

In this document

What is RC Claim Assist?	1
How do I access RC Claim Assist?.....	1
Which providers have access to RC Claim Assist?	2
Can I use RC Claim Assist for patients who have insurance through another company?	2
Some insurance companies want claims submitted only with units and not with milliliters. What's different for Blue Cross and BCN?.....	2
Are units and CCs considered the same?	2
When billing with NDCs, how do I know where the placeholder zero goes?	3
How often does RJ Health Systems update the NDC information in RC Claim Assist?	3
When a code in RC Claim Assist has a strikethrough, what does it mean?	3
Does the RC Claim Assist tool change the way I bill claims?	3
In the claim, does the unit of measure need to be on the 2410 loop after the CPT code or the 2400 loop after the HCPCS code?.....	4
How does using RC Claim Assist affect the JW modifier for medication waste?.....	4
Who can I contact with questions?	4

This document answers frequently asked questions about using RC Claim Assist.

What is RC Claim Assist?

RC Claim Assist is a web-based tool that provides a comprehensive crosswalk of HCPCS and CPT drug codes, product names and National Drug Codes as well as information on package-size billable units and reference-based pricing.

Blue Cross Blue Shield of Michigan and Blue Care Network work with RJ Health Systems to offer this comprehensive resource to assist you in billing medical drug claims at the NDC level.

How do I access RC Claim Assist?

To log in to RC Claim Assist:

1. Log in to our provider portal ([availity.com](https://www.availity.com)*).
2. Click *Payer Spaces* on the menu bar and then click the BCBSM and BCN logo.

3. In the Applications tab, click the *RC Claim Assist medical drug coding tool* tile.
4. Follow the prompts.

Which providers have access to RC Claim Assist?

All Blue Cross and BCN-contracted providers have access to RC Claim Assist at no charge.

Can I use RC Claim Assist for patients who have insurance through another company?

RC Claim Assist is licensed for the express use of Blue Cross and BCN contracted providers. It's not intended for use with patients covered through other insurance companies.

Some insurance companies want claims submitted only with units and not with milliliters. What's different for Blue Cross and BCN?

RC Claim Assist is programmed to show only the units of measures that Blue Cross and BCN accept. The codes that Blue Cross and BCN accept are:

Code	Unit of measure	Notes
UN	Units	If you're currently billing with EA (each), please convert to UN.
ML	Milliliters	If you're currently billing with cubic centimeters (CC), please convert to ML.
GR	Grams	

Use the NDC units of measure displayed in RC Claim Assist to avoid potential claim denials.

Are units and CCs considered the same?

Units and cubic centimeters are not the same. For Blue Cross and BCN, CC is not an appropriate unit of measure for billing. If you are currently billing with CC, convert that to ML.

You should bill using only the appropriate unit of measure as displayed in RC Claim Assist.

When billing with NDCs, how do I know where the placeholder zero goes?

NDCs need to be submitted in a 5-4-2 format. Add the leading zero as follows:

Label configuration	Add leading zero and remove hyphens
4-4-2 (xxxx-xxxx-xx)	0xxxxxxxxxx
5-3-2 (xxxxx-xxx-xx)	xxxxx0xxxxx
5-4-1 (xxxxx-xxxx-x)	xxxxxxxxx0x

How often does RJ Health Systems update the NDC information in RC Claim Assist?

The data are updated on the first business day of each month.

When a code in RC Claim Assist has a strikethrough, what does it mean?

A code that has a strikethrough is a code that is considered inactive.

NDCs become inactive when the manufacturer of the product stops production. Because some product may be left on the market or in inventory, RJ Health Systems leaves inactive NDCs in RC Claim Assist for 30 months after the inactive date to allow for supply runoff.

Does the RC Claim Assist tool change the way I bill claims?

RC Claim Assist does not change the way you bill. It's simply a point of reference to help you bill at an NDC level. You should submit claims as you always have.

For additional information, see the [Billing instructions: Reporting the National Drug Code](#) document. To access it, go to our ereferrals.bcbsm.com website, click *Blue Cross* or *BCN*, click *Medical Benefit Drugs* and look in the "Training resources" section.

In the claim, does the unit of measure need to be on the 2410 loop after the CPT code or the 2400 loop after the HCPCS code?

You should enter the unit of measure in the same place you always have on the claim.

Refer to the “Submitting the NDC on electronic claims” section of the [Billing instructions: Reporting the National Drug Code](#) document for details.

How does using RC Claim Assist affect the JW modifier for medication waste?

You should submit claims involving medication waste the same way you always have, using the normal billing rules for that situation. Using RC Claim Assist does not change how those claims should be billed.

Who can I contact with questions?

For questions about:

- How to submit NDCs on claims: Refer to the following questions in this document:
 - “When billing with NDCs, how do I know where the placeholder zero goes?” on page 3
 - “Does the RC Claim Assist tool change the way I bill claims?” on page 3
- The data on RC Claim Assist: Send an email to info@rjhealthsystems.com
- Billing or claims: Contact Provider Inquiry
- A claim that is contractual or complex in nature: Contact your provider consultant.