

## NEW POLICY UPDATES

### CLINICAL PAYMENT, CODING AND POLICY CHANGES

We regularly augment our clinical, payment and coding policy positions as part of our ongoing policy review processes. In an effort to keep our providers informed, please see the chart below highlighting upcoming new policies.

Effective for dates of service beginning (**11/1/2025**):

#### **Medicaid-Policy Guidelines**

##### Ineligible NPI

This policy identifies situations when any service is billed by a DME supplier, and both the referring and ordering National Provider Identifier (NPI) are ineligible.

Per CMS Policy, Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) supplier claims must contain a referring or ordering National Provider Identifier (NPI) of a provider with an eligible specialty who is enrolled in Medicare in an approved status

##### NDC and Non-Specific Crosswalk

According to the Food and Drug Administration (FDA), providers are required to report National Drug Codes (NDC) with certain HCPCS codes. The NDC must match the HCPCS code being reported.

This policy identifies situations in which a HCPCS drug code reported with non-specific language, such as miscellaneous, unclassified, NEC, NOS, etc. is billed with a National Drug Code (NDC) number and the NDC number does not match a non-specific HCPCS code in the NDC Crosswalk.