

August 10, 2018 Web Announcement 1658

Modernization: Upcoming Physician-Administered Drug (PAD) Claim Requirements

Effective February 4, 2019, claims for physician/outpatient-facility administered drugs need to be submitted electronically, including Medicare crossover claims. Providers using the 837P Professional Transaction are required to bill using the 11-digit National Drug Code (NDC) and the Healthcare Common Procedure Coding System (HCPCS) code for the drug being administered. Providers using the 837I Institutional Transaction are required to bill using the 11-digit NDC; however, the HCPCS code is not required, but is recommended for outpatient claims. More details will be made available in future web announcements.