



# Pharmacy Claims

# File Specifications



**Data Specifications**

The file name is built based on the following pattern: **EntityRxPaidClaim\_YYYYMM**. For **EntityRxPaidClaims**: Pharmacy Paid Claims; **YYYYMM**: Year and month associated with the information contained in the file. The file will contain payments and reversals for one month example: *XXXXPharmacyPaidClaim\_201710.csv*, containing information from 10/01/2017 to 10/31/2017.

The file must be in an **ASCII delimited format** with the appropriate fields. The file should contain header for all fields. Each line has the fields listed below and specifies the values associated with a single period. Each field is separated with a vertical bar (also referred to as **pipe “|”**) and lines are terminated with a **CR/LF sequence**. No text qualifier is needed. The file can have as many lines as needed. Each record is unique for a specific transaction.

**Note:** When editing or importing the file all leading zero(s) in character string (**CS**) will be preserved to ensure data accuracy. For example: *008547256*.

**In the list that follows the column labeled "FT" (for Field Type) indicates the following:**

**NU** Numeric – including decimal points. For example: *20,000.00; 152.23*

**CS** Character String. For example: *John Doe; Community Care Plan, 10342320*

**DT** Date represented as a number in the form of YYYYMMDD, for example 20170406.

**C** A single character

| <b>Field Header</b>   | <b>FT</b> | <b>Field Description</b>                           | <b>Max Length</b> |
|-----------------------|-----------|--|-------------------|
| GroupNumber           | CS        | Unique ID plan number.                             | N 20              |
| MemberID              | CS        | Member unique ID                                   | X 15              |
| PersonCode            | CS        | Sequence to identify the subscriber and dependents | N 02              |
| MemberFirstName       | CS        | Member First Name                                  | X 50              |
| MemberLastName        | CS        | Member Last Name                                   | X 50              |
| NABP                  | CS        | National Association of Boards of Pharmacy         | N 10              |
| PharmacyNPI           | CS        | Prescriber National Provider Identifier            | X 20              |
| Pharmacy              | CS        | Pharmacy Name                                      | X 50              |
| TransactionID         | CS        | Transaction ID                                     | X 50              |
| OriginalTransactionID | CS        | Original Transaction ID. Used in case of reversal  | X 50              |



## Pharmacy Paid Claims File Definition

|                     |    |  |      |
|---------------------|----|--|------|
| RxNumber            | CS | Prescription number                        | N 20 |
| FillDate            | DT | Fill date                                  | N 08 |
| EnteredDate         | DT | Entered date                               | N 08 |
| NDC                 | CS | National Drug Code                         | N 13 |
| GPI                 | CS | Generic Product Identifier                 | N 14 |
| DrugName            | CS | Drug Name                                  | X 50 |
| Specialty Drug      | C  | Determines if the drug is a specialty drug | X 01 |
|                     |    | Y = Yes                                    |      |
|                     |    | N = N                                      |      |
| TransactionType     | C  | Transaction Type                           | X 01 |
|                     |    | P = Payment                                |      |
|                     |    | R = Reversal                               |      |
| DS                  | CS | Days Supply                                | N 10 |
| Qty                 | CS | Quantity                                   | N 10 |
| BillCost            | NU |  |      |
| BillDispFee         | NU |  |      |
| BillTax             | NU |  |      |
| Copay               | NU |  |      |
| PlanPaid            | NU |  |      |
| AuthNumber          | CS | Unique transaction number                  | X 20 |
| ReverseAuth         | CS | Original transaction number                | X 20 |
| PrescriberDEA       | CS | Prescriber D.E.A.                          | X 20 |
| PrescriberNPI       | CS | Prescriber National Provider Identifier    | X 20 |
| PrescriberFirstName | CS | Prescriber First Name                      | X 50 |
| PrescriberLastName  | CS | Prescriber Last Name                       | X 50 |
| Generic             | C  | Determines if the drug is a generic drug   | X 01 |
|                     |    | Y = Yes                                    |      |
|                     |    | N = N                                      |      |



## Pharmacy Paid Claims File Definition

| <b>MemberDOB</b> | <b>DT</b> | <b>Member Date of Birth</b> | <b>N 08</b> |
|------------------|-----------|-----------------------------|-------------|
|------------------|-----------|-----------------------------|-------------|