National Drug Codes

Claim submission and inquiry procedures
(NDC/ppoONE contracted providers only)

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Overview

The National Drug Code (NDC) claims submission process applies to ancillary home infusion providers, specialty pharmacy, ambulatory suites and hemophilia treatment centers contracted through UnitedHealthcare. Processing is done using our internal system, ppoONE. This guide contains information on the claims and inquiry procedures for NDC submissions. We may deny or reject claims with missing or incorrect information.

Submission guidelines

Use the following table for instructions on how to submit different types of claims:

Type of NDC claim	Submission method	Process
Initial submission	**EDI 837**	**To submit claims using an EDI 837 transaction:** • Enter Payer ID UHNDC • Select the correct payer name/code and policy (if the member has more than 1 policy) • Enter the insurance type: commercial, UnitedHealthcare® Medicare Advantage or UnitedHealthcare Community Plan (Medicaid) • Enter the member's 2-digit plan ID code in 2010BB Loop/REF Segment, REF01 = (FY) and REF02 = (2-digit plan ID) – The system will reject EDI claims without a 2-digit plan ID code – To identify the plan ID code: ◦ **Step 1:** Refer to the member's ID card for the name of the UnitedHealthcare plan ◦ **Step 2:** Find the corresponding 2-digit plan ID code in the "Health plan information" chart on page 4 of this guide

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Type of NDC claim	Submission method	Process
Initial submission (cont.)	**EDI 837**	• Enter the NDC unit of measure in the billing unit. Don't bill with HCPCS units. – Billing with the incorrect NDC unit of measure may impact the repriced amount of the claim • Enter the 11-digit NDC, without dashes or spaces, in the drug claim lines – An invalid, incorrect or missing NDC will pay at $0.00 • Submit a valid HCPCS or CPT® code in the administrative claim lines (per diem/nursing), in accordance with your UnitedHealthcare Participation Agreement – An invalid, incorrect or missing NDC will pay at $0.00 **Reminders:** • Uniform Billing (UB) claim formats are not accepted • You may not bill for future dates of service • Subscriber and group numbers are required on all claims • SH[1] and SJ[2] modifiers are required for multiple therapies **Note:** Before processing claims using electronic data interchange (EDI), you must initially set up and test your system. Contact your clearinghouse to begin the testing process. If you have questions, call UnitedHealthcare EDI Support.
Initial submission	**Online claims tool**	**Sign in to the UnitedHealthcare Provider Portal using your One Healthcare ID. Use the instructions for submitting a claim and ensure the following entries are accurate:** • Select the correct payer name/code and policy (if the member has more than 1 policy) • Enter the insurance type: commercial, UnitedHealthcare Medicare Advantage or UnitedHealthcare Community Plan (Medicaid) • Enter the NDC unit of measure in the billing unit. Don't bill with HCPCS units. – Billing with the incorrect NDC unit of measure may impact the repriced amount of the claim • Enter the 11-digit NDC, without dashes or spaces, in the drug claim lines – An invalid, incorrect or missing NDC will pay at $0.00 • Submit a valid HCPCS or CPT code in the administrative claim lines (per diem/nursing), in accordance with your UnitedHealthcare Participation Agreement – An invalid, incorrect or missing NDC will pay at $0.00 **Reminders:** • Uniform Billing (UB) claim formats are not accepted • You may not bill for future dates of service • Subscriber and group numbers are required on all claims • SH[1] and SJ[2] modifiers are required for multiple therapies **Note:** If you're unable to enter the NDC code when submitting the claim or the system doesn't require you to enter the member information, you may have selected the wrong tax ID number (TIN). Verify the TIN against the most current provider record, click "Cancel" on the claim and start the process over.

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Type of NDC claim	Submission method	Process
Correct or resubmit a claim	**EDI 837**	**To submit corrected or resubmitted claims by EDI 837:** • Use Payer ID UHNDC • Include the original claim ID number • Enter the appropriate frequency type (e.g., 7) • Ensure the steps were correctly followed in the initial submission (see instructions above) If you're unable to submit via EDI 837, submit by paper as outlined below. Contact the Provider Services team identified for the plan in the "Health plan information" chart on page 4 of this guide if you have questions.
Correct or resubmit a claim	**Paper**	**To submit corrected or resubmitted CMS-1500 paper claims by fax to 801-994-1260:** • Enter the plan ID code in Box 11c – The system will reject fax claims without a 2-digit plan ID code – To identify the plan ID code: ◦ **Step 1:** Refer to the member's ID card for the UnitedHealthcare plan ◦ **Step 2:** Find the corresponding 2-digit plan code in the "Health plan information" chart on page 4 of this guide • Include the original claim ID number • Stamp "corrected" on the claim in the top-right corner • Enter "corrected" in Box 19 • Enter claims submission type 7 in Box 22 • Enter the NDC unit of measure in the billing unit – Billing with the incorrect NDC unit of measure may impact the repriced amount of the claim • Enter the 11-digit NDC, without dashes or spaces, in the drug claim lines – An invalid, incorrect or missing NDC will pay at $0.00 • Submit a valid HCPCS or CPT code in the administrative claim lines (per diem/nursing), in accordance with your UnitedHealthcare Participation Agreement – An invalid, incorrect or missing NDC will pay at $0.00 **Note:** Paper claims cannot be submitted by mail and are only accepted by fax if: • You're submitting a corrected claim. You cannot fax an initial claim. • You're unable to submit the corrected claim using EDI batch resubmission • The claim requires coordination of benefits (COB) • The total billed charges on the claim are greater than $99,999.99
Coordination of benefits	**Paper**	Fax CMS-1500 paper claims to 801-994-1260. Submit the CMS-1500 claim form and the primary carrier's explanation of benefits (EOB) together. **Note:** When Medicare is the primary carrier, the HCPCS codes and drug units on the UnitedHealthcare secondary claim submission will differ from those on the Medicare primary claim submission.

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NDC claim appeal or reconsideration

Sign in to **UHCprovider.com/claims** to file an appeal or reconsideration. Follow the instructions on the EOB or provider remittance advice.

NDC claim inquiries

Go to **UHCprovider.com/claims** for the following information:

- Check member eligibility
- Check claim status
- Obtain claim reconsideration or appeal forms and procedure information
- Confirm the status of an online or written claim reconsideration
- Determine why a claim still didn't process, even after submitting updated COB information
- Determine why a claim still didn't process, even after submitting additional information or a corrected claim
- Determine why a claim still didn't process, even after submitting proof of timely filing

If your questions aren't answered on **UHCprovider.com/claims,** use one of the following methods to identify what tool to use or who to contact regarding specific plans:

- Review "How to Submit a Claim" at **UHCprovider.com/guides**
- Find the information listed in the following "Health plan information" chart
- Get the plan information from the member's ID card and match it to the following "Health plan information" chart

Health plan information

The following chart identifies helpful resources for specific plans. The plan ID code corresponds with the health plan and must be entered on NDC claims.

Health plan	Plan ID code	Self-service tools	Provider services	Claim submission instructions
UnitedHealthcare (commercial)	10	**UHCprovider.com**	Call the customer service number on the member's ID card.	
UnitedHealthcare Medicare Advantage (specified and unspecified)	11	**UHCprovider.com**	Call the customer service number on the member's ID card.	
United Medical Resources (UMR) Compass Rose Health Plan U.S. Networks & Administrative Services (USNAS)	20	umr.com	Call the customer service number on the member's ID card.	
UnitedHealthcare Individual Exchange Benefit plans for Alabama, Arizona, Colorado, Florida, Georgia, Illinois, Kansas, Louisiana, Maryland, Massachusetts, Michigan, Mississippi, Missouri, New York, North Carolina, Ohio, Oklahoma, Tennessee, Texas, Virginia, Washington	42	**UHCprovider.com**	Call the customer service number on the member's ID card.	

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Health plan	Plan ID code	Self-service tools	Provider services	Claim submission instructions
UnitedHealthcare Life Insurance Company/ All Savers	08		**800-232-5432**	
Surest (formerly BIND)	20	**UHCprovider.com**	Call the customer service number on the member's ID card.	Follow the standard NDC billing process when submitting claims for Surest members. See "Submission guidelines" starting on page 1. **Note:** The message "Claim redirected: claim received in error" indicates the claim is being redirected to Surest. It doesn't mean the claim is rejected.
Harvard Pilgrim Designated service areas: New Hampshire, Massachusetts and Maine	N/A	harvardpilgrim.org		Submit claims directly to the health plan for members in New Hampshire, Massachusetts and Maine, per your plan Agreement.
Harvard Pilgrim – Passport Connect Outside of designated service areas	10	**UHCprovider.com**		Follow the standard NDC billing process when submitting claims for members outside of New Hampshire, Massachusetts and Maine. See "Submission guidelines" starting on page 1.
Optum® Care Network of Arizona Designated provider for these services	N/A	**Optum Care Provider Portal Login | Optum**	**877-370-2845**	Verify member's benefits prior to providing services. If the health plan authorizes services by exception, submit claims directly to the member's plan. Use Payer ID LIFE1 and standard NDC units of measure.
Optum Care Network of Colorado	N/A	**Optum Care Provider Portal Login | Optum**	**888-685-8491**	Submit claims directly to the member's plan. Use Payer ID LIFE1 and standard NDC units of measure.

Health plan	Plan ID code	Self-service tools	Provider services	Claim submission instructions
Optum Care Network of Connecticut For dates of service prior to Jan. 1, 2023 For dates of service on and after Jan. 1, 2023	N/A	**Optum Care Provider Portal Login | Optum**	**888-556-7048**	Submit claims directly to the member's plan. Use Payer ID E2387 and standard NDC units of measure. Submit claims directly to the member's plan. Use Payer ID LIFE1 and standard NDC units of measure.
Optum Care Network of Idaho	N/A	**Optum Care Provider Portal Login | Optum**	**855-822-4340** for dates of service beginning Jan. 1, 2023	Submit claims directly to the member's plan. Use Payer ID LIFE1 and standard NDC units of measure.
Optum Care Network of Indiana	N/A	**Optum Care Provider Portal Login | Optum**	**888-685-8491** for dates of service beginning Jan. 1, 2022	Submit claims directly to the member's plan. Use Payer ID LIFE1 and standard NDC units of measure.
Optum Care Network of Kansas/Missouri	N/A	**Optum Care Provider Portal Login | Optum**	**855-822-4325** for dates of service beginning Jan. 1, 2023	Submit claims directly to the member's plan. Use Payer ID LIFE1 and standard NDC units of measure.
Optum Care Network of Nevada Designated provider for these services	N/A	**Optum Care Provider Portal Login | Optum**	**877-370-2845**	Verify member's benefits prior to providing services. If health plan authorizes services by exception, submit claims directly to the member's plan. Use Payer ID LIFE1 and standard NDC units of measure.
Optum Care Network of New Mexico	N/A	**Optum Care Provider Portal Login | Optum**	**800-620-6768**	Submit claims directly to the member's plan. Use Payer ID LIFE1 and standard NDC units of measure.
Optum Care Network of New York	N/A	**Optum Care Provider Portal Login | Optum**	**866-565-3468** for dates of service beginning Jan. 1, 2022	Submit claims directly to the member's plan. Use Payer ID LIFE1 and standard NDC units of measure.
Optum Care Network of Ohio	N/A	**Optum Care Provider Portal Login | Optum**	**866-566-4715** for dates of service beginning Jan. 1, 2022	Submit claims directly to the member's plan. Use Payer ID LIFE1 and standard NDC units of measure.
Optum Care Network of Oregon	N/A	**Optum Care Provider Portal Login | Optum**	**866-565-3644** for dates of service beginning Jan. 1, 2022	Submit claims directly to the member's plan. Use Payer ID LIFE1 and standard NDC units of measure.

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Health plan	Plan ID code	Self-service tools	Provider services	Claim submission instructions
Optum Care Network of Utah	N/A	**Optum Care Provider Portal Login | Optum**	**877-370-2845**	Submit claims directly to the member's plan. Use Payer ID LIFE1 and standard NDC units of measure.
Optum Care Network of Washington	N/A	**Optum Care Provider Portal Login | Optum**	**877-836-6806**	Submit claims directly to the member's plan. Use Payer ID LIFE1 and standard NDC units of measure.
Medica Health Plans Designated service areas: Minnesota, North Dakota, South Dakota and Wisconsin	N/A	medica.com		Submit claims directly to the health plan for members in Minnesota, North Dakota, South Dakota and Wisconsin, per your plan Agreement.
Outside of designated service areas	11	**UHCprovider.com**		Follow the standard NDC billing process when submitting claims for members outside of Minnesota, North Dakota, South Dakota and Wisconsin. See "Submission guidelines" starting on page 1.
Peoples Health	11	**UHCprovider.com**	Call the customer service number on the member's ID card.	
Preferred Care Network (formerly Medica HealthCare)	N/A	pcnhealth.com	**800-407-9069**	Submit claims directly to the member's health plan, per your plan Agreement with Preferred Care Network. The UnitedHealthcare Agreement doesn't apply.
Rocky Mountain Health Plans	42	**UHCprovider.com**	Call the customer service number on the member's ID card.	
UnitedHealthcare Freedom Plans	10	**UHCprovider.com**	**800-460-9599**	
UnitedHealthcare Freedom Plans (formerly Tufts Health Freedom Plan) (UMR ID card)	20	umr.com	**877-233-1800**	
UnitedHealthcare StudentResources	N/A	**uhcsr.com**		Submit claims directly to the member's health plan. Use Payer ID 74227 and standard NDC units.

Health plan	Plan ID code	Self-service tools	Provider services	Claim submission instructions
UnitedHealthcare Oxford Effective dates of service prior to Jan. 1, 2022 Effective dates of service after Jan. 1, 2022	 N/A 10	**UHCprovider.com**	Call the customer service number on the member's ID card.	Submit claims directly to the member's health plan and use HCPCS units. The contracted amount equals the average wholesale price (AWP) times the number of units less the AWP discount. Follow the standard ppoONE process and submit claims with NDC units.
UnitedHealthcare West	N/A	**UHCprovider.com**		Submit claims directly to the member's health plan and use HCPC units. The contracted amount equals the average wholesale price (AWP) times the number of units less the AWP discount.
Care Improvement Plus	11	**UHCprovider.com**	Call the customer service number on the member's ID card.	
UnitedHealthcare Plan of the River Valley	10	**UHCprovider.com**	Call the NDC Provider Services team at **866-950-3513**	
UnitedHealthOne®, underwritten by Golden Rule	18	**uhone.com**	**800-657-8205**	
UnitedHealthcare Global (formerly International Plan)	20	**UHCprovider.com**	**888-787-4117**	
Neighborhood Health Partnership	10	**UHCprovider.com**	**877-972-8845**	
UnitedHealthcare MAHP	10	**UHCprovider.com**	Call the customer service number on the member's ID card.	
UnitedHealthcare Shared Services Government Employees Health Association (GEHA)	20 20	**uhss.umr.com**	Call the customer service number on the member's ID card.	
UnitedHealthcare Community Plan of Arizona UnitedHealthcare Dual Complete® – Arizona	22	**UHCprovider.com**	**800-445-1638**	

Health plan	Plan ID code	Self-service tools	Provider services	Claim submission instructions
UnitedHealthcare Community Plan of California UnitedHealthcare Dual Complete – California	36	**UHCprovider.com**	Call the customer service number on the member's ID card. **844-555-9774**	
UnitedHealthcare Community Plan of Delaware	29	**UHCprovider.com**	**800-600-9007**	
UnitedHealthcare Community Plan of Florida UnitedHealthcare CMMA UnitedHealthcare UnitedHealthcare Community Plan Medicaid (MMA) UnitedHealthcare Dual Complete – Florida	12	**UHCprovider.com**	For chat options and contact information, visit **UHCprovider.com/contactus.** You can also contact UnitedHealthcare Provider Services at **877-842-3210,** TTY/RTT **711,** 7 a.m.–5 p.m. CT, Monday–Friday.	
UnitedHealthcare Community Plan of Hawaii UnitedHealthcare Dual Complete – Hawaii	37	**UHCprovider.com**	**888-980-8728**	
UnitedHealthcare Community Plan of Indiana	42	**UHCprovider.com**	Call the customer service number on the member's ID card.	
UnitedHealthcare Community Plan of Iowa UnitedHealthcare Dual Complete – Iowa	32	**UHCprovider.com**	Call the customer service number on the member's ID card.	
UnitedHealthcare Community Plan of Kansas UnitedHealthcare Dual Complete – Kansas	26	**UHCprovider.com**	**877-542-9235**	
UnitedHealthcare Community Plan of Kentucky UnitedHealthcare Dual Complete – Kentucky	42	**UHCprovider.com**	Call the customer service number on the member's ID card.	
UnitedHealthcare Community Plan of Louisiana UnitedHealthcare Dual Complete – Louisiana	33	**UHCprovider.com**	**866-675-1607**	

Health plan	Plan ID code	Self-service tools	Provider services	Claim submission instructions
UnitedHealthcare Community Plan of Maryland UnitedHealthcare Dual Complete – Maryland	02	**UHCprovider.com**	For chat options and contact information, visit **UHCprovider.com/contactus.** You can also contact UnitedHealthcare Provider Services at **877-842-3210,** TTY/RTT **711,** 7 a.m.–5 p.m. CT, Monday–Friday. **844-855-9776**	
UnitedHealthcare Community Plan of Massachusetts	34	**UHCprovider.com**	**888-867-5511**	
UnitedHealthcare Community Plan of Michigan UnitedHealthcare Dual Complete – Michigan	27	**UHCprovider.com**	**800-903-5253**	
UnitedHealthcare Community Plan of Minnesota United HealthCare Dual Complete – Minnesota	42	**UHCprovider.com**	Call the customer service number on the member's ID card	
UnitedHealthcare Community Plan of Mississippi UnitedHealthcare Dual Complete – Mississippi	31	**UHCprovider.com**	Call the customer service number on the member's ID card.	
UnitedHealthcare Community Plan of Missouri UnitedHealthcare Dual Complete – Missouri	38	**UHCprovider.com**	Call the customer service number on the member's ID card.	
UnitedHealthcare Community Plan of Nebraska UnitedHealthcare Dual Complete – Nebraska	04	**UHCprovider.com**	**866-331-2243**	
UnitedHealthcare Community Plan of New Jersey	05	**UHCprovider.com**	**888-362-3368**	

Health plan	Plan ID code	Self-service tools	Provider services	Claim submission instructions
UnitedHealthcare Community Plan of New Mexico UnitedHealthcare Dual Complete – New Mexico	28	**UHCprovider.com**	**877-236-0826**	
UnitedHealthcare Community Plan of New York	06	**UHCprovider.com**	For chat options and contact information, visit **UHCprovider.com/contactus.** You can also contact UnitedHealthcare Provider Services at **877-842-3210,** TTY/RTT **711,** 7 a.m.–5 p.m. CT, Monday–Friday.	
UnitedHealthcare Community Plan of North Carolina	42	**UHCprovider.com**	Call the customer service number on the member's ID card.	
UnitedHealthcare Dual Complete – North Carolina	40	**UHCprovider.com**	Call the customer service number on the member's ID card.	
UnitedHealthcare Community Plan of Ohio UnitedHealthcare MME UnitedHealthcare Dual Complete – Ohio	25	**UHCprovider.com**	For chat options and contact information, visit **UHCprovider.com/contactus.** You can also contact UnitedHealthcare Provider Services at **877-842-3210,** TTY/RTT **711,** 7 a.m.–5 p.m. CT, Monday–Friday.	
UnitedHealthcare Dual Complete – Oklahoma	41	**UHCprovider.com**	Call the customer service number on the member's ID card.	
UnitedHealthcare Community Plan of Pennsylvania UnitedHealthcare Dual Complete – Pennsylvania	03	**UHCprovider.com**	**800-600-9007**	

Health plan	Plan ID code	Self-service tools	Provider services	Claim submission instructions
UnitedHealthcare Community Plan of Rhode Island For dates of service prior to Sept. 1, 2022. For dates of service on and after Sept. 1, 2022.	13 42	**UHCprovider.com**	For chat options and contact information, visit **UHCprovider.com/contactus.** You can also contact UnitedHealthcare Provider Services at **877-842-3210,** TTY/RTT **711,** 7 a.m.–5 p.m. CT, Monday–Friday.	
UnitedHealthcare Community Plan of Tennessee (TennCare) UnitedHealthcare Dual Complete – Tennessee	30	**UHCprovider.com**	**800-690-1606**	
UnitedHealthcare Community Plan of Texas UnitedHealthcare Dual Complete – Texas	21	**UHCprovider.com**	**888-887-9003**	
UnitedHealthcare Community Plan of Virginia UnitedHealthcare Dual Complete – Virginia	39	**UHCprovider.com**	For chat options and contact information, visit **UHCprovider.com/contactus.** You can also contact UnitedHealthcare Provider Services at **877-842-3210,** TTY/RTT **711,** 7 a.m.–5 p.m. CT, Monday–Friday.	
UnitedHealthcare Community Plan of Washington UnitedHealthcare Dual Complete – Washington	24	**UHCprovider.com**	**877-542-9231**	
UnitedHealthcare Community Plan of Wisconsin UnitedHealthcare Dual Complete – Wisconsin	07	**UHCprovider.com**	**877-651-6677**	

Health plan	Plan ID code	Self-service tools	Provider services	Claim submission instructions
Use these plan names and plan ID codes if a state is not identified in this chart. UnitedHealthcare® Chronic Complete UnitedHealthcare® Nursing Home Plan UnitedHealthcare Dual Complete	19	**UHCprovider.com**	Call the customer service number on the member's ID card.	
WellMed Medical Management of Florida	N/A	**UHCprovider.com/FL**	For chat options and contact information, visit **UHCprovider.com/contactus.** You can also contact UnitedHealthcare Provider Services at **877-842-3210,** TTY/RTT **711,** 7 a.m.–5 p.m. CT, Monday–Friday.	Submit claims directly to the member's health plan. The UnitedHealthcare Agreement may not apply. Use Payer ID WELM2.
WellMed Medical Management of Texas	N/A	**UHCprovider.com**	**800-550-7691**	Submit claims directly to the member's health plan. The UnitedHealthcare Agreement may not apply. Use Payer ID WELM2.

This NDC process applies to benefit plans administered by UnitedHealthcare Insurance Company and its affiliates, except for benefit plans issued, sponsored or administered by PacifiCare Health System or its subsidiaries, and benefit plans issued and administered by Sierra or its subsidiaries.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Health plan coverage provided by UnitedHealthcare of Arizona, Inc., UHC of California DBA UnitedHealthcare of California, UnitedHealthcare Benefits Plan of California, UnitedHealthcare of Colorado, Inc., UnitedHealthcare of the Mid-Atlantic, Inc., MAMSI Life and Health Insurance Company, UnitedHealthcare of New York, Inc., UnitedHealthcare Insurance Company of New York, UnitedHealthcare of Oklahoma, Inc., UnitedHealthcare of Oregon, Inc., UnitedHealthcare of Pennsylvania, Inc., UnitedHealthcare of Texas, Inc., UnitedHealthcare Benefits of Texas, Inc., UnitedHealthcare of Utah, Inc., UnitedHealthcare of Washington, Inc., Optimum Choice, Inc., Oxford Health Insurance, Inc., Oxford Health Plans (NJ), Oxford Health Plans (CT), Inc., All Savers Insurance Company, Tufts Health Freedom Insurance Company or other affiliates. Administrative services provided by OptumHealth Care Solutions, LLC, OptumRx, Oxford Health Plans LLC, United HealthCare Services, Inc., Tufts Health Freedom Insurance Company or other affiliates. Behavioral health products provided by U.S. Behavioral Health Plan, California (USBHPC), United Behavioral Health (UBH), or its affiliates.

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