

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 660	Date: March 22, 2010
	Change Request 6845

Transmittal 660 dated March 22, 2010, rescinds and replaces Transmittal 645 dated March 5, 2010, to show that VMS is to develop in July and implement in October. All other information remains the same.

SUBJECT: Version D.0 Inbound National Council for Prescription Drug Programs (NCPDP) Flat File Implementation

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to provide direction to the Durable Medical Equipment (DME) Medicare Administrative Contractors (MAC) Common Electronic Data Interchange (CEDI) contractor and the shared system maintainer to implement the version D.0 inbound flat file, Transmission Report, front end editing, and addition systems changes to support the new version. This CR includes one attachment: The NCPDP D.0 flat file

EFFECTIVE DATES: July 1, 2010 – VMS Development
August 1, 2010 – CEDI
October 1, 2010 – VMS Implementation

IMPLEMENTATION DATES: July 6, 2010 – VMS Development
August 2, 2010 – CEDI
October 4, 2010 – VMS Implementation

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)
R=REVISED, N=NEW, D=DELETED-*Only One Per Row.*

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
N/A	

III. FUNDING:

For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs) and/or Carriers:
Not Applicable.

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

Entities covered: CEDI

IV. ATTACHMENTS:

One-Time Notification

**Unless otherwise specified, the effective date is the date of service.*

Attachment – One-Time Notification

Pub. 100-20	Transmittal: 660	Date: March 22, 2010	Change Request: 6845
-------------	------------------	----------------------	----------------------

Transmittal 660 dated March 22, 2010, rescinds and replaces Transmittal 645 dated March 5, 2010, to show that VMS is to develop in July and implement in October. All other information remains the same.

SUBJECT: Version D.0 Inbound National Council for Prescription Drug Programs (NCPDP) Flat File Implementation

Effective Date: July 1, 2010 – VMS Development
August 1, 2010 – CEDI
October 1, 2010 – VMS Implementation

Implementation Date: July 6, 2010 – VMS Development
August 2, 2010 – CEDI
October 4, 2010 – VMS Implementation

I. GENERAL INFORMATION

A. Background: The Centers for Medicare and Medicaid Services (CMS) is in the process of implementing the next version of the Health Insurance Portability and Accountability Act transactions. The Secretary of the Department of Health and Human Services (DHHS) has adopted Accredited Standards Committee (ASC) X12 Version 5010 and the National Council for Prescription Drug Programs (NCPDP) Version D.0 as the next HIPAA transaction standards for covered entities to exchange HIPAA transactions. The final rule was published on January 16, 2009. Some of the important dates in the implementation process are:

Effective Date of the regulation:	March 17, 2009
Level I compliance by:	December 31, 2010
Level II Compliance by:	December 31, 2011
All covered entities have to be fully compliant on:	January 1, 2012

Level I compliance means “that a covered entity can demonstrate that it could create and receive compliant transactions, resulting from the compliance of all design/build activities and internal testing.”

Level II compliance means “that a covered entity has completed end-to-end testing with each of its trading partners, and is able to operate in production mode with the new versions of the standards.”

DHHS has promulgated in the Final Rules provisions which permit dual use of existing standards (ASC X12 4010A1 and NCPDP 5.1) and the new standards (5010 and D.0) from the March 17, 2009, effective date until the January 1, 2012 compliance date to facilitate testing subject to trading partner agreement.

The purpose of this Change Request (CR) is to provide direction to the Durable Medical Equipment (DME) Medicare Administrative Contractors (MAC) Common Electronic Data Interchange (CEDI) contractor and the shared system maintainer to implement the version D.0 inbound flat file, Transmission Report, front end editing, and addition systems changes to support the new version. There are **no** aspects/components of Receipt, Control, and Balancing incorporated in this change request.

This CR includes one attachment: The NCPDP D.0 flat file

Estimates for this CR should include a breakdown as part of the Level of Effort (LOE) response, utilizing the following table to be included in the “Estimate-Specific Comments” portion of the LOE template, to follow the Investment Lifecycle Phases. This breakdown of LOE responses is only to be utilized by A/B MACs, DME MACs, and the DME MAC CEDI contractor.

Number	Requirement	Responsibility									
		A / B M A C	D M E M A C	F I R I E R	C A R R I E R	R H I I S S	Shared-System Maintainers				Other
							F I S S	M C S	V M S	C W F	
6845.7	The DME MAC's CEDI contractor shall not reject claims if data elements labeled as "Not Used" in the NCPDP Billing Transaction are present, nor should they pass those data elements on in the flat file.										CEDI
6845.8	The DME MAC's CEDI contractor shall require the new data element 361-2D (Provider Accept Assignment Indicator) for D.0 claims.										CEDI
6845.9	The shared system maintainer shall process the new data element 361-2D (Provider Accept Assignment Indicator) in sync with how 2300.CLM07 is being handled for 4010A1 and 5010.								X		
6845.9.1	If 361-2D (PROVIDER ACCEPT ASSIGNMENT INDICATOR) is submitted and value is "N", the claim still be subject to existing VMS processing rules where assignment may be flipped from "non-assigned" to "assigned" for purposes of Medicare's adjudication based on current rules for mandatory assignment -- which includes drugs & biologicals.								X		
6845.10	The DME MAC's CEDI contractor shall allow all the same POS codes allowed for X12 claims for inbound NCPDP claims.										CEDI
6845.11	The DME MAC's CEDI contractor shall require all fields in the new Facility Segment to be present when the segment is used – with the exception of the Facility ID field.										CEDI
6845.12	The DME MAC's CEDI contractor shall only accept one batch header/trailer per physical file sent.										CEDI

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (
		A / B M A C	D M E M A C	F I R I E R	C A R R I E R	R H I I S S	Shared-System Maintainers				Other
							F I S S	M C S	V M S	C W F	
	None.										

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements:

X-Ref Requirement Number	Recommendations or other supporting information:
	None

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Jason Jackson (410) 786-6156 jason.jackson3@cms.hhs.gov
 Brian Reitz (410) 786-5001 brian.reitz@cms.hhs.gov

Post-Implementation Contact(s): Jason Jackson (410) 786-6156 jason.jackson3@cms.hhs.gov
 Brian Reitz (410) 786-5001 brian.reitz@cms.hhs.gov

VI. FUNDING

Section A: For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs), and/or Carriers:

Not Applicable

Section B: For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

Entities covered: CEDI.

Attachment: NCPDP D.0 Flat File 20091228.doc

Batch Header Record

<i>Batch Header Record</i>							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Sender ID*	880-K1	Identification number assigned to the sender of the data by the processor of the data.	X(24)		NCPKFLAT	1	24
Segment Identifier*	701	Unique record type required on Batch Transaction Standard.	X(02)	00 =File Header	NCPKFLAT	25	26
Segment Identification*	111-AM	Identifies the segment in the request record. This field is only populated on records with Segment Identifier G1.	X(02)	Spaces	NCPKFLAT	27	28
Version**1	N/A	Represents the current version of VIPs NCPDP software that is being used.	X(01)	A	NCPKFLAT	29	29
Batch Number*	806-5C	Number assigned by processor. Matches trailer record.	9(07)		NCPKFLAT	30	36
Transaction Reference Number*	880-K5	Number assigned by provider to each transaction record. This number is unique to each set of flat file records that represent a single claim. This field is only populated on records with Segment Identifier G1.	X(10)	Spaces	NCPKFLAT	37	46
Group Indicator*	N/A	This field is used to indicate a group of related segments. These segments together represent the equivalent of 1 claim line. This field is only populated with a "Y" on records with Segment Identification '07' (claim segment).	X(01)	N Y	NCPKFLAT	47	47
Telecommunication Version Number*	N/A	Code identifying the Telecommunication Standard.	X(02)	D0=Version D.0	NCPKFLAT	48	49

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

NCPDP D.0 Flat File

Batch Header Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Filler [*]	N/A	Reserved for future use.	X(11)	Spaces	NCPKFLAT	50	60
Segment Identification	111-AM	Identifies the segment in the request record.	X(02)	00	NCPSB00A	61	62
Transmission Type	880-K6	Defines the Type of transmission being sent.	X(01)	T= Telecom Standard	NCPSB00A	63	63
Sender ID	880-K1	Identification number assigned to the sender of the data by the processor of the data.	X(24)		NCPSB00A	64	87
Batch Number	806-5C	Number assigned by processor. Matches trailer record.	9(07)		NCPSB00A	88	94
Creation Date	880-K2	Date the file was created.	9(08)	Format = CCYYMMDD	NCPSB00A	95	102
Creation Time	880-K3	Time the file was created.	9(04)	Format = HHMM	NCPSB00A	103	106
File Type	702	Test or Production.	X(01)	See External Code List	NCPSB00A	107	107
Version/Release Number	102-A2	Code identifying the release syntax and corresponding Data Dictionary.	X(02)	11=Version 1.1 12=Version 1.2	NCPSB00A	108	109
Receiver ID	880-K7	Determined by CEDI/derived from 324-CO.	X(24)		NCPSB00A	110	133
Receipt Date	N/A	Date the file was received.	X(08)	Format = CCYYMMDD	NCPSB00A	134	141

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Header Record

<i>Transaction Header Record</i>							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Sender ID*	880-K1	Identification number assigned to the sender of the data by the processor of the data.	X(24)		NCPKFLAT	1	24
Segment Identifier*	701	Unique record type required on Batch Transaction Standard.	X(02)	G1 =Data Detail Record	NCPKFLAT	25	26
Segment Identification*	111-AM	Identifies the segment in the request record. This field is only populated on records with Segment Identifier G1.	X(02)	00	NCPKFLAT	27	28
Version** ¹	N/A	Represents the current version of VIPs NCPDP software that is being used.	X(01)	A	NCPKFLAT	29	29
Batch Number*	806-5C	Number assigned by processor.	9(07)		NCPKFLAT	30	36
Transaction Reference Number*	880-K5	Number assigned by provider to each transaction record. This number is unique to each set of flat file records that represent a single claim. This field is only populated on records with Segment Identifier G1.	X(10)		NCPKFLAT	37	46
Group Indicator*	N/A	This field is used to indicate a group of related segments. These segments together represent the equivalent of 1 claim line. This field is only populated with a "Y" on records with Segment Identification '07' (claim segment).	X(01)	N Y	NCPKFLAT	47	47
Telecommunication Version Number*	N/A	Code identifying the Telecommunication Standard.	X(02)	D0=Version D.0	NCPKFLAT	48	49
Filler*	N/A	Reserved for future use.	X(11)	Spaces	NCPKFLAT	50	60

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Header Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
BIN Number	101-A1	Card Issuer or Bank ID used for network routing.	9(06)		NCPST00A	61	66
Version/Release Number	102-A2	Code identifying the release syntax and corresponding Data Dictionary.	X(02)	D0	NCPST00A	67	68
Transaction Code	103-A3	Identifies type of transaction	X(02)	B1	NCPST00A	69	70
Processor Control Number	104-A4	Number assigned by processor.	X(10)		NCPST00A	71	80
Transaction Count	109-A9	Number of transactions in the transmission.	X(01)	See External Code List	NCPST00A	81	81
Service Provider ID Qualifier	202-B2	Code qualifying the Service Provider ID	X(02)	See External Code List	NCPST00A	82	83
Service Provider ID	201-B1	ID assigned to pharmacy or provider.	X(15)		NCPST00A	84	98
Date of Service	401-D1	Identifies the date the prescription was filled.	9(08)	Format = CCYYMMDD	NCPST00A	99	106
Software Vendor/Certification ID	110-AK	ID assigned by the switch or processor to identify the software source.	X(10)		NCPST00A	107	116
Claim Control Number	N/A	Claim number assigned by CEDI for internal processing.	9(14)	Format = YYJJBBBBSS000	NCPST00A	117	130
Provider ID Qualifier	N/A	Used for back end for COB, space filled by CEDI.	X(02)	Spaces	NCPST00A	131	132
Provider ID	N/A	Used for back end for COB, space filled by CEDI.	X(15)	Spaces	NCPST00A	133	147

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transmission Patient Record

<i>Transmission Patient Record</i>							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Sender ID*	880-K1	Identification number assigned to the sender of the data by the processor of the data.	X(24)		NCPKFLAT	1	24
Segment Identifier*	701	Unique record type required on Batch Transaction Standard.	X(02)	G1 = Data Detail Record	NCPKFLAT	25	26
Segment Identification*	111-AM	Identifies the segment in the request record. This field is only populated on records with Segment Identifier G1.	X(02)	01	NCPKFLAT	27	28
Version** ¹	N/A	Represents the current version of VIPs NCPDP software that is being used.	X(01)	B	NCPKFLAT	29	29
Batch Number*	806-5C	Number assigned by processor.	9(07)		NCPKFLAT	30	36
Transaction Reference Number*	880-K5	Number assigned by provider to each transaction record. This number is unique to each set of flat file records that represent a single claim. This field is only populated on records with Segment Identifier G1.	X(10)		NCPKFLAT	37	46
Group Indicator*	N/A	This field is used to indicate a group of related segments. These segments together represent the equivalent of 1 claim line. This field is only populated with a "Y" on records with Segment Identification '07' (claim segment).	X(01)	N Y	NCPKFLAT	47	47
Telecommunication Version Number*	N/A	Code identifying the Telecommunication Standard.	X(02)	D0=Version D.0	NCPKFLAT	48	49
Filler*	N/A	Reserved for future use.	X(11)	Spaces	NCPKFLAT	50	60

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transmission Patient Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Segment Identification	111-AM	Identifies the segment in the request record.	X(02)	01	NCPST01B	61	62
Patient ID Qualifier	331-CX	Code qualifying the Patient ID	X(02)	See External Code List	NCPST01B	63	64
Patient ID	332-CY	ID assigned to the patient.	X(20)		NCPST01B	65	84
Date of Birth	304-C4	Date of birth of patient.	9(08)	Format = CCYYMMDD	NCPST01B	85	92
Patient Gender Code	305-C5	Code indicating the gender of the patient.	9(01)	See External Code List	NCPST01B	93	93
Patient First Name	310-CA	Patient's first name.	X(12)		NCPST01B	94	105
Patient Last Name	311-CB	Patient's last name.	X(15)		NCPST01B	106	120
Patient Street Address	322-CM	Free form text for address information.	X(30)		NCPST01B	121	150
Patient City Address	323-CN	Free form text for city name.	X(20)		NCPST01B	151	170
Patient State/Province Address	324-CO	Standard state/province code as defined by appropriate government agency.	X(02)	See External Code List Appendix C.	NCPST01B	171	172
Patient ZIP/Postal Zone	325-CP	Code defining international postal zone excluding punctuation and blanks.	X(15)		NCPST01B	173	187
Patient Phone Number	326-CQ	Patient's 10-digit phone number.	9(10)	Format= AAEEEEENNNN	NCPST01B	188	197
Place of Service *Part of External Code List	307-C7	Code identifying the location of the patient when receiving pharmacy services	9(02)	Standard CMS Place of Service values	NCPST01B	198	199
Employer ID	333-CZ	ID assigned to the employer.	X(15)		NCPST01B	200	214

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transmission Patient Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Pregnancy Indicator	335-2C	Code indicating whether the patient is pregnant or not.	X(01)	See External Code List	NCPST01B	215	215
Patient E-mail Address	350-HN	The E-Mail address of the patient (member).	X(80)		NCPST01B	216	295
Patient Residence	384-4X	Code identifying the patient's place of residence	9(02)	See External Code List	NCPST01B	296	297

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Pharmacy Record

<i>Transaction Pharmacy Record</i>							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Sender ID*	880-K1	Identification number assigned to the sender of the data by the processor of the data.	X(24)		NCPKFLAT	1	24
Segment Identifier*	701	Unique record type required on Batch Transaction Standard.	X(02)	G1 = Data Detail Record	NCPKFLAT	25	26
Segment Identification*	111-AM	Identifies the segment in the request record. This field is only populated on records with Segment Identifier G1.	X(02)	02	NCPKFLAT	27	28
Version** ¹	N/A	Represents the current version of VIPs NCPDP software that is being used.	X(01)	A	NCPKFLAT	29	29
Batch Number*	806-5C	Number assigned by processor.	9(07)		NCPKFLAT	30	36
Transaction Reference Number*	880-K5	Number assigned by provider to each transaction record. This number is unique to each set of flat file records that represent a single claim. This field is only populated on records with Segment Identifier G1.	X(10)		NCPKFLAT	37	46
Group Indicator*	N/A	This field is used to indicate a group of related segments. These segments together represent the equivalent of 1 claim line. This field is only populated with a "Y" on records with Segment Identification '07' (claim segment).	X(01)	N Y	NCPKFLAT	47	47
Telecommunication Version Number*	N/A	Code identifying the Telecommunication Standard.	X(02)	D0=Version D.0	NCPKFLAT	48	49
Filler*	N/A	Reserved for future use.	X(11)	Spaces	NCPKFLAT	50	60

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Pharmacy Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Segment Identification	111-AM	Identifies the segment in the request record.	X(02)	02	NCPST02A	61	62
Provider ID Qualifier	465-EY	Code qualifying the Provider ID.	X(02)	See External Code List	NCPST02A	63	64
Provider ID	444-E9	ID assigned to the person responsible for the dispensing of the prescription.	X(15)		NCPST02A	65	79

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Prescriber Record

<i>Transaction Prescriber Record</i>							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Sender ID*	880-K1	Identification number assigned to the sender of the data by the processor of the data.	X(24)		NCPKFLAT	1	24
Segment Identifier*	701	Unique record type required on Batch Transaction Standard.	X(02)	G1 = Data Detail Record	NCPKFLAT	25	26
Segment Identification*	111-AM	Identifies the segment in the request record. This field is only populated on records with Segment Identifier G1.	X(02)	03	NCPKFLAT	27	28
Version** ¹	N/A	Represents the current version of VIPs NCPDP software that is being used.	X(01)	C	NCPKFLAT	29	29
Batch Number*	806-5C	Number assigned by processor.	9(07)		NCPKFLAT	30	36
Transaction Reference Number*	880-K5	Number assigned by provider to each transaction record. This number is unique to each set of flat file records that represent a single claim. This field is only populated on records with Segment Identifier G1.	X(10)		NCPKFLAT	37	46
Group Indicator*	N/A	This field is used to indicate a group of related segments. These segments together represent the equivalent of 1 claim line. This field is only populated with a "Y" on records with Segment Identification '07' (claim segment).	X(01)	N Y	NCPKFLAT	47	47
Telecommunication Version Number*	N/A	Code identifying the Telecommunication Standard.	X(02)	D0=Version D.0	NCPKFLAT	48	49
Filler*	N/A	Reserved for future use.	X(11)	Spaces	NCPKFLAT	50	60

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Prescriber Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Segment Identification	111-AM	Identifies the segment in the request record.	X(02)	03	NCPST03C	61	62
Prescriber ID Qualifier	466-EZ	Code qualifying the Prescriber ID.	X(02)	See External Code List	NCPST03C	63	64
Prescriber ID	411-DB	ID assigned to the prescriber.	X(15)		NCPST03C	65	79
Prescriber Last Name	427-DR	Individual last name.	X(15)		NCPST03C	80	94
Prescriber Phone Number	498-PM	Prescriber's 10-digit phone number.	9(10)		NCPST03C	95	104
Primary Care Provider ID Qualifier	468-2E	Code qualifying the Primary Care Provider ID.	X(02)	See External Code List	NCPST03C	105	106
Primary Care Provider ID	421-DL	Assigned to the primary care provider.	X(15)		NCPST03C	107	121
Primary Care Provider Last Name	470-4E	Providers last name.	X(15)		NCPST03C	122	136
Prescriber First Name	364-2J	Individual first name.	X(12)		NCPST03C	137	148
Prescriber Street Address	365-2K	Free form text for prescriber address information.	X(30)		NCPST03C	149	178
Prescriber City Address	366-2M	Free form text for prescriber city name.	X(20)		NCPST03C	179	198
Prescriber State/Province Address	367-2N	Standard state/province code as defined by appropriate government agency.	X(02)	See External Code List Appendix C.	NCPST03C	199	200
Prescriber Zip/Postal Service	368-2P	Code defining international postal zone excluding punctuation and blanks (zip code for US).	X(15)		NCPST03C	201	215
Prescriber ID Qualifier	N/A	Used for back end for COB, space filled by CEDI.	X(02)	Spaces	NCPST03C	216	217

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

<i>Transaction Prescriber Record</i>							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Prescriber ID	N/A	Used for back end for COB, space filled by CEDI.	X(15)	Spaces	NCPST03C	218	232

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transmission Insurance Record

<i>Transmission Insurance Record</i>							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Sender ID*	880-K1	Identification number assigned to the sender of the data by the processor of the data.	X(24)		NCPKFLAT	1	24
Segment Identifier*	701	Unique record type required on Batch Transaction Standard.	X(02)	G1 = Data Detail Record	NCPKFLAT	25	26
Segment Identification*	111-AM	Identifies the segment in the request record. This field is only populated on records with Segment Identifier G1.	X(02)	04	NCPKFLAT	27	28
Version** ¹	N/A	Represents the current version of VIPs NCPDP software that is being used.	X(01)	B	NCPKFLAT	29	29
Batch Number*	806-5C	Number assigned by processor.	9(07)		NCPKFLAT	30	36
Transaction Reference Number*	880-K5	Number assigned by provider to each transaction record. This number is unique to each set of flat file records that represent a single claim. This field is only populated on records with Segment Identifier G1.	X(10)		NCPKFLAT	37	46
Group Indicator*	N/A	This field is used to indicate a group of related segments. These segments together represent the equivalent of 1 claim line. This field is only populated with a "Y" on records with Segment Identification '07' (claim segment).	X(01)	N Y	NCPKFLAT	47	47
Telecommunication Version Number*	N/A	Code identifying the Telecommunication Standard.	X(02)	D0=Version D.0	NCPKFLAT	48	49
Filler*	N/A	Reserved for future use.	X(11)	Spaces	NCPKFLAT	50	60

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transmission Insurance Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Segment Identification	111-AM	Identifies the segment in the request record.	X(02)	04	NCPST04B	61	62
Cardholder ID	302-C2	Insurance ID assigned to the cardholder.	X(20)	HICN	NCPST04B	63	82
Cardholder First Name	312-CC	Individual first name.	X(12)		NCPST04B	83	94
Cardholder Last Name	313-CD	Individual last name.	X(15)		NCPST04B	95	109
Home Plan	314-CE	Blue Cross/Blue Shield plan ID	X(03)		NCPST04B	110	112
Plan ID	524-FO	Assigned by the processor to identify coverage criteria used to adjudicate a claim.	X(08)		NCPST04B	113	120
Eligibility Clarification Code	309-C9	Code indicating that the pharmacy is clarifying eligibility based on receiving a denial.	9(01)	See External Code List	NCPST04B	121	121
Group ID	301-C1	ID assigned to the cardholders or employers group.	X(15)		NCPST04B	122	136
Person Code	303-C3	Code assigned to a specific person within a family.	X(03)		NCPST04B	137	139
Patient Relationship Code	306-C6	Code identifying relationship of patient to cardholder.	9(01)	See External Code List	NCPST04B	140	140
Medigap ID	359-2A	Patient's ID assigned by the Medigap Insurer	X(20)		NCPST04B	141	160
Medicaid Indicator	360-2B	Two character State Postal Code indicating the state where Medicaid coverage exists.	X(02)	See External Code List Appendix C.	NCPST04B	161	162
Provider Accept Assignment Indicator	361-2D	Code indicating whether provider accepts assignment	X(01)	See External Code List	NCPST04B	163	163

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transmission Insurance Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
CMS Part D Defined Qualified Facility	997-G2	Indicates that the patient resides in a facility that qualifies for the CMS Part D benefit	X(01)	See External Code List	NCPST04B	164	164
Medicaid ID Number	115-N5	A unique member identification number assigned by the Medicaid Agency.	X(20)		NCPST04B	165	184

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record

<i>Transaction Coordination of Benefits/Other Payments Record</i>							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Sender ID*	880-K1	Identification number assigned to the sender of the data by the processor of the data.	X(24)		NCPKFLAT	1	24
Segment Identifier*	701	Unique record type required on Batch Transaction Standard.	X(02)	G1 = Data Detail Record	NCPKFLAT	25	26
Segment Identification*	111-AM	Identifies the segment in the request record. This field is only populated on records with Segment Identifier G1.	X(02)	05	NCPKFLAT	27	28
Version** ¹	N/A	Represents the current version of VIPs NCPDP software that is being used.	X(01)	B	NCPKFLAT	29	29
Batch Number*	806-5C	Number assigned by processor.	9(07)		NCPKFLAT	30	36
Transaction Reference Number*	880-K5	Number assigned by provider to each transaction record. This number is unique to each set of flat file records that represent a single claim. This field is only populated on records with Segment Identifier G1.	X(10)		NCPKFLAT	37	46
Group Indicator*	N/A	This field is used to indicate a group of related segments. These segments together represent the equivalent of 1 claim line. This field is only populated with a "Y" on records with Segment Identification '07' (claim segment).	X(01)	N Y	NCPKFLAT	47	47
Telecommunication Version Number*	N/A	Code identifying the Telecommunication Standard.	X(02)	D0=Version D.0	NCPKFLAT	48	49
Filler*	N/A	Reserved for future use.	X(11)	Spaces	NCPKFLAT	50	60

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Segment Identification	111-AM	Identifies the segment in the request record.	X(02)	05	NCPST05B	61	62
Coordination of Benefits/ Other Payments Count	337-4C	Count of other payment occurrences.	9(02)	Maximum count of 9	NCPST05B	63	64
Other Payer Coverage Type (1)	338-5C	Code identifying the type of Other Payer ID.	X(02)	See External Code List	NCPST05B	65	66
Other Payer ID Qualifier (1)	339-6C	Code qualifying the Other Payer ID.	X(02)	See External Code List	NCPST05B	67	68
Other Payer ID (1)	340-7C	ID assigned to the payer.	X(10)		NCPST05B	69	78
Other Payer Date (1)	443-E8	Payment or denial date of the claim submitted to the other payer.	9(08)	Format = CCYYMMDD	NCPST05B	79	86
Internal Control Number (1)	993-A7	Number assigned by the processor to identify an adjudicated claim when supplied in payer-to-payer coordination of benefits only.	X(30)		NCPST05B	87	116
Other Payer Amount Paid Count (1)	341-HB	Count of the Other Payer Amount Paid occurrences.	9(02)	Maximum count of 9	NCPST05B	117	118
Other Payer Amount Paid Qualifier (1,1)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	119	120
Other Payer Amount Paid (1,1)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	121	128
Other Payer Amount Paid Qualifier (1,2)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	129	130
Other Payer Amount Paid (1,2)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	131	138

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Amount Paid Qualifier (1,3)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	139	140
Other Payer Amount Paid (1,3)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	141	148
Other Payer Amount Paid Qualifier (1,4)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	149	150
Other Payer Amount Paid (1,4)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	151	158
Other Payer Amount Paid Qualifier (1,5)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	159	160
Other Payer Amount Paid (1,5)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	161	168
Other Payer Amount Paid Qualifier (1,6)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	169	170
Other Payer Amount Paid (1,6)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	171	178
Other Payer Amount Paid Qualifier (1,7)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	179	180
Other Payer Amount Paid (1,7)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	181	188
Other Payer Amount Paid Qualifier (1,8)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	189	190

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Amount Paid (1,8)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	191	198
Other Payer Amount Paid Qualifier (1,9)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	199	200
Other Payer Amount Paid (1,9)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	201	208
Other Payer Reject Count (1)	471-5E	Count of the Other Payer Reject Code occurrences.	9(02)	Maximum count of 5	NCPST05B	209	210
Other Payer Reject Code (1,1)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	211	213
Other Payer Reject Code (1,2)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	214	216
Other Payer Reject Code (1,3)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	217	219
Other Payer Reject Code (1,4)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	220	222
Other Payer Reject Code (1,5)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	223	225
Other Payer-Patient Responsibility Amount Count (1)	353-NR	The patient's cost share from a previous payer.	9(02)	Maximum count of 25	NCPST05B	226	227

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (1,1)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	228	229
Other Payer-Patient Responsibility Amount (1,1)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	230	239
Other Payer-Patient Responsibility Amount Qualifier (1,2)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	240	241
Other Payer-Patient Responsibility Amount (1,2)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	242	251
Other Payer-Patient Responsibility Amount Qualifier (1,3)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	252	253
Other Payer-Patient Responsibility Amount (1,3)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	254	263
Other Payer-Patient Responsibility Amount Qualifier (1,4)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	264	265
Other Payer-Patient Responsibility Amount (1,4)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	266	275
Other Payer-Patient Responsibility Amount Qualifier (1,5)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	276	277
Other Payer-Patient Responsibility Amount (1,5)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	278	287

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (1,6)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	288	289
Other Payer-Patient Responsibility Amount (1,6)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	290	299
Other Payer-Patient Responsibility Amount Qualifier (1,7)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	300	301
Other Payer-Patient Responsibility Amount (1,7)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	302	311
Other Payer-Patient Responsibility Amount Qualifier (1,8)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	312	313
Other Payer-Patient Responsibility Amount (1,8)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	314	323
Other Payer-Patient Responsibility Amount Qualifier (1,9)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	324	325
Other Payer-Patient Responsibility Amount (1,9)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	326	335
Other Payer-Patient Responsibility Amount Qualifier (1,10)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	336	337

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ VIPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount (1,10)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	338	347
Other Payer-Patient Responsibility Amount Qualifier (1,11)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	348	349
Other Payer-Patient Responsibility Amount (1,11)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	350	359
Other Payer-Patient Responsibility Amount Qualifier (1,12)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	360	361
Other Payer-Patient Responsibility Amount (1,12)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	362	371
Other Payer-Patient Responsibility Amount Qualifier (1,13)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	372	373
Other Payer-Patient Responsibility Amount (1,13)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	374	383
Other Payer-Patient Responsibility Amount Qualifier (1,14)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	384	385
Other Payer-Patient Responsibility Amount (1,14)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	386	395

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (1,15)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	396	397
Other Payer-Patient Responsibility Amount (1,15)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	398	407
Other Payer-Patient Responsibility Amount Qualifier (1,16)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	408	409
Other Payer-Patient Responsibility Amount (1,16)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	410	419
Other Payer-Patient Responsibility Amount Qualifier (1,17)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	420	421
Other Payer-Patient Responsibility Amount (1,17)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	422	431
Other Payer-Patient Responsibility Amount Qualifier (1,18)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	432	433
Other Payer-Patient Responsibility Amount (1,18)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	434	443

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (1,19)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	444	445
Other Payer-Patient Responsibility Amount (1,19)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	446	455
Other Payer-Patient Responsibility Amount Qualifier (1,20)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	456	457
Other Payer-Patient Responsibility Amount (1,20)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	458	469
Other Payer-Patient Responsibility Amount Qualifier (1,21)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	468	467
Other Payer-Patient Responsibility Amount (1,21)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	470	479
Other Payer-Patient Responsibility Amount Qualifier (1,22)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	480	481
Other Payer-Patient Responsibility Amount (1,22)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	482	491

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (1,23)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	492	493
Other Payer-Patient Responsibility Amount (1,23)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	494	503
Other Payer-Patient Responsibility Amount Qualifier (1,24)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	504	505
Other Payer-Patient Responsibility Amount (1,24)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	506	515
Other Payer-Patient Responsibility Amount Qualifier (1,25)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	516	517
Other Payer-Patient Responsibility Amount (1,25)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	518	527
Benefit Stage Count (1)	392-MU	Count of Benefit Stage Amount occurrences.	9(02)	Maximum count of 4	NCPST05B	528	529
Benefit Stage Qualifier (1,1)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	530	531
Benefit Stage Amount (1,1)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	532	539
Benefit Stage Qualifier (1,2)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	540	541

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Benefit Stage Amount (1,2)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	542	549
Benefit Stage Qualifier (1,3)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	550	551
Benefit Stage Amount (1,3)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	552	559
Benefit Stage Qualifier (1,4)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	560	561
Benefit Stage Amount (1,4)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	562	569
Other Payer Coverage Type (2)	338-5C	Code identifying the type of Other Payer ID.	X(02)	See External Code List	NCPST05B	570	571
Other Payer ID Qualifier (2)	339-6C	Code qualifying the Other Payer ID.	X(02)	See External Code List	NCPST05B	572	573
Other Payer ID (2)	340-7C	ID assigned to the payer.	X(10)		NCPST05B	574	583
Other Payer Date (2)	443-E8	Payment or denial date of the claim submitted to the other payer.	9(08)	Format = CCYYMMDD	NCPST05B	584	591
Internal Control Number (2)	993-A7	Number assigned by the processor to identify an adjudicated claim when supplied in payer-to-payer coordination of benefits only.	X(30)		NCPST05B	592	621
Other Payer Amount Paid Count (2)	341-HB	Count of the Other Payer Amount Paid occurrences.	9(02)	Maximum count of 9	NCPST05B	622	623
Other Payer Amount Paid Qualifier (2,1)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	624	625

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Amount Paid (2,1)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	626	633
Other Payer Amount Paid Qualifier (2,2)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	634	635
Other Payer Amount Paid (2,2)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	636	643
Other Payer Amount Paid Qualifier (2,3)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	644	645
Other Payer Amount Paid (2,3)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	646	653
Other Payer Amount Paid Qualifier (2,4)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	654	655
Other Payer Amount Paid (2,4)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	656	663
Other Payer Amount Paid Qualifier (2,5)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	664	665
Other Payer Amount Paid (2,5)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	666	673
Other Payer Amount Paid Qualifier (2,6)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	674	675
Other Payer Amount Paid (2,6)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	676	683

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Amount Paid Qualifier (2,7)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	684	685
Other Payer Amount Paid (2,7)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	686	693
Other Payer Amount Paid Qualifier (2,8)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	694	695
Other Payer Amount Paid (2,8)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	696	703
Other Payer Amount Paid Qualifier (2,9)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	704	705
Other Payer Amount Paid (2,9)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	706	713
Other Payer Reject Count (2)	471-5E	Count of the Other Payer Reject Code occurrences.	9(02)	Maximum count of 5	NCPST05B	714	715
Other Payer Reject Code (2,1)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	716	718
Other Payer Reject Code (2,2)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	719	721
Other Payer Reject Code (2,3)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	722	724
Other Payer Reject Code (2,4)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	725	727

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Reject Code (2,5)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	728	730
Other Payer-Patient Responsibility Amount Count (2)	353-NR	The patient's cost share from a previous payer.	9(02)	Maximum count of 25	NCPST05B	731	732
Other Payer-Patient Responsibility Amount Qualifier (2,1)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	733	734
Other Payer-Patient Responsibility Amount (2,1)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	735	744
Other Payer-Patient Responsibility Amount Qualifier (2,2)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	745	746
Other Payer-Patient Responsibility Amount (2,2)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	747	756
Other Payer-Patient Responsibility Amount Qualifier (2,3)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	757	758
Other Payer-Patient Responsibility Amount (2,3)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	759	768
Other Payer-Patient Responsibility Amount Qualifier (2,4)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	769	770
Other Payer-Patient Responsibility Amount (2,4)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	771	780

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (2,5)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	781	782
Other Payer-Patient Responsibility Amount (2,5)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	783	792
Other Payer-Patient Responsibility Amount Qualifier (2,6)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	793	794
Other Payer-Patient Responsibility Amount (2,6)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	795	804
Other Payer-Patient Responsibility Amount Qualifier (2,7)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	805	806
Other Payer-Patient Responsibility Amount (2,7)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	807	816
Other Payer-Patient Responsibility Amount Qualifier (2,8)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	817	818
Other Payer-Patient Responsibility Amount (2,8)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	819	828
Other Payer-Patient Responsibility Amount Qualifier (2,9)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	829	830
Other Payer-Patient Responsibility Amount (2,9)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	831	840

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (2,10)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	841	842
Other Payer-Patient Responsibility Amount (2,10)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	843	852
Other Payer-Patient Responsibility Amount Qualifier (2,11)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	853	854
Other Payer-Patient Responsibility Amount (2,11)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	855	864
Other Payer-Patient Responsibility Amount Qualifier (2,12)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	865	866
Other Payer-Patient Responsibility Amount (2,12)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	867	876
Other Payer-Patient Responsibility Amount Qualifier (2,13)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	877	878
Other Payer-Patient Responsibility Amount (2,13)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	879	888

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (2,14)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	889	890
Other Payer-Patient Responsibility Amount (2,14)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	891	900
Other Payer-Patient Responsibility Amount Qualifier (2,15)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	901	902
Other Payer-Patient Responsibility Amount (2,15)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	903	912
Other Payer-Patient Responsibility Amount Qualifier (2,16)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	913	914
Other Payer-Patient Responsibility Amount (2,16)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	915	924
Other Payer-Patient Responsibility Amount Qualifier (2,17)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	925	926
Other Payer-Patient Responsibility Amount (2,17)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	927	936

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (2,18)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	937	938
Other Payer-Patient Responsibility Amount (2,18)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	939	948
Other Payer-Patient Responsibility Amount Qualifier (2,19)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	949	950
Other Payer-Patient Responsibility Amount (2,19)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	951	960
Other Payer-Patient Responsibility Amount Qualifier (2,20)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	961	962
Other Payer-Patient Responsibility Amount (2,20)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	963	972
Other Payer-Patient Responsibility Amount Qualifier (2,21)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	973	974
Other Payer-Patient Responsibility Amount (2,21)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	975	984

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (2,22)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	985	986
Other Payer-Patient Responsibility Amount (2,22)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	987	996
Other Payer-Patient Responsibility Amount Qualifier (2,23)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	997	998
Other Payer-Patient Responsibility Amount (2,23)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	999	1008
Other Payer-Patient Responsibility Amount Qualifier (2,24)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1009	1010
Other Payer-Patient Responsibility Amount (2,24)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1011	1020
Other Payer-Patient Responsibility Amount Qualifier (2,25)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1021	1022
Other Payer-Patient Responsibility Amount (2,25)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1023	1032
Benefit Stage Count (2)	392-MU	Count of Benefit Stage Amount occurrences.	9(02)	Maximum count of 4	NCPST05B	1033	1034

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Benefit Stage Qualifier (2,1)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	1035	1036
Benefit Stage Amount (2,1)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	1037	1044
Benefit Stage Qualifier (2,2)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	1045	1046
Benefit Stage Amount (2,2)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	1047	1054
Benefit Stage Qualifier (2,3)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	1055	1056
Benefit Stage Amount (2,3)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	1057	1064
Benefit Stage Qualifier (2,4)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	1065	1066
Benefit Stage Amount (2,4)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	1067	1074
Other Payer Coverage Type (3)	338-5C	Code identifying the type of Other Payer ID.	X(02)	See External Code List	NCPST05B	1075	1076
Other Payer ID Qualifier (3)	339-6C	Code qualifying the Other Payer ID.	X(02)	See External Code List	NCPST05B	1077	1078
Other Payer ID (3)	340-7C	ID assigned to the payer.	X(10)		NCPST05B	1079	1088
Other Payer Date (3)	443-E8	Payment or denial date of the claim submitted to the other payer.	9(08)	Format = CCYYMMDD	NCPST05B	1089	1096

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Internal Control Number (3)	993-A7	Number assigned by the processor to identify an adjudicated claim when supplied in payer-to-payer coordination of benefits only.	X(30)		NCPST05B	1097	1126
Other Payer Amount Paid Count (3)	341-HB	Count of the Other Payer Amount Paid occurrences.	9(02)	Maximum count of 9	NCPST05B	1127	1128
Other Payer Amount Paid Qualifier (3,1)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	1129	1130
Other Payer Amount Paid (3,1)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	1131	1138
Other Payer Amount Paid Qualifier (3,2)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	1139	1140
Other Payer Amount Paid (3,2)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	1141	1148
Other Payer Amount Paid Qualifier (3,3)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	1149	1150
Other Payer Amount Paid (3,3)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	1151	1158
Other Payer Amount Paid Qualifier (3,4)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	1159	1160
Other Payer Amount Paid (3,4)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	1161	1168
Other Payer Amount Paid Qualifier (3,5)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	1169	1170

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Amount Paid (3,5)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	1171	1178
Other Payer Amount Paid Qualifier (3,6)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	1179	1180
Other Payer Amount Paid (3,6)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	1181	1188
Other Payer Amount Paid Qualifier (3,7)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	1189	1190
Other Payer Amount Paid (3,7)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	1191	1198
Other Payer Amount Paid Qualifier (3,8)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	1199	1200
Other Payer Amount Paid (3,8)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	1201	1208
Other Payer Amount Paid Qualifier (3,9)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	1209	1210
Other Payer Amount Paid (3,9)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	1211	1218
Other Payer Reject Count (3)	471-5E	Count of the Other Payer Reject Code occurrences.	9(02)	Maximum count of 5	NCPST05B	1219	1220
Other Payer Reject Code (3,1)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	1221	1223

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Reject Code (3,2)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	1224	1226
Other Payer Reject Code (3,3)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	1227	1229
Other Payer Reject Code (3,4)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	1230	1232
Other Payer Reject Code (3,5)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	1233	1235
Other Payer-Patient Responsibility Amount Count (3)	353-NR	The patient's cost share from a previous payer.	9(02)	Maximum count of 25	NCPST05B	1236	1237
Other Payer-Patient Responsibility Amount Qualifier (3,1)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1238	1239
Other Payer-Patient Responsibility Amount (3,1)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1240	1249
Other Payer-Patient Responsibility Amount Qualifier (3,2)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1250	1251
Other Payer-Patient Responsibility Amount (3,2)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1252	1261
Other Payer-Patient Responsibility Amount Qualifier (3,3)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1262	1263

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount (3,3)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1264	1273
Other Payer-Patient Responsibility Amount Qualifier (3,4)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1274	1275
Other Payer-Patient Responsibility Amount (3,4)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1276	1286
Other Payer-Patient Responsibility Amount Qualifier (3,5)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1286	1287
Other Payer-Patient Responsibility Amount (3,5)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1288	1297
Other Payer-Patient Responsibility Amount Qualifier (3,6)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1298	1299
Other Payer-Patient Responsibility Amount (3,6)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1300	1309
Other Payer-Patient Responsibility Amount Qualifier (3,7)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1310	1311
Other Payer-Patient Responsibility Amount (3,7)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1312	1321
Other Payer-Patient Responsibility Amount Qualifier (3,8)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1322	1323

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount (3,8)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1324	1333
Other Payer-Patient Responsibility Amount Qualifier (3,9)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1334	1335
Other Payer-Patient Responsibility Amount (3,9)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1336	1345
Other Payer-Patient Responsibility Amount Qualifier (3,10)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1346	1347
Other Payer-Patient Responsibility Amount (3,10)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1348	1357
Other Payer-Patient Responsibility Amount Qualifier (3,11)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1358	1359
Other Payer-Patient Responsibility Amount (3,11)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1360	1369
Other Payer-Patient Responsibility Amount Qualifier (3,12)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1370	1371
Other Payer-Patient Responsibility Amount (3,12)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1372	1381

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (3,13)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount..	X(02)	See External Code List	NCPST05B	1382	1383
Other Payer-Patient Responsibility Amount (3,13)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1384	1393
Other Payer-Patient Responsibility Amount Qualifier (3,14)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1394	1395
Other Payer-Patient Responsibility Amount (3,14)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1396	1405
Other Payer-Patient Responsibility Amount Qualifier (3,15)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1406	1407
Other Payer-Patient Responsibility Amount (3,15)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1408	1417
Other Payer-Patient Responsibility Amount Qualifier (3,16)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1418	1419
Other Payer-Patient Responsibility Amount (3,16)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1420	1429

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (3,17)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1430	1431
Other Payer-Patient Responsibility Amount (3,17)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1432	1441
Other Payer-Patient Responsibility Amount Qualifier (3,18)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1442	1443
Other Payer-Patient Responsibility Amount (3,18)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1444	1453
Other Payer-Patient Responsibility Amount Qualifier (3,19)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1454	1455
Other Payer-Patient Responsibility Amount (3,19)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1456	1465
Other Payer-Patient Responsibility Amount Qualifier (3,20)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount..	X(02)	See External Code List	NCPST05B	1466	1467
Other Payer-Patient Responsibility Amount (3,20)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1468	1477

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (3,21)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1478	1479
Other Payer-Patient Responsibility Amount (3,21)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1480	1489
Other Payer-Patient Responsibility Amount Qualifier (3,22)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1490	1491
Other Payer-Patient Responsibility Amount (3,22)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1492	1501
Other Payer-Patient Responsibility Amount Qualifier (3,23)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1502	1503
Other Payer-Patient Responsibility Amount (3,23)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1504	1513
Other Payer-Patient Responsibility Amount Qualifier (3,24)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1514	1515
Other Payer-Patient Responsibility Amount (3,24)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1516	1525

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (3,25)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1526	1527
Other Payer-Patient Responsibility Amount (3,25)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1528	1537
Benefit Stage Count (3)	392-MU	Count of Benefit Stage Amount occurrences.	9(02)	Maximum count of 4	NCPST05B	1538	1539
Benefit Stage Qualifier (3,1)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	1540	1541
Benefit Stage Amount (3,1)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	1542	1549
Benefit Stage Qualifier (3,2)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	1550	1551
Benefit Stage Amount (3,2)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	1552	1559
Benefit Stage Qualifier (3,3)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	1560	1561
Benefit Stage Amount (3,3)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	1562	1569
Benefit Stage Qualifier (3,4)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	1570	1571
Benefit Stage Amount (3,4)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	1572	1579

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Coverage Type (4)	338-5C	Code identifying the type of Other Payer ID.	X(02)	See External Code List	NCPST05B	1580	1581
Other Payer ID Qualifier (4)	339-6C	Code qualifying the Other Payer ID.	X(02)	See External Code List	NCPST05B	1582	1583
Other Payer ID (4)	340-7C	ID assigned to the payer.	X(10)		NCPST05B	1584	1593
Other Payer Date (4)	443-E8	Payment or denial date of the claim submitted to the other payer.	9(08)	Format = CCYYMMDD	NCPST05B	1594	1601
Internal Control Number (4)	993-A7	Number assigned by the processor to identify an adjudicated claim when supplied in payer-to-payer coordination of benefits only.	X(30)		NCPST05B	1602	1631
Other Payer Amount Paid Count (4)	341-HB	Count of the Other Payer Amount Paid occurrences.	9(02)	Maximum count of 9	NCPST05B	1632	1633
Other Payer Amount Paid Qualifier (4,1)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	1634	1635
Other Payer Amount Paid (4,1)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	1636	1643
Other Payer Amount Paid Qualifier (4,2)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	1644	1645
Other Payer Amount Paid (4,2)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	1646	1653
Other Payer Amount Paid Qualifier (4,3)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	1654	1655
Other Payer Amount Paid (4,3)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	1656	1663

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Amount Paid Qualifier (4,4)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	1664	1665
Other Payer Amount Paid (4,4)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	1666	1673
Other Payer Amount Paid Qualifier (4,5)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	1674	1675
Other Payer Amount Paid (4,5)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	1676	1683
Other Payer Amount Paid Qualifier (4,6)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	1684	1685
Other Payer Amount Paid (4,6)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	1686	1693
Other Payer Amount Paid Qualifier (4,7)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	1694	1695
Other Payer Amount Paid (4,7)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	1696	1703
Other Payer Amount Paid Qualifier (4,8)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	1704	1705
Other Payer Amount Paid (4,8)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	1706	1713
Other Payer Amount Paid Qualifier (4,9)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	1714	1715

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Amount Paid (4,9)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	1716	1723
Other Payer Reject Count (4)	471-5E	Count of the Other Payer Reject Code occurrences.	9(02)	Maximum count of 5	NCPST05B	1724	1725
Other Payer Reject Code (4,1)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	1726	1728
Other Payer Reject Code (4,2)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	1729	1731
Other Payer Reject Code (4,3)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	1732	1734
Other Payer Reject Code (4,4)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	1735	1737
Other Payer Reject Code (4,5)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	1738	1740
Other Payer-Patient Responsibility Amount Count (4)	353-NR	The patient's cost share from a previous payer.	9(02)	Maximum count of 25	NCPST05B	1741	1742
Other Payer-Patient Responsibility Amount Qualifier (4,1)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1743	1744
Other Payer-Patient Responsibility Amount (4,1)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1745	1754

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (4,2)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1755	1756
Other Payer-Patient Responsibility Amount (4,2)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1757	1766
Other Payer-Patient Responsibility Amount Qualifier (4,3)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1767	1768
Other Payer-Patient Responsibility Amount (4,3)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1769	1778
Other Payer-Patient Responsibility Amount Qualifier (4,4)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1779	1780
Other Payer-Patient Responsibility Amount (4,4)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1781	1790
Other Payer-Patient Responsibility Amount Qualifier (4,5)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1791	1792
Other Payer-Patient Responsibility Amount (4,5)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1793	1802
Other Payer-Patient Responsibility Amount Qualifier (4,6)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1803	1804
Other Payer-Patient Responsibility Amount (4,6)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1805	1814

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (4,7)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1815	1816
Other Payer-Patient Responsibility Amount (4,7)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1817	1826
Other Payer-Patient Responsibility Amount Qualifier (4,8)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1827	1828
Other Payer-Patient Responsibility Amount (4,8)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1829	1838
Other Payer-Patient Responsibility Amount Qualifier (4,9)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1839	1840
Other Payer-Patient Responsibility Amount (4,9)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1841	1850
Other Payer-Patient Responsibility Amount Qualifier (4,10)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1851	1852
Other Payer-Patient Responsibility Amount (4,10)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1853	1862
Other Payer-Patient Responsibility Amount Qualifier (4,11)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1863	1864

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ VIPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount (4,11)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1865	1874
Other Payer-Patient Responsibility Amount Qualifier (4,12)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1875	1876
Other Payer-Patient Responsibility Amount (4,12)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1877	1886
Other Payer-Patient Responsibility Amount Qualifier (4,13)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1887	1888
Other Payer-Patient Responsibility Amount (4,13)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1889	1898
Other Payer-Patient Responsibility Amount Qualifier (4,14)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1899	1900
Other Payer-Patient Responsibility Amount (4,14)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1901	1910
Other Payer-Patient Responsibility Amount Qualifier (4,15)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1911	1912
Other Payer-Patient Responsibility Amount (4,15)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1913	1922

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (4,16)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1923	1924
Other Payer-Patient Responsibility Amount (4,16)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1925	1934
Other Payer-Patient Responsibility Amount Qualifier (4,17)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1935	1936
Other Payer-Patient Responsibility Amount (4,17)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1937	1946
Other Payer-Patient Responsibility Amount Qualifier (4,18)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1947	1948
Other Payer-Patient Responsibility Amount (4,18)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1949	1958
Other Payer-Patient Responsibility Amount Qualifier (4,19)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1959	1960
Other Payer-Patient Responsibility Amount (4,19)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1961	1970

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (4,20)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1971	1972
Other Payer-Patient Responsibility Amount (4,20)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1973	1982
Other Payer-Patient Responsibility Amount Qualifier (4,21)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1983	1984
Other Payer-Patient Responsibility Amount (4,21)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1985	1994
Other Payer-Patient Responsibility Amount Qualifier (4,22)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	1995	1996
Other Payer-Patient Responsibility Amount (4,22)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	1997	2006
Other Payer-Patient Responsibility Amount Qualifier (4,23)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2007	2008
Other Payer-Patient Responsibility Amount (4,23)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2009	2018

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (4,24)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2019	2020
Other Payer-Patient Responsibility Amount (4,24)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2021	2030
Other Payer-Patient Responsibility Amount Qualifier (4,25)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2031	2032
Other Payer-Patient Responsibility Amount (4,25)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2033	2042
Benefit Stage Count (4)	392-MU	Count of Benefit Stage Amount occurrences.	9(02)	Maximum count of 4	NCPST05B	2043	2044
Benefit Stage Qualifier (4,1)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	2045	2046
Benefit Stage Amount (4,1)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	2047	2054
Benefit Stage Qualifier (4,2)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	2055	2056
Benefit Stage Amount (4,2)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	2057	2064
Benefit Stage Qualifier (4,3)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	2065	2066

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ VIPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Benefit Stage Amount (4,3)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	2067	2074
Benefit Stage Qualifier (4,4)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	2075	2076
Benefit Stage Amount (4,4)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	2077	2084
Other Payer Coverage Type (5)	338-5C	Code identifying the type of Other Payer ID.	X(02)	See External Code List	NCPST05B	2085	2086
Other Payer ID Qualifier (5)	339-6C	Code qualifying the Other Payer ID.	X(02)	See External Code List	NCPST05B	2087	2088
Other Payer ID (5)	340-7C	ID assigned to the payer.	X(10)		NCPST05B	2089	2098
Other Payer Date (5)	443-E8	Payment or denial date of the claim submitted to the other payer.	9(08)	Format = CCYYMMDD	NCPST05B	2099	2106
Internal Control Number (5)	993-A7	Number assigned by the processor to identify an adjudicated claim when supplied in payer-to-payer coordination of benefits only.	X(30)		NCPST05B	2107	2136
Other Payer Amount Paid Count (5)	341-HB	Count of the Other Payer Amount Paid occurrences.	9(02)	Maximum count of 9	NCPST05B	2137	2138
Other Payer Amount Paid Qualifier (5,1)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	2139	2140
Other Payer Amount Paid (5,1)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	2141	2148
Other Payer Amount Paid Qualifier (5,2)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	2149	2150

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Amount Paid (5,2)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	2151	2158
Other Payer Amount Paid Qualifier (5,3)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	2159	2160
Other Payer Amount Paid (5,3)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	2161	2168
Other Payer Amount Paid Qualifier (5,4)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	2169	2170
Other Payer Amount Paid (5,4)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	2171	2178
Other Payer Amount Paid Qualifier (5,5)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	2179	2180
Other Payer Amount Paid (5,5)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	2181	2188
Other Payer Amount Paid Qualifier (5,6)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	2189	2190
Other Payer Amount Paid (5,6)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	2191	2198
Other Payer Amount Paid Qualifier (5,7)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	2199	2200
Other Payer Amount Paid (5,7)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	2201	2208

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Amount Paid Qualifier (5,8)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	2209	2210
Other Payer Amount Paid (5,8)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	2211	2218
Other Payer Amount Paid Qualifier (5,9)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	2219	2220
Other Payer Amount Paid (5,9)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	2221	2228
Other Payer Reject Count (5)	471-5E	Count of the Other Payer Reject Code occurrences.	9(02)	Maximum count of 5	NCPST05B	2229	2230
Other Payer Reject Code (5,1)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	2231	2233
Other Payer Reject Code (5,2)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	2234	2236
Other Payer Reject Code (5,3)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	2237	2239
Other Payer Reject Code (5,4)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	2240	2242
Other Payer Reject Code (5,5)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	2243	2245
Other Payer-Patient Responsibility Amount Count (5)	353-NR	The patient's cost share from a previous payer.	9(02)	Maximum count of 25	NCPST05B	2246	2247

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (5,1)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2248	2249
Other Payer-Patient Responsibility Amount (5,1)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2250	2259
Other Payer-Patient Responsibility Amount Qualifier (5,2)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2260	2261
Other Payer-Patient Responsibility Amount (5,2)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2262	2271
Other Payer-Patient Responsibility Amount Qualifier (5,3)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2272	2273
Other Payer-Patient Responsibility Amount (5,3)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2274	2283
Other Payer-Patient Responsibility Amount Qualifier (5,4)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2284	2285
Other Payer-Patient Responsibility Amount (5,4)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2286	2295
Other Payer-Patient Responsibility Amount Qualifier (5,5)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2296	2297
Other Payer-Patient Responsibility Amount (5,5)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2298	2307

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (5,6)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2308	2309
Other Payer-Patient Responsibility Amount (5,6)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2310	2319
Other Payer-Patient Responsibility Amount Qualifier (5,7)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2320	2321
Other Payer-Patient Responsibility Amount (5,7)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2322	2331
Other Payer-Patient Responsibility Amount Qualifier (5,8)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2332	2333
Other Payer-Patient Responsibility Amount (5,8)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2334	2343
Other Payer-Patient Responsibility Amount Qualifier (5,9)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2344	2345
Other Payer-Patient Responsibility Amount (5,9)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2346	2355
Other Payer-Patient Responsibility Amount Qualifier (5,10)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2356	2357

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount (5,10)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2358	2367
Other Payer-Patient Responsibility Amount Qualifier (5,11)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2368	2369
Other Payer-Patient Responsibility Amount (5,11)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2370	2379
Other Payer-Patient Responsibility Amount Qualifier (5,12)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2380	2381
Other Payer-Patient Responsibility Amount (5,12)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2382	2391
Other Payer-Patient Responsibility Amount Qualifier (5,13)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2392	2393
Other Payer-Patient Responsibility Amount (5,13)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2394	2403
Other Payer-Patient Responsibility Amount Qualifier (5,14)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2404	2405
Other Payer-Patient Responsibility Amount (5,14)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2406	2415

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (5,15)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2416	2417
Other Payer-Patient Responsibility Amount (5,15)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2418	2427
Other Payer-Patient Responsibility Amount Qualifier (5,16)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2428	2429
Other Payer-Patient Responsibility Amount (5,16)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2430	2439
Other Payer-Patient Responsibility Amount Qualifier (5,17)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2440	2441
Other Payer-Patient Responsibility Amount (5,17)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2442	2451
Other Payer-Patient Responsibility Amount Qualifier (5,18)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2452	2453
Other Payer-Patient Responsibility Amount (5,18)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2454	2463

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (5,19)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2464	2465
Other Payer-Patient Responsibility Amount (5,19)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2466	2475
Other Payer-Patient Responsibility Amount Qualifier (5,20)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2476	2477
Other Payer-Patient Responsibility Amount (5,20)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2478	2487
Other Payer-Patient Responsibility Amount Qualifier (5,21)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2488	2489
Other Payer-Patient Responsibility Amount (5,21)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2490	2499
Other Payer-Patient Responsibility Amount Qualifier (5,22)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2500	2501
Other Payer-Patient Responsibility Amount (5,22)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2502	2511

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (5,23)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2512	2513
Other Payer-Patient Responsibility Amount (5,23)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2514	2523
Other Payer-Patient Responsibility Amount Qualifier (5,24)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2524	2525
Other Payer-Patient Responsibility Amount (5,24)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2526	2535
Other Payer-Patient Responsibility Amount Qualifier (5,25)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2536	2537
Other Payer-Patient Responsibility Amount (5,25)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2538	2547
Benefit Stage Count (5)	392-MU	Count of Benefit Stage Amount occurrences.	9(02)	Maximum count of 4	NCPST05B	2548	2549
Benefit Stage Qualifier (5,1)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	2550	2551
Benefit Stage Amount (5,1)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	2552	2559
Benefit Stage Qualifier (5,2)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	2560	2561

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Benefit Stage Amount (5,2)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	2562	2569
Benefit Stage Qualifier (5,3)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	2570	2571
Benefit Stage Amount (5,3)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	2572	2579
Benefit Stage Qualifier (5,4)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	2580	2581
Benefit Stage Amount (5,4)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	2582	2589
Other Payer Coverage Type (6)	338-5C	Code identifying the type of Other Payer ID.	X(02)	See External Code List	NCPST05B	2590	2591
Other Payer ID Qualifier (6)	339-6C	Code qualifying the Other Payer ID.	X(02)	See External Code List	NCPST05B	2592	2593
Other Payer ID (6)	340-7C	ID assigned to the payer.	X(10)		NCPST05B	2594	2603
Other Payer Date (6)	443-E8	Payment or denial date of the claim submitted to the other payer.	9(08)	Format = CCYYMMDD	NCPST05B	2604	2611
Internal Control Number (6)	993-A7	Number assigned by the processor to identify an adjudicated claim when supplied in payer-to-payer coordination of benefits only.	X(30)		NCPST05B	2612	2641
Other Payer Amount Paid Count (6)	341-HB	Count of the Other Payer Amount Paid occurrences.	9(02)	Maximum count of 9	NCPST05B	2642	2643
Other Payer Amount Paid Qualifier (6,1)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	2644	2645

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Amount Paid (6,1)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	2646	2653
Other Payer Amount Paid Qualifier (6,2)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	2654	2655
Other Payer Amount Paid (6,2)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	2656	2663
Other Payer Amount Paid Qualifier (6,3)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	2664	2665
Other Payer Amount Paid (6,3)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	2666	2673
Other Payer Amount Paid Qualifier (6,4)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	2674	2675
Other Payer Amount Paid (6,4)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	2676	2683
Other Payer Amount Paid Qualifier (6,5)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	2684	2685
Other Payer Amount Paid (6,5)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	2686	2693
Other Payer Amount Paid Qualifier (6,6)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	2694	2695
Other Payer Amount Paid (6,6)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	2696	2703

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Amount Paid Qualifier (6,7)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	2704	2705
Other Payer Amount Paid (6,7)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	2706	2713
Other Payer Amount Paid Qualifier (6,8)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	2714	2715
Other Payer Amount Paid (6,8)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	2716	2723
Other Payer Amount Paid Qualifier (6,9)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	2724	2725
Other Payer Amount Paid (6,9)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	2726	2733
Other Payer Reject Count (6)	471-5E	Count of the Other Payer Reject Code occurrences.	9(02)	Maximum count of 5	NCPST05B	2734	2735
Other Payer Reject Code (6,1)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	2736	2738
Other Payer Reject Code (6,2)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	2739	2741
Other Payer Reject Code (6,3)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	2742	2744
Other Payer Reject Code (6,4)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	2745	2747

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Reject Code (6,5)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	2748	2750
Other Payer-Patient Responsibility Amount Count (6)	353-NR	The patient's cost share from a previous payer.	9(02)	Maximum count of 25	NCPST05B	2751	2752
Other Payer-Patient Responsibility Amount Qualifier (6,1)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2753	2754
Other Payer-Patient Responsibility Amount (6,1)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2755	2764
Other Payer-Patient Responsibility Amount Qualifier (6,2)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2765	2766
Other Payer-Patient Responsibility Amount (6,2)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2767	2776
Other Payer-Patient Responsibility Amount Qualifier (6,3)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2777	2778
Other Payer-Patient Responsibility Amount (6,3)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2779	2788
Other Payer-Patient Responsibility Amount Qualifier (6,4)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2789	2790
Other Payer-Patient Responsibility Amount (6,4)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2791	2800

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (6,5)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2801	2802
Other Payer-Patient Responsibility Amount (6,5)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2803	2812
Other Payer-Patient Responsibility Amount Qualifier (6,6)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2813	2814
Other Payer-Patient Responsibility Amount (6,6)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2815	2824
Other Payer-Patient Responsibility Amount Qualifier (6,7)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2825	2826
Other Payer-Patient Responsibility Amount (6,7)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2827	2836
Other Payer-Patient Responsibility Amount Qualifier (6,8)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2837	2838
Other Payer-Patient Responsibility Amount (6,8)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2839	2848
Other Payer-Patient Responsibility Amount Qualifier (6,9)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2849	2850
Other Payer-Patient Responsibility Amount (6,9)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2851	2860

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (6,10)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2861	2862
Other Payer-Patient Responsibility Amount (6,10)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2863	2872
Other Payer-Patient Responsibility Amount Qualifier (6,11)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2873	2874
Other Payer-Patient Responsibility Amount (6,11)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2875	2884
Other Payer-Patient Responsibility Amount Qualifier (6,12)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2885	2886
Other Payer-Patient Responsibility Amount (6,12)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2887	2896
Other Payer-Patient Responsibility Amount Qualifier (6,13)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2897	2898
Other Payer-Patient Responsibility Amount (6,13)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2899	2908

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (6,14)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2909	2910
Other Payer-Patient Responsibility Amount (6,14)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2911	2920
Other Payer-Patient Responsibility Amount Qualifier (6,15)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2921	2922
Other Payer-Patient Responsibility Amount (6,15)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2923	2932
Other Payer-Patient Responsibility Amount Qualifier (6,16)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2933	2934
Other Payer-Patient Responsibility Amount (6,16)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2935	2944
Other Payer-Patient Responsibility Amount Qualifier (6,17)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2945	2946
Other Payer-Patient Responsibility Amount (6,17)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2947	2956

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (6,18)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2957	2958
Other Payer-Patient Responsibility Amount (6,18)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2959	2968
Other Payer-Patient Responsibility Amount Qualifier (6,19)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2969	2970
Other Payer-Patient Responsibility Amount (6,19)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2971	2980
Other Payer-Patient Responsibility Amount Qualifier (6,20)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2981	2982
Other Payer-Patient Responsibility Amount (6,20)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2983	2992
Other Payer-Patient Responsibility Amount Qualifier (6,21)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	2993	2994
Other Payer-Patient Responsibility Amount (6,21)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	2995	3004

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (6,22)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3005	3006
Other Payer-Patient Responsibility Amount (6,22)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3007	3016
Other Payer-Patient Responsibility Amount Qualifier (6,23)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3017	3018
Other Payer-Patient Responsibility Amount (6,23)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3019	3028
Other Payer-Patient Responsibility Amount Qualifier (6,24)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3029	3030
Other Payer-Patient Responsibility Amount (6,24)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3031	3040
Other Payer-Patient Responsibility Amount Qualifier (6,25)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3041	3042
Other Payer-Patient Responsibility Amount (6,25)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3043	3052
Benefit Stage Count (6)	392-MU	Count of Benefit Stage Amount occurrences.	9(02)	Maximum count of 4	NCPST05B	3053	3054

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Benefit Stage Qualifier (6,1)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	3055	3056
Benefit Stage Amount (6,1)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	3057	3064
Benefit Stage Qualifier (6,2)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	3065	3066
Benefit Stage Amount (6,2)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	3067	3074
Benefit Stage Qualifier (6,3)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	3075	3076
Benefit Stage Amount (6,3)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	3077	3084
Benefit Stage Qualifier (6,4)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	3085	3086
Benefit Stage Amount (6,4)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	3087	3094
Other Payer Coverage Type (7)	338-5C	Code identifying the type of Other Payer ID.	X(02)	See External Code List	NCPST05B	3095	3096
Other Payer ID Qualifier (7)	339-6C	Code qualifying the Other Payer ID.	X(02)	See External Code List	NCPST05B	3097	3098
Other Payer ID (7)	340-7C	ID assigned to the payer.	X(10)		NCPST05B	3099	3108
Other Payer Date (7)	443-E8	Payment or denial date of the claim submitted to the other payer.	9(08)	Format = CCYYMMDD	NCPST05B	3109	3116

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Internal Control Number (7)	993-A7	Number assigned by the processor to identify an adjudicated claim when supplied in payer-to-payer coordination of benefits only.	X(30)		NCPST05B	3117	3146
Other Payer Amount Paid Count (7)	341-HB	Count of the Other Payer Amount Paid occurrences.	9(02)	Maximum count of 9	NCPST05B	3147	3148
Other Payer Amount Paid Qualifier (7,1)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	3149	3150
Other Payer Amount Paid (7,1)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	3151	3158
Other Payer Amount Paid Qualifier (7,2)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	3159	3160
Other Payer Amount Paid (7,2)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	3161	3168
Other Payer Amount Paid Qualifier (7,3)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	3169	3170
Other Payer Amount Paid (7,3)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	3171	3178
Other Payer Amount Paid Qualifier (7,4)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	3179	3180
Other Payer Amount Paid (7,4)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	3181	3188
Other Payer Amount Paid Qualifier (7,5)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	3189	3190

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Amount Paid (7,5)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	3191	3198
Other Payer Amount Paid Qualifier (7,6)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	3199	3200
Other Payer Amount Paid (7,6)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	3201	3208
Other Payer Amount Paid Qualifier (7,7)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	3209	3210
Other Payer Amount Paid (7,7)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	3211	3218
Other Payer Amount Paid Qualifier (7,8)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	3219	3220
Other Payer Amount Paid (7,8)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	3221	3228
Other Payer Amount Paid Qualifier (7,9)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	3229	3230
Other Payer Amount Paid (7,9)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	3231	3238
Other Payer Reject Count (7)	471-5E	Count of the Other Payer Reject Code occurrences.	9(02)	Maximum count of 9	NCPST05B	3239	3240
Other Payer Reject Code (7,1)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	3241	3243

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Reject Code (7,2)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	3244	3246
Other Payer Reject Code (7,3)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	3247	3249
Other Payer Reject Code (7,4)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	3250	3252
Other Payer Reject Code (7,5)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	3253	3255
Other Payer-Patient Responsibility Amount Count (7)	353-NR	The patient's cost share from a previous payer.	9(02)	Maximum count of 25	NCPST05B	3256	3257
Other Payer-Patient Responsibility Amount Qualifier (7,1)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3258	3259
Other Payer-Patient Responsibility Amount (7,1)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3260	3269
Other Payer-Patient Responsibility Amount Qualifier (7,2)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3270	3271
Other Payer-Patient Responsibility Amount (7,2)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3272	3281
Other Payer-Patient Responsibility Amount Qualifier (7,3)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3282	3283

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount (7,3)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3284	3293
Other Payer-Patient Responsibility Amount Qualifier (7,4)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3294	3295
Other Payer-Patient Responsibility Amount (7,4)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3296	3305
Other Payer-Patient Responsibility Amount Qualifier (7,5)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3306	3307
Other Payer-Patient Responsibility Amount (7,5)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3308	3317
Other Payer-Patient Responsibility Amount Qualifier (7,6)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3318	3319
Other Payer-Patient Responsibility Amount (7,6)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3320	3329
Other Payer-Patient Responsibility Amount Qualifier (7,7)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3330	3331
Other Payer-Patient Responsibility Amount (7,7)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3332	3341
Other Payer-Patient Responsibility Amount Qualifier (7,8)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3342	3343

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount (7,8)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3344	3353
Other Payer-Patient Responsibility Amount Qualifier (7,9)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3354	3355
Other Payer-Patient Responsibility Amount (7,9)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3356	3365
Other Payer-Patient Responsibility Amount Qualifier (7,10)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3366	3367
Other Payer-Patient Responsibility Amount (7,10)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3368	3377
Other Payer-Patient Responsibility Amount Qualifier (7,11)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3378	3379
Other Payer-Patient Responsibility Amount (7,11)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3380	3389
Other Payer-Patient Responsibility Amount Qualifier (7,12)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3390	3391
Other Payer-Patient Responsibility Amount (7,12)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3392	3401

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (7,13)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3402	3403
Other Payer-Patient Responsibility Amount (7,13)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3404	3413
Other Payer-Patient Responsibility Amount Qualifier (7,14)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3414	3415
Other Payer-Patient Responsibility Amount (7,14)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3416	3425
Other Payer-Patient Responsibility Amount Qualifier (7,15)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3426	3427
Other Payer-Patient Responsibility Amount (7,15)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3428	3437
Other Payer-Patient Responsibility Amount Qualifier (7,16)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3438	3439
Other Payer-Patient Responsibility Amount (7,16)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3440	3449

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (7,17)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3450	3451
Other Payer-Patient Responsibility Amount (7,17)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3452	3461
Other Payer-Patient Responsibility Amount Qualifier (7,18)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3462	3463
Other Payer-Patient Responsibility Amount (7,18)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3464	3473
Other Payer-Patient Responsibility Amount Qualifier (7,19)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3474	3475
Other Payer-Patient Responsibility Amount (7,19)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3476	3485
Other Payer-Patient Responsibility Amount Qualifier (7,20)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3486	3487
Other Payer-Patient Responsibility Amount (7,20)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3488	3497

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (7,21)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3498	3499
Other Payer-Patient Responsibility Amount (7,21)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3500	3509
Other Payer-Patient Responsibility Amount Qualifier (7,22)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3510	3511
Other Payer-Patient Responsibility Amount (7,22)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3512	3521
Other Payer-Patient Responsibility Amount Qualifier (7,23)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3522	3523
Other Payer-Patient Responsibility Amount (7,23)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3524	3533
Other Payer-Patient Responsibility Amount Qualifier (7,24)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3534	3535
Other Payer-Patient Responsibility Amount (7,24)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3536	3545

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (7,25)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3546	3547
Other Payer-Patient Responsibility Amount (7,25)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3548	3557
Benefit Stage Count (7)	392-MU	Count of Benefit Stage Amount occurrences.	9(02)	Maximum count of 4	NCPST05B	3558	3559
Benefit Stage Qualifier (7,1)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	3560	3561
Benefit Stage Amount (7,1)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	3562	3569
Benefit Stage Qualifier (7,2)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	3570	3571
Benefit Stage Amount (7,2)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	3572	3579
Benefit Stage Qualifier (7,3)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	3580	3581
Benefit Stage Amount (7,3)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	3582	3589
Benefit Stage Qualifier (7,4)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	3590	3591
Benefit Stage Amount (7,4)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	3592	3599

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Coverage Type (8)	338-5C	Code identifying the type of Other Payer ID.	X(02)	See External Code List	NCPST05B	3600	3601
Other Payer ID Qualifier (8)	339-6C	Code qualifying the Other Payer ID.	X(02)	See External Code List	NCPST05B	3602	3603
Other Payer ID (8)	340-7C	ID assigned to the payer.	X(10)		NCPST05B	3604	3613
Other Payer Date (8)	443-E8	Payment or denial date of the claim submitted to the other payer.	9(08)	Format = CCYYMMDD	NCPST05B	3614	3621
Internal Control Number (8)	993-A7	Number assigned by the processor to identify an adjudicated claim when supplied in payer-to-payer coordination of benefits only.	X(30)		NCPST05B	3622	3651
Other Payer Amount Paid Count (8)	341-HB	Count of the Other Payer Amount Paid occurrences.	9(02)	Maximum count of 9	NCPST05B	3652	3653
Other Payer Amount Paid Qualifier (8,1)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	3654	3655
Other Payer Amount Paid (8,1)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	3656	3663
Other Payer Amount Paid Qualifier (8,2)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	3664	3665
Other Payer Amount Paid (8,2)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	3666	3673
Other Payer Amount Paid Qualifier (8,3)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	3674	3675
Other Payer Amount Paid (8,3)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	3676	3683

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Amount Paid Qualifier (8,4)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	3684	3685
Other Payer Amount Paid (8,4)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	3686	3693
Other Payer Amount Paid Qualifier (8,5)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	3694	3695
Other Payer Amount Paid (8,5)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	3696	3703
Other Payer Amount Paid Qualifier (8,6)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	3704	3705
Other Payer Amount Paid (8,6)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	3706	3713
Other Payer Amount Paid Qualifier (8,7)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	3714	3715
Other Payer Amount Paid (8,7)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	3716	3723
Other Payer Amount Paid Qualifier (8,8)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	3724	3725
Other Payer Amount Paid (8,8)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	3726	3733
Other Payer Amount Paid Qualifier (8,9)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	3734	3735

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Amount Paid (8,9)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	3736	3743
Other Payer Reject Count (8)	471-5E	Count of the Other Payer Reject Code occurrences.	9(02)	Maximum count of 5	NCPST05B	3744	3745
Other Payer Reject Code (8,1)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	3746	3748
Other Payer Reject Code (8,2)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	3749	3751
Other Payer Reject Code (8,3)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	3752	3754
Other Payer Reject Code (8,4)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	3755	3757
Other Payer Reject Code (8,5)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	3758	3760
Other Payer-Patient Responsibility Amount Count (8)	353-NR	The patient's cost share from a previous payer.	9(02)	Maximum count of 25	NCPST05B	3761	3762
Other Payer-Patient Responsibility Amount Qualifier (8,1)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3763	3764
Other Payer-Patient Responsibility Amount (8,1)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3765	3774

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (8,2)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3775	3776
Other Payer-Patient Responsibility Amount (8,2)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3777	3786
Other Payer-Patient Responsibility Amount Qualifier (8,3)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3787	3788
Other Payer-Patient Responsibility Amount (8,3)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3789	3798
Other Payer-Patient Responsibility Amount Qualifier (8,4)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3799	3800
Other Payer-Patient Responsibility Amount (8,4)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3801	3810
Other Payer-Patient Responsibility Amount Qualifier (8,5)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3811	3812
Other Payer-Patient Responsibility Amount (8,5)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3813	3822
Other Payer-Patient Responsibility Amount Qualifier (8,6)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3823	3824
Other Payer-Patient Responsibility Amount (8,6)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3825	3834

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (8,7)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3835	3836
Other Payer-Patient Responsibility Amount (8,7)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3837	3846
Other Payer-Patient Responsibility Amount Qualifier (8,8)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3847	3848
Other Payer-Patient Responsibility Amount (8,8)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3849	3858
Other Payer-Patient Responsibility Amount Qualifier (8,9)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3859	3860
Other Payer-Patient Responsibility Amount (8,9)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3861	3870
Other Payer-Patient Responsibility Amount Qualifier (8,10)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3871	3872
Other Payer-Patient Responsibility Amount (8,10)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3873	3882
Other Payer-Patient Responsibility Amount Qualifier (8,11)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3883	3884

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ VIPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount (8,11)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3885	3894
Other Payer-Patient Responsibility Amount Qualifier (8,12)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3895	3896
Other Payer-Patient Responsibility Amount (8,12)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3897	3906
Other Payer-Patient Responsibility Amount Qualifier (8,13)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3907	3908
Other Payer-Patient Responsibility Amount (8,13)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3909	3918
Other Payer-Patient Responsibility Amount Qualifier (8,14)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3919	3920
Other Payer-Patient Responsibility Amount (8,14)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3921	3930
Other Payer-Patient Responsibility Amount Qualifier (8,15)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3931	3932
Other Payer-Patient Responsibility Amount (8,15)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3933	3942

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (8,16)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3943	3944
Other Payer-Patient Responsibility Amount (8,16)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3945	3954
Other Payer-Patient Responsibility Amount Qualifier (8,17)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3955	3956
Other Payer-Patient Responsibility Amount (8,17)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3957	3966
Other Payer-Patient Responsibility Amount Qualifier (8,18)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3967	3968
Other Payer-Patient Responsibility Amount (8,18)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3969	3978
Other Payer-Patient Responsibility Amount Qualifier (8,19)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3979	3980
Other Payer-Patient Responsibility Amount (8,19)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3981	3990

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (8,20)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	3991	3992
Other Payer-Patient Responsibility Amount (8,20)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	3993	4002
Other Payer-Patient Responsibility Amount Qualifier (8,21)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4003	4004
Other Payer-Patient Responsibility Amount (8,21)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4005	4014
Other Payer-Patient Responsibility Amount Qualifier (8,22)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4015	4016
Other Payer-Patient Responsibility Amount (8,22)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4017	4026
Other Payer-Patient Responsibility Amount Qualifier (8,23)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4027	4028
Other Payer-Patient Responsibility Amount (8,23)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4029	4038

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (8,24)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4039	4040
Other Payer-Patient Responsibility Amount (8,24)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4041	4050
Other Payer-Patient Responsibility Amount Qualifier (8,25)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4051	4052
Other Payer-Patient Responsibility Amount (8,25)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4053	4062
Benefit Stage Count (8)	392-MU	Count of Benefit Stage Amount occurrences.	9(02)	Maximum count of 4	NCPST05B	4063	4064
Benefit Stage Qualifier (8,1)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	4065	4066
Benefit Stage Amount (8,1)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	4067	4074
Benefit Stage Qualifier (8,2)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	4075	4076
Benefit Stage Amount (8,2)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	4077	4084
Benefit Stage Qualifier (8,3)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	4085	4086

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ VIPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Benefit Stage Amount (8,3)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	4087	4094
Benefit Stage Qualifier (8,4)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	4095	4096
Benefit Stage Amount (8,4)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	4097	4104
Other Payer Coverage Type (9)	338-5C	Code identifying the type of Other Payer ID.	X(02)	See External Code List	NCPST05B	4105	4106
Other Payer ID Qualifier (9)	339-6C	Code qualifying the Other Payer ID.	X(02)	See External Code List	NCPST05B	4107	4108
Other Payer ID (9)	340-7C	ID assigned to the payer.	X(10)		NCPST05B	4109	4118
Other Payer Date (9)	443-E8	Payment or denial date of the claim submitted to the other payer.	9(08)	Format = CCYYMMDD	NCPST05B	4119	4126
Internal Control Number (9)	993-A7	Number assigned by the processor to identify an adjudicated claim when supplied in payer-to-payer coordination of benefits only.	X(30)		NCPST05B	4127	4156
Other Payer Amount Paid Count (9)	341-HB	Count of the Other Payer Amount Paid occurrences.	9(02)	Maximum count of 9	NCPST05B	4157	4158
Other Payer Amount Paid Qualifier (9,1)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	4159	4160
Other Payer Amount Paid (9,1)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	4161	4168
Other Payer Amount Paid Qualifier (9,2)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	4169	4170

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Amount Paid (9,2)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	4171	4178
Other Payer Amount Paid Qualifier (9,3)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	4179	4180
Other Payer Amount Paid (9,3)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	4181	4188
Other Payer Amount Paid Qualifier (9,4)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	4189	4190
Other Payer Amount Paid (9,4)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	4191	4198
Other Payer Amount Paid Qualifier (9,5)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	4199	4200
Other Payer Amount Paid (9,5)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	4201	4208
Other Payer Amount Paid Qualifier (9,6)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	4209	4210
Other Payer Amount Paid (9,6)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	4211	4218
Other Payer Amount Paid Qualifier (9,7)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	4219	4220
Other Payer Amount Paid (9,7)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	4221	4228

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer Amount Paid Qualifier (9,8)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	4229	4230
Other Payer Amount Paid (9,8)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	4231	4238
Other Payer Amount Paid Qualifier (9,9)	342-HC	Code qualifying the Other Payer Amount Paid.	X(02)	See External Code List	NCPST05B	4239	4240
Other Payer Amount Paid (9,9)	431-DV	Amount of any payment known by the pharmacy from other sources (including coupons).	S9(6)v99		NCPST05B	4241	4248
Other Payer Reject Count (9)	471-5E	Count of the Other Payer Reject Code occurrences.	9(02)	Maximum count of 5	NCPST05B	4249	4250
Other Payer Reject Code (9,1)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	4251	4253
Other Payer Reject Code (9,2)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	4254	4256
Other Payer Reject Code (9,3)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	4257	4259
Other Payer Reject Code (9,4)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	4260	4262
Other Payer Reject Code (9,5)	472-6E	The error encountered by the previous Other Payer.	X(03)	See External Code List Appendix A.1	NCPST05B	4263	4265
Other Payer-Patient Responsibility Amount Count (9)	353-NR	The patient's cost share from a previous payer.	9(02)	Maximum count of 25	NCPST05B	4266	4267

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (9,1)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4268	4269
Other Payer-Patient Responsibility Amount (9,1)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4270	4279
Other Payer-Patient Responsibility Amount Qualifier (9,2)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4280	4281
Other Payer-Patient Responsibility Amount (9,2)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4282	4291
Other Payer-Patient Responsibility Amount Qualifier (9,3)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4292	4293
Other Payer-Patient Responsibility Amount (9,3)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4294	4303
Other Payer-Patient Responsibility Amount Qualifier (9,4)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4304	4305
Other Payer-Patient Responsibility Amount (9,4)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4306	4315
Other Payer-Patient Responsibility Amount Qualifier (9,5)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4316	4317
Other Payer-Patient Responsibility Amount (9,5)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4318	4327

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (9,6)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4328	4329
Other Payer-Patient Responsibility Amount (9,6)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4330	4339
Other Payer-Patient Responsibility Amount Qualifier (9,7)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4340	4341
Other Payer-Patient Responsibility Amount (9,7)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4342	4351
Other Payer-Patient Responsibility Amount Qualifier (9,8)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4352	4353
Other Payer-Patient Responsibility Amount (9,8)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4354	4363
Other Payer-Patient Responsibility Amount Qualifier (9,9)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4364	4365
Other Payer-Patient Responsibility Amount (9,9)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4366	4375
Other Payer-Patient Responsibility Amount Qualifier (9,10)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4376	4377

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ VIPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount (9,10)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4378	4387
Other Payer-Patient Responsibility Amount Qualifier (9,11)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4388	4389
Other Payer-Patient Responsibility Amount (9,11)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4390	4399
Other Payer-Patient Responsibility Amount Qualifier (9,12)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4400	4401
Other Payer-Patient Responsibility Amount (9,12)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4402	4411
Other Payer-Patient Responsibility Amount Qualifier (9,13)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4412	4413
Other Payer-Patient Responsibility Amount (9,13)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4414	4423
Other Payer-Patient Responsibility Amount Qualifier (9,14)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4424	4425
Other Payer-Patient Responsibility Amount (9,14)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4426	4435

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (9,15)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4436	4437
Other Payer-Patient Responsibility Amount (9,15)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4438	4447
Other Payer-Patient Responsibility Amount Qualifier (9,16)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4448	4449
Other Payer-Patient Responsibility Amount (9,16)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4450	4459
Other Payer-Patient Responsibility Amount Qualifier (9,17)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4460	4461
Other Payer-Patient Responsibility Amount (9,17)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4462	4471
Other Payer-Patient Responsibility Amount Qualifier (9,18)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4472	4473
Other Payer-Patient Responsibility Amount (9,18)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4474	4483

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (9,19)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4484	4485
Other Payer-Patient Responsibility Amount (9,19)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4486	4495
Other Payer-Patient Responsibility Amount Qualifier (9,20)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4496	4497
Other Payer-Patient Responsibility Amount (9,20)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4498	4507
Other Payer-Patient Responsibility Amount Qualifier (9,21)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4508	4509
Other Payer-Patient Responsibility Amount (9,21)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4510	4519
Other Payer-Patient Responsibility Amount Qualifier (9,22)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4520	4521
Other Payer-Patient Responsibility Amount (9,22)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4522	4531

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Payer-Patient Responsibility Amount Qualifier (9,23)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4532	4533
Other Payer-Patient Responsibility Amount (9,23)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4534	4543
Other Payer-Patient Responsibility Amount Qualifier (9,24)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4544	4545
Other Payer-Patient Responsibility Amount (9,24)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4546	4555
Other Payer-Patient Responsibility Amount Qualifier (9,25)	351-NP	Code qualifying the Other Payer-Patient Responsibility Amount.	X(02)	See External Code List	NCPST05B	4556	4557
Other Payer-Patient Responsibility Amount (9,25)	352-NQ	The patient's cost share from a previous payer.	S9(8)v99		NCPST05B	4558	4567
Benefit Stage Count (9)	392-MU	Count of Benefit Stage Amount occurrences.	9(02)	Maximum count of 4	NCPST05B	4568	4569
Benefit Stage Qualifier (9,1)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	4570	4571
Benefit Stage Amount (9,1)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	4572	4579
Benefit Stage Qualifier (9,2)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	4580	4581

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coordination of Benefits/Other Payments Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Benefit Stage Amount (9,2)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	4582	4589
Benefit Stage Qualifier (9,3)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	4590	4591
Benefit Stage Amount (9,3)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	4592	4599
Benefit Stage Qualifier (9,4)	393-MV	Code qualifying the Benefit Stage Amount.	X(02)	See External Code List	NCPST05B	4600	4601
Benefit Stage Amount (9,4)	394-MW	The amount of the claim allocated to the Medicare stage identified by the Benefit Stage Qualifier.	S9(6)v99		NCPST05B	4602	4609

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Workers Comp Record

Transaction Workers Comp Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Sender ID*	880-K1	Identification number assigned to the sender of the data by the processor of the data.	X(24)		NCPKFLAT	1	24
Segment Identifier*	701	Unique record type required on Batch Transaction Standard.	X(02)	G1 = Data Detail Record	NCPKFLAT	25	26
Segment Identification*	111-AM	Identifies the segment in the request record. This field is only populated on records with Segment Identifier G1.	X(02)	06	NCPKFLAT	27	28
Version** ¹	N/A	Represents the current version of VIPs NCPDP software that is being used.	X(01)	B	NCPKFLAT	29	29
Batch Number*	806-5C	Number assigned by processor.	9(07)		NCPKFLAT	30	36
Transaction Reference Number*	880-K5	Number assigned by provider to each transaction record. This number is unique to each set of flat file records that represent a single claim. This field is only populated on records with Segment Identifier G1.	X(10)		NCPKFLAT	37	46
Group Indicator*	N/A	This field is used to indicate a group of related segments. These segments together represent the equivalent of 1 claim line. This field is only populated with a "Y" on records with Segment Identification '07' (claim segment).	X(01)	N Y	NCPKFLAT	47	47
Telecommunication Version Number*	N/A	Code identifying the Telecommunication Standard.	X(02)	D0=Version D.0	NCPKFLAT	48	49
Filler*	N/A	Reserved for future use.	X(11)	Spaces	NCPKFLAT	50	60

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Workers Comp Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Segment Identification	111-AM	Identifies the segment in the request record.	X(02)	06	NCPST06B	61	62
Date of Injury	434-DY	Date on which the injury occurred.	9(08)	Format = CCYYMMDD	NCPST06B	63	70
Employer Name	315-CF	Complete name of employer.	X(30)		NCPST06B	71	100
Employer Street Address	316-CG	Free-form text for address information.	X(30)		NCPST06B	101	130
Employer City Address	317-CH	Free-form text for city name.	X(20)		NCPST06B	131	150
Employer State/Province Address	318-CI	Standard state/province code as defined by appropriate government agency.	X(02)	See External Code List Appendix C.	NCPST06B	151	152
Employer ZIP/Postal Code	319-CJ	Code identifying international postal zone excluding punctuation and blanks.	X(15)		NCPST06B	153	167
Employer Phone Number	320-CK	Ten-digit phone number of employer.	9(10)		NCPST06B	168	177
Employer Contact Name	321-CL	Employer primary contact.	X(30)		NCPST06B	178	207
Carrier ID	327-CR	Carrier code assigned in Worker's Compensation program	X(10)		NCPST06B	208	217
Claim/Reference ID	435-DZ	Identifies the claim number assigned by the Worker's Compensation program.	X(30)		NCPST06B	218	247
Billing Entity Type Indicator	117-TR	A code that defines the entity submitting the billing transaction.	9(02)	See External Code List	NCPST06B	248	249
Pay To Qualifier	118-TS	Code qualifying the 'Pay To ID' (119-TT).	X(02)	See External Code List	NCPST06B	250	251
Pay To ID	119-TT	Identifying number of the entity to receive payment for the claim.	X(15)		NCPST06B	252	266

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Workers Comp Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Pay To Name	120-TU	Name of entity to receive payment for claim.	X(20)		NCPST06B	267	286
Pay To Street Address	121-TV	Street address of entity to receive payment for claim.	X(30)		NCPST06B	287	316
Pay To City Address	122-TW	City of the entity to receive payment for claim.	X(20)		NCPST06B	317	336
Pay To State/Province Address	123-TX	Standard state/province code as defined by appropriate government agency.	X(02)	See External Code List Appendix C.	NCPST06B	337	338
Pay To Zip/Postal Code	124-TY	Code defining international postal code excluding punctuation and blanks (zip code for U.S.).	X(15)		NCPST06B	339	353
Generic Equivalent Product ID Qualifier	125-TZ	Code qualifying the Generic Equivalent Product ID.	X(02)	See External Code List Appendix B.	NCPST06B	354	355
Generic Equivalent Product ID	126-UA	Identifies the generic equivalent of the brand product dispensed.	X(19)		NCPST06B	356	374

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ VIPS generated; does not correspond to any NCPDP field name.

Transaction Claim Record

<i>Transaction Claim Record</i>							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Sender ID*	880-K1	Identification number assigned to the sender of the data by the processor of the data.	X(24)		NCPKFLAT	1	24
Segment Identifier*	701	Unique record type required on Batch Transaction Standard.	X(02)	G1 = Data Detail Record	NCPKFLAT	25	26
Segment Identification*	111-AM	Identifies the segment in the request record. This field is only populated on records with Segment Identifier G1.	X(02)	07	NCPKFLAT	27	28
Version** ¹	N/A	Represents the current version of VIPs NCPDP software that is being used.	X(01)	B	NCPKFLAT	29	29
Batch Number*	806-5C	Number assigned by processor.	9(07)		NCPKFLAT	30	36
Transaction Reference Number*	880-K5	Number assigned by provider to each transaction record. This number is unique to each set of flat file records that represent a single claim. This field is only populated on records with Segment Identifier G1.	X(10)		NCPKFLAT	37	46
Group Indicator*	N/A	This field is used to indicate a group of related segments. These segments together represent the equivalent of 1 claim line. This field is only populated with a "Y" on records with Segment Identification '07' (claim segment).	X(01)	Y	NCPKFLAT	47	47
Telecommunication Version Number*	N/A	Code identifying the Telecommunication Standard.	X(02)	D0=Version D.0	NCPKFLAT	48	49
Filler*	N/A	Reserved for future use.	X(11)	Spaces	NCPKFLAT	50	60

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Claim Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Segment Identification	111-AM	Identifies the segment in the request record.	X(02)	07	NCPST07B	61	62
Prescription/Service Reference Number Qualifier	455-EM	Indicates the type of billing submitted.	X(01)	See External Code List	NCPST07B	63	63
Prescription/Service Reference Number	402-D2	Reference number assigned by the provider for the dispensed drug/product and/or service provided.	9(12)		NCPST07B	64	75
Product/Service ID Qualifier	436-E1	Code qualifying the Product/Service ID	X(02)	See External Code List	NCPST07B	76	77
Product/Service ID	407-D7	ID of the product dispensed or service provided.	X(19)		NCPST07B	78	96
Associated Prescription/ Service Reference Number	456-EN	Related Prescription/Service Reference Number to which the service is associated.	9(12)		NCPST07B	97	108
Associated Prescription/ Service Date	457-EP	Date of the Associated Prescription/Service Reference Number.	9(08)		NCPST07B	109	116
Procedure Modifier Code Count	458-SE	Count of the Procedure Modifier Code	9(02)	Maximum count is 10	NCPST07B	117	118
Procedure Modifier Code (1)	459-ER	Identifies special circumstances related to the performance of the service.	X(02)	CMS code set of HCPCS modifiers	NCPST07B	119	120
Procedure Modifier Code (2)	459-ER	Identifies special circumstances related to the performance of the service.	X(02)	CMS code set of HCPCS modifiers	NCPST07B	121	122
Procedure Modifier Code (3)	459-ER	Identifies special circumstances related to the performance of the service.	X(02)	CMS code set of HCPCS modifiers	NCPST07B	123	124

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Claim Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Procedure Modifier Code (4)	459-ER	Identifies special circumstances related to the performance of the service.	X(02)	CMS code set of HCPCS modifiers	NCPST07B	125	126
Procedure Modifier Code (5)	459-ER	Identifies special circumstances related to the performance of the service.	X(02)	CMS code set of HCPCS modifiers	NCPST07B	127	128
Procedure Modifier Code (6)	459-ER	Identifies special circumstances related to the performance of the service.	X(02)	CMS code set of HCPCS modifiers	NCPST07B	129	130
Procedure Modifier Code (7)	459-ER	Identifies special circumstances related to the performance of the service.	X(02)	CMS code set of HCPCS modifiers	NCPST07B	131	132
Procedure Modifier Code (8)	459-ER	Identifies special circumstances related to the performance of the service.	X(02)	CMS code set of HCPCS modifiers	NCPST07B	133	134
Procedure Modifier Code (9)	459-ER	Identifies special circumstances related to the performance of the service.	X(02)	CMS code set of HCPCS modifiers	NCPST07B	135	136
Procedure Modifier Code (10)	459-ER	Identifies special circumstances related to the performance of the service.	X(02)	CMS code set of HCPCS modifiers	NCPST07B	137	138
Quantity Dispensed	442-E7	Quantity dispensed expressed in metric decimal units.	9(7)v999		NCPST07B	139	148
Fill Number	403-D3	The code indicating whether the prescription is an original or a refill.	9(02)	See External Code List	NCPST07B	149	150
Days Supply	405-D5	Estimated number of days that the prescription will last.	9(03)		NCPST07B	151	153
Compound Code	406-D6	Code indicating whether or not the prescription is a compound.	9(01)	See External Code List	NCPST07B	154	154

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Claim Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Dispense As Written (DAW)/Product Selection Code	408-D8	Code indicating whether or not the prescriber's instructions regarding generic substitution were followed.	X(01)	See External Code List	NCPST07B	155	155
Date Prescription Written	414-DE	Date prescription was written.	9(08)	Format = CCYYMMDD	NCPST07B	156	163
Number of Refills Authorized	415-DF	Number of refills authorized by the prescriber.	9(02)	See External Code List	NCPST07B	164	165
Prescription Origin Code	419-DJ	Code indicating the origin of the prescription.	9(01)	See External Code List	NCPST07B	166	166
Submission Clarification Code Count	354-NX	Count of the Submission Clarification Code occurrences.	9(02)	Maximum count is 3	NCPST07B	167	168
Submission Clarification Code (1)	420-DK	Code indicating that the pharmacist is clarifying the submission.	9(02)	See External Code List	NCPST07B	169	170
Submission Clarification Code (2)	420-DK	Code indicating that the pharmacist is clarifying the submission.	9(02)	See External Code List	NCPST07B	171	172
Submission Clarification Code (3)	420-DK	Code indicating that the pharmacist is clarifying the submission.	9(02)	See External Code List	NCPST07B	173	174
Other Coverage Code	308-C8	Code indicating whether or not the patient has other insurance coverage.	9(02)	See External Code List	NCPST07B	175	176
Special Packaging Indicator	429-DT	Code indicating the type of unit dose dispensing.	9(01)	See External Code List	NCPST07B	177	177
Originally Prescribed Product/Service ID Qualifier	453-EJ	Code qualifying the value in Originally Prescribed Product/Service Code.	X(02)	See External Code List Appendix B.	NCPST07B	178	179
Originally Prescribed Product/Service Code	445-EA	Code of the initially prescribed product or service.	X(19)		NCPST07B	180	198

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Claim Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Originally Prescribed Quantity	446-EB	Product initially prescribed amount expressed in metric decimal units.	9(7)v999		NCPST07B	199	208
Scheduled Prescription ID Number	454-EK	The serial number of the prescription blank/form.	X(12)		NCPST07B	209	220
Unit of Measure	600-28	NCPDP standard product billing codes	X(02)	See External Code List	NCPST07B	221	222
Level of Service	418-DI	Coding indicating the type of service the provider rendered.	9(02)	See External Code List	NCPST07B	223	224
Prior Authorization Type Code	461-EU	Code clarifying the Prior Authorization Number	9(02)	See External Code List	NCPST07B	225	226
Prior Authorization Number Submitted	462-EV	Number submitted by the provider to identify the prior authorization.	9(11)		NCPST07B	227	237
Intermediary Authorization Type ID	463-EW	Value indicating that authorization occurred for intermediary processing.	9(02)	See External Code List	NCPST07B	238	239
Intermediary Authorization ID	464-EX	Value indicating intermediary authorization occurred.	X(11)		NCPST07B	240	250
Dispensing Status	343-HD	Code indicating the quantity is a partial fill or the completion of a partial fill.	X(01)	See External Code List	NCPST07B	251	251
Quantity Intended To Be Dispensed	344-HF	Metric decimal quantity of medication that would be dispensed on original filling if inventory were available.	9(7)v999		NCPST07B	252	261
Days Supply Intended To Be Dispensed	345-HG	Days supply for metric decimal quantity that would be dispensed on original fill if inventory were available.	9(03)		NCPST07B	262	264
Delay Reason Code	357-NV	Code to specify the reason that submission of the transactions has been delayed.	9(02)	See External Code List	NCPST07B	265	266

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Claim Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Patient Assignment Indicator	391-MT	Code to indicate a patient's choice on assignment of benefits.	X(01)	See External Code List	NCPST07B	267	267
Route of Administration	995-E2	This is an override to the "default" route referenced for the product. For a multi-ingredient compound, it is the route of the complete compound mixture.	X(11)	Systematized Nomenclature of Medicine Clinical Terms® (SNOMED CT) SNOMED CT® terminology is available from the College of American Pathologists, Northfield, Illinois http://www.snomed.org/	NCPST07B	268	278
Compound Type	996-G1	Clarifies type of compound	X(02)	See External Code List	NCPST07B	279	280
Pharmacy Service Type	147-U7	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.	9(02)	See External Code List	NCPST07B	281	282

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction DUR-PPS Record

<i>Transaction DUR-PPS Record</i>							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Sender ID*	880-K1	Identification number assigned to the sender of the data by the processor of the data.	X(24)		NCPKFLAT	1	24
Segment Identifier*	701	Unique record type required on Batch Transaction Standard.	X(02)	G1 = Data Detail Record	NCPKFLAT	25	26
Segment Identification*	111-AM	Identifies the segment in the request record. This field is only populated on records with Segment Identifier G1.	X(02)	08	NCPKFLAT	27	28
Version** ¹	N/A	Represents the current version of VIPs NCPDP software that is being used.	X(01)	A	NCPKFLAT	29	29
Batch Number*	806-5C	Number assigned by processor.	9(07)		NCPKFLAT	30	36
Transaction Reference Number*	880-K5	Number assigned by provider to each transaction record. This number is unique to each set of flat file records that represent a single claim. This field is only populated on records with Segment Identifier G1.	X(10)		NCPKFLAT	37	46
Group Indicator*	N/A	This field is used to indicate a group of related segments. These segments together represent the equivalent of 1 claim line. This field is only populated with a "Y" on records with Segment Identification '07' (claim segment).	X(01)	N Y	NCPKFLAT	47	47
Telecommunication Version Number*	N/A	Code identifying the Telecommunication Standard.	X(02)	D0=Version D.0	NCPKFLAT	48	49
Filler*	N/A	Reserved for future use.	X(11)	Spaces	NCPKFLAT	50	60

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction DUR-PPS Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Segment Identification	111-AM	Identifies the segment in the request record.	X(02)	08	NCPST08A	61	62
DUR/PPS Code Counter	473-7E	Counter number for each DUR/PPS set/logical grouping.	9(02)	0 –9	NCPST08A	63	64
Reason For Service Code (1)	439-E4	Code identifying the type of utilization conflict detected or the reason for the pharmacist's professional service.	X(02)	See External Code List	NCPST08A	65	66
Professional Service Code (1)	440-E5	Code identifying pharmacist intervention when a conflict code has been identified or service has been rendered.	X(02)	See External Code List	NCPST08A	67	68
Result Of Service Code (1)	441-E6	Action taken by pharmacist in response to a conflict or the result of a pharmacist's professional service.	X(02)	See External Code List	NCPST08A	69	70
DUR/PPS Level Of Effort (1)	474-8E	Code indicating the level of effort as determined by the complexity of decision making or resources utilized by a pharmacist to perform a professional service.	9(02)	See External Code List	NCPST08A	71	72
DUR Co-agent ID Qualifier (1)	475-J9	Code qualifying the value in DUR Co-agent ID.	X(02)	See External Code List Appendix B.	NCPST08A	73	74
DUR Co-agent ID (1)	476-H6	Identifies the co-existing agent contributing to the DUR event.	X(19)		NCPST08A	75	93
Reason For Service Code (2)	439-E4	Code identifying the type of utilization conflict detected or the reason for the pharmacist's professional service.	X(02)	See External Code List	NCPST08A	94	95
Professional Service Code (2)	440-E5	Code identifying pharmacist intervention when a conflict code has been identified or service has been rendered.	X(02)	See External Code List	NCPST08A	96	97

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction DUR-PPS Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Result Of Service Code (2)	441-E6	Action taken by pharmacist in response to a conflict or the result of a pharmacist's professional service.	X(02)	See External Code List	NCPST08A	98	99
DUR/PPS Level Of Effort (2)	474-8E	Code indicating the level of effort as determined by the complexity of decision making or resources utilized by a pharmacist to perform a professional service.	9(02)	See External Code List	NCPST08A	100	101
DUR Co-agent ID Qualifier (2)	475-J9	Code qualifying the value in DUR Co-agent ID.	X(02)	See External Code List Appendix B.	NCPST08A	102	103
DUR Co-agent ID (2)	476-H6	Identifies the co-existing agent contributing to the DUR event.	X(19)		NCPST08A	104	122
Reason For Service Code (3)	439-E4	Code identifying the type of utilization conflict detected or the reason for the pharmacist's professional service.	X(02)	See External Code List	NCPST08A	123	124
Professional Service Code (3)	440-E5	Code identifying pharmacist intervention when a conflict code has been identified or service has been rendered.	X(02)	See External Code List	NCPST08A	125	126
Result Of Service Code (3)	441-E6	Action taken by pharmacist in response to a conflict or the result of a pharmacist's professional service.	X(02)	See External Code List	NCPST08A	127	128
DUR/PPS Level Of Effort (3)	474-8E	Code indicating the level of effort as determined by the complexity of decision making or resources utilized by a pharmacist to perform a professional service.	9(02)	See External Code List	NCPST08A	129	130
DUR Co-agent ID Qualifier (3)	475-J9	Code qualifying the value in DUR Co-agent ID.	X(02)	See External Code List Appendix B.	NCPST08A	131	132

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction DUR-PPS Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
DUR Co-agent ID (3)	476-H6	Identifies the co-existing agent contributing to the DUR event.	X(19)		NCPST08A	133	151
Reason For Service Code (4)	439-E4	Code identifying the type of utilization conflict detected or the reason for the pharmacist's professional service.	X(02)	See External Code List	NCPST08A	152	153
Professional Service Code (4)	440-E5	Code identifying pharmacist intervention when a conflict code has been identified or service has been rendered.	X(02)	See External Code List	NCPST08A	154	155
Result Of Service Code (4)	441-E6	Action taken by pharmacist in response to a conflict or the result of a pharmacist's professional service.	X(02)	See External Code List	NCPST08A	156	157
DUR/PPS Level Of Effort (4)	474-8E	Code indicating the level of effort as determined by the complexity of decision making or resources utilized by a pharmacist to perform a professional service.	9(02)	See External Code List	NCPST08A	158	159
DUR Co-agent ID Qualifier (4)	475-J9	Code qualifying the value in DUR Co-agent ID.	X(02)	See External Code List Appendix B.	NCPST08A	160	161
DUR Co-agent ID (4)	476-H6	Identifies the co-existing agent contributing to the DUR event.	X(19)		NCPST08A	162	180
Reason For Service Code (5)	439-E4	Code identifying the type of utilization conflict detected or the reason for the pharmacist's professional service.	X(02)	See External Code List	NCPST08A	181	182
Professional Service Code (5)	440-E5	Code identifying pharmacist intervention when a conflict code has been identified or service has been rendered.	X(02)	See External Code List	NCPST08A	183	184
Result Of Service Code (5)	441-E6	Action taken by pharmacist in response to a conflict or the result of a pharmacist's professional service.	X(02)	See External Code List	NCPST08A	185	186

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction DUR-PPS Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
DUR/PPS Level Of Effort (5)	474-8E	Code indicating the level of effort as determined by the complexity of decision making or resources utilized by a pharmacist to perform a professional service.	9(02)	See External Code List	NCPST08A	187	188
DUR Co-agent ID Qualifier (5)	475-J9	Code qualifying the value in DUR Co-agent ID.	X(02)	See External Code List Appendix B.	NCPST08A	189	190
DUR Co-agent ID (5)	476-H6	Identifies the co-existing agent contributing to the DUR event.	X(19)		NCPST08A	191	209
Reason For Service Code (6)	439-E4	Code identifying the type of utilization conflict detected or the reason for the pharmacist's professional service.	X(02)	See External Code List	NCPST08A	210	211
Professional Service Code (6)	440-E5	Code identifying pharmacist intervention when a conflict code has been identified or service has been rendered.	X(02)	See External Code List	NCPST08A	212	213
Result Of Service Code (6)	441-E6	Action taken by pharmacist in response to a conflict or the result of a pharmacist's professional service.	X(02)	See External Code List	NCPST08A	214	215
DUR/PPS Level Of Effort (6)	474-8E	Code indicating the level of effort as determined by the complexity of decision making or resources utilized by a pharmacist to perform a professional service.	9(02)	See External Code List	NCPST08A	216	217
DUR Co-agent ID Qualifier (6)	475-J9	Code qualifying the value in DUR Co-agent ID.	X(02)	See External Code List Appendix B.	NCPST08A	218	219
DUR Co-agent ID (6)	476-H6	Identifies the co-existing agent contributing to the DUR event.	X(19)		NCPST08A	220	238

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ VIPS generated; does not correspond to any NCPDP field name.

Transaction DUR-PPS Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Reason For Service Code (7)	439-E4	Code identifying the type of utilization conflict detected or the reason for the pharmacist's professional service.	X(02)	See External Code List	NCPST08A	239	240
Professional Service Code (7)	440-E5	Code identifying pharmacist intervention when a conflict code has been identified or service has been rendered.	X(02)	See External Code List	NCPST08A	241	242
Result Of Service Code (7)	441-E6	Action taken by pharmacist in response to a conflict or the result of a pharmacist's professional service.	X(02)	See External Code List	NCPST08A	243	244
DUR/PPS Level Of Effort (7)	474-8E	Code indicating the level of effort as determined by the complexity of decision making or resources utilized by a pharmacist to perform a professional service.	9(02)	See External Code List	NCPST08A	245	246
DUR Co-agent ID Qualifier (7)	475-J9	Code qualifying the value in DUR Co-agent ID.	X(02)	See External Code List Appendix B.	NCPST08A	247	248
DUR Co-agent ID (7)	476-H6	Identifies the co-existing agent contributing to the DUR event.	X(19)		NCPST08A	249	267
Reason For Service Code (8)	439-E4	Code identifying the type of utilization conflict detected or the reason for the pharmacist's professional service.	X(02)	See External Code List	NCPST08A	268	269
Professional Service Code (8)	440-E5	Code identifying pharmacist intervention when a conflict code has been identified or service has been rendered.	X(02)	See External Code List	NCPST08A	270	271
Result Of Service Code (8)	441-E6	Action taken by pharmacist in response to a conflict or the result of a pharmacist's professional service.	X(02)	See External Code List	NCPST08A	272	273

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction DUR-PPS Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
DUR/PPS Level Of Effort (8)	474-8E	Code indicating the level of effort as determined by the complexity of decision making or resources utilized by a pharmacist to perform a professional service.	9(02)	See External Code List	NCPST08A	274	275
DUR Co-agent ID Qualifier (8)	475-J9	Code qualifying the value in DUR Co-agent ID.	X(02)	See External Code List Appendix B.	NCPST08A	276	277
DUR Co-agent ID (8)	476-H6	Identifies the co-existing agent contributing to the DUR event.	X(19)		NCPST08A	278	296
Reason For Service Code (9)	439-E4	Code identifying the type of utilization conflict detected or the reason for the pharmacist's professional service.	X(02)	See External Code List	NCPST08A	297	298
Professional Service Code (9)	440-E5	Code identifying pharmacist intervention when a conflict code has been identified or service has been rendered.	X(02)	See External Code List	NCPST08A	299	300
Result Of Service Code (9)	441-E6	Action taken by pharmacist in response to a conflict or the result of a pharmacist's professional service.	X(02)	See External Code List	NCPST08A	301	302
DUR/PPS Level Of Effort (9)	474-8E	Code indicating the level of effort as determined by the complexity of decision making or resources utilized by a pharmacist to perform a professional service.	9(02)	See External Code List	NCPST08A	303	304
DUR Co-agent ID Qualifier (9)	475-J9	Code qualifying the value in DUR Co-agent ID.	X(02)	See External Code List Appendix B.	NCPST08A	305	306
DUR Co-agent ID (9)	476-H6	Identifies the co-existing agent contributing to the DUR event.	X(19)		NCPST08A	307	325

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ VIPS generated; does not correspond to any NCPDP field name.

Transaction Coupon Record

<i>Transaction Coupon Record</i>							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Sender ID*	880-K1	Identification number assigned to the sender of the data by the processor of the data.	X(24)		NCPKFLAT	1	24
Segment Identifier*	701	Unique record type required on Batch Transaction Standard.	X(02)	G1 = Data Detail Record	NCPKFLAT	25	26
Segment Identification*	111-AM	Identifies the segment in the request record. This field is only populated on records with Segment Identifier G1.	X(02)	09	NCPKFLAT	27	28
Version** ¹	N/A	Represents the current version of VIPs NCPDP software that is being used.	X(01)	A	NCPKFLAT	29	29
Batch Number*	806-5C	Number assigned by processor.	9(07)		NCPKFLAT	30	36
Transaction Reference Number*	880-K5	Number assigned by provider to each transaction record. This number is unique to each set of flat file records that represent a single claim. This field is only populated on records with Segment Identifier G1.	X(10)		NCPKFLAT	37	46
Group Indicator*	N/A	This field is used to indicate a group of related segments. These segments together represent the equivalent of 1 claim line. This field is only populated with a "Y" on records with Segment Identification '07' (claim segment).	X(01)	N Y	NCPKFLAT	47	47
Telecommunication Version Number*	N/A	Code identifying the Telecommunication Standard.	X(02)	D0=Version D.0	NCPKFLAT	48	49
Filler*	N/A	Reserved for future use.	X(11)	Spaces	NCPKFLAT	50	60

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Coupon Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Segment Identification	111-AM	Identifies the segment in the request record.	X(02)	09	NCPST09A	61	62
Coupon Type	485-KE	Code indicating the type of coupon being used.	X(02)	See External Code List	NCPST09A	63	64
Coupon Number	486-ME	Unique serial number assigned to the prescription coupons.	X(15)		NCPST09A	65	79
Coupon Value Amount	487-NE	Value of the coupon.	S9(6)v99		NCPST09A	80	87

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record

<i>Transaction Compound Record</i>							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Sender ID*	880-K1	Identification number assigned to the sender of the data by the processor of the data.	X(24)		NCPKFLAT	1	24
Segment Identifier*	701	Unique record type required on Batch Transaction Standard.	X(02)	G1 = Data Detail Record	NCPKFLAT	25	26
Segment Identification*	111-AM	Identifies the segment in the request record. This field is only populated on records with Segment Identifier G1.	X(02)	10	NCPKFLAT	27	28
Version** ¹	N/A	Represents the current version of VIPs NCPDP software that is being used.	X(01)	B	NCPKFLAT	29	29
Batch Number*	806-5C	Number assigned by processor.	9(07)		NCPKFLAT	30	36
Transaction Reference Number*	880-K5	Number assigned by provider to each transaction record. This number is unique to each set of flat file records that represent a single claim. This field is only populated on records with Segment Identifier G1.	X(10)		NCPKFLAT	37	46
Group Indicator*	N/A	This field is used to indicate a group of related segments. These segments together represent the equivalent of 1 claim line. This field is only populated with a "Y" on records with Segment Identification '07' (claim segment).	X(01)	N Y	NCPKFLAT	47	47
Telecommunication Version Number*	N/A	Code identifying the Telecommunication Standard.	X(02)	D0=Version D.0	NCPKFLAT	48	49
Filler*	N/A	Reserved for future use.	X(11)	Spaces	NCPKFLAT	50	60

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Segment Identification	111-AM	Identifies the segment in the request record.	X(02)	10	NCPST10B	61	62
Compound Dosage Form Description Code	450-EF	Dosage form of the complete compound mixture.	X(02)	See External Code List	NCPST10B	63	64
Compound Dispensing Unit Form Indicator	451-EG	NCPDP standard product billing codes.	9(01)	See External Code List	NCPST10B	65	65
Compound Ingredient Component Count	447-EC	Count of compound product IDs in the compound mixture.	9(02)	0-25	NCPST10B	66	67
Compound Product ID Qualifier (1)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	68	69
Compound Product ID (1)	489-TE	Product identification of an ingredient used in the compound. Although the format is X(19), the last byte of this record may not always be space filled. The value "Y" is plugged by CEDI in the last position when Compound Product ID qualifier is not = 03 (i.e. not an NDC code), or when the Compound Product ID qualifier is = 03, but not found on the internal drug file.	X(19)		NCPST10B	70	88
Compound Ingredient Quantity (1)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	89	98
Compound Ingredient Drug Cost (1)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	99	106

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Basis of Cost Determination (1)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	107	108
Compound Ingredient Modifier Code Count (1)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	109	110
Compound Ingredient Modifier Code (1,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	111	112
Compound Ingredient Modifier Code (1,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	113	114
Compound Ingredient Modifier Code (1,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	115	116
Compound Ingredient Modifier Code (1,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	117	118
Compound Ingredient Modifier Code (1,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	119	120
Compound Ingredient Modifier Code (1,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	121	122

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (1,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	123	124
Compound Ingredient Modifier Code (1,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	125	126
Compound Ingredient Modifier Code (1,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	127	128
Compound Ingredient Modifier Code (1,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	129	130
Compound Product ID Qualifier (2)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	131	132
Compound Product ID (2)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	133	151
Compound Ingredient Quantity (2)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	152	161
Compound Ingredient Drug Cost (2)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	162	169
Compound Ingredient Basis of Cost Determination (2)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	170	171

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code Count (2)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	172	173
Compound Ingredient Modifier Code (2,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	174	175
Compound Ingredient Modifier Code (2,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	176	177
Compound Ingredient Modifier Code (2,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	178	179
Compound Ingredient Modifier Code (2,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	180	181
Compound Ingredient Modifier Code (2,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	182	183
Compound Ingredient Modifier Code (2,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	184	185
Compound Ingredient Modifier Code (2,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	186	187

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (2,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	188	189
Compound Ingredient Modifier Code (2,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	190	191
Compound Ingredient Modifier Code (2,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	192	193
Compound Product ID Qualifier (3)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	194	195
Compound Product ID (3)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	196	214
Compound Ingredient Quantity (3)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	215	224
Compound Ingredient Drug Cost (3)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	225	232
Compound Ingredient Basis of Cost Determination (3)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	233	234
Compound Ingredient Modifier Code Count (3)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	235	236

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (3,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	237	238
Compound Ingredient Modifier Code (3,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	239	240
Compound Ingredient Modifier Code (3,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	241	242
Compound Ingredient Modifier Code (3,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	243	244
Compound Ingredient Modifier Code (3,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	245	246
Compound Ingredient Modifier Code (3,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	247	248
Compound Ingredient Modifier Code (3,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	249	250

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (3,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	251	252
Compound Ingredient Modifier Code (3,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	253	254
Compound Ingredient Modifier Code (3,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	255	256
Compound Product ID Qualifier (4)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	257	258
Compound Product ID (4)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	259	277
Compound Ingredient Quantity (4)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	278	287
Compound Ingredient Drug Cost (4)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	288	295
Compound Ingredient Basis of Cost Determination (4)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	296	297
Compound Ingredient Modifier Code Count (4)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	298	299

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (4,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	300	301
Compound Ingredient Modifier Code (4,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	302	303
Compound Ingredient Modifier Code (4,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	304	305
Compound Ingredient Modifier Code (4,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	306	307
Compound Ingredient Modifier Code (4,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	308	309
Compound Ingredient Modifier Code (4,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	310	311
Compound Ingredient Modifier Code (4,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	312	313

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (4,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	314	315
Compound Ingredient Modifier Code (4,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	316	317
Compound Ingredient Modifier Code (4,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	318	319
Compound Product ID Qualifier (5)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	320	321
Compound Product ID (5)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	322	340
Compound Ingredient Quantity (5)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	341	350
Compound Ingredient Drug Cost (5)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	351	358
Compound Ingredient Basis of Cost Determination (5)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	359	360
Compound Ingredient Modifier Code Count (5)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	361	362

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (5,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	363	364
Compound Ingredient Modifier Code (5,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	365	366
Compound Ingredient Modifier Code (5,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	367	368
Compound Ingredient Modifier Code (5,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	369	370
Compound Ingredient Modifier Code (5,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	371	372
Compound Ingredient Modifier Code (5,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	373	374
Compound Ingredient Modifier Code (5,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	375	376

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (5,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	377	378
Compound Ingredient Modifier Code (5,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	379	380
Compound Ingredient Modifier Code (5,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	381	382
Compound Product ID Qualifier (6)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	383	384
Compound Product ID (6)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	385	403
Compound Ingredient Quantity (6)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	404	413
Compound Ingredient Drug Cost (6)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	414	421
Compound Ingredient Basis of Cost Determination (6)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	422	423
Compound Ingredient Modifier Code Count (6)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	424	425

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (6,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	426	427
Compound Ingredient Modifier Code (6,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	428	429
Compound Ingredient Modifier Code (6,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	430	431
Compound Ingredient Modifier Code (6,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	432	433
Compound Ingredient Modifier Code (6,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	434	435
Compound Ingredient Modifier Code (6,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	436	437
Compound Ingredient Modifier Code (6,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	438	439

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (6,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	440	441
Compound Ingredient Modifier Code (6,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	442	443
Compound Ingredient Modifier Code (6,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	444	445
Compound Product ID Qualifier (7)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	446	447
Compound Product ID (7)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	448	466
Compound Ingredient Quantity (7)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	467	476
Compound Ingredient Drug Cost (7)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	477	484
Compound Ingredient Basis of Cost Determination (7)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	485	486
Compound Ingredient Modifier Code Count (7)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	487	488

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (7,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	489	490
Compound Ingredient Modifier Code (7,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	491	492
Compound Ingredient Modifier Code (7,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	493	494
Compound Ingredient Modifier Code (7,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	495	496
Compound Ingredient Modifier Code (7,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	497	498
Compound Ingredient Modifier Code (7,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	499	500
Compound Ingredient Modifier Code (7,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	501	502

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (7,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	503	504
Compound Ingredient Modifier Code (7,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	505	506
Compound Ingredient Modifier Code (7,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	507	508
Compound Product ID Qualifier (8)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	509	510
Compound Product ID (8)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	511	529
Compound Ingredient Quantity (8)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	530	539
Compound Ingredient Drug Cost (8)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	540	547
Compound Ingredient Basis of Cost Determination (8)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	548	549
Compound Ingredient Modifier Code Count (8)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	550	551

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (8,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	552	553
Compound Ingredient Modifier Code (8,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	554	555
Compound Ingredient Modifier Code (8,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	556	557
Compound Ingredient Modifier Code (8,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	558	559
Compound Ingredient Modifier Code (8,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	560	561
Compound Ingredient Modifier Code (8,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	562	563
Compound Ingredient Modifier Code (8,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	564	565

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (8,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	566	567
Compound Ingredient Modifier Code (8,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	568	569
Compound Ingredient Modifier Code (8,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	570	571
Compound Product ID Qualifier (9)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	572	573
Compound Product ID (9)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	574	592
Compound Ingredient Quantity (9)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	593	602
Compound Ingredient Drug Cost (9)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	603	610
Compound Ingredient Basis of Cost Determination (9)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	611	612
Compound Ingredient Modifier Code Count (9)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	613	614

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (9,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	615	616
Compound Ingredient Modifier Code (9,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	617	618
Compound Ingredient Modifier Code (9,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	619	620
Compound Ingredient Modifier Code (9,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	621	622
Compound Ingredient Modifier Code (9,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	623	624
Compound Ingredient Modifier Code (9,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	625	626
Compound Ingredient Modifier Code (9,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	627	628

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (9,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	629	630
Compound Ingredient Modifier Code (9,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	631	632
Compound Ingredient Modifier Code (9,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	633	634
Compound Product ID Qualifier (10)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	635	636
Compound Product ID (10)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	637	655
Compound Ingredient Quantity (10)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	656	665
Compound Ingredient Drug Cost (10)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	666	673
Compound Ingredient Basis of Cost Determination (10)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	674	675
Compound Ingredient Modifier Code Count (10)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	676	677

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (10,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	678	679
Compound Ingredient Modifier Code (10,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	680	681
Compound Ingredient Modifier Code (10,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	682	683
Compound Ingredient Modifier Code (10,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	684	685
Compound Ingredient Modifier Code (10,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	686	687
Compound Ingredient Modifier Code (10,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	688	689
Compound Ingredient Modifier Code (10,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	690	691

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (10,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	692	693
Compound Ingredient Modifier Code (10,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	694	695
Compound Ingredient Modifier Code (10,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	696	697
Compound Product ID Qualifier (11)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	698	699
Compound Product ID (11)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	700	718
Compound Ingredient Quantity (11)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	719	728
Compound Ingredient Drug Cost (11)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	729	736
Compound Ingredient Basis of Cost Determination (11)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	737	738
Compound Ingredient Modifier Code Count (11)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	739	740

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (11,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	741	742
Compound Ingredient Modifier Code (11,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	743	744
Compound Ingredient Modifier Code (11,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	745	746
Compound Ingredient Modifier Code (11,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	747	748
Compound Ingredient Modifier Code (11,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	749	750
Compound Ingredient Modifier Code (11,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	751	752
Compound Ingredient Modifier Code (11,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	753	754

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (11,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	755	756
Compound Ingredient Modifier Code (11,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	757	758
Compound Ingredient Modifier Code (11,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	759	760
Compound Product ID Qualifier (12)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	761	762
Compound Product ID (12)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	763	781
Compound Ingredient Quantity (12)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	782	791
Compound Ingredient Drug Cost (12)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	792	799
Compound Ingredient Basis of Cost Determination (12)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	800	801
Compound Ingredient Modifier Code Count (12)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	802	803

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (12,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	804	805
Compound Ingredient Modifier Code (12,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	806	807
Compound Ingredient Modifier Code (12,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	808	809
Compound Ingredient Modifier Code (12,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	810	811
Compound Ingredient Modifier Code (12,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	812	813
Compound Ingredient Modifier Code (12,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	814	815
Compound Ingredient Modifier Code (12,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	816	817

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (12,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	818	819
Compound Ingredient Modifier Code (12,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	820	821
Compound Ingredient Modifier Code (12,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	822	823
Compound Product ID Qualifier (13)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	824	825
Compound Product ID (13)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	826	844
Compound Ingredient Quantity (13)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	845	854
Compound Ingredient Drug Cost (13)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	855	862
Compound Ingredient Basis of Cost Determination (13)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	863	864
Compound Ingredient Modifier Code Count (13)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	865	866

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (13,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	867	868
Compound Ingredient Modifier Code (13,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	869	870
Compound Ingredient Modifier Code (13,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	871	872
Compound Ingredient Modifier Code (13,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	873	874
Compound Ingredient Modifier Code (13,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	875	876
Compound Ingredient Modifier Code (13,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	877	878
Compound Ingredient Modifier Code (13,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	879	880
Compound Ingredient Modifier Code (13,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	881	882

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (13,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	883	884
Compound Ingredient Modifier Code (13,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	885	886
Compound Product ID Qualifier (14)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	887	888
Compound Product ID (14)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	889	907
Compound Ingredient Quantity (14)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	908	917
Compound Ingredient Drug Cost (14)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	918	925
Compound Ingredient Basis of Cost Determination (14)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	926	927
Compound Ingredient Modifier Code Count (14)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	928	929
Compound Ingredient Modifier Code (14,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	930	931

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (14,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	932	933
Compound Ingredient Modifier Code (14,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	934	935
Compound Ingredient Modifier Code (14,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	936	937
Compound Ingredient Modifier Code (14,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	938	939
Compound Ingredient Modifier Code (14,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	940	941
Compound Ingredient Modifier Code (14,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	942	943
Compound Ingredient Modifier Code (14,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	944	945
Compound Ingredient Modifier Code (14,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	946	947

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (14,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	948	949
Compound Product ID Qualifier (15)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	950	951
Compound Product ID (15)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	952	970
Compound Ingredient Quantity (15)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999	Format = 9999999.999	NCPST10B	971	980
Compound Ingredient Drug Cost (15)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99	Format = s999999.99	NCPST10B	981	988
Compound Ingredient Basis of Cost Determination (15)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	989	990
Compound Ingredient Modifier Code Count (15)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	991	992
Compound Ingredient Modifier Code (15,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	993	994
Compound Ingredient Modifier Code (15,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	995	996

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ VIPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (15,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	997	998
Compound Ingredient Modifier Code (15,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	999	1000
Compound Ingredient Modifier Code (15,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1001	1002
Compound Ingredient Modifier Code (15,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1003	1004
Compound Ingredient Modifier Code (15,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1005	1006
Compound Ingredient Modifier Code (15,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1007	1008
Compound Ingredient Modifier Code (15,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1009	1010
Compound Ingredient Modifier Code (15,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1011	1012

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Product ID Qualifier (16)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	1013	1014
Compound Product ID (16)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	1015	1033
Compound Ingredient Quantity (16)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	1034	1043
Compound Ingredient Drug Cost (16)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	1044	1051
Compound Ingredient Basis of Cost Determination (16)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	1052	1053
Compound Ingredient Modifier Code Count (16)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	1054	1055
Compound Ingredient Modifier Code (16,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1056	1057
Compound Ingredient Modifier Code (16,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1058	1059
Compound Ingredient Modifier Code (16,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1060	1061

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (16,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1062	1063
Compound Ingredient Modifier Code (16,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1064	1065
Compound Ingredient Modifier Code (16,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1066	1067
Compound Ingredient Modifier Code (16,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1068	1069
Compound Ingredient Modifier Code (16,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1070	1071
Compound Ingredient Modifier Code (16,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1072	1073
Compound Ingredient Modifier Code (16,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1074	1075
Compound Product ID Qualifier (17)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	1076	1077

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Product ID (17)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	1078	1096
Compound Ingredient Quantity (17)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	1097	1106
Compound Ingredient Drug Cost (17)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	1107	1114
Compound Ingredient Basis of Cost Determination (17)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	1115	1116
Compound Ingredient Modifier Code Count (17)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	1117	1118
Compound Ingredient Modifier Code (17,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1119	1120
Compound Ingredient Modifier Code (17,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1121	1122
Compound Ingredient Modifier Code (17,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1123	1124
Compound Ingredient Modifier Code (17,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1125	1126

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (17,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1127	1128
Compound Ingredient Modifier Code (17,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1129	1130
Compound Ingredient Modifier Code (17,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1131	1132
Compound Ingredient Modifier Code (17,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1133	1134
Compound Ingredient Modifier Code (17,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1135	1136
Compound Ingredient Modifier Code (17,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1137	1138
Compound Product ID Qualifier (18)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	1139	1140
Compound Product ID (18)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	1141	1159

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Quantity (18)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	1160	1169
Compound Ingredient Drug Cost (18)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	1170	1177
Compound Ingredient Basis of Cost Determination (18)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	1178	1179
Compound Ingredient Modifier Code Count (18)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	1180	1181
Compound Ingredient Modifier Code (18,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1182	1183
Compound Ingredient Modifier Code (18,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1184	1185
Compound Ingredient Modifier Code (18,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1186	1187
Compound Ingredient Modifier Code (18,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1188	1189

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (18,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1190	1191
Compound Ingredient Modifier Code (18,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1192	1193
Compound Ingredient Modifier Code (18,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1194	1195
Compound Ingredient Modifier Code (18,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1196	1197
Compound Ingredient Modifier Code (18,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1198	1199
Compound Ingredient Modifier Code (18,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1200	1201
Compound Product ID Qualifier (19)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	1202	1203
Compound Product ID (19)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	1204	1222

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Quantity (19)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	1223	1232
Compound Ingredient Drug Cost (19)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	1233	1240
Compound Ingredient Basis of Cost Determination (19)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	1241	1242
Compound Ingredient Modifier Code Count (19)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	1243	1244
Compound Ingredient Modifier Code (19,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1245	1245
Compound Ingredient Modifier Code (19,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1247	1248
Compound Ingredient Modifier Code (19,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1249	1250
Compound Ingredient Modifier Code (19,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1251	1252

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ VIPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (19,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1253	1254
Compound Ingredient Modifier Code (19,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1255	1256
Compound Ingredient Modifier Code (19,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1257	1258
Compound Ingredient Modifier Code (19,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1259	1260
Compound Ingredient Modifier Code (19,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1261	1262
Compound Ingredient Modifier Code (19,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1263	1264
Compound Product ID Qualifier (20)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	1265	1266
Compound Product ID (20)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	1267	1285

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Quantity (20)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	1286	1295
Compound Ingredient Drug Cost (20)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	1296	1303
Compound Ingredient Basis of Cost Determination (20)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	1304	1305
Compound Ingredient Modifier Code Count (20)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	1306	1307
Compound Ingredient Modifier Code (20,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1308	1309
Compound Ingredient Modifier Code (20,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1310	1311
Compound Ingredient Modifier Code (20,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1312	1313
Compound Ingredient Modifier Code (20,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1314	1315

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (20,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1316	1317
Compound Ingredient Modifier Code (20,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1318	1319
Compound Ingredient Modifier Code (20,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1320	1321
Compound Ingredient Modifier Code (20,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1322	1323
Compound Ingredient Modifier Code (20,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1324	1325
Compound Ingredient Modifier Code (20,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1326	1327
Compound Product ID Qualifier (21)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	1328	1329
Compound Product ID (21)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	1330	1348

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Quantity (21)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	1349	1358
Compound Ingredient Drug Cost (21)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	1359	1366
Compound Ingredient Basis of Cost Determination (21)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	1367	1368
Compound Ingredient Modifier Code Count (21)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	1369	1370
Compound Ingredient Modifier Code (21,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1371	1372
Compound Ingredient Modifier Code (21,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1373	1374
Compound Ingredient Modifier Code (21,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1375	1376
Compound Ingredient Modifier Code (21,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1377	1378

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (21,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1379	1380
Compound Ingredient Modifier Code (21,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1381	1382
Compound Ingredient Modifier Code (21,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1383	1384
Compound Ingredient Modifier Code (21,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1385	1386
Compound Ingredient Modifier Code (21,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1387	1388
Compound Ingredient Modifier Code (21,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1389	1390
Compound Product ID Qualifier (22)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	1391	1392
Compound Product ID (22)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	1393	1411

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Quantity (22)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	1412	1421
Compound Ingredient Drug Cost (22)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	1422	1429
Compound Ingredient Basis of Cost Determination (22)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	1430	1431
Compound Ingredient Modifier Code Count (22)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	1432	1433
Compound Ingredient Modifier Code (22,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1434	1435
Compound Ingredient Modifier Code (22,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1436	1437
Compound Ingredient Modifier Code (22,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1438	1439
Compound Ingredient Modifier Code (22,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1440	1441

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (22,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1442	1443
Compound Ingredient Modifier Code (22,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1444	1445
Compound Ingredient Modifier Code (22,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1446	1447
Compound Ingredient Modifier Code (22,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1448	1449
Compound Ingredient Modifier Code (22,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1450	1451
Compound Ingredient Modifier Code (22,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1452	1453
Compound Product ID Qualifier (23)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	1454	1455
Compound Product ID (23)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	1456	1474

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Quantity (23)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	1475	1484
Compound Ingredient Drug Cost (23)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	1485	1492
Compound Ingredient Basis of Cost Determination (23)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	1493	1494
Compound Ingredient Modifier Code Count (23)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	1495	1496
Compound Ingredient Modifier Code (23,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1497	1498
Compound Ingredient Modifier Code (23,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1499	1500
Compound Ingredient Modifier Code (23,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1501	1502
Compound Ingredient Modifier Code (23,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1503	1504

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ VIPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (23,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1505	1506
Compound Ingredient Modifier Code (23,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1507	1508
Compound Ingredient Modifier Code (23,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1509	1510
Compound Ingredient Modifier Code (23,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1511	1512
Compound Ingredient Modifier Code (23,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1513	1514
Compound Ingredient Modifier Code (23,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1515	1516
Compound Product ID Qualifier (24)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	1517	1518
Compound Product ID (24)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	1519	1537

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Quantity (24)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	1538	1547
Compound Ingredient Drug Cost (24)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	1548	1555
Compound Ingredient Basis of Cost Determination (24)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	1556	1557
Compound Ingredient Modifier Code Count (24)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	1558	1559
Compound Ingredient Modifier Code (24,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1560	1561
Compound Ingredient Modifier Code (24,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1562	1563
Compound Ingredient Modifier Code (24,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1564	1565
Compound Ingredient Modifier Code (24,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1566	1567

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (24,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1568	1569
Compound Ingredient Modifier Code (24,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1570	1571
Compound Ingredient Modifier Code (24,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1572	1573
Compound Ingredient Modifier Code (24,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1574	1575
Compound Ingredient Modifier Code (24,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1576	1577
Compound Ingredient Modifier Code (24,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1578	1519
Compound Product ID Qualifier (25)	488-RE	Code qualifying the type of product dispensed.	X(02)	See External Code List Appendix B.	NCPST10B	1580	1581
Compound Product ID (25)	489-TE	Product identification of an ingredient used in the compound.	X(19)		NCPST10B	1582	1600

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Quantity (25)	448-ED	Amount expressed in metric decimal units of the compound included in the compound mixture.	9(7)v999		NCPST10B	1601	1610
Compound Ingredient Drug Cost (25)	449-EE	Ingredient cost of the metric decimal quantity of the product included in the compound mixture indicated in Compound Ingredient Quantity.	s9(6)v99		NCPST10B	1611	1618
Compound Ingredient Basis of Cost Determination (25)	490-UE	Code indicating the method by which the cost of an ingredient used in a compound was calculated.	X(02)	See External Code List	NCPST10B	1619	1620
Compound Ingredient Modifier Code Count (25)	362-2G	Code indicating the number of Compound ingredient Modifier Code (363-2H).	9(02)	Maximum count is 10	NCPST10B	1621	1622
Compound Ingredient Modifier Code (25,1)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1623	1624
Compound Ingredient Modifier Code (25,2)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1625	1626
Compound Ingredient Modifier Code (25,3)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1627	1628
Compound Ingredient Modifier Code (25,4)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1629	1630

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Compound Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Compound Ingredient Modifier Code (25,5)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1631	1632
Compound Ingredient Modifier Code (25,6)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1633	1634
Compound Ingredient Modifier Code (25,7)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1635	1635
Compound Ingredient Modifier Code (25,8)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1637	1638
Compound Ingredient Modifier Code (25,9)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1639	1640
Compound Ingredient Modifier Code (25,10)	363-2H	Identifies special circumstances related to the dispensing /payment of the product as identified in the Compound Product ID (498-TE).	X(02)	CMS code set of HCPCS modifiers	NCPST10B	1641	1642

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Pricing Record

<i>Transaction Pricing Record</i>							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Sender ID*	880-K1	Identification number assigned to the sender of the data by the processor of the data.	X(24)		NCPKFLAT	1	24
Segment Identifier*	701	Unique record type required on Batch Transaction Standard.	X(02)	G1 = Data Detail Record	NCPKFLAT	25	26
Segment Identification*	111-AM	Identifies the segment in the request record. This field is only populated on records with Segment Identifier G1.	X(02)	11	NCPKFLAT	27	28
Version** ¹	N/A	Represents the current version of VIPs NCPDP software that is being used.	X(01)	B	NCPKFLAT	29	29
Batch Number*	806-5C	Number assigned by processor.	9(07)		NCPKFLAT	30	36
Transaction Reference Number*	880-K5	Number assigned by provider to each transaction record. This number is unique to each set of flat file records that represent a single claim. This field is only populated on records with Segment Identifier G1.	X(10)		NCPKFLAT	37	46
Group Indicator*	N/A	This field is used to indicate a group of related segments. These segments together represent the equivalent of 1 claim line. This field is only populated with a "Y" on records with Segment Identification '07' (claim segment).	X(01)	N Y	NCPKFLAT	47	47
Telecommunication Version Number	N/A	Code identifying the Telecommunication Standard.	X(02)	D0=Version D.0	NCPKFLAT	48	49
Filler*	N/A	Reserved for future use.	X(11)	Spaces	NCPKFLAT	50	60

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ VIPs generated; does not correspond to any NCPDP field name.

Transaction Pricing Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Segment Identification	111-AM	Identifies the segment in the request record.	X(02)	11	NCPST11B	61	62
Ingredient Cost Submitted	409-D9	Submitted product component cost of the dispensed prescription. Included in the Gross Amount Due.	s9(6)v99		NCPST11B	63	70
Dispensing Fee Submitted	412-DC	Dispensing fee submitted by pharmacy. Included in Gross Amount Due.	s9(6)v99		NCPST11B	71	78
Patient Paid Amount Submitted	433-DX	Amount the pharmacy received from the patient for the prescription dispensed.	s9(6)v99		NCPST11B	79	86
Incentive Amount Submitted	438-E3	Amount represents the contractually agreed upon incentive fee paid for specific services rendered. Included in Gross Amount Due.	s9(6)v99		NCPST11B	87	94
Other Amount Claimed Submitted Count	478-H7	Count of Other Amount Claimed Submitted occurrences.	9(02)	Maximum count of 3	NCPST11B	95	96
Other Amount Claimed Submitted Qualifier (1)	479-H8	Code identifying the additional incurred cost claimed in Other Amount Claimed Submitted.	X(02)	See External Code List	NCPST11B	97	98
Other Amount Claimed Submitted (1)	480-H9	Amount representing the additional incurred costs for a dispensed prescription or service. Included in Gross Amount Due.	s9(6)v99		NCPST11B	99	106
Other Amount Claimed Submitted Qualifier (2)	479-H8	Code identifying the additional incurred cost claimed in Other Amount Claimed Submitted.	X(02)	See External Code List	NCPST11B	107	108
Other Amount Claimed Submitted (2)	480-H9	Amount representing the additional incurred costs for a dispensed prescription or service. Included in Gross Amount Due.	s9(6)v99		NCPST11B	109	116

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ VIPS generated; does not correspond to any NCPDP field name.

Transaction Pricing Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Other Amount Claimed Submitted Qualifier (3)	479-H8	Code identifying the additional incurred cost claimed in Other Amount Claimed Submitted.	X(02)	See External Code List	NCPST11B	117	118
Other Amount Claimed Submitted (3)	480-H9	Amount representing the additional incurred costs for a dispensed prescription or service. Included in Gross Amount Due.	s9(6)v99		NCPST11B	119	126
Flat Sales Tax Amount Submitted	481-HA	Flat sales tax amount submitted for prescription. Included in Gross Amount Due	s9(6)v99		NCPST11B	127	134
Percentage Sales Tax Amount Submitted	482-GE	Percentage sales tax submitted. Included in Gross Amount Due.	s9(6)v99		NCPST11B	135	142
Percentage Sales Tax Rate Submitted	483-HE	Percentage sales tax rate used to calculate Percentage Sales Tax Amount Submitted.	s9(3)v9(4)		NCPST11B	143	149
Percentage Sales Tax Basis Submitted	484-JE	Code indicating the percentage sales tax paid basis.	X(02)	See External Code List	NCPST11B	150	151
Usual and Customary Charge	426-DQ	Amount charged cash customers for the prescription exclusive of sales tax or other amounts claimed.	s9(6)v99		NCPST11B	152	159
Gross Amount Due	430-DU	Total price claimed from all sources.	s9(6)v99		NCPST11B	160	167
Basis of Cost Determination	423-DN	Code indicating the method by which Ingredient Cost Submitted was calculated.	X(02)	See External Code List	NCPST11B	168	169

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Clinical Record

<i>Transaction Clinical Record</i>							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Sender ID*	880-K1	Identification number assigned to the sender of the data by the processor of the data.	X(24)		NCPKFLAT	1	24
Segment Identifier*	701	Unique record type required on Batch Transaction Standard.	X(02)	G1 = Data Detail Record	NCPKFLAT	25	26
Segment Identification*	111-AM	Identifies the segment in the request record. This field is only populated on records with Segment Identifier G1.	X(02)	13	NCPKFLAT	27	28
Version** ¹	N/A	Represents the current version of VIPs NCPDP software that is being used.	X(01)	A	NCPKFLAT	29	29
Batch Number*	806-5C	Number assigned by processor.	9(07)		NCPKFLAT	30	36
Transaction Reference Number*	880-K5	Number assigned by provider to each transaction record. This number is unique to each set of flat file records that represent a single claim. This field is only populated on records with Segment Identifier G1.	X(10)		NCPKFLAT	37	46
Group Indicator*	N/A	This field is used to indicate a group of related segments. These segments together represent the equivalent of 1 claim line. This field is only populated with a "Y" on records with Segment Identification '07' (claim segment).	X(01)	N Y	NCPKFLAT	47	47
Telecommunication Version Number*	N/A	Code identifying the Telecommunication Standard.	X(02)	D0=Version D.0	NCPKFLAT	48	49
Filler*	N/A	Reserved for future use.	X(11)	Spaces	NCPKFLAT	50	60

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Clinical Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Segment Identification	111-AM	Identifies the segment in the request record.	X(02)	13	NCPST13A	61	62
Diagnosis Code Count	491-VE	Count of diagnosis occurrences.	9(02)	Maximum count of 5	NCPST13A	63	64
Diagnosis Code Qualifier (1)	492-WE	Code qualifying the Diagnosis Code.	X(02)	See External Code List	NCPST13A	65	66
Diagnosis Code (1)	424-DO	Code identifying the diagnosis of the patient.	X(15)		NCPST13A	67	81
Diagnosis Code Qualifier (2)	492-WE	Code qualifying the Diagnosis Code.	X(02)	See External Code List	NCPST13A	82	83
Diagnosis Code (2)	424-DO	Code identifying the diagnosis of the patient.	X(15)		NCPST13A	84	98
Diagnosis Code Qualifier (3)	492-WE	Code qualifying the Diagnosis Code.	X(02)	See External Code List	NCPST13A	99	100
Diagnosis Code (3)	424-DO	Code identifying the diagnosis of the patient.	X(15)		NCPST13A	101	115
Diagnosis Code Qualifier (4)	492-WE	Code qualifying the Diagnosis Code.	X(02)	See External Code List	NCPST13A	116	117
Diagnosis Code (4)	424-DO	Code identifying the diagnosis of the patient.	X(15)		NCPST13A	118	132
Diagnosis Code Qualifier (5)	492-WE	Code qualifying the Diagnosis Code.	X(02)	See External Code List	NCPST13A	133	134
Diagnosis Code (5)	424-DO	Code identifying the diagnosis of the patient.	X(15)		NCPST13A	135	149
Clinical Information Counter	493-XE	Counter number of clinical information measurement sets/logical groupings.	9(02)	Maximum count of 5	NCPST13A	150	151
Measurement Date (1)	494-ZE	Date clinical information was collected or measured.	9(08)	Format = CCYYMMDD	NCPST13A	152	159

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ VIPS generated; does not correspond to any NCPDP field name.

Transaction Clinical Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Measurement Time (1)	495-H1	Time clinical information was collected or measured.	9(04)	Format=HHMM	NCPST13A	160	163
Measurement Dimension (1)	496-H2	Code indicating the clinical domain of the observed value in Measurement Value.	X(02)	See External Code List	NCPST13A	164	165
Measurement Unit (1)	497-H3	Code indicating the metric or English units used with the clinical information.	X(02)	See External Code List	NCPST13A	166	167
Measurement Value (1)	499-H4	Actual value of clinical information.	X(15)		NCPST13A	168	182
Measurement Date (2)	494-ZE	Date clinical information was collected or measured.	9(08)	Format = CCYYMMDD	NCPST13A	183	190
Measurement Time (2)	495-H1	Time clinical information was collected or measured.	9(04)	Format = HHMM	NCPST13A	191	193
Measurement Dimension (2)	496-H2	Code indicating the clinical domain of the observed value in Measurement Value.	X(02)	See External Code List	NCPST13A	194	196
Measurement Unit (2)	497-H3	Code indicating the metric or English units used with the clinical information.	X(02)	See External Code List	NCPST13A	197	198
Measurement Value (2)	499-H4	Actual value of clinical information.	X(15)		NCPST13A	199	213
Measurement Date (3)	494-ZE	Date clinical information was collected or measured.	9(08)	Format = CCYYMMDD	NCPST13A	214	221
Measurement Time (3)	495-H1	Time clinical information was collected or measured.	9(04)	Format = HHMM	NCPST13A	222	225
Measurement Dimension (3)	496-H2	Code indicating the clinical domain of the observed value in Measurement Value.	X(02)	See External Code List	NCPST13A	226	227
Measurement Unit (3)	497-H3	Code indicating the metric or English units used with the clinical information.	X(02)	See External Code List	NCPST13A	228	229
Measurement Value (3)	499-H4	Actual value of clinical information.	X(15)		NCPST13A	230	244

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Clinical Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Measurement Date (4)	494-ZE	Date clinical information was collected or measured.	9(08)	Format = CCYYMMDD	NCPST13A	245	252
Measurement Time (4)	495-H1	Time clinical information was collected or measured.	9(04)	Format = HHMM	NCPST13A	253	256
Measurement Dimension (4)	496-H2	Code indicating the clinical domain of the observed value in Measurement Value.	X(02)	See External Code List	NCPST13A	257	258
Measurement Unit (4)	497-H3	Code indicating the metric or English units used with the clinical information.	X(02)	See External Code List	NCPST13A	259	260
Measurement Value (4)	499-H4	Actual value of clinical information.	X(15)		NCPST13A	261	275
Measurement Date (5)	494-ZE	Date clinical information was collected or measured.	9(08)	Format = CCYYMMDD	NCPST13A	276	283
Measurement Time (5)	495-H1	Time clinical information was collected or measured.	9(04)	Format = HHMM	NCPST13A	284	287
Measurement Dimension (5)	496-H2	Code indicating the clinical domain of the observed value in Measurement Value.	X(02)	See External Code List	NCPST13A	288	289
Measurement Unit (5)	497-H3	Code indicating the metric or English units used with the clinical information.	X(02)	See External Code List	NCPST13A	290	291
Measurement Value (5)	499-H4	Actual value of clinical information.	X(15)		NCPST13A	292	306

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Facility Record

<i>Transaction Facility Record</i>							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Sender ID [*]	880-K1	Identification number assigned to the sender of the data by the processor of the data.	X(24)		NCPKFLAT	1	24
Segment Identifier [*]	701	Unique record type required on Batch Transaction Standard.	X(02)	G1 = Data Detail Record	NCPKFLAT	25	26
Segment Identification [*]	111-AM	Identifies the segment in the request record. This field is only populated on records with Segment Identifier G1.	X(02)	15	NCPKFLAT	27	28
Version ^{**1}	N/A	Represents the current version of VIPs NCPDP software that is being used.	X(01)	A	NCPKFLAT	29	29
Batch Number [*]	806-5C	Number assigned by processor. Matches header.	9(07)		NCPKFLAT	30	36
Transaction Reference Number [*]	880-K5	Number assigned by provider to each transaction record. This number is unique to each set of flat file records that represent a single claim. This field is only populated on records with Segment Identifier G1.	X(10)		NCPKFLAT	37	46
Group Indicator [*]	N/A	This field is used to indicate a group of related segments. These segments together represent the equivalent of 1 claim line. This field is only populated with a "Y" on records with Segment Identification '07' (claim segment).	X(01)	N Y	NCPKFLAT	47	47
Telecommunication Version Number [*]	N/A	Code identifying the Telecommunication Standard.	X(02)	D0=Version D.0	NCPKFLAT	48	49
Filler [*]	N/A	Reserved for future use.	X(11)	Spaces	NCPKFLAT	50	60

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Facility Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Segment Identification	111-AM	Identifies the segment in the request record.	X(02)	15	NCPST15A	61	62
Facility ID	336-8C	ID assigned to the patient's clinic/host party.	X(10)		NCPST15A	63	72
Facility Name	385-3Q	Name identifying the location of the service rendered.	X(30)		NCPST15A	73	102
Facility Street Address	386-3U	Free for text for Facility Address information.	X(30)		NCPST15A	103	132
Facility City Address	388-5J	Free for text for Facility City Name.	X(20)		NCPST15A	133	152
Facility State/Province Address	387-3V	Standard state/province code as defined by appropriate government agency.	X(02)	See External Code List Appendix C.	NCPST15A	153	154
Facility Zip/Postal Zone	389-6D	Code defining international postal zone excluding punctuation and blanks (zip code for U.S.).	X(15)		NCPST15A	155	169

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Narrative Record

<i>Transaction Narrative Record</i>							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Sender ID*	880-K1	Identification number assigned to the sender of the data by the processor of the data.	X(24)		NCPKFLAT	1	24
Segment Identifier*	701	Unique record type required on Batch Transaction Standard.	X(02)	G1 = Data Detail Record	NCPKFLAT	25	26
Segment Identification*	111-AM	Identifies the segment in the request record. This field is only populated on records with Segment Identifier G1.	X(02)	16	NCPKFLAT	27	28
Version** ¹	N/A	Represents the current version of VIPs NCPDP software that is being used.	X(01)	A	NCPKFLAT	29	29
Batch Number*	806-5C	Number assigned by processor. Matches header.	9(07)		NCPKFLAT	30	36
Transaction Reference Number*	880-K5	Number assigned by provider to each transaction record. This number is unique to each set of flat file records that represent a single claim. This field is only populated on records with Segment Identifier G1.	X(10)		NCPKFLAT	37	46
Group Indicator*	N/A	This field is used to indicate a group of related segments. These segments together represent the equivalent of 1 claim line. This field is only populated with a "Y" on records with Segment Identification '07' (claim segment).	X(01)	N Y	NCPKFLAT	47	47
Telecommunication Version Number*	N/A	Code identifying the Telecommunication Standard.	X(02)	D0=Version D.0	NCPKFLAT	48	49
Filler*	N/A	Reserved for future use.	X(11)	Spaces	NCPKFLAT	50	60

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Transaction Narrative Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Segment Identification	111-AM	Identifies the segment in the request record.	X(02)	16	NCPST16A	61	62
Narrative Message	390-BM	Free form text.	X(200)		NCPST16A	63	262

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Batch Trailer Record

<i>Batch Trailer Record</i>							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Sender ID*	880-K1	Identification number assigned to the sender of the data by the processor of the data.	X(24)		NCPKFLAT	1	24
Segment Identifier*	701	Unique record type required on Batch Transaction Standard.	X(02)	99 =File Trailer	NCPKFLAT	25	26
Segment Identification*	111-AM	Identifies the segment in the request record. This field is only populated on records with Segment Identifier G1.	X(02)	Spaces	NCPKFLAT	27	28
Version** ¹	N/A	Represents the current version of VIPs NCPDP software that is being used.	X(01)	A	NCPKFLAT	29	29
Batch Number*	806-5C	Number assigned by processor. Matches header.	9(07)		NCPKFLAT	30	36
Transaction Reference Number*	880-K5	Number assigned by provider to each transaction record. This number is unique to each set of flat file records that represent a single claim. This field is only populated on records with Segment Identifier G1.	X(10)	Spaces	NCPKFLAT	37	46
Group Indicator*	N/A	This field is used to indicate a group of related segments. These segments together represent the equivalent of 1 claim line. This field is only populated with a "Y" on records with Segment Identification '07' (claim segment).	X(01)	N Y	NCPKFLAT	47	47
Telecommunication Version Number*	N/A	Code identifying the Telecommunication Standard.	X(02)	D0=Version D.0	NCPKFLAT	48	49
Filler*	N/A	Reserved for future use.	X(11)	Spaces	NCPKFLAT	50	60

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

Batch Trailer Record							
NCPDP Data Dictionary Name	Field Number	Definition of Field	Format	Valid Values	Copybook	Starting Position	Ending Position
Segment Identification	111-AM	Identifies the segment in the request record.	X(02)	99	NCPSB99A	61	62
Batch Number [*]	806-5C	Number assigned by processor. Matches header.	9(07)		NCPSB99A	63	69
Record Count	751	Record count within batch file. Mapped from field 751, or calculated by CEDI when input files are split by jurisdiction.	9(10)		NCPSB99A	70	79
Message	504-F4	Free form message.	X(35)		NCPSB99A	80	114

Recommended Segment Order within this Flat File:

Batch Header

Transaction Header

Patient Segment (01)

Insurance Segment (04)

Claim Segment (07)

Followed by any of the remaining segment (02, 03, 05, 06, 08, 09, 10, 11, 12, 13, 15, and 16) in numerical order

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.

* Part of the key portion of the portion of the flat file record format; present on every flat file record.

¹ ViPS generated; does not correspond to any NCPDP field name.