- Value of 3 = Other coverage billed – claim not covered; fields 471-5E and 472-6E are required and must have values entered.
- Value of 4 = Other coverage exists – payment not collected; fields 341-HB, 342-HC and 431-DV are required and must have values entered. Field 431-DV must be zero ($0.00). The sum of all occurrences must be zero.
- Value of 8 = Claim is billing for patient financial responsibility only; fields 353-NR, 351-NP and 352-NQ are required and must have values entered. **Note:** WellPoint and Priority Health do not accept a value of 8 in field 3Ø8-C8.
- Values of 5, 6, or 7 will be rejected.

DUR/PPS Segment – Situational

Field #	NCPDP Field Name	Value	Payer Usage
111-AM	Segment Identification	Ø8=DUR/PPS	M
473-7E	DUR/PPS Code Counter	1=Rx Billing (maximum of 9 occurrences)	R
439-E4	Reason for Service Code	AT=Additive Toxicity DD=Drug-Drug Interaction	R
44Ø-E5	Professional Service Code	ØØ=No intervention MØ=Prescriber Consulted MA=Medication Administered – indicates the administration of a covered vaccine*	R
441-E6	Result of Service Code	1G=Filled, With Prescriber Approval	R
474-8E	DUR/PPS Level of Effort	11=Level 1 (Lowest) 12=Level 2 13=Level 3 14=Level 4 15=Level 5 (Highest)	R**

*Indicates the claim billing includes a charge for administration of the vaccine; leave blank if dispensing vaccine without administration.
**When submitting a compound claim, Field 474-8E is required; using the values consistent with your contract.

Compound Segment – Situational

(Required when submitting a compound claim. Will support only one transaction per transmission)

Field #	NCPDP Field Name	Value	Payer Usage
111-AM	Segment Identification	1Ø=Compound	M
45Ø-EF	Compound Dosage Form Description Code		M
451-EG	Compound Dispensing Unit Form Indicator	1=Each 2=Grams 3=Milliliters	M
447-EC	Compound Ingredient Component Count	Maximum 25 ingredients	M

Payer Usage: M=Mandatory, O=Optional, R=Required by ESI to expedite claim processing,
"R"=Repeating Field, RW=Required when; required if "x", not required if "y"