NCPDP Version D.0 Payer Sheet Commercial

Claim Segment - Mandatory

Field #	NCPDP Field Name	Value	Payer Usage
		Ø7=Claim	M
455-EM	Prescription /Service Reference	1=Rx Billing	M
	Number Qualifier		
4Ø2-D2	Prescription/Service Reference		M
	Number		
436-E1	Product/Service ID Qualifier	Value used on original claim submission	R
4Ø7-D7	Product/Service ID		R
4Ø3-D3	Fill Number		R
3Ø8-C8	Other Coverage Code	Value used on original claim submission	R

Coordination of Benefits/Other Payments Segment – Situational

(Will support only one transaction per transmission)

Field #	NCPDP Field Name	Value	Payer Usage
111-AM	Segment Identification	Ø5=COB/Other Payments	М
337-4C	Coordination of Benefits/Other	Maximum count of 9	M
	Payments Count		
338-5C	Other Payer Coverage Type		M

Section IV: Reversal Response Transaction (Out Bound)

Response Header Segment - Mandatory

Field #	NCPDP Field Name	Value	Payer Usage
1Ø2-A2	Version Release Number	DØ=Version D.Ø	М
1Ø3-A3	Transaction Code	B2=Reversal	M
1Ø9-A9	Transaction Count	1=One Occurrence, per B2 transmission	M
5Ø1-FI	Header Response Status	A=Accepted	M
		R=Rejected	
2Ø2-B2	Service Provider ID Qualifier	Ø1=NPI	М
2Ø1-B1	Service Provider ID	NPI	М
4Ø1-D1	Date of Service		M

Response Message Segment - Situational

Field #	NCPDP Field Name	Value	Payer Usage
111-AM	Segment Identification	2Ø=Response Message	М
5Ø4-F4	Message		0