## Pharmacy Batch Claim Transactions

*This guide was developed to facilitate the submission of pharmacy claim transaction data by batch billing providers to the Department of Labor on behalf of their claimants. This guide is based upon the NCPDP Batch Transaction Standard Version 1.2 and the Telecommunication Standard Version D.0 but may contain some non-standard use of fields only as necessary to gather complete information. Except when noted as "non-standard usage", field formats and values are compliant with the NCPDP Data Dictionary and External Code List (ECL) dated November 2016.*

The batch file will consist of 3 sections: the header, data, and trailer. The header and trailer must be present in every transmission.

Transaction Header -1 per File
Transaction Detail Data - Up to 100,000 records per file
Transaction Trailer - 1 per File

Start of Text and End of Text is used to mark the beginning and ending of each record within a file. If a Processor wishes to send the Detail Records to an on-line system, the Start and End of Text fields can be used to easily feed into current real-time processing. The Start and End of Text fields are also used to delimit the records within the file since variable length Detail Records may be sent in the file.

## Separator Characters

Segment Separator (hex character "1E", decimal "3Ø") delineates each segment within the transaction.
A Group Separator (hex character "1D", decimal "29") denotes the start of each transaction in the transmission.
A Field Separator (hex character "1C", decimal "28") separates each field in a transaction's segments.
Each field has a unique identifier code that, when used in conjunction with the Field Separator, shows the start of a new field in the record (for example, FB refers to Field 511-FB, Reject Code).

* Segment/Field required in Detail Data record for B2 transactions

**Department of Labor Pharmacy Batch Claim Format**
**NCPDP 1.2 Batch Standard**
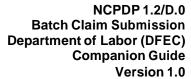
**\*\*\*General Information\*\*\***

| | |
|---|---|
| Payer Name: Department of Labor | Date: May 30, 2017 |
| Plan Name/Group Name: Division of Federal Employee's Compensation | |
| Processor: Conduent | Help Desk: 1-866-664-5581 |
| Effective as of: June 1, 2017 | Version/Release Number: D.0/1.2 |

**Required Transaction Header Section**

| Field | Field Name | *M/R/RW* | Type | Length | Value/Format |
|---|---|---|---|---|---|
| 880-K4 | Text Indicator | M | A/N | 1 | Start of text (Stx) = X'02' |
| 701 | Segment Identifier | M | A/N | 2 | ØØ=File Control (header) |
| 880-K6 | Transmission Type | M | A/N | 1 | T = Transaction |
| 880-K1 | Sender ID | M | A/N | 24 | MCO ID as assigned by CONDUENT |
| 806-5C | Batch Number | M | N | 7 | Must be 7 numeric characters, must match trailer record. |
| 880-K2 | Creation Date | M | N | 8 | Format = CCYYMMDD |
| 880-K3 | Creation Time | M | N | 4 | Format = HHMM |
| 702 | File Type | M | A/N | 1 | P = Production  T = Test |
| 102-A2 | Version /Release Number | M | A/N | 2 | 12 |
| 880-K7 | Receiver ID | M | A/N | 24 | CONDUENT |
| 880-K4 | Text Indicator | M | A/N | 1 | End of Text (Etx) = X'03' |

**Detail Data Record**

| Field | Field Name | *M/R/RW* | Type | Length | Value/Format |
|---|---|---|---|---|---|
| 880-K4 | Text Indicator | M* | A/N | 1 | Start of Text (Stx)=X'02' |
| 701 | Segment Identifier | M* | A/N | 2 | G1=Detail Data Record |
| 880-K5 | Transaction Reference Number | M* | A/N | 10 | *Determined by provider* |
| 101–A1 | BIN Number | M* | N | 6 | 61ØØ84 |
| 102–A2 | Version/Release Number | M* | A | 2 | DØ |
| 103–A3 | Transaction Code | M* | N | 2 | B1 = Billing  B2 = Reversal  B3 = Rebill |

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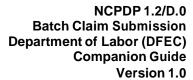| Field | Field Name | *M/R/RW* | Type | Length | Value/Format |
|---|---|---|---|---|---|
| 104–A4 | Processor Control Number | M* | A/N | 10 | DRWDPROD – for Prod claims<br>DRWDACCP – for test claims |
| 109-A9 | Transaction Count | M* | A/N | 1 | 1 = One Transaction<br>(Only one claim occurrence per detail record is allowed in a batch) |
| 202–B2 | Service Provider ID Qualifier | M* | A/N | 2 | Ø1 = NPI |
| 201–B1 | Service Provider ID | M* | A/N | 15 | NPI or<br>NCPDP Provider ID |
| 401–D1 | Date of Service | M* | N | 8 | CCYYMMDD |
| 110–AK | Software Vendor Certification ID | M* | A/N | 10 | If no number is supplied, populate with zeros |
| 111–AM | Segment Identification | M | A/N | 2 | Ø1 = Patient Segment |
| 304-C4 | Patient Date of Birth | R | N | 8 | CCYYMMDD |
| 305-C5 | Patient Gender Code | R | N | 1 | Ø =Not specified<br>1=Male<br>2=Female |
| 310-CA | Patient First Name | R | | 12 | |
| 311-CB | Patient Last Name | R | | 15 | |
| 111-AM | Segment Identification | M* | A/N | 2 | Ø4 = Insurance Segment |
| 302-C2 | Cardholder ID | M* | A/N | 20 | Claimant Case Number |
| 301–C1 | Group ID | R* | A/N | 15 | OWCP1ØØØ |
| 306-C6 | Patient Relationship Code | RW | N | 1 | 1=Cardholder |
| 111-AM | Segment Identification | M* | A/N | 2 | Ø7 = Claim Segment |
| 455–EM | Prescription/Service Reference Number Qualifier | M* | A/N | 1 | 1=Rx Billing |

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| Field | Field Name | M/R/RW | Type | Length | Value/Format |
|-------|-----------|--------|------|--------|--------------|
| 402–D2 | Prescription/Service Reference Number | M* | N | 12 | Number assigned by the Pharmacy |
| 436–E1 | Product/Service ID Qualifier | M* | A/N | 2 | Ø3=National Drug Code Number |
| 407–D7 | Product/Service ID | M* | A/N | 19 | NDC Number |
| 442–E7 | Quantity Dispensed | R | N | 7 | 9(7)V999 |
| 403–D3 | Fill Number | R* | N | 2 | Ø =Original Fill 1-99=Number of refill |
| 405–D5 | Days Supply | R | N | 3 | |
| 406–D6 | Compound Code | RW | N | 1 | 1=Not a compound 2=Compound |
| 408-D8 | Dispense as Written | RW | A/N | 1 | Ø = No Product Selection Indicated 1 = Substitution Not Allowed by Prescriber 8 = Substitution allowed – Generic drug not available in marketplace |
| 414-DE | Date Prescription Written | R | N | 8 | CCYYMMDD |
| 463-EW | Intermediary Authorization Type ID | RW | N | 2 | Type 99 = Other Override |
| 464-EX | Intermediary Authorization ID | RW | N | 7 | CONDUENT assigned 7-digit ID |
| 995-E2 | Route of Administration | RW | A/N | 11 | New Field - replaces 452-EH from 5.1 Compound Segment SNOMED CT Values required for D.0 |

* Segment/Field required in Detail Data record for B2 transactions

| Field | Field Name | M/R/RW | Type | Length | Value/Format |
|---|---|---|---|---|---|
| 111-AM | Segment Identification | M | A/N | 2 | Ø3 = Prescriber Segment |
| 466-EZ | Prescriber ID Qualifier | R | A/N | 2 | Ø1= NPI<br>12=DEA Number |
| 411-DB | Prescriber ID | R | A/N | 15 | NPI or<br>Drug Enforcement<br>Agency (DEA) Number |
| 111-AM | Segment Identifier | M | A/N | 2 | Ø8 = DUR/PPS |
| 473-7E | DUR/PPS Code Counter | RW | N | 1 | Required if DUR/PPS Segment is used |
| 439-E4 | Reason for Service Code | RW | A/N | 2 | Required when there is a conflict to resolve or reason for service to be explained (MAX 9)<br><br>Code identifying the type of utilization conflict detected of the reason for the pharmacist's professional service |
| 440-E5 | Professional Service Code | RW | A/N | 3 | Required when there is a professional service to be identified (Max 9)<br><br>Code identifying pharmacist intervention when a conflict code has been identified or service has been rendered. |
| 441-E6 | Result of Service Code | RW | A/N | 2 | Required when there is a result of service to be submitted (Max = 9)<br><br>Action taken by a pharmacist in response to a conflict or the result of a pharmacist's professional service. |
| 111-AM | Segment Identifier | M* | A/N | 2 | 11= Pricing Segment |
| 409-D9 | Ingredient Cost Submitted | R | N | 8 | Format = s$$$$$$cc |
| 412-DC | Dispensing Fee Submitted | RW | N |  | *Imp Guide:* Required if its value has an effect on the Gross Amount Due (43Ø - DU) calculation |

\* Segment/Field required in Detail Data record for B2 transactions

| 481-HA | Flat Sales Tax Amount Submitted | *RW* | N | 8 | Required when there is sales tax applicable at the dispensing site |
| 482-GE | Percentage Sales Tax Amount Submitted | *RW* | N | 11 | Required when there is sales tax applicable at the dispensing site |
| 484-JE | Percentage Sales Tax Basis Submitted | *RW* | A/N | 2 | Required when there is a sales tax applicable at the dispensing site<br><br>Value Ø1 = Gross Amount Due no longer valid |
| 426-DQ | Usual and Customary Charge | *R* | N | 8 | S9(6)v99 |
| 430-DU | Gross Amount Due | *R\** | N | 8 | Format = s$$$$$$cc |

\* Segment/Field required in Detail Data record for B2 transactions

| Field | Field Name | M/R/RW | Type | Length | Value/Format |
|-------|-----------|--------|------|--------|-------------|
| 111- AM | Segment Identifier | M | A/N | 2 | 1Ø = Compound Segment |
| 450-EF | Compound Dosage Form Description Code | M | A/N | 2 | Ø1 = Capsule<br>Ø2 = Ointment<br>Ø3 = Cream<br>Ø4 = Suppository<br>Ø5 = Powder<br>Ø6 = Emulsion<br>Ø7 = Liquid<br>1Ø = Tablet<br>11 = Solution<br>12 = Suspension<br>13 = Lotion<br>14 = Shampoo<br>15 = Elixir<br>16 = Syrup<br>17 = Lozenge<br>18 = Enema |
| 451-EG | Compound Dispensing Unit Form Indicator | M | N | 1 | 1 = Each<br>2 = Grams<br>3 = Milliliters |
| 447-EC | Compound Ingredient Component Count | M | N | 2 | Maximum = 25 Ingredients |
| 488-RE | Compound Product ID Qualifier | M (Repeating) | A/N | 2 | Ø3 = National Drug Code (NDC) |
| 489-TE | Compound Product ID | M (Repeating) | A/N | 19 | |
| 448-ED | Compound Ingredient Quantity | M (Repeating) | N | 10 | |
| 449-EE | Compound Ingredient Drug Cost | R | N | | |
| 880-K4 | Text Indicator | M | A/N | 1 | End of Text (Etx)=X'03' |

## Trailer Record

| Field | Field Name | M/R/RW | Type | Length | Value/Format |
|-------|-----------|--------|------|--------|-------------|
| 880-K4 | Text Indicator | M | A/N | 1 | Start of Text (Stx) = X'02' |
| 701 | Segment Identifier | M | A/N | 2 | 99 = File Trailer |
| 806-5C | Batch Number | M | N | 7 | Matches Header |
| 751 | Record Count | M | N | 10 | |
| 504-F4 | Message | M | A/N | 10 | |
| 880-K4 | Text Indicator | M | A/N | 1 | End of Text (Etx)=X'03' |

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