NCPDP Version D.0 Payer Sheet Commercial

Coordination of Benefits/Other Payments Segment – Situational (Required only for secondary, tertiary, etc. claims. Will support only one transaction per transmission.)

Field #	NCPDP Field Name	Value	Payer Usage
111-AM	Segment Identification	Ø5=COB/Other Payments	M
337-4C	Coordination of Benefits/Other Payments Count	Maximum count of 9	М
338-5C	Other Payer Coverage Type		М
339-6C	Other Payer ID Qualifier	Ø3=BIN Ø5=Medicare Carrier Number	RW (Other Payer ID (34Ø-7C) is used)
34Ø-7C	Other Payer ID		R
443-E8	Other Payer Date		R
341-HB	Other Payer Amount Paid Count	Maximum count of 9	RW (Other Payer Amount Paid Qualifier (342-HC) is used
342-HC	Other Payer Amount Paid Qualifier	Ø7=Drug Benefit 1Ø=Sales Tax	RW (If Other Payer Amount Paid (431-DV) is used
431-DV	Other Payer Amount Paid		RW (If other payer has approved payment for some/all of the billing. Not used for non-governmental agency programs if Other Payer-Patient Responsibility Amount (352-NQ) is submitted. Not used for patient financial responsibility only billing)