



EXPRESS SCRIPTS®

NCPDP Version D.0 Payer Sheet Commercial

| Field # | NCPDP Field Name | Value | Payer Usage |
|---------|---|--|-------------|
| 488-RE | Compound Product ID Qualifier | Ø3=NDC | M |
| 489-TE | Compound Product ID | At least 2 ingredients and 2 NDC #s. Number should equal field 447-EC. | M |
| 448-ED | Compound Ingredient Quantity | | M |
| 449-EE | Compound Ingredient Drug Cost | | R |
| 49Ø-UE | Compound Ingredient Basis of Cost Determination | | R |

Clinical Segment – Situational

May be required as determined by benefit design. When the segment is submitted, the fields defined below are required.

| Field # | NCPDP Field Name | Value | Payer Usage |
|---------|--------------------------|--------------------|-------------|
| 111-AM | Segment Identification | 13=Clinical | M |
| 491-VE | Diagnosis Code Count | Maximum count of 5 | R |
| 492-WE | Diagnosis Code Qualifier | Ø2=ICD-10 | R |
| 424-DO | Diagnosis Code | | R |

Section II: Response Claim Billing (Out Bound)

Response Header Segment – Mandatory

| Field # | NCPDP Field Name | Value | Payer Usage |
|---------|-------------------------------|--------------------------|-------------|
| 1Ø2-A2 | Version Release Number | DØ =Version D.Ø | M |
| 1Ø3-A3 | Transaction Code | B1=Billing | M |
| 1Ø9-A9 | Transaction Count | Same value as in request | M |
| 5Ø1-F1 | Header Response Status | A=Accepted R=Rejected | M |
| 2Ø2-B2 | Service Provider ID Qualifier | Same value as in request | M |
| 2Ø1-B1 | Service Provider ID | Same value as in request | M |
| 4Ø1-D1 | Date of Service | Same value as in request | M |

Response Message Segment – Situational

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