MMIS Replacement Project (MRP)

National Council for Prescription Drug Programs (NCPDP) D.0 Reversal Payer Sheet Standard Companion Guide

Companion to National Council for Prescription Drug Programs (NCPDP) D.0 Payer Sheet Implementation Guide

November 2022

Version 0.5

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1. NCPDP D.O Layouts – Request

1.1. Reversal

> **If you do not receive confirmation that the reversal has been accepted, contact your software vendor or helpdesk. The Gainwell Pharmacy Team cannot reverse a claim.**
>
> **Data elements not listed in the table below are not required by the State of Mississippi, Division of Medicaid (DOM).**
>
> **Fields marked with an asterisk require special attention**

Field	Field Name	Definition of Field	Mississippi Requirements
Transaction Header Segment – Reversal			
1Ø1-A1	Bin Number	Card Issuer ID or Bank ID Number used for network routing.	Required field: Ø25151
1Ø2-A2	Version/Release Number	Code uniquely identifying the transmission syntax and corresponding Data Dictionary.	Required field: D.Ø
1Ø3-A3	Transaction Code	Code identifying the type of transaction.	Required field: B2 = Reversal
1Ø4-A4	Processor Control Number	Number assigned by the processor.	DRMSPROD = Production DRMSTEST = Test ENCOUNTER is expected for CCOs
1Ø9-A9	Transaction Count	Count of transactions in the transmission.	Ø1 = One occurrence
2Ø2-B2	Service Provider ID Qualifier	Code qualifying the 'Service Provider ID' (2Ø1-B1).	Required field: Ø1=National Provider Identifier (NPI)
2Ø1-B1	Service Provider ID	ID assigned to a pharmacy or provider.	Required field: 10-digit assigned NPI
4Ø1-D1	Date of Service	Identifies date the prescription was filled, or professional service rendered.	Required field: Format = CCYYMMDD
11Ø-AK	Software Vendor/Certification ID	ID assigned by the switch or processor to identify the software source.	ØØØØØØØØØØ
Insurance Segment – Reversal			
111-AM	Segment Identification	Identifies the segment in the request and/or response.	Required field: Ø4 = Insurance

3Ø2-C2	Card Holder ID	Identifies the member.	Required: Enter the 9-Digit Mississippi Medicaid ID Number.
524-FO	Plan ID	Mississippi Title 19 code	MS_TXIX
3Ø6-C6	Patient Relationship Code	K-Baby Note: Use NCPDP 306-C6 Value '3' to indicate K-Baby claim. Medicaid ID submitted should be that of the Mother, the First/Last Name, DOB and Gender values should be those of the infant/baby.	0 - Not Specified 1 - Cardholder 2 - Spouse 3 - Child 4 - Other

' **Claim Segment – Reversal**			
111-AM	Segment Identification	Identifies the segment in the request and/or response.	Required field: Ø7 = Claim
455-EM	Prescription/Service Reference Number Qualifier	Indicates the type of billing submitted.	Required field: 1 = Rx Billing
4Ø2-D2	Prescription/Service Reference Number	Reference number assigned by the provider for the dispensed drug/product and/or service provided.	Required field: Enter the 12-digit numeric prescription number. The number must be identical to the initial claim.
436-E1	Product/Service ID Qualifier	Code qualifying the value in 'Product/Service ID' (4Ø7-D7).	Required field: ØØ = Not specified Ø3 = National Drug Code (NDC)
4Ø7-D7	Product/Service ID	ID of the product dispensed or service provided.	Required field when 436-E1 is an Ø3: When the Prescription/Service Reference Number Qualifier is a ' Ø3', enter the 11-digit National Drug Code (NDC) for the drug dispensed. If the Product/Service Id Qualifier is an 'ØØ' this field should contain a 'Ø'.
147-U7	Pharmacy Service Type	The type of service being performed by a pharmacy when different contractual terms exist between a payer and the pharmacy, or when benefits are based upon the type of service performed.	Required: Default to 99 if nothing entered. This is a 2-digit numeric field.

DUR/PPS Segment - Reversal			

| | | | | | | This segment is not required for a claim reversal. |

StypPricing Segment - Reversal						
						This segment is not required for a claim reversal.

1.2.   Batch Claim Header – ONLY ONE HEADER RECORD PER FILE

* Batch transactions are only accepted from MCO Partners without a special permission from MS DOM.

Field	Field Name	Type	Length	Start	End	Value
88Ø-K4	Text Indicator	A/N	1	1	1	Start of Text (STX) = X'Ø2'
7Ø1	Segment Identifier	A/N	2	2	3	ØØ = File Control (header)
88Ø-K6	Transmission Type	A/N	1	4	4	T = Transaction R = Response E = Error
88Ø-K1	Sender ID	A/N	24	5	28	This is the same as your Trading Partner ID.
8Ø6-5C	Batch Number	N	7	29	35	Assigned by Sender. Matches trailer. To be returned in Response or Error file from processor/switch.
88Ø-K2	Creation Date	N	8	36	43	Format = CCYYMMDD
88Ø-K3	Creation Time	N	4	44	47	Format = HHMM
7Ø2	File Type	A/N	1	48	48	P = Production T = Test
1Ø2-A2	Version/Release Number	A/N	2	49	5Ø	Version/Release # of Header Data.
88Ø-K7	Receiver ID	A/N	24	51	74	Enter the Gainwell ETIN = 345724166.
88Ø-K4	Text Indicator	A/N	1	75	75	End of Text (ETX) = X'Ø3'

1.3. Batch Claim Detail

* Batch transactions are applicable to encounters from the MCOs only. All other submissions require pre-approval from MS DOM.

Field	Field Name	Type	Length	Start	End	Value
88Ø-K4	Text Indicator	A/N	1	1	1	Start of Text (STX) = X'Ø2'
7Ø1	Segment Identifier	A/N	2	2	3	G1 = Detail Data Record
88Ø-K5	Transaction Reference Number	A/N	1Ø	4	13	To be determined by Provider.
	NCPDP Data Record		Varies	14	Varies	
88Ø-K4	Text Indicator	A/N	1	Varies	Varies	End of Text(ETX) = X'Ø3'

1.4. Batch Claim Trailer – ONLY ONE TRAILER RECORD PER FILE

* Batch transactions are applicable to encounters from the MCOs only. All other submissions require pre-approval from MS DOM.

Field	Field Name	Type	Length	Start	End	Value
88Ø-K4	Text Indicator	A/N	1	1	1	Start of Text (STX) = X'Ø2'
7Ø1	Segment Identifier	A/N	2	2	3	99 = File trailer
8Ø6-5C	Batch Number	N	7	4	1Ø	Assigned by Sender. Matches header.
751	Record Count	N	1Ø	11	2Ø	
5Ø4-F4	Message	A/N	35	21	55	
88Ø-K4	Text Indicator	A/N	1	56	56	End of Text(ETX) = X'Ø3'

Appendix A.   Change History

Version #	Date of release	Author	Description of change
0.1	12/16/2021	EDI Technical Team	Initial document creation. Field 3Ø6-C6, Page 4 – KBaby Notes
0.2	6/8/2022	EDI Technical Team	Mississippi Logo clean-up Copyright change from 2021 to 2022
0.3	8/17/2022	EDI Technical Team	BIN, Page 4 and 5 updated to 025151
0.4	9/12/2022	EDI Technical Team	PCN (PROCESSOR CONTROL NUMBER) Value "ENCOUNTER" added for CCOs, Page 4
0.5	11/02/2022	EDI Technical Team	Fields 524-FO and 3Ø6-C6, Page 4 removed.