxxx-xxxx-x (10 digits, 5-4-1)

• Conversion:
  • Any NDC not in the 5-4-2 format must be converted prior to submittal with correctly placed zeroes (Ø).
NDC Format

• If NDC is formatted as 4-4-2:
  • 10-digit NDC on package/vial: 0002-7597-01; the Labeler code is missing a zero (Ø).
  • 11-digit conversion: 00002-7597-01; the zero (0) is inserted in front of the labeler code segment.

• If NDC is formatted as 5-3-2:
  • 10-digit NDC on package/vial: 50242-040-62; the Product code is missing a zero (Ø).
  • 11-digit conversion: 50242-0040-62; the zero (0) is inserted in front of the package code segment.

• If NDC is formatted as 5-4-1:
  • 10-digit NDC on package/vial: 50242-0040-1; the Package code is missing a zero (Ø).
  • 11-digit conversion: 50242-0040-01; the zero (0) is inserted in front of the package code segment.
NDC Unit of Measure

- Providers should submit the pharmacy unit of measure in the NDC Unit of Measure field on the claim.
- Providers should use the value in Column J (“NDC Package Measure”) from the Texas NDC-to-HCPCS Crosswalk.
NDC Unit of Measure

- **F2 - International unit**
  - Factor VII- Antihemophilic factors

- **GR - Gram**
  - Solid substances: powders, creams, ointments, etc.

- **ML - Milliliter**
  - Injectable in prepackaged syringe
  - Unit dose liquids

- **UN - Unit**
  - Vials of powder form drug that must be reconstituted
  - Tablets, capsules, suppositories, lozenges, etc.

- **ME - Milligram**
  - Note: Do not use MG for a milligram unit of measure.
NDC Quantity

• Refer to the Crosswalk to convert HCPCS units to NDC units:
  • Review “HCPCS Description”, “NDC Label”, and “NDC Package Measure” columns of NDC-to-HCPCS Crosswalk to calculate the NDC Unit Quantity.
### NDC Claim Example

- **CMS 1500 (top)**

   ![CMS 1500 Form]

   - N4
   - NDC
   - Unit of Measurement Qualifier
   - Quantity
   - HCPCS

- **UB04 CMS 1450 (bottom)**

   ![UB04 CMS 1450 Form]
• Drug example:
  • Drug Name: Adenosine 6 mg/2 ml Syringe
  • HCPCS: J0151
  • HCPCS Description: Injection, adenosine for diagnostic use, 1 mg
  • Amount Administered: 6MG (6 HCPCS units)
  • NDC: 25021-0301-72
  • NDC Unit of Measure: ML
  • NDC Quantity: 2.0
**NDC Claim Examples**

**• UB04 CMS 1450**

<table>
<thead>
<tr>
<th>Block No.</th>
<th>Description</th>
<th>Guidelines</th>
</tr>
</thead>
<tbody>
<tr>
<td>43</td>
<td>Revenue codes and description</td>
<td>Should include the following elements in the following order:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Enter &quot;N4&quot; (NDC qualifier)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• The 11-digit NDC number (number on the package or vial from which the</td>
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<tr>
<td></td>
<td></td>
<td>medication was administered. Do not enter hyphens or spaces within this</td>
</tr>
<tr>
<td></td>
<td></td>
<td>number).</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• The NDC Unit of Measurement code and</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• The NDC Unit Quantity with a floating decimal for fractional units</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(limited to 3 digits)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Example: N425021030172ML2.0</td>
</tr>
</tbody>
</table>
## NDC Claim Examples

- **CMS 1500**

<table>
<thead>
<tr>
<th>Block No.</th>
<th>Description</th>
<th>Guidelines</th>
</tr>
</thead>
<tbody>
<tr>
<td>24A</td>
<td>Dates of service</td>
<td>In the shaded area above the Dates of Service, enter the following elements in the following order: • Enter &quot;N4&quot; (NDC qualifier) • The 11-digit NDC number from the package. Do not enter hyphens or spaces within this number. Example: N425021030172</td>
</tr>
<tr>
<td>24D</td>
<td>Procedures, services, or supplies</td>
<td>In the shaded area above the HCPCS number, enter a 1- through 12-digit NDC Unit Quantity with a floating decimal for fractional units (limited to 3 digits). Example: 2.0</td>
</tr>
<tr>
<td>24G</td>
<td>Days or units</td>
<td>In the shaded area, enter the NDC Unit of Measurement code. Example: ML</td>
</tr>
</tbody>
</table>
NDC Claim Examples

• CMS 1500 Single line example:
  • 4mg Zofran IV
  • NDC 00173-0442-02 (Zofran 2mg/ml); bill ML2
  • J2405 (ondansetron hydrochloride, per 1mg) bill 4 units
### NDC Claim Examples

#### CMS 1500 Multi-line example:

- **125 mg Aranesp (darbepoetin alfa)**
- **Line one:**
  - NDC 55513-0057-04 (Aranesp 25mg/0.42 ML); bill ML0.42
  - J0881 (Darbepoetin Alfa NON-ERSD, 1meg); bill 25 units
- **Line two:**
  - NDC 55513-0025-04 (Aranesp 100mg/0.5 ML); bill ML0.5
  - J0881 (Darbepoetin Alfa NON-ERSD, 1meg); bill 100 units
## NDC Claim Examples

### 2017 Claim Form

<table>
<thead>
<tr>
<th>Block No.</th>
<th>Description</th>
<th>Guidelines</th>
</tr>
</thead>
</table>
| 32A       | Dates of service | In the upper shaded area, enter the following elements in the following order:  
  - Enter "N4" (NDC qualifier)  
  - The 11-digit NDC number from the package. Do not enter hyphens or spaces within this number.  
  Example: N425021030172 |
| 32D       | Procedures, services, or supplies CPT/HCPCS Modifier | Optional: In the shaded area, enter a 1- through 12-digit NDC Unit Quantity. A decimal point must be used for fractions of units.  
Example: 2.0 |
| 32F       | Days or units | Optional: In the shaded area, enter the NDC Unit of Measurement code.  
Example: ML |
### Electronic 837P Claims

<table>
<thead>
<tr>
<th>Field Description</th>
<th>Loop</th>
<th>Segment</th>
<th>Entered Value</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>National Drug Code</strong>: The national drug identification number assigned by the Federal Drug Administration.</td>
<td>2410</td>
<td>LIN03</td>
<td>25021030172</td>
</tr>
<tr>
<td>National Drug Unit: The dispensing <strong>NDC Unit Quantity</strong> (based upon the unit of measure as defined by the National Drug Code).</td>
<td>2410</td>
<td>CTP04</td>
<td>2.0</td>
</tr>
<tr>
<td>National Drug Unit of Measurement: The <strong>NDC Unit of Measurement</strong> as defined by the National Drug Code.</td>
<td>2410</td>
<td>CTP05-1</td>
<td>ML</td>
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</tbody>
</table>
## NDC Claim Examples

### Electronic 837I Claims

<table>
<thead>
<tr>
<th>Field Description</th>
<th>Loop</th>
<th>Segment</th>
<th>Entered Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Drug Unit: The dispensing <strong>NDC Unit Quantity</strong> (based upon the unit of measure as defined by the National Drug Code).</td>
<td>2410</td>
<td>CTP&gt;C001-01</td>
<td>2.0</td>
</tr>
<tr>
<td><strong>National Drug Code</strong> : The national drug identification number assigned by the Federal Drug Administration.</td>
<td>2410</td>
<td>LIN03</td>
<td>25021030172</td>
</tr>
<tr>
<td>National Drug Unit of Measurement: The <strong>NDC Unit of Measurement</strong> as defined by the National Drug Code.</td>
<td>2410</td>
<td>CTP&gt;C001-05&gt;01</td>
<td>ML</td>
</tr>
</tbody>
</table>
Dosages

• Multi-dose vials can be used for more than one patient.
  • Provider must bill the units administered to the patient.

• Single-dose vials can only be used for one patient.
  • Provider must bill Medicaid only for the units administered.

• Medicaid does not reimburse for drug waste for single or multi-use vials.
### Example 1:

**Drug Name:** ARTISS FROZEN 4 ML SYRINGE  
**HCPCS:** C9250  
**HCPCS Description:** Human plasma fibrin sealant, vapor-heated, solvent-detergent (artiss), 2ml  
**Amount Administered:** 2ML (1 HCPCS unit)  
**NDC:** 00944-8503-04  
**NDC Unit of Measure:** ML  
**NDC Quantity:** 4.0

<table>
<thead>
<tr>
<th>Source</th>
<th>Claim</th>
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<th>Claim</th>
<th>Claim</th>
</tr>
</thead>
<tbody>
<tr>
<td>Field</td>
<td>HCPCS Quantity</td>
<td>HCPCS Description</td>
<td>NDC Label Strength/Volume</td>
<td>Number of Items in NDC Package</td>
<td>NDC Package Measure</td>
<td>NDC Quantity</td>
<td>NDC Unit of Measurement</td>
<td>National Drug Code</td>
</tr>
<tr>
<td>Value</td>
<td>1</td>
<td>Human plasma fibrin sealant, vapor-heated, solvent-detergent (artiss), 2ml</td>
<td>ARTISS FROZEN 4 ML SYRINGE</td>
<td>4</td>
<td>ML</td>
<td>2</td>
<td>ML</td>
<td>00944850304</td>
</tr>
<tr>
<td>Explanation</td>
<td>1 unit x 2ML = 2ML</td>
<td>The NDC Package Measure is ML, therefore we need to convert the HCPCS quantity (1) into ML. The HCPCS description is for 2ML of Artiss. Since the NDC Quantity should reflect the quantity administered (2ML), not the total quantity in the package (4ML). The NDC Quantity should be only the 2 ML that were administered.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Example 2:

**Drug Name:** GAMUNEX-C 1 GRAM/10 ML VIAL  
**HCPCS:** J1561  
**HCPCS Description:** Injection, immune globulin, (gamunex-c/gammaked), non-lyophilized (e.g. liq...  
**Amount Administered:** 500MG (5 HCPCS unit)  
**NDC:** 13533-0800-12  
**NDC Unit of Measure:** ML  
**NDC Quantity:** 5.0

<table>
<thead>
<tr>
<th>Source</th>
<th>Claim</th>
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<th>Claim</th>
<th>Claim</th>
</tr>
</thead>
<tbody>
<tr>
<td>Field</td>
<td></td>
<td>HCPCS Quantity</td>
<td>HCPCS Description</td>
<td>NDC Label Strength/Volume</td>
<td>Number of Items in NDC Package</td>
<td>NDC Package Measure</td>
<td>NDC Quantity</td>
</tr>
<tr>
<td>Value</td>
<td>5</td>
<td>Immune globulin (SClg), human, for use in subcutaneous infusions, 100 mg, each</td>
<td>GAMUNEX-C 1 GRAM/10 ML VIAL</td>
<td>10</td>
<td>ML</td>
<td>5</td>
<td>ML</td>
</tr>
</tbody>
</table>
| Explanation | 5 unit x 100MG = 500MG | The NDC is for 1000MG/10ML or 100MG=1ML.  
The NDC Package Measure is ML, therefore we need to convert the HCPCS quantity (5) into ML. The HCPCS description is for 100MG of Gamunex. Since the NDC Quantity should reflect the quantity administered (500MG), not the total quantity in the package (10ML). The NDC Quantity should be only the 5 ML that were administered.  
500MG administered is ½ of the strength from "NDC Label." Therefore, you should claim ½ (or 0.5) of the 10ML volume. |
Example 3:

**Drug Name**: EPINEPHRINE 1 MG/ML VIAL  
**HCPCS**: J0171  
**HCPCS Description**: Injection, adrenalin, epinephrine, 0.1 mg  
**Amount Administered**: 0.5MG (5 HCPCS unit)  
**NDC**: 00517-1130-05  
**NDC Unit of Measure**: ML  
**NDC Quantity**: 0.5

<table>
<thead>
<tr>
<th>Source</th>
<th>Claim</th>
<th>Crosswalk</th>
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<th>Claim</th>
<th>Claim</th>
<th>Claim</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Field</strong></td>
<td><strong>HCPCS Quantity</strong></td>
<td><strong>HCPCS Description</strong></td>
<td><strong>NDC Label Strength/Volume</strong></td>
<td><strong>Number of Items in NDC Package</strong></td>
<td><strong>NDC Package Measure</strong></td>
<td><strong>NDC Quantity</strong></td>
<td><strong>NDC Unit of Measurement</strong></td>
<td><strong>National Drug Code</strong></td>
</tr>
<tr>
<td><strong>Value</strong></td>
<td>5</td>
<td>Injection, adrenalin, epinephrine, 0.1 MG</td>
<td>ADRENALIN CL 1 MG/ML VIAL</td>
<td>30</td>
<td>ML</td>
<td>0.5</td>
<td>ML</td>
<td>00517113005</td>
</tr>
</tbody>
</table>
| **Explanation** | 5 unit x 0.1MG = 0.5MG | The NDC Package Measure is ML, therefore we need to convert the HCPCS quantity (5) into ML. The HCPCS description is for 0.1MG of Adrenalin. Since the NDC Quantity should reflect the quantity administered (0.5MG), not the total quantity in the package (1ML). The NDC Quantity should only be the 0.5 ML that was administered.  
0.5MG claimed is ½ (0.5 / 1 = 0.5) of the strength from "NDC Label." Therefore, you should claim ½ (or 0.5) of the 1ML volume. |
**Example 4:**

**Drug Name:** DEXTROSE 5%-LR IV SOLUTION  
**HCPCS:** J7120  
**HCPCS Description:** Ringers lactate infusion, up to 1000 cc  
**Amount Administered:** 2500cc (2.5 HCPCS unit)  
**NDC:** 00264-7751-10  
**NDC Unit of Measure:** ML  
**NDC Quantity:** 2500

Clinician administered 2500cc (or 5 bags) of DEXTROSE, NDC 00264-7751-10. The "HCPCS Description" is for 1000cc. The "HCPCS Quantity" = 2.5 (2500cc/ 1000cc = 2.5 HCPCS quantity.) Since 1cc = 1ML, then the NDC Quantity is 2500.

In this case, because the clinician used smaller bags of DEXTROSE, they would need to use 2 bags to equal 1 HCPCS unit.

<table>
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<tr>
<th>Source</th>
<th>Claim</th>
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<th>Claim</th>
<th>Claim</th>
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<tbody>
<tr>
<td>Field</td>
<td>HCPCS Quantity</td>
<td>HCPCS Description</td>
<td>NDC Label Strength/Volume</td>
<td>Number of Items in NDC Package</td>
<td>NDC Package Measure</td>
<td>NDC Quantity</td>
<td>NDC Unit of Measurement</td>
<td>National Drug Code</td>
</tr>
<tr>
<td>Value</td>
<td>2.5</td>
<td>Ringers lactate infusion, up to 1000 cc</td>
<td>DEXTROSE 5%-LR IV SOLUTION</td>
<td>500</td>
<td>ML</td>
<td>2500</td>
<td>ML</td>
<td>00264775110</td>
</tr>
<tr>
<td>Explanation</td>
<td>2.5 unit x 1000 = 2500cc</td>
<td>The NDC Package Measure is ML, therefore we need to convert the HCPCS quantity (2.5) into ML. The HCPCS description is for 1000cc of Dextrose. Since the NDC Quantity should reflect the quantity administered (2500cc) and 1cc = 1ML, claim the number of ML administered.</td>
<td></td>
<td></td>
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<td></td>
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</tbody>
</table>
Example 5:

**Drug Name:** ROCEPHIN 500 MG VIAL  
**HCPCS:** J0696  
**HCPCS Description:** Injection, ceftriaxone sodium, per 250 mg  
**Amount Administered:** 1GR  
**NDC:** 00004-1963-02  
**NDC Unit of Measure:** UN  
**NDC Quantity:** 1

A patient received 1 gram of Rocephin IM in the physician’s office. The NDC of the product used was 00004-1963-02, which is Rocephin 500-mg vial in a powder form that you needed to reconstitute before the injection. You would bill J0696 (ceftriaxone sodium, per 250 mg) with four HCPCS units. Because this drug comes in powder form, you would bill the NDC units as two units (also called two each) (UN2).

<table>
<thead>
<tr>
<th>Source</th>
<th>Claim</th>
<th>Crosswalk</th>
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<th>Claim</th>
<th>Claim</th>
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</thead>
<tbody>
<tr>
<td>Field</td>
<td>HCPCS Quantity</td>
<td>HCPCS Description</td>
<td>NDC Label Strength/Volume</td>
<td>Number of Items in NDC Package</td>
<td>NDC Package Measure</td>
<td>NDC Quantity</td>
<td>NDC Unit of Measurement</td>
<td>National Drug Code</td>
</tr>
<tr>
<td>Value</td>
<td>4</td>
<td>Injection, ceftriaxone sodium, per 250 mg</td>
<td>ROCEPHIN 500 MG VIAL</td>
<td>1 VIAL</td>
<td>UN</td>
<td>2</td>
<td>UN</td>
<td>00004196302</td>
</tr>
<tr>
<td>Explanation</td>
<td>250x4=1000mg</td>
<td>The NDC Package Measure is UN (or 1 VIAL), therefore we need to convert the HCPCS quantity (4) for the administered 1 gram of Rocephin. The HCPCS description is for 250 mg of Rocephin. Since the NDC Quantity should reflect the quantity administered (1000 mg) and 1000 mg = 1GR. The NDC Quantity administered was 2 UN (2 Vials which contain 500 MG each).</td>
<td></td>
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</tbody>
</table>
Example 6:

**Drug Name**: ZOFRAN 2 MG/ML VIAL  
**HCPCS**: J2405  
**HCPCS Description**: Injection, ondansetron hydrochloride, per 1 mg  
**Amount Administered**: 4MG  
**NDC**: 00173-0442-00  
**NDC Unit of Measure**: ML  
**NDC Quantity**: 2

A patient received 4 mg of Zofran in the physician’s office. The NDC you used was 00173-0442-00, which is Zofran 2 mg/ml in solution form. There are 2 milliliters per vial. You would bill J2405 (ondansetron hydrochloride, per 1 mg) with four HCPCS units. Because this drug comes in a liquid form, you would bill the NDC units as 2 milliliters (ML2).

<table>
<thead>
<tr>
<th>Source</th>
<th>Claim</th>
<th>Crosswalk</th>
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<tbody>
<tr>
<td>Field</td>
<td><strong>HCPCS Quantity</strong></td>
<td><strong>HCPCS Description</strong></td>
<td><strong>NDC Label Strength/Volume</strong></td>
<td><strong>Number of Items in NDC Package</strong></td>
<td><strong>NDC Package Measure</strong></td>
<td><strong>NDC Quantity</strong></td>
<td><strong>NDC Unit of Measurement</strong></td>
<td><strong>National Drug Code</strong></td>
</tr>
<tr>
<td>Value</td>
<td>4</td>
<td>Injection, ondansetron hydrochloride, per 1 mg</td>
<td>ZOFRAN 2 MG/ML VIAL</td>
<td>20</td>
<td>ML</td>
<td>2</td>
<td>ML</td>
<td>00173044200</td>
</tr>
<tr>
<td>Explanation</td>
<td>4 x 1 = 4mg</td>
<td>The NDC Package Measure is ML, therefore we need to convert the HCPCS quantity (4) into ML. The HCPCS description is for 1mg of Zofran. Since the NDC Quantity should reflect the quantity administered (4mg) and 4MG = 2ML, claim the number of ML administered.</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
Resources

• NDC-to-HCPCS Crosswalk
  • TxVendorDrug.com/formulary/clinician-administered-drugs.shtml

• TMHP National Drug Code information
  • tmhp.com/Pages/Topics/NDC.aspx

• Provider contact for NDC/HCPCS Crosswalk questions:
  • vdp_cad@hhsc.state.tx.us