

Claims clarification: NDC claim requirements

UnitedHealthcare Community Plan in Texas is sharing this information from the Texas Health and Human Services Commission so you know what the state requires.

Texas Medicaid & Healthcare Partnership (TMHP) requires all Texas Medicaid providers submit a valid national drug code (NDC) number, unit of measure and units dispensed for professional or outpatient claims submitted with a physician-administered prescription drug procedure code. Claims without the proper NDC information will be denied.

Due to a system error, some claims with missing or incorrect NDC information were paid incorrectly, resulting in overpayments to providers. As a result of this system error, we're doing a claim analysis on previously processed claims from Sept. 1, 2019, to March 1, 2021.

Next steps

We'll contact you if we determine you were incorrectly paid on any of these claims and advise you of the next steps.

Resources

For more information about clean claims, go to UHCprovider.com/TXcommunityplan > Bulletins and Newsletters > Claims Clarifications > [Claims Clarification: Clean Claims](#).

For information about filing an appeal, go to UHCprovider.com/TXcommunityplan > [Care Provider Manuals](#) > Texas > UnitedHealthcare Community Plan of Texas CHIP, State of Texas Access Reform (STAR), STAR+PLUS Provider Manual or UnitedHealthcare Community Plan of Texas STAR Kids Provider Manual.

We're here to help

If you have questions, please contact your Provider Advocate or call Customer Service at **888-887-9003**, 8 a.m.–6 p.m. Central Time, Monday–Friday. Thank you.