



September 26, 2022

Web Announcement 2902

## Claims without National Drug Codes (NDC) that Denied in Error Have Been Reprocessed

Claims for the procedure codes listed below that were submitted without a National Drug Code (NDC) and denied in error with error code 708 (HCPCS procedure requires a valid NDC) have been reprocessed automatically. The impacted claims were processed on or after September 14, 2020, through July 18, 2022. Professional, Professional Crossover, Outpatient and Outpatient Crossover claims were impacted.

A9542	A9581	J2182	J9325	Q9953	Q9963	90586
A9543	A9585	J2786	J9352	Q9954	Q9964	90653
A9556	A9586	J2840	Q4101	Q9956	Q9965	90675
A9575	A9600	J7179	Q4102	Q9957	Q9966	90682
A9576	A9604	J7320	Q4106	Q9958	Q9967	90740
A9577	A9699	J7322	Q4110	Q9960	Q9968	90747
A9578	J0884	J9176	Q4111	Q9961	Q9982	
A9579	J1130	J9295	Q4115	Q9962		

Results of the reprocessed claims appear on remittance advices dated September 30, 2022. When claims are reprocessed, please be aware that all system and clinical claim editor edits are applicable. As a result, there may be no additional payment, and other claim denials may be received. Providers have the right to appeal denied claims, including those denied upon reprocessing. Please refer to [Medicaid Services Manual Chapter 100](#) and the [Billing Manual](#) for information concerning the claim appeal process and time frames.