



Vendor Drug Program Payer Specifications

NCPDP Claim Billing Reversal (B2) Transaction

- **Last Updated:** Sept. 21, 2020

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General Information

- **Payer Name:** Texas Vendor Drug Program
 - ▶ Traditional Medicaid
 - ▶ Children with Special Health Care Needs (CSHCN) Services Program
 - ▶ Healthy Texas Women (HTW) Program
 - ▶ Kidney Health Care (KHC) Program
- **Processor name:** Conduent (since Jan. 1, 2017)
- **Version/Release:** D.Ø (since Feb. 1, 2012)
- **Transaction Code / Name:** B2 / Reversal
- **Contact/Information Source:**
 - ▶ Pharmacy Benefits Access Help Desk: 1-800-435-4165
 - ▶ Texas Pharmacy Provider Procedure Manual: txvendordrug.com
- **Notes:**
 - ▶ All submitted data elements are edited for valid format and values.
 - ▶ Provider software should support all data elements on the required segments.
 - ▶ Reversals match on Provider Number, RX Number, Product/Service ID, and Date Of Service fields.
 - ▶ In cases where multiple iterations of a field (“repeating fields”) are allowed, the maximum number of iterations is indicated.
- **Field Usage Description:**
 - ▶ Mandatory (M): Submitted following the NCPDP Telecommunication Implementation Guide Version D.Ø.
 - ▶ Required (R): Always submitted.
 - ▶ Required When (RW): Submitted under circumstances explained in the Comment column.
 - ▶ Optional (O): Submitted at the discretion of the pharmacy provider.
 - ▶ Repeating (**R**): Designates a repeating field.

Transaction: Reversal Request

Transaction Header Segment (mandatory in all cases)

Field #	NCPDP Field Name	Value	Usage	Comment
101-A1	BIN Number	610084	M	
102-A2	Version/Release Number	D0 = Version D.0	M	
103-A3	Transaction Code	B2 = Reversal	M	Reversal Request
104-A4	Processor Control Number	<u>Medicaid, CSHCN, and HTW:</u> DRTXPROD <u>KHC:</u> DRTXPRODKH	M	
109-A9	Transaction Count	1 = One Occurrence 2 = Two Occurrences 3 = Three Occurrences 4 = Four Occurrences	M	
202-B2	Service Provider ID Qualifier	01 = National Provider Identifier (NPI)	M	
201-B1	Service Provider ID		M	10-digit NPI
401-D1	Date of Service		M	Fill Date, Format = CCYYMMDD
110-AK	Software Vendor/Certification ID		M	Three-digit software identification number with space fill.

Claim Segment (mandatory)

Field #	NCPDP Field Name	Value	Usage	Comment
111-AM	Segment Identification	07 = Claim Segment	M	
455-EM	Prescription/Service Reference Number Qualifier	1 = Rx Billing	M	

Field #	NCPDP Field Name	Value	Usage	Comment
402-D2	Prescription/Service Reference Number		M	Twelve digit prescription number
436-E1	Product/Service ID Qualifier	ØØ = Compound Ø3 = National Drug Code (NDC)	M	Value "ØØ" if Compound Code = "2"
407-D7	Product/Service ID		M	

Drug Use Review/Professional Pharmacy Service Segment (optional)

Field #	NCPDP Field Name	Value	Usage	Comment
111-AM	Segment Identification	Ø8 = DUR/PPS Segment	M	
473-7E	DUR Code Counter	1 to 9	RW	If segment transmitted
439-E4	Reason for Service Code	DD = Drug-Drug Interaction HD = High Dose ID = Ingredient Duplication TD = Therapeutic	RW ***R***	
44Ø-E5	Professional Service Code	ØØ = No Intervention MØ = Prescriber consulted PØ = Patient consulted RØ = Pharmacist consulted other source	RW ***R***	
441-E6	Result of Service Code	1C = Filled, With Different Dose 1D = Filled, With Different Directions 1E = Filled, With Different Drug 1F = Filled, With Different Quantity 2A = Prescription Not Filled 2B = Not Filled, Directions Clarified	RW ***R***	

Transaction: Accepted Response

Transaction Header Segment (mandatory in all cases)

Field #	NCPDP Field Name	Value	Usage	Comment
102-A2	Version/Release Number	DØ = Version D.Ø	M	
103-A3	Transaction Code	B2 = Reversal	M	Reversal Response
109-A9	Transaction Count	1 = One Occurrence 2 = Two Occurrences 3 = Three Occurrences 4 = Four Occurrences	M	
501-F1	Header Response Status	A = Accepted	M	
202-B2	Service Provider ID Qualifier	Ø1 = National Provider Identifier (NPI)	M	
201-B1	Service Provider ID		M	10-digit NPI
401-D1	Date of Service		M	Fill Date, Format = CCYYMMDD

Response Status Segment (mandatory)

Field #	NCPDP Field Name	Value	Usage	Comment
111-AM	Segment Identification	21 = Response Status Segment	M	
112-AN	Transaction Response Status	A=Approved S=Duplicate of Approved	M	
503-F3	Authorization Number		RW	Returned when needed to identify the transaction.
130-UF	Additional Message Information Count	Ø1 – 25	RW	
132-UH	Additional Message Information Qualifier	Ø1 – Ø9	RW ***R***	The sequence number of message for each transaction

Field #	NCPDP Field Name	Value	Usage	Comment
526-FQ	Additional Message Information		RW ***R***	40 bytes
131-UG	Additional message Information Continuity	+ = Current text continues	RW ***R***	

Response Claim Segment (mandatory)

Field #	NCPDP Field Name	Value	Usage	Comment
111-AM	Segment Identification	22 = Response Claim Segment	M	
455-EM	Prescription/Service Reference Number Qualifier	1 = Rx Billing	M	
402-D2	Prescription/Service Reference Number		M	Twelve digit prescription number

Transaction: Rejected Response

Transaction Header Segment (mandatory in all cases)

Field #	NCPDP Field Name	Value	Usage	Comment
102-A2	Version/Release Number	DØ = Version D.Ø	M	
103-A3	Transaction Code	B2 = Reversal	M	Reversal Response
109-A9	Transaction Count	1 = One Occurrence 2 = Two Occurrences 3 = Three Occurrences 4 = Four Occurrences	M	
501-F1	Header Response Status	A = Accepted R=Rejected	M	
202-B2	Service Provider ID Qualifier	Ø1 = National Provider Identifier (NPI)	M	
201-B1	Service Provider ID		M	10-digit NPI
401-D1	Date of Service		M	Fill Date, Format = CCYYMMDD

Response Status Segment (mandatory)

Field #	NCPDP Field Name	Value	Usage	Comment
111-AM	Segment Identification	21 = Response Status Segment	M	
112-AN	Transaction Response Status	R = Rejected	M	
503-F3	Authorization Number		RW	Returned when needed to identify the transaction.
510-FA	Reject Count	1-5	R	
511-FB	Reject Code		R Repeating	

Field #	NCPDP Field Name	Value	Usage	Comment
546-4F	Reject Field Occurrence Indicator		R ***R***	Optional
130-UF	Additional Message Information Count	1 – 25	R	
132-UH	Additional Message Information Qualifier	1-9	R ***R***	The sequence number of message for each transaction
526-FQ	Additional Message Information		R ***R***	40 bytes
131-UG	Additional message Information Continuity	+ = Current text continues	R ***R***	

Response Claim Segment (mandatory)

Field #	NCPDP Field Name	Value	Usage	Comment
111-AM	Segment Identification	22 = Response Claim Segment	M	
455-EM	Prescription/Service Reference Number Qualifier	1 = Rx Billing	M	
402-D2	Prescription/Service Reference Number		M	Twelve digit prescription number

Document History Log

STATUS ¹	REVISION ²	EFFECTIVE	DESCRIPTION ³
Revision	1.1	Sept. 21, 2020	<ul style="list-style-type: none">• Format update
Baseline	1.0	Jan. 1, 2017	<ul style="list-style-type: none">• Initial update

1. Status is represented as "Baseline" for initial issuances, "Revision" for changes to the Baseline version, and "Cancellation" for withdrawn versions
2. Revisions are numbered according to the version of the issuance and sequential numbering of the revision; e.g., "1.2" refers to the first version of the document and the second revision.
3. Brief description of the changes to the document made in the revision.