

340B Drug Claims Submissions

Provider Claims Submission Guide

Carolina Complete Health adheres to guidance in the [NC Medicaid Clinical Coverage Policy No: 9 for Outpatient Pharmacy](#) and the [NC Division of Medical Assistance Clinical Coverage Policy No: 1B for Physician's Drug Program](#).

- **Outpatient Pharmacy Guidance:** Per [Clinical Coverage Policy No. 9](#), 340B providers must submit POS claims with an '08' in the basis of cost determination field (NCPDP D.O filed 423-DN) AND a '20' in the submission clarification field (NCPDP D.O field 420-DK) to indicate they are dispensing a 340B product.
- **Physician Administered Drug Program Guidance:** Per [Clinical Coverage Policy No. 1B](#), Providers shall indicate that a drug was purchased under a 340B purchasing agreement by appending the 'UD' modifier on the drug detail.

340B Provision as It Pertains to the Cost for the Drug

340B providers must be listed on the **Health Resources and Services Administration (HRSA)** website (www.hrsa.gov/opa/). 340B providers must submit the actual purchased drug price in the usual and customary charge field. Providers who maintain two separate inventories—one for the 340B beneficiaries and a purchased inventory for non-340B beneficiaries—may not dispense a 340B-purchased drug and bill Carolina Complete Health the calculated Medicaid price for non-340B beneficiaries. For hemophilia drugs, 340B providers may submit the state upper limit established for a 340B purchased hemophilia drug.

Support

We are committed to the care and well-being of our members. We are also committed to working with you as a partner to develop the best possible treatment plans for all patients.

Please view the Provider section of our website at network.carolinacompletehealth.com for additional tools and resources. You may also contact your [Provider Engagement Administrator](#) directly, or contact Provider Relations for assistance at **1-833-552-3876 (TTY 711)**.

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