



February 12, 2018

Web Announcement 1522

## **Attention Providers Who Bill with National Drug Codes (NDCs) Regarding Some Claims Voiding and Denying in Error**

Claims billed with National Drug Codes (NDCs) that originally pay and then are automatically reprocessed are correctly pended with edit code 0899 (NDC claim pended during transition period). When these pended claims are released, instead of paying some of them are processing in error as a voided claim with reason code 1196 (Void resulted from clinical claim editor review) and as a denied claim with timely filing edit codes 0208 (The payment request is past the filing limit), 0308 (Your payment request was filed past the filing time limit) or 0408 (Payment date is past the earliest service date allowed). This issue has been resolved and beginning February 19, 2018, claims billed with correct NDCs and quantities will process correctly following the pended claim status instead of voiding/denying in error.

The impacted claims that voided/denied in error will be automatically reprocessed to adjudicate correctly. A future web announcement will notify providers when the claims are reprocessed.