



# EXPRESS SCRIPTS®

## NCPDP Version D.0 Payer Sheet Commercial

| Field # | NCPDP Field Name   | Value | Payer Usage   |
|---------|--|-------|---|
| 136-UN  | Amount Attributed to Product Selection/Brand Non-Preferred Formulary Selection |       | RW<br>(Patient Pay Amount (505-F5) includes an amount that is attributable to a patient's selection of a Brand non-preferred formulary product) |
| 137-UP  | Amount Attributed to Coverage Gap  |       | RW<br>(Patient's financial responsibility is due to the coverage gap)   |
| 148-U8  | Ingredient Cost Contracted/Reimbursable Amount                                 |       | RW*   |
| 149-U9  | Dispensing Fee Contracted/Reimbursable Amount                                  |       | RW*   |

\*Basis of Reimbursement Determination (522-FM) is 14 (Patient Responsibility Amount) or 15 (Patient Pay Amount) unless prohibited by state/federal/regulatory agency.

### Response DUR/PPS Segment – Situational

| Field # | NCPDP Field Name              | Value  | Payer Usage                                      |
|---------|-------------------------------|--|--|
| 111-AM  | Segment Identification        | 24=Response DUR/PPS  | M  |
| 567-J6  | DUR/PPS Response Code Counter | Maximum 9 occurrences supported                                | RW<br>(Reason for Service Code (439-E4) is used) |
| 439-E4  | Reason for Service Code       | AT=Additive Toxicity<br>DD=Drug-Drug Interaction<br>ER=Overuse | O  |
| 528-FS  | Clinical Significance Code    |  | O  |
| 529-FT  | Other Pharmacy Indicator      |  | O  |
| 530-FU  | Previous Date of Fill         |  | O  |