

National Drug Codes and Single Dose Vials – Apple Health (Medicaid Patients)

CHPW would like to remind our providers that per Washington State Health Care Authority (HCA) billing guidelines, providers are directed to bill for the full amount of the drug contained in single use (dose) vials. To help facilitate this guideline, CHPW's claims system is configured to ensure the entire single use vial is billed for. We ask that providers validate whether a single dose vial (SDV) is being used and to bill for the entire vial amount on a single claim line to speed up payment for these services.

Please:

- Make sure to refer back to the manufacturer to accurately report the drug amount contained in the single use vial based on the associated National Drug Code (NDC).
- Note, the units billed must correspond with the smallest dose (vial) available for purchase from the manufacturer(s) that could provide the appropriate dose for the patient.
- Refer to the [Washington Apple Health Physician-Related Services/ Health Care Professional Services Provider Guide](#) for more information.

Examples

Medication and Dosage	NDC	How to Bill SDV
Lucentis®	50242-008*-.**	HCPCS J2778
Lucentis® 0.5 MG	50242-0080-01	HCPCS J2778 5 units = 1 SDV
Lucentis® 0.3MG	50242-0082-01	HCPCS J2778 3 units = 1 SDV
Gammaked	76125-0900-.**	HCPCS J1561
Gammaked Inj 1GM/10 ML®	76125-0900-01	HCPCS J1561 2 units = 1 SDV
Gammaked Inj 10GM/100 ML®	76125-0900-10	HCPCS J1561 20 units = 1 SDV
Gammaked INJ 20GM/200ML®	76125-0900-20	HCPCS J1561 40 units = 1 SDV
Gammaked INJ 2.5 GM/25ML®	76125-0900-25	HCPCS J1561 5 units = 1 SDV
Gammaked INJ 5GM/50ML®	76125-0900-50	HCPCS J1561 10 units = 1 SDV
Cubicin Sol 500MG (Daptomycin for IV soln 500 MG)	67919-0011-01	HCPCS J0878 500 units = 1 SDV To be correct, J0878 must be billed in whole increments of five-hundred (500)
TNKase Kit 50MG (Tenecteplase for IV soln kit 50 MG)	50242-0120-01	HCPCS J3101 50 units = 1 SDV (1 whole kit) To be correct, J3101 must be billed in whole increments of fifty (50)
Remicade® 100MG Inj (Infliximab for IV inj 100 MG)	57894-0030-01	HCPCS J1745 10 units = 1 whole SDV

		To be correct, J1745 must be billed in whole increments of ten (10)
Rhophylac® 1500 units/2ml	44206-0300-01	<p>HCPCS J2778 together with HCPCS J2791</p> <p>Each unit of HCPCS J2778 represents 100units of the active ingredient in Rhophylac®</p> <p>15 units of HCPCS J2791 equals 2 mls of medication</p>