



NCPDP Version 5 Request Payer Sheet

NCPDP Rev.04.16.02

General Information

Payer Name: Gateway Health Plan MA-PD	Date: 12/16/2005
Plan Name/Group Name: Gateway Medicare Assured	
Processor: Argus	Switch: Various
Payer Sheet Revision Effective as of: 01/01/2006	Version/Release #: MEDD
Contact/Information Source: Argus Call Center 1.800.KC.ARGUS (1.800.522.7487)	
Certification Testing Window: Not Applicable	
Provider Relations Help Desk Info: 1.800.KC.ARGUS (1.800.522.7487)	
Other versions supported: The HIPAA required format is 5.1	

Other Transactions Supported (as of 10/16/2003)

Transaction Code	Transaction Name
B2	Reversal
B3	Rebill

Billing Transaction

Segments

The following lists the segments available in a Billing Transaction. The document also lists values as defined under Version 5.1. The Transaction Header Segment is mandatory. The Segment Summaries included below list the mandatory data fields. Fields designed as "Mandatory" (M) are in accordance with the NCPDP Telecommunication Implementation Guide Version 5.1 and are the only fields designated mandatory. Fields designated as "Required" (R) must always be sent. Fields

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designated as “Required When” (RW) will be sent under circumstances that should be explained in the Comment column. **Fields not listed are not applicable to Argus or are not applicable to this particular payer.**

- M = Mandatory (NCPDP mandated)
- R = Required
- RW = Required When

Transaction Header Segment: Mandatory in all cases

Field #	NCPDP Field Name	Value	M/R/RW	Comment
101-A1	BIN Number	012353	M	
102-A2	Version/Release Number	51	M	
103-A3	Transaction Code	B1	M	B1 = Billing (claim)
104-A4	Processor Control Number	03740000	M	
109-A9	Transaction Count		M	1
202-B2	Service Provider ID Qualifier	07 = NCPDP ID	M	01 = NPI (Future use)
201-B1	Service Provider ID		M	
401-D1	Date of Service		M	
110-AK	Software Vendor/Certification ID	blanks	M	

Patient Segment: Required

Field #	NCPDP Field Name	Value	M/R/RW	Comment
111-AM	Segment Identification	01	M	
304-C4	Date Of Birth		R	
305-C5	Patient Gender Code		R	

Insurance Segment: Mandatory

Field #	NCPDP Field Name	Value	M/R/RW	Comment
111-AM	Segment Identification	04	M	
302-C2	Cardholder ID		M	

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303-C3	Person Code	R	Gateway's Person codes are '01'
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Claim Segment:

Mandatory

Field #	NCPDP Field Name	Value	M/R/RW	Comment
111-AM	Segment Identification	07	M	
455-EM	Prescription/Service Ref # Qualifier	Blank = not specified 1 = Rx Billing	M	Blank treated as '1'
402-D2	Prescription/Service Reference Number		M	
436-E1	Product/Service ID Qualifier	03 = NDC	M	
407-D7	Product/Service ID		M	
442-E7	Quantity Dispensed		R	
405-D5	Days Supply		R	
406-D6	Compound Code	0=Not Specified 1=Not a Compound 2=Compound	RW	Compound Code=2 required when submitting compound prescription
408-D8	DAW/Product Selection Code		R	
414-DE	Date Prescription Written		R	
308-C8	Other Coverage Code		RW	Use as needed for benefit determination.
461-EU	Prior Authorization Type Code		RW	Required when field 462-EV is used
462-EV	Prior Authorization Number Submitted		RW	Free-form messages instruct pharmacy on codes to use.

Pharmacy Provider Segment (02):

Not used

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Prescriber Segment:

Required

Field #	NCPDP Field Name	Value	M/R/RW	Comment
111-AM	Segment Identification	Ø3	M	
466-EZ	Prescriber ID Qualifier		RW	08=State License Required when field 411-DB is used
411-DB	Prescriber ID		R	PA State License is Required

COB/Other Payments Segment (05):

Situational

Note: Required for supplemental claim submission.

Field #	NCPDP Field Name	Value	M/R/RW	Comment
111-AM	Segment Identification	Ø5	M	
337-4C	Coordination of Benefits/Other Payments Count		RW	
338-5C	Other Payer Coverage Type		RW	Can occur up to 3 times.
339-6C	Other Payer ID Qualifier		RW	Required when 34Ø-7C is submitted. Can occur up to 3 times per payer.
34Ø-7C	Other Payer ID		RW	Can occur up to 3 times per payer..
443-E8	Other Payer Date		RW	Can occur up to 3 times per payer..
341-HB	Other Payer Amount Paid Count		RW	
342-HC	Other Payer Amount Paid Qualifier		RW	Required when 431-DV is submitted. Can occur up to 9 times.
431-DV	Other Payer Amount Paid		RW	Can occur up to 9 times.
471-5E	Other Payer Reject Count		RW	
472-6E	Other Payer Reject Code		RW	Can occur up to 5 times.

Workers' Compensation Segment (06):

N/A for this payer

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DUR/PPS Segment (08):

Optional

Field #	NCPDP Field Name	Value	M/R/RW	Comment
111-AM	Segment Identification	08	M	
473-7E	DUR/PPS Code Counter		RW	
439-E4	Reason for Service Code		RW	Can occur up to 9 times.
440-E5	Professional Service Code		RW	Can occur up to 9 times.
441-E6	Result of Service Code		RW	Can occur up to 9 times.

Pricing Segment:

Mandatory

Field #	NCPDP Field Name	Value	M/R/RW	Comment
111-AM	Segment Identification	11	M	
409-D9	Ingredient Cost Submitted		R	May be populated with zeros
412-DC	Dispensing Fee Submitted		R	
433-DX	Patient Paid Amount Submitted		R	
426-DQ	Usual And Customary Charge		R	
430-DU	Gross Amount Due		R	

Coupon Segment (09):

Not used

Compound Segment (10):

Not used

Prior Authorization Segment (12):

Not used

Clinical Segment (13):

Optional

Field #	NCPDP Field Name	Value	M/R/RW	Comment
111-AM	Segment Identification	13	M	
491-VE	Diagnosis Code Count		RW	
492-WE	Diagnosis Code Qualifier		RW	Can occur up to 5 times
424-DO	Diagnosis Code		RW	Can occur up to 5 times.

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Additional Information for Claim Billing Submissions

Sales Tax Processing

Sales tax processing is not applicable to this payer.

Other Transaction Information

Reversals

Maximum Number of Transactions Supported per transmission	Max # of transactions supported = 1
What is your reversal window? (If transaction is billed today what is the timeframe for reversal to be submitted?)	Timeframe = 60 days from initial receipt

Certification Requirements

Does payer/processor require software certification?

No, but we encourage certification through NHIN, the third-party certification used by Argus.

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NCPDP Version 5 Response Payer Sheet

NCPDP Rev.04.16.02

General Information

Payer Name: Gateway Health Plan MA-PD
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Date: 12/16/2005

Segments

The purpose of this document is to provide further clarity for Providers as to the Response Data they will receive. This document lists the segments available in a Response Transaction. The document also lists values as defined under Version 5.1. The Transaction Header Segment is mandatory. The Segment Summaries included below list the mandatory data fields. See Template Instructions for mandatory or optional fields and the usage of the M/R/RW and Comment columns. Fields designed as "Mandatory" (M) are in accordance with the NCPDP Telecommunication Implementation Guide Version 5.1 and are the only fields designated mandatory. Fields designated as "Required" (R) will always be sent. Fields designated as "Required When" (RW) will be sent under circumstances that should be explained in the Comment column. **Fields not listed are not applicable to Argus or are not applicable to this particular payer. Note that on the Response segments, "Required" should be interpreted as "Reported" by the processor.**

- M = Mandatory (NCPDP mandated)
- R = Required
- RW = Required When

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PAID (or Duplicate of Paid) Response

Response Header Segment:

Mandatory

Field #	NCPDP Field Name	Value	M/R/RW	Comment
102-A2	Version/Release Number	Same value as in request billing	M	51
103-A3	Transaction Code	Same value as in request billing	M	
109-A9	Transaction Count	Same value as in request billing	M	
501-F1	Header Response Status	A	M	A = Accepted
202-B2	Service Provider ID Qualifier	Same value as in request billing	M	
201-B1	Service Provider ID	Same value as in request billing	M	
401-D1	Date of Service	Same value as in request billing	M	

Response Message Segment:

Optional

Field #	NCPDP Field Name	Value	M/R/RW	Comment
111-AM	Segment Identification	20	M	
504-F4	Message		RW	If applicable for Other Health Insurance reporting and if plan requests messaging

Response Insurance Segment (25):

Not used

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Response Status Segment:

Mandatory

Field	NCPDP Field Name	Value	M/R/RW	Comment
111-AM	Segment Identification	21	M	
112-AN	Transaction Response Status	P or D	M	P = Paid D = Duplicate of Paid
526-FQ	Additional Message Information		RW	If applicable for Other Health Insurance reporting and if plan requests messaging

Response Claim Segment:

Mandatory

Will Preferred Product fields be provided for provider display?

No

Field #	NCPDP Field Name	Value	M/R/RW	Comment
111-AM	Segment Identification	22	M	
455-EM	Prescription/Service Reference Number Qualifier	1	M	1 = Rx Billing
402-D2	Prescription/Service Reference Number		M	

Response Pricing Segment:

Mandatory

Will Payer/Processor provide the following fields regarding the member's overall pharmacy benefit?

512-FC Accumulated Deductible Amount	No
513-FD Remaining Deductible Amount	No
514-FE Remaining Benefit Amount	No

Will Payer/Processor provide the following Partial Fill payment fields?

546-HH Basis of Calculation – Dispensing Fee	No
547-HJ Basis of Calculation – Copay	No
548-HK Basis of Calculation – Flat Sales Tax	No
549-HL Basis of Calculation – Percentage Sales Tax	No

Will Payer/Processor support the inclusion of Tax Exempt Flag (557-AV)? No

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Will Payer/Processor follow the pricing formula from the NCPDP Telecommunication Implementation Guide Version 5.1 section “4.2.9 Pricing Segment” and “4.4.4 Response Pricing Segment”?

Yes, excluding percentage sales tax fields.

Will Payer/Processor populate the following fields with zeros when the field value is zero, because the following fields are part of the sum reported in the field “total provider reimbursement”?

505-F5 Patient Pay Amount Yes
 509-F9 Total Amount Paid Yes

Field #	NCPDP Field Name	Value	M/R/RW	Comment
111-AM	Segment Identification	23	M	
505-F5	Patient Pay Amount		R	May be populated with zeros
506-F6	Ingredient Cost Paid		RW	Reported back when amount is submitted
507-F7	Dispensing Fee Paid		RW	Reported back when amount is submitted
558-AW	Flat Sales Tax Amount Paid		RW	Reported back when amount is submitted
559-AX	Percentage Sales Tax Amount Paid		RW	Reported back when amount is submitted
509-F9	Total Amount Paid		R	May be populated with zeros
523-FN	Amount Attributed To Sales Tax		RW	Reported when applicable
517-FH	Amount Applied To Periodic Deductible		RW	Reported when applicable
518-FI	Amount Of Copay/Co-Insurance		RW	Reported when applicable
519-FJ	Amount Attributed To Product Selection		RW	Reported when applicable
346-HH	Basis of Calculation-Dispensing Fee		RW	Reported when applicable
347-HJ	Basis of Calculation-Copay		RW	Reported when applicable

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Response DUR/PPS Segment:

Optional

Field #	NCPDP Field Name	Value	M/R/RW	Comment
111-AM	Segment Identification	24	M	
567-J6	DUR/PPS Response Code Counter		RW	Required when field 439 and/or 528 is used.
439-E4	Reason For Service Code		RW	Reported when applicable. Can occur up to 9 times.
528-FS	Clinical Significance Code		RW	Reported when applicable.
544-FY	DUR Free Text Message		RW	Reported when applicable.

Response Prior Authorization Segment (26):

Not used

Reject Response

Response Header Segment:

Mandatory

Field #	NCPDP Field Name	Value	M/R/RW	Comment
102-A2	Version/Release Number	Same value as in request billing	M	51
103-A3	Transaction Code	Same value as in request billing	M	
109-A9	Transaction Count	Same value as in request billing	M	
501-F1	Header Response Status	A	M	
202-B2	Service Provider ID Qualifier	Same value as in request billing	M	
201-B1	Service Provider ID	Same value as in request billing	M	
401-D1	Date of Service	Same value as in request billing	M	

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Response Message Segment:

Optional

Field #	NCPDP Field Name	Value	M/R/RW	Comment
111-AM	Segment Identification	20	M	
504-F4	Message		RW	If applicable for Other Health Insurance reporting and if plan requests messaging

Response Status Segment:

Mandatory

Field	NCPDP Field Name	Value	M/R/RW	Comment
111-AM	Segment Identification	21	M	
112-AN	Transaction Response Status	R	M	R = Reject
510-FA	Reject Count		R	
511-FB	Reject Code		R	Can occur up to 5 times.
526-FQ	Additional Message Information		RW	If applicable for Other Health Insurance reporting and if plan requests messaging

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