

Provider Administered Drugs-National Drug Code (NDC)

Reimbursement Policy ID: RPC.0117.SCEX

Recent review date: 2/2025

Next review date: 1/2026

First Choice Next reimbursement policies and their resulting edits are based on guidelines from established industry sources, such as the Centers for Medicare and Medicaid Services (CMS), the American Medical Association (AMA), state and federal regulatory agencies, and medical specialty professional societies. Reimbursement policies are intended as a general reference and do not constitute a contract or other guarantee of payment. First Choice Next may use reasonable discretion in interpreting and applying its policies to services provided in a particular case and may modify its policies at any time.

In making claim payment determinations, the health plan also uses coding terminology and methodologies based on accepted industry standards, including Current Procedural Terminology (CPT®); the Healthcare Common Procedure Coding System (HCPCS); and the International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM), and other relevant sources. Other factors that may affect payment include medical record documentation, legislative or regulatory mandates, a provider's contract, a member's eligibility in receiving covered services, submission of clean claims, other health plan policies, and other relevant factors. These factors may supplement, modify, or in some cases supersede reimbursement policies.

This reimbursement policy applies to all health care services billed on a CMS-1500 form or its electronic equivalent, or when billed on a UB-04 form or its electronic equivalent.

Policy Overview

This policy addresses the mandatory National Drug Code (NDC) requirements for both professional and outpatient facility drug claims when submitted for reimbursement. National Drug Code numbers are industry standard identifiers for medications; the NDC number identifies the manufacturer, drug name, dosage, strength, package size and quantity.

Exceptions

N/A

Reimbursement Guidelines

First Choice Next requires a valid NDC number, NDC unit of measure and NDC units dispensed for the drug administered for reimbursement on professional and facility claims. If the NDC number is missing, invalid, or does not match the HCPCS or CPT code submitted, the claim will not be eligible for reimbursement. Note the NDC must also be active for the date of service.

NDC Unit of Measure (UOM)

Policy Name 1 of 3

UOM	Description	
GR	Gram	
ML	Milliliter	
F2	International unit	
UN	Unit	

The units submitted for a drug should not exceed the package maximum units, based on the NDC number or in increments associated with the drug package. Any amount that surpasses the maximum units on the package will not be eligible for reimbursement.

Please refer to First Choice Next website and/or provider manual for NDC billing instructions.

Definitions

National Drug Code (NDC)

The National Drug Code (NDC) is a unique 10- or 11-digit number that identifies a drug's labeler, product, and package size. It's used to report drugs to the FDA and is required for all prescription and non-prescription medications in the United States.

Edit Sources

- I. Current Procedural Terminology (CPT) and associated publications and services.
- II. International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10).
- III. Healthcare Common Procedure Coding System (HCPCS).
- IV. Centers for Medicare and Medicaid Services (CMS). https://www.fda.gov/drugs/drug-approvals-and-databases/national-drug-code-directory
- V. The National Correct Coding Initiative (NCCI).
- VI. https://www.ecfr.gov/current/title-21/chapter-I/subchapter-C/part-207#207.33
- VII. CMS Fee Schedule(s).
- VIII. https://www.fda.gov/drugs/drug-approvals-and-databases/national-drug-code-directory

Attachments

N/A

Associated Policies

N/A

Policy History

02/2025	Reimbursement Policy Committee Approval
04/2024	Revised preamble
08/2023	Removal of policy implemented by First Choice Next from Policy History section
01/2023	Template Revised
	Revised preamble

Policy Name 2 of 3

• F	Removal of Applicable Claim Types table
	Coding section renamed to Reimbursement Guidelines
• A	added Associated Policies section

Policy Name 3 of 3