Explanation of reason codes and descriptions for the NDC denial codes



New	NDC edits codes e	effective Septen	nber 201	9				
STATE EDITS	01 Denial Codes (Claims reviewed by examiners)	XC Denial Codes (Batch process)	EOB Codes	Short Description	Long Description	Remark	Print on EOB	CARC / RARC
551	185	189	163	NDC probably obsolete for date of service	NDC on this claim is no longer valid for the dates of service	Deny claim	Υ	16/M119
300	182	184	170	Maximum dosage exceeded	Validate claims based on the maximum daily dosage exceeded	Deny claim	Y	222/ N362
215	18A	18B	NDC - Healthcare Common Procedure Coding System (HCPCS) mismatch		NDC – HCPCS codes combination is invalid	Deny claim	Y	16/M119
Existi	ng NDC edit imple	emented in Augi	ust 2018					
STATE EDITS	01 Denial Codes (Claims reviewed by examiners)	XC Denial Codes (Batch process)	EOB Codes	Short Description	Long Description	Remark	Print on EOB	CARC / RARC
214	171	141	154	NDC Code is invalid/ no WAC price in First Data Bank (FDB)	NDC number is invalid for date of service or WAC price is not available in FDB	Deny claim	Y	16/M119
317	172	145	155	NDC quantity is invalid	NDC quantity has invalid metric quantity	Deny claim	Υ	16/M119
322	174	150	157	NDC unit of measurement is invalid	Must have a valid unit of measure gram (GR), milliliter (ML), units (UN), International Units (F2) and should be valid for the NDC code	Deny claim	Y	16/M119
330	175	I51	158	NDC quantity exceeded	Quantity should be valid and calculated allowed amount (quantity X price) should not be more than two times of the billed amount	Deny claim	Y	222/N362
328	176	152	159	Valid revenue codes are required for this NDC	Outpatient drug claims are required revenue codes 631 through 637 or 25x	Deny claim	Y	16/M50
544	177	153	161	NDC is in Drug Efficacy Study Implementation (DESI) file	NDC is not payable and invalid in Federal DESI file for the date of service	Deny claim	Y	16/M119
323	NA	NA	167	Warning NDC not in Maximum Dosage File	Warning NDC is not in Maximum Daily Dosage File for the claims date of service	Warning		

NDC edit impl	emente	ed Augu:	st 2018	– Exa	mple	es: EC)IT – 2	14					
DENIAL COD (01 CLAIMS – WO BY EXAMINER	RKED	Denial (Batch Pi		EO Cod		Enco	ate unter Code	Sł	nort	Description	1	Long l	Description
171		141	l	154	<u> </u>	2	14	NDO		e is invalid/no W orice in FDB	AC NE	NDC number is invalid for date of ser WAC price is not available in FDE	
Claim	exampl	e: The clai	im/encou	ınter w	as reje	ected b	oecause	the N	IDC c	ode 682560	79701 i	is not a valid	NDC code.
DOS FROM DT	DO	S to Dt	Proced	lure	ure Proc Units		NDC			NDC Units		Charge Amount	Paid Amount
4/18/2018	4/1	8/2018	J246	19	5	5	6825	607970	79701 5			\$500.00	\$231.05
EDIT – 317													
DENIAL COI (01 CLAIMS – WO BY EXAMINEI	ORKED		al Code Process		OB ode		State ncoun dit Co	ter		Short Description	n	Long Description	
172			145		155		317		N	IDC quantity is i	nvalid	NDC quantity h	as invalid metric quantity.
Claim example: The claim/encounter was rejected because the NDC units billed are invalid. The provider billed the NDC code in place of the NDC units.													
DOS FROM DT	DO:	S to Dt	Proced	lure	Ira		Proc Jnits N			NDC Unit	(C	Charge Amount	Paid Amount
10/24/2017	10/2	24/2017	J705	0	1		0026	418003	32	264180032	264180032		\$3.21
EDIT – 322													
DENIAL COD (01 CLAIMS – WO BY EXAMINER	RKED	Denial (Batch Pr		EOB Code		State ncour dit Co	nter		D	Short Description			Long Description
174		150		157		322		NDC (unit o	f measurement	is invalid		valid UOM F2, GR, ML, UN be valid for the NDC code.
Claim examp	le: The o	claim/enco	unter wa	s rejec	ted be	cause	the ND	CUON	∕l wa	s billed as M	L, but it s	should have b	peen billed as UN.
DOS FROM DT	OS to D	ot Proce	dure	Proc Units		ND	С		DC nits	NDC UO	IVI	Charge Amount	Paid Amount
1/8/2018	1/8/2018	J17	45	50	5	789400	03001		1	ML	9	37,854.00	\$5,710.35
EDIT – 330													
DENIAL CODE (01 CLAIMS - WORKED BY EXAMINERS) Denial Code (Batch Process) Denial Code (Batch Process) Code State Encounter Edit Code Edit Code Short Description Description													
175	NDC quantity Amount (quantity X price) should not be more two times the billed amount.					e) should not be more than							
Claim examp	le: The I	below clair is less and	n/encou d this sho	nter (C ould be	laim II e more	D - 18(e than t	085F95 total NC	9900 C pric	line ce (N	e 1) was reject DC price * NI	ted beca OC units	use (claim ch billed).	arge amount * 2)

DOS FROM DT	DOS to Dt	Procedure	Proc Units	NDC	NDC Units	Charge Amount	Paid Amount
3/22/2018	3/22/2018	J9271	200	00006302602	200	\$16,000.00	\$9,344.00

Claim charge amount * 2 \rightarrow \$16,000 * 2 = \$32,000

Total NDC Price \rightarrow \$1,145.23 * 200 = \$229,046

In this case, since the (claim charge amount * 2) is less and this should be more than total NDC price (NDC price * NDC units billed) the provider has billed the NDC units incorrectly.

Claim example 2: The below claim/encounter (Claim ID - **18247I516300** line 1) was rejected as (claim charge amount * 2) is less and this should be more than total NDC price (NDC price * NDC units billed).

DOS FROM DT	DOS to Dt	Procedure	Proc Units	NDC	NDC Units	Charge Amount	Paid Amount
8/30/2018	8/30/2018	J3380	300	64764030020	300	\$10,800.00	\$6,219.00

Claim charge amount * 2 \rightarrow \$10,800 * 2 = \$21,600

Total NDC Price \rightarrow \$6,097.57 * 300 = \$1,829,271

In this case, since the (claim charge amount * 2) is less and this should be more than total NDC price (NDC price * NDC units billed)the provider has billed the NDC units incorrectly.

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DENIAL CODE (01 CLAIMS – WORKED BY EXAMINERS)	Denial Code (Batch Process)	Encount (Short Description	Long Description	
176	152	159	328	Valid revenue codes are required for this NDC	Outpatient drug claims use revenue codes 631 through 637 or 25x.	

Claim example: The claim/encounter was rejected because the revenue code billed on the outpatient claim was invalid.

DOS FROM DT	DOS to Dt	Procedure	Proc Units	Revenue code	NDC	NDC Units
1/29/2018	1/29/2018	J3490	4	0270	24357070106	20

EDIT - 544

DENIAL CODE (01 CLAIMS – WORKED BY EXAMINERS)	Denial Code (Batch Process)	EOB Code	State Encounter Edit Code	Short Description	Long Description
177	153	161	544	NDC is not in DESI file	NDC is not payable and invalid in Federal DESI file for the date of service.

Claim example: The above claim/encounter was rejected because the NDC billed has been classified as a less than effective (LTE)

DESI drug effective 11/18/2014, which is lesser than the DOS on the claim.

DOS FROM DT	DOS to Dt	Procedure	Proc Units	Revenue Code	NDC	NDC Units	Charge Amount	Paid Amount
8/30/2018	8/30/2018	J3380	300	64764030020	300	\$10,800.00	\$6,219.00	\$6,219.00

September 2019 NDC Edits 9 — EDIT - 300 - Maximum dosage exceeded

DENIAL CODE (01 CLAIMS – WORKED BY EXAMINERS)	Denial Code (Batch Process)	EOB Code	State Encounter Edit Code	Short Description	Long Description
182	184	170	300	Maximum dosage exceeded	NDC metric quantity reported on the claim exceeds the Maximum Daily Dosage File for the claims date of service.

Claim example: The below claim/encounter was rejected because the NDC metric quantity reported on the claim exceeds the Maximum Daily Dosage File for the claims date of service.

DOS FROM DT	DOS to Dt	Procedure	Proc Units	Revenu	e Code	NI	DC	NDC U	nits	Charge Amount	Paid Amount	
2/12/2018	2/12/2018	J9201	8	000027	750101 39.211		.211	\$3,296.00		\$103.44	\$6,219.00	
Dosage det	ails for the	NDC:										
ND	С		MDD		Effec	tive D	ate			Term	Date	
000027	50101		20		6	/9/2009				12/3	1/9999	
EDIT – 551												
DENIAL CODE (01 CLAIMS – WORKED BY EXAMINERS)		Denial Code (Batch Proces		State Enc Edit C				Long Description				
185		189	163	551		N	IDC proba obsolet		NDC on this claim is obsolete and is no longer valid for the dates of service on this claim.			
Claim example: The below claim/encounter was rejected because the NDC reported on the claim is obsolete for the claims date of service.												
DOS FROM DT	DOS to Dt	Procedure	Proc Units	Revenue Code		DC NDC Uni		Units	Charge Amount		Paid Amount	
12/19/2018	12/19/2018	J0885EC	60	54868580200		.5	\$3,567.00		(\$3,567.00	\$133.84	
EDIT – 215												
DENIAL (01 CLAIMS - BY EXAMI	- WORKED	Denial Coo (Batch Proce			State Encounte Edit Code		r Short Description		Long n Descripti			
I8A		18B	18C		215		NDC – HCPCS misma		NDC – HCPCS combination does not match the Centers for Medicare and Medicaid (CMS) crosswalk.		nters for Medicare and	
Claim exam	ple: The belo	w claim/encou	nter was reje	ted because	the NDC	- HCP	CS com	bination	does	not match th	e CMS crosswalk.	
DOS FROM DT	DOS to DT	Proc	edure	Proc Units		NDC		ND Uni		Charge Amount	Paid Amount	
2/16/2019	2/16/2019 2/16/2019 J9044 (Injection, bortezor not otherwise specified, 0.1				630 (VELCAD	200049 E 3.5 M		1		\$4,809.00	\$1,635.20	
NDC – HCP	CS crossw	alk										
J CODE		J co	de Descrip	ion	NDC				NDC Description		escription	
J9044		njection, bortezom	nib, not otherwis	e specified, 0.1	mg	63323072110				BORTEZOMIB 3.5 MG VIAL		

For the most recent NDC-HCPCS (J code) cross walk table, visit

CMS.gov/Medicare/Medicare-Fee-for-Service-Part-B-Drugs/McrPartBDrugAvgSalesPrice/2019ASPFiles.html.

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