

Payment Policy | Claim Filing Requirements For Drugs

EFFECTIVE DATE: 08/01/2011

POLICY LAST UPDATED: 02/20/2018



**Blue Cross
Blue Shield**
of Rhode Island

OVERVIEW

This policy documents claim filing requirements for drugs.

PRIOR AUTHORIZATION

Not applicable.

POLICY STATEMENT

Effective for dates of all services, all BCBSRI participating providers, except home infusion and specialty pharmacy, are required to file drug claims with the correct HCPCS code for the drug. Pricing will be determined solely based on the HCPCS code filed. Home infusion providers and specialty pharmacy should continue to file as they do today.

If there is no valid HCPCS code, the appropriate not otherwise classified (unlisted) drug code (J3490, J3530, J3535, J3590, J7199, J7599, J7699, J7799, J8498, J8499, J8999, J9999, Q0181, Q4082) should be submitted with the 11-digit NDC number. Unlisted codes should only be used when there is not a valid HCPCS code for the drug. NDC codes will not be considered for payment except when submitted with an unlisted HCPCS code. Units for the HCPCS codes must be billed using the units of the total dosage administered to the patient.

Example: Leuprolide Acetate, Per 7.5 MG

J-Code: J9217

Unit of Measure: 7.5 MG

Dose Administered: 22.5 MG

Units Billed 3

1. Drug claims filed with a HCPCS code alone, will process and price as they currently do. Pricing will be based on the HCPCS codes.

2. Drug claims filed with a NDC code alone will be denied back to the provider as a filing error.

3. Drug claims filed with both a valid HCPCS code (not unlisted - J3490, J3530, J3535, J3590, J7199, J7599, J7699, J7799, J8498, J8499, J8999, J9999, Q0181, Q4082) AND an NDC code will be priced using the HCPCS code.

4. Drug claims for drugs without a more specific HCPCS code filed with an unlisted HCPCS code and an NDC will price using the NDC. This is the only instance where NDC units should be used. These scenarios are limited and should only be filed when the NDC has no corresponding HCPCS code.

Note: Claims filed under this scenario are subject to audit and subsequent recovery of payment if it is determined that the unlisted HCPCS code was used inappropriately.

5. Claims filed with an unlisted HCPCS codes and no NDC code will be denied back to the provider as a filing error.

6. Effective 1/1/2018, Home Infusion providers can file HCPCS codes and will be reimbursed based on standard ASP pricing model from CMS. Home Infusion providers can also file for specific negotiated NDC's.

Payment made based on a claim filed with an NDC (except for home infusion and specialty pharmacy) or without proper use of an unlisted HCPCS, will be subject to recovery by Blue Cross Blue Shield of RI.

MEDICAL CRITERIA

Not applicable.

BACKGROUND

Not applicable.

COVERAGE

Not applicable.

CODING

Not applicable.

RELATED POLICIES

Not applicable.

PUBLISHED

Not applicable.

REFERENCES

Not applicable.

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