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Medicaid Alert

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April 2018

TO: Providers of Pharmaceutical Services – **For Action**
 Health Maintenance Organizations – **For Information Only**

SUBJECT: Changes to the New Jersey NCPDP D.0/1.2 Payer Sheet

EFFECTIVE: Immediately (posting informational edits)
 Claims with service dates on or after June 1, 2018 (possible claim denials)

PURPOSE: The purpose of this Alert is to announce changes to the New Jersey NCPDP D.0/1.2 Payer Sheet to enhance the State’s compliance with the National Council for Prescription Drug Program (NCPDP) D.0 standard.

ACTION: Updates to the Payer Sheet are indicated below. These updates reflect mandatory NCPDP standards for submitting claims. The New Jersey NCPDP D.0/1.2 Payer Sheet may be found at <https://www.njmmis.com> under “Forms and Documents.” Choose a Type: “Provider;” Choose a Topic: “HIPAA.”

Segment	Segment Name	NCPDP Field	Field Name	NCPDP-Related Information	Error Code*
AM07	Claim Segment	406-D6	Compound Code	Valid NCPDP values are 1 or 2	2313
AM10	Compound Segment	450-EF	Compound Dosage Form Description Code	Valid NCPDP values are 01-18 Right justify Zero fill.	2327
AM11	Pricing Segment	409-D9	Ingredient Cost Submitted	Required NCPDP field Value must be greater than zero	2309
AM11	Pricing Segment	430-DU	Gross Amount Due	Required NCPDP field Value must be greater than zero	2328
AM01	Patient Segment	384-4X	Patient Residence	Valid NCPDP values are 00-15	2230

*These Error Codes shall initially post as informational edits. For claims with service dates **on or after June 1, 2018**, these Error Codes shall deny payments for claims not compliant with these NCPDP standards.

If you have any questions concerning this Medicaid Alert, please contact Molina Medicaid Solutions Provider Services at 1-800-776-6334.

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