

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT202475 MAY 30, 2024

Term date removed from NDCs for Treanda injection procedure code J9033

The Indiana Health Coverage Programs (IHCP) recently identified a discrepancy with the Centers for Medicare & Medicaid Services (CMS) termination date applied to the Core Medicaid Management Information System (CoreMMIS) for two National Drug Codes (NDCs) for procedure code J9033 – *Injection, bendamustine HCl (Treanda), 1 mg*. As of **April 30, 2017**, NDCs 63459039008 and 63459039120 were terminated in error by the CMS. The IHCP has updated CoreMMIS by removing the term date for these NDCs.



Procedure code J9033 will be reimbursed at a max fee of \$31.20, which was last updated with an effective date of **Jan. 1, 2018**. Any fee-for-service (FFS) claim details that denied with explanation of benefits (EOB) 4007 – *Non-covered NDC due to CMS termination* with dates of service (DOS) on or after **May 9, 2022**, will be mass reprocessed. Affected claims will be reprocessed on remittance advices (RAs) beginning July 3, 2024.

Any questions about managed care billing should be directed to the managed care entity (MCE) with which the member is enrolled.

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

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