

NCPDP VERSION D.Ø B2 REVERSAL RESPONSE PAYER SHEET  
 Medicaid / CHIP / CSHCN / KHC

<b>B2</b> R RESPONSE
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**\*\*GENERAL INFORMATION\*\***

Payer Name: Texas Health and Human Services Commission Medicaid/CHIP Vendor Drug Program	
Processor: ACS-Pharmacy	
Effective as of: April 1, 2012	Version/Release: D.Ø
Contact/Information Source: <ul style="list-style-type: none"> <li>• Texas Medicaid Vendor Drug Pharmacy Handbook</li> <li>• Texas Medicaid Vendor Drug Prescription Drug Claim Procedures Manual</li> <li>• Vendor Drug website (<a href="http://txvendordrug.com">txvendordrug.com</a>)</li> </ul>	
Provider Relations Help Desk Info: 1-800-435-4165	

**\*\* OTHER TRANSACTIONS SUPPORTED \*\***

**Payer:** Please list each transaction supported with the segments, fields, and pertinent information on each transaction.

Transaction Code	Transaction Name
B2	Reversal

The following lists the segments available in a Billing Transaction. The document also lists values as defined under Version D.Ø. The Transaction Header Segment is mandatory. The Segment summaries below list the mandatory data fields. Fields designed as “**Mandatory**” (M) are in accordance with the NCPDP Telecommunication Implementation Guide Version D.Ø and are the only fields designated mandatory. Fields designated as “**Required**” (R) will always be sent. Fields designated as “**Required When**” (RW) will be sent under circumstances that are explained in the Comment column.

Transaction Header Segment: Mandatory				
Field #	NCPDP Field Name	Value	M/R/RW	Comment
1Ø2-A2	Version/Release Number	DØ = Version D.Ø	M	
1Ø3-A3	Transaction Code	B2 = Reversal	M	
1Ø9-A9	Transaction Count	1 = One occurrence 2 = Two occurrences 3 = Three occurrences 4 = Four occurrences	M	
5Ø1-F1	Header Response Status	A = Accepted R = Rejected	M	
2Ø2-B2	Service Provider ID Qualifier	Ø1 = National Provider Identifier (NPI)	M	
2Ø1-B1	Service Provider ID		M	1Ø-digit NPI
4Ø1-D1	Date of Service		M	Format = CCYYMMDD

Response Status Segment: Mandatory				
Field	NCPDP Field Name	Value	M/R/RW	Comment
111-AM	Segment Identification	21 = Response Status Segment	M	
112-AN	Transaction Response Status	R = Rejected	M	
5Ø3-F3	Authorization Number		RW	Returned if needed to identify the transaction.
51Ø-FA	Reject Count	1 – 5	R	
511-FB	Reject Code		R (Repeating)	See Provider Manual for list of applicable error codes.
546-4F	Reject Field Occurrence Indicator		RW (Repeating)	Optional
13Ø-UF	Additional Message Information Count	Ø1 – 25	R	

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<b>Response Status Segment: Mandatory</b>				
<i>Field</i>	<i>NCPDP Field Name</i>	<i>Value</i>	<i>M/R/RW</i>	<i>Comment</i>
132-UH	Additional Message Information Qualifier	Ø1 – Ø9	<b>R</b> <b>(Repeating)</b>	Sequence number of message for each transaction
526-FQ	Additional Message Information	4Ø bytes	<b>R</b> <b>(Repeating)</b>	
131-UG	Additional message Information Continuity	+ = Current text continues	<b>R</b> <b>(Repeating)</b>	

<b>Response Claim Segment: Mandatory</b>				
<i>Field #</i>	<i>NCPDP Field Name</i>	<i>Value</i>	<i>M/R/RW</i>	<i>Comment</i>
111-AM	Segment Identification	22 = Response Claim Segment	M	
455-EM	Prescription/Service Reference Number Qualifier	1 = Rx Billing	M	
4Ø2-D2	Prescription/Service Reference Number		M	Twelve digit prescription number