

NDC FAQs

What is NDC?

The National Drug Code (NDC) is the 11-digit code from the package of the dispensed drug.

When is it required?

Effective July 1, 2010, Medicaid will require certain provider types that bill claims for physician-administered drugs billed with HCPCS codes to have the corresponding NDC number on the claim forms.

My claim is a crossover; is the NDC still required?

Yes, this requirement also applies to Medicare/Medicaid crossover claims.

Are all drugs reimbursable?

No, Florida Medicaid only reimburses physician-administered drugs for which the manufacturer has a federal rebate agreement, per Section 1927 of the Social Security Act [42 U.S.C. 1396r-8]. Only drugs that have a rebate are considered for Medicaid reimbursement; all others are not reimbursed.

How can I verify if a manufacturer has an acceptable rebate?

The current list of manufacturers with drug rebate agreements is available on AHCA's Web site at <http://www.ahca.myflorida.com/>. At the top of the page, select **Site Menu**, then **Division of Medicaid**. Next, scroll down to the section titled "What is Occurring in Medicaid?" and select **Current List of Drug Rebate Manufacturers**.

Beside the NDC, do I need to report any other drug-related information on my claim form?

According to policy in the UB 04 and CMS 1500 Medicaid Provider Reimbursement Handbooks, providers who bill HCPCS codes for drugs must enter identifier N4, the eleven-digit NDC code, Unit Qualifier, and number of units from the package of the dispensed drug. Both handbooks can be found online at <http://mymedicaid-florida.com>. Select **Public Information for Providers**, then **Provider Support**, and then **Provider Handbooks**.

I bill using the Florida Medicaid Web Portal. Where can I find instructions on how to enter NDCs?

All training for Direct Data Entry (DDE) of Web Portal claims can be found online at <http://mymedicaid-florida.com>. Select **Public Information for Providers**, then **Provider Support**, and then **Training**. When submitting claims via DDE, providers who bill HCPCS codes for drugs are not required to enter the N4 identifier or unit qualifier on the DDE claim.

The NDC on the drug my facility administered is not eleven digits, what should I do?

For an NDC that is less than 11 digits, add the missing digits as follows:

For a 4-4-2 digit number, add a 0 to the beginning

For a 5-3-2 digit number, add a 0 as the sixth digit.

For a 5-4-1 digit number, add a 0 as the tenth digit.

Which revenue codes require an NDC?

Revenue codes that require an NDC are: 631, 632, 633, 634, 635, 636 and 637.

I still have additional questions. How do I receive assistance?

Please feel free to outreach to your local HP Field Representative for billing questions or to your Local Medicaid Area Office for policy questions.