STATE of HAWAII DEPARTMENT of HUMAN SERVICES MED-QUEST DIVISION

NCPDP Post Adjudicated History (PAH) 2.2 Companion Guide

959

November 2023 Version 1.8

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NCPDP Batch Transaction Standard Implementation Guide Version 1.2 defines the data structure and content of batch pharmacy transmissions only. NCPDP Telecommunication Standard Implementation Guide Version 5.1 defines the data structure and content of a single NCPDP standard transmission only.

Refer to the NCPDP Post Adjudication Transaction Standard Implementation Guide Version 2.2 (Post Adjudication History [PAH]), Data Dictionary (June 2010), and External Code List (June 2010) for further information on the various segments and fields allowed. Additional information for National Council for Prescription Drug Programs is found at www.ncpdp.org

Revision History

#	Location or Field	Description
1.0	466-EZ	Changed from situational (S) to mandatory (M) per this
	411-DB	TP agreement.
	419-DJ	
	442-E7	
	693	
1.1	302-C2	Added note to value and usage – limited size allowed
	201-B1	
	411-DB	
	402-D2	
	407-D7	
	424-DO	
	896	
1.2	301-C1	Added note that TRIBE-ID is being sent in this field
		for FFS
1.2	521-FL	(Incentive Amount Paid) – add note that this field
	v=112	should contain the Vaccine Administration Fee when
		field 440-E5 = 'MA'
1.2	517-FH	Added note that this field is used for the Health Plan
		Deductible Amount
1.2	281	Added note that this field is the HP Paid Amount
1.2	308-C8	Added note on how this field maps to other insurance
		on screen EC215
1.3	2.1	File Submission – Clarification
		Validation – Clarification
	4.1	Overview – Clarification
	4.2	Over Punch Signs – correct the example
	4.4	Change Heading to "NPCPD PAH 2.2 File Layout"
1 4		
1.4	439-E4 & 441-E6	Fields are now utilized by MQD. Changed Note to
1.5		"Submit if Available"
1.5	440-E5 & 521-FL	Added note in MQD Usage column: **Note: 'MA'
		calculation will include Ingredient Cost + Incent Fee Paid only
		+ Sales Tax. <u>Exclude Dispense Fee Paid</u> .

#	Location or Field	Description
1.6	509-F9	Removed references to 509-F9 that were found in Values column for 506-F6 & 507-F7. This field was replaced by 894.
	308-C8	Did not show the full desc for Code 4 in the 'Values' column. The word 'Collected' was missing at the end.
1.7	307-C7	 Place of Service 'MQD Usage' column: Removed verbiage "not currently utilized by MQD". Added "If submitted, must be valid value from CMS Place of Service Code Set." In the 'Values' column, added: Valid values found in the CMS Place of Service Code Set https://www.cms.gov/Medicare/Coding/place-of-service-codes/Place of Service Code Set
1.8	201-B1	Service Provider ID 'MQD Usage' column. Added verbiage: This NPI must not be associated with a provider that appears in the PMR as Provider Type 01 – Group Payment ID.
1.8	411-DB	Prescriber ID 'MQD Usage' column. Added verbiage: This NPI must not be associated with a provider that appears in the PMR as Provider Type 01 – Group Payment ID.

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1 Introduction

Companion Documents	Companion Guides are intended to supplement the standard HIPAA Implementation Guides and are technical in nature. They are intended for technical staff members who are responsible for electronic transaction/file exchanges. This document provides specific information related to the fields and values reported.
Disclaimer	These specifications cover the required fields per the NCPDP Post Adjudication Transaction Standard Implementation Guide Version 2.2 as well as the required fields needed for claims processing by MQD. When additional segments and/or fields that are allowed within the supported NCPDP versions are provided, MQD will accept the transaction but only those segments and fields pertinent to claims processing will be utilized. Any NCPDP transaction that is not supported by MQD will be rejected.
	MQD supports the following NCPDP transactions: • Post Adjudication History
	This Companion Document is intended to be a technical document describing the specific technical and procedural requirements for interfaces between MQD and its trading partners. It does not supersede either health plan contracts or the specific procedure manuals for various operational processes. If there are conflicts between this document and either the health plan contracts or operational procedure manuals, the contract or procedure manual will prevail.
	Substantial effort has been taken to minimize conflicts or errors; however, MQD, the MQD Information Services Division, or its employees will not be liable or responsible for any errors or expenses resulting from the use of information in this document. If you believe there is an error in the document, please notify the MQD Information Services Division immediately

immediately

2. NCPDP Transactions

2.1 Overview

NCPDP Overview	The NCPDP PAH 2.2 transaction is used by the MQD contracted health plans to report post adjudicated pharmacy encounters.						
_	MQD accepts NCPDP transactions from the contracted health plans, completes a validation check, translates files that pass validation and then forwards the file to the adjudication system for processing.						
File Submission	To exchange electronic data with MQD, Trading Partners must establish individual user accounts to the secure file transfer protocol (SFTP, aka EFT). When permissions have been granted to the SFTP, Trading Partners will upload their NCPDP transactions for processing.						
Validation	MQD currently only performs a basic syntactical validation on the NCPDP file; record count balancing and record length checking. Batch files should contain one header, one trailer (including count of records), and at least one detail record; there currently is no maximum limit of detail records. It is suggested that Trading Partners limit file sizes to less than 75 MB to facilitate faster file transfer.						
	Files that pass will be forwarded to the translator and the Trading Partner will receive a response file that starts with "HIENACK" indicating the file was accepted.						
	Files that fail validation will discontinue processing and the Trading Partner will receive a response file with a .REJECT extension.						
Translation	Files that pass validation will be translated and sent to the adjudication system for processing.						
Submission Schedule –	Trading Partners can transmit NCPDP transactions to MQD at any time. MQD typically processes files each evening, Monday through Friday.						

3 Technical Infrastructure and Procedures

3.1 Technical Environment

Connectivity Authorized individuals from the Trading Partner organization may connect to the MQD SFTP using a standard internet browser. To obtain an individual SFTP account, the Electronic Data Exchange Request and External User Affirmation Statement forms must be completed and submitted to MQD Data Security. These forms can be obtained from the MQD website.

Technical Assistance and Help

Med-QUEST Systems Office

System	Primary
All Systems	MQD Help Desk
	692-7953
Encounter	Wileen Ortega
	692-7990
Provider	Wileen Ortega
	692-7990
Health Plan & Rosters Questions	Haidee Shaw
	692-7963
VPN, Connectivity to MQD FTP, Logins	Network Support
	692-7953

To report problems, please send an email to mgdhelpdesk@medicaid.dhs.state.hi.us.

If your problem is critical to your operation, please call the above personnel.

For calls reaching Systems Office Staff voicemail, a customer can leave a message or press "03" and the call will be transferred to the MQD Help Desk for assignment. If you get the Help Desk voicemail, please leave a message and a SO staff member will return your call within 2 hours (**during normal business hours**).

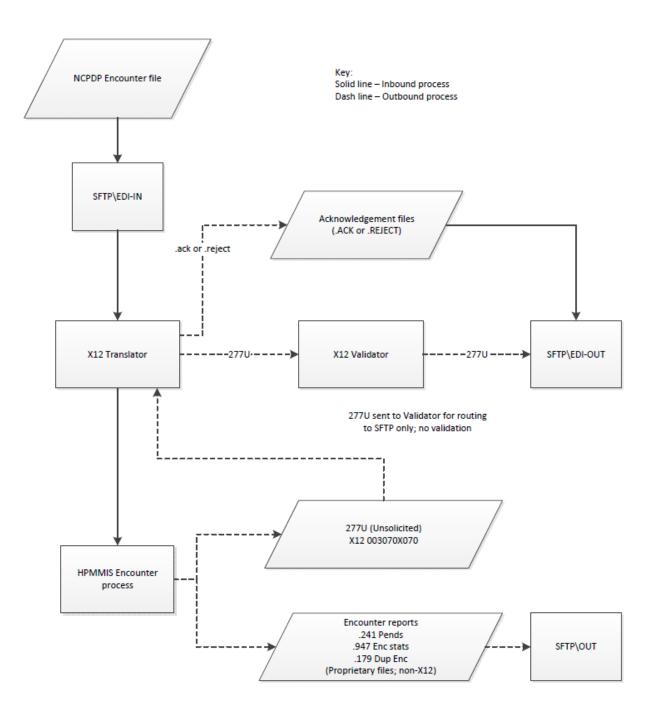
3.2 Directory and File Naming Conventions

SFTS Directory Structure	 The SFTP Directory Structure is as follows: XXXXXX/Environment/Type and Direction XXXXXX - Six byte Health Plan Identifier Environment Dev is for internal MQD development staff Other is for sending/receiving large files that cannot be sent in an email or contains PHI. Prod is for sending/receiving production files Test is for sending/receiving test files Type and Direction EDI-IN is for sending HIPAA X12 and NCPDP PAH 2.2 transaction files only. Zipped files will not be allowed. EDI-OUT is for receiving HIPAA X12 NCPDP PAH 2.2 response files. IN is for sending proprietary files.
File Naming Conventions	 File naming convention is as follows: IDNCPDPCCYYMMDDA.txt ID - two character Health Plan Identifier NCPDP CCYYMMDD – processing date A – 1 character sequential letter to differentiate between multiple files submitted on the same day (i.e. A, B, C,) Files should be rendered in a standard text file format and should not have a .tmp, .zip and/or any other application file extension. Files that fail validation will discontinue processing and the Trading Partner will receive a memory file with a DELECT extension.

will receive a response file with a .REJECT extension.

3.3 NCPDP Transaction Flow Diagram

MQD Interchange Flow for NCPDP Transaction



4 NCPDP Post Adjudication History (PAH) 2.2 File Information

4.1 Overview

The batch specifications contained in this document include the header, detail and trailer. Batch files should contain one header, one trailer (including count of records), and at least one detail record; there currently is no maximum limit of detail records. It is suggested that Trading Partners limit file sizes to less than 75 MB to facilitate faster file.

- Post Adjudication History Header (Occurs 1)
- Post Adjudication History Detail (Occurs 1 to Many)
- Post Adjudication History Compound Detail 1 (Occurs 1 as Applicable with Detail Record)
- Post Adjudication History Compound Detail 2 (Occurs 1 as Applicable with Detail Record)
- Post Adjudication History Trailer (Occurs 1).

4.2 Over Punch Signs

Positive	e Signed	Negative Signed				
Numeric	Graphic	Numeric	Graphic			
0	{	0	}			
1	Α	1	J			
2	В	2	K			
3	С	3	L			
4	D	4	Μ			
5	Е	5	Ν			
6	F	6	0			
7	G	7	Р			
8	Н	8	Q			
9	Ι	9	R			

Examples:

1. 104} is -1040

2. 23B is 232

Decimal points are usually implied not explicit in the text. Ex of a number with two decimal digits:

2903K is -290.32

4.3 Table Format

Following is a list of the field, use, field name and values/comments for MQD PAH 2.2 Transactions.

The following definitions are given to ensure consistency of interpretation:

- Field The Post Adjudication Transaction Standard Version 2.2 field number. *Note: You may need to search by the field name because the Field ID listed in the Transaction Notes and the IG will differ because the IG formats the 0 with a slash.
 - Example: 409-D9 from cannot be found because it would be listed as 4Ø9-D9 in the IG.
- Field Name The Post Adjudication Transaction Standard Version 2.2 field name
- Mandatory or Situational (M/S) Field designation, Indicates whether a field is mandatory or situational. Mandatory fields may be mandatory by the NCPCP PAH 2.2 Standard and/or required by the processor. If a field is situational and data does not exist for the field, the field MUST be populated with the appropriate padding;
 - a. \mathbf{M} Mandatory field
 - b. **S** Situational field
- Format Field format values
- Size The field length size
 - a. A/N Alpha/Numeric, upper case when alpha, always left justified, space filled, upper case, printable characters and default values of spaces;
 - Example: X(14) represents "1234ABC44bbbb" where "b" is a space
 - b. N Unsigned Numeric, always right justified, zero filled and when used for dollar fields, have default values of zeroes
 - Example: 9(7)v999 represents "9999999999";
 - c. D Signed Numeric, sign is internal and trailing (see 4.2 Over punch Signs), zero always positive, always right justified, zero filled dollar-cents amount with 2 positions to the right of the implied decimal point, all other positions to the left of the implied decimal point and when used for dollar fields, have default values of zeroes.
 - Example: "D" fields of length 8 represent \$\$\$\$\$cc
- Size The field length size
- Start The starting position in the record of the field
- End The ending position in the record of the field
- Values/Comments Defines the MQD required values or default values
- MQD Usage Clarification & notes regarding field usage

4.4 NPCPD PAH 2.2 File Layout

Layout Table starts on next page

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
		POST ADJUDICATED HISTORY						ECL = Extended Code List	light green = Mandatory
		V2.2						(June 2010 or later). Code	Fields
								values for data elements	Submit appropriate values as
								contained within the NCPDP	indicated
								standards. If an amount is 0	
								then it is approriate to submit it	
2								as such.	
									light yellow - Situational Fields
									Submit if available. MQD will
									be reviewing the data in these
									fields for consideration for
3									future use.
									Grey = Situational Fields
									Currently not utilized by MQD.
4									Submit if available.
4 5									
5	8.1	POST ADJUDICATION HISTORY							
6		HEADER RECORD							
	601-04	RECORD TYPE	М	A/N	2	1	2	'PA' -Post Adjudication History	
7								Header Record	
8		VERSION/RELEASE NUMBER	М	A/N	2	3	4	'22' – Post Adjudication	
	879	SENDING ENTITY IDENTIFIER	М	A/N	24	5	-	Pos 5-13:	
								For Health Plans	
								Submitter Trading Partner ID =	
								6-digit Health Plan ID + 3-digit	
								TSN	
								For PBM NCPDP Claims:	
								Submitter Trading Partner ID =	
9								6-digit Health Plan ID	
	806-5C	BATCH NUMBER	М	N	7	29	35	A number generated by the	
								sender to uniquely identify this	
								batch from others, especially	
								when multiple batches may be	
								sent in one day.	
10									
11	880-K2	CREATION DATE	М	N	8	36	43	Date the file was created	

	Α	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
12		CREATION TIME	М	N	4	44	47	Time the file was created	
13	880-K7	RECEIVER ID	М	A/N	24	48	71	MQD996001089	
	601-06	REPORTING PERIOD START	М	N	8	72	79	The first day of the period	
		DATE						being reported in the file.	
14								Format: CCYYMMDD	
	601-05	REPORTING PERIOD END DATE	М	N	8	80	87	The last day of the period	
								being reported in the file.	
15								Format: CCYYMMDD	
	702-MC	FILE TYPE	М	A/N	1	88	88	T' - Test	
16								'P' - Production	
	981-JV	TRANSMISSION ACTION	М	A/N	1	89	89	O' - Original Submission (New)	
17								- A new file	
18		SUBMISSION NUMBER	М	A/N	2	90		00' - Original Submission	
		FILLER	М	A/N	3609	92	3700	TOMYKNOWLEDGEINFORM	BBA Attestation - applies to
								ATIONANDBELIEFTHEDATAI	Health Plans
								NTHISFILEISACCURATEC	
10								OMPLETEANDTRUE.CERTIFI	
19						[ER@PLAN.COM	
20		POST ADJUDICATION HISTORY							
20		DETAIL RECORD RECORD TYPE	М	A/N	2	1	2	DE' - Post Adjudication History	
21	001-04		IVI	<i>F</i> vin	2	'	2	Detail Record	
21	398	RECORD INDICATOR	S	A/N	1	3	3	0' - New Record	MQD only allows '0' - new
	390	INDICATOR	5	<i>7</i> /1N		5	5		record. Will not recognize
									Overwrite or Delete.
									Overwrite of Delete.
22									
		SECTION ELIGIBILITY							
23	0.12	CATEGORY:			-				
	248	ELIGIBLE COVERAGE CODE	S	A/N	3	4	6		Submit if available-not
24									currently utilized by MQD

1 Field Field Name M/S Format Size Start End Values MQD USAC 898 USER BENEFIT ID S A/N 10 7 16 Submit if available-n currently utilized by I 899 USER COVERAGE ID S A/N 10 17 26 Submit if available-n currently utilized by I 26 246 ELIGIBILITY GROUP ID S A/N 15 27 41 Submit if available-n currently utilized by I 27 270 LINE OF BUSINESS CODE S A/N 6 42 47 Submit if available-n currently utilized by I 28 267 INSURANCE CODE S A/N 20 48 67 Submit if available-n currently utilized by I 29 220 CLIENT ASSIGNED LOCATION CODE S A/N 20 68 87 Submit if available-n currently utilized by I 30 222 CLIENT PASS THROUGH S A/N 20 68 87 Submit if available-n currently utilized by I 31 222 CLIENT PASS THROUGH S A/N 200 8	ot MQD ot MQD ot MQD ot MQD ot MQD ot MQD ot
25	MQD ot MQD ot MQD ot MQD ot MQD ot MQD ot
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29 220 CLIENT ASSIGNED LOCATION CODE S A/N 20 68 87 Submit if available-n currently utilized by I 30 222 CLIENT PASS THROUGH S A/N 200 88 287 Submit if available-n currently utilized by I 31 32 SUBSECTION CARDHOLDER INFORMATION: S A/N 200 88 287 Submit if available-n currently utilized by I	MQD ot MQD ot
220CLIENT ASSIGNED LOCATION CODESA/N206887Submit if available-n currently utilized by I30222CLIENT PASS THROUGHSA/N20088287Submit if available-n currently utilized by I3131SUBSECTION CARDHOLDER INFORMATION:SA/N20088287Submit if available-n currently utilized by I	ot MQD ot
30 Currently utilized by I 30 222 222 CLIENT PASS THROUGH 31 31 32 SUBSECTION CARDHOLDER INFORMATION:	MQD ot
222 CLIENT PASS THROUGH S A/N 200 88 287 Submit if available-n currently utilized by I 31 SUBSECTION CARDHOLDER INFORMATION: SUBSECTION CARDHOLDER Submit if available-n Submit if available-n	ot
222 CLIENT PASS THROUGH S A/N 200 88 287 Submit if available-n currently utilized by I 31 SUBSECTION CARDHOLDER INFORMATION: SUBSECTION CARDHOLDER INFORMATION: Submit if available-n currently utilized by I	ot
32 SUBSECTION CARDHOLDER INFORMATION:	MQD
32 INFORMATION:	
33 302-C2 CARDHOLDER ID M A/N 20 288 307 MOD Member ID (9 digit) Limited to 9 character	
	ers
34 716 LAST NAME S A/N 35 308 342 Submit if available	
35 717 FIRST NAME S A/N 25 343 367 Submit if available	
36 718 MIDDLE INITIAL S A/N 1 368 368 Submit if available	
280 NAME SUFFIX S A/N 10 369 378 Submit if available-n	ot
37 currently utilized by I	MQD
[See Patient Info Segment] Submit if available-n	ot
38 currently utilized by I	MQD
[See Benefit Category] Submit if available-n	
39 currently utilized by I	MQD
[See Patient Info Subsection] Submit if available-n	ot
40 currently utilized by I	MQD
[See Patient Info Subsection] Submit if available-n	ot
41 currently utilized by I	NQD
726 ADDRESS LINE 1 S A/N 55 379 433 Submit if available-n	
42 currently utilized by I	MQD
727 ADDRESS LINE 2 S A/N 55 434 488 Submit if available-n	ot
43 currently utilized by I	MQD
728 CITY S A/N 30 489 518 Submit if available-n	
44 currently utilized by I	MQD
729 STATE S A/N 2 519 520 Submit if available-n	
45 currently utilized by I	MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	730	ZIP/POSTAL CODE	S	A/N	15	521	535		Submit if available-not
46									currently utilized by MQD
	214	CARDHOLDER DATE OF BIRTH	S	N	8	536	543		Submit if available-not
47									currently utilized by MQD
	721-MD	GENDERCODE	S	N	1	544	544		Submit if available-not
48									currently utilized by MQD
	274	MEDICARE PLAN CODE	S	A/N	1	545	545		Submit if available-not
49									currently utilized by MQD
	288	PAYROLL CLASS	S	A/N	1	546	546		Submit if available-not
50									currently utilized by MQD
		SUBSECTION PATIENT							
51		INFORMATION:							
	331-CX	PATIENT ID QUALIFIER	S	A/N	2	547	548		Submit if available-not
52									currently utilized by MQD
	332-CY	PATIENT ID	S	A/N	20	549	568		Submit if available-not
53									currently utilized by MQD
	716	LAST NAME	S	A/N	35	569	603		Submit if available-not
54			5	A/IN	35	569	603		currently utilized by MQD
	717	FIRSTNAME	S	A/N	25	604	628		Submit if available-not
55			5	A/IN	25	604	020		currently utilized by MQD
	718	MIDDLE INITIAL	S	A/N	1	629	629		Submit if available-not
56			5	A/IN	1	029	629		currently utilized by MQD
	280	NAME SUFFIX	S	A/N	10	630	639		Submit if available-not
57			5	A/N	10	630	639		currently utilized by MQD
	726	ADDRESS LINE 1	s	A /NI	55	640	694		Submit if available-not
58			5	A/N	55	640	694		currently utilized by MQD
	727	ADDRESS LINE 2	s	A/N	55	695	749		Submit if available-not
59			5	A/IN	55	695	749		currently utilized by MQD
	728	CITY	S	A/N	30	750	779		Submit if available-not
60			5	A/IN	30	750	119		currently utilized by MQD
	729	STATE	S	A/N	2	780	781		Submit if available-not
61			5	A/IN	2	780	/01		currently utilized by MQD
	730	ZIP/POSTAL CODE	S	A/N	15	782	796		Submit if available-not
62			5	A/IN	15	102	790		currently utilized by MQD
	304-C4	DATE OF BIRTH		NI		707	804		Submit if available-not
63			S	N	8	797	804		currently utilized by MQD
	305-C5	PATIENT GENDER CODE		NI	1	005	00F		Submit if available-not
64			S	N		805	805		currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
		[see Claim Category]							Submit if available-not
65									currently utilized by MQD
	247	ELIGIBILITY/PATIENT RELATIONSHIP	S	N	2	806	807		Submit if available-not
66		CODE							currently utilized by MQD
	208	AGE	S	N	3	808	810		Submit if available-not
67									currently utilized by MQD
	303-C3	PERSONCODE	S	A/N	3	811	813		Submit if available-not
68									currently utilized by MQD
	306-C6	PATIENT RELATIONSHIP CODE	S	Ν	1	814	814		Submit if available-not
69									currently utilized by MQD
	309-C9	ELIGIBILITY CLARIFICATION CODE	S	A/N	1	815	815		Submit if available-not
70									currently utilized by MQD
	336-8C	FACILITYID	S	A/N	10	816	825		Submit if available-not
71									currently utilized by MQD
72		SECTION BENEFIT CATEGORY:							
	301-C1	GROUP ID	М	A/N	15	826	840	ID assigned to the cardholder	
73								group or employer group.	
	215	CARRIERNUMBER	S	A/N	9	841	849		Submit if available-not
74									currently utilized by MQD
	757-U6	BENEFITID	S	A/N	15	850	864		Submit if available-not
75									currently utilized by MQD
	240	CONTRACT NUMBER	S	A/N	8	865	872		Submit if available-not
76									currently utilized by MQD
	212	BENEFITTYPE	S	A/N	1	873	873		Submit if available-not
77									currently utilized by MQD
	279	MEMBER SUBMITTED CLAIM PROGRAM	S	A/N	1	874	874		Submit if available-not
78									currently utilized by MQD
	282	NON-POS CLAIM OVERRIDE CODE	S	A/N	1	875	875		Submit if available-not
79									currently utilized by MQD
	282	NON-POS CLAIM OVERRIDE CODE	S	A/N	1	876	876		Submit if available-not
80									currently utilized by MQD
	282	NON-POS CLAIM OVERRIDE CODE	S	A/N	1	877	877		Submit if available-not
81									currently utilized by MQD
	241	COPAY MODIFIER ID	S	A/N	10	878	887		Submit if available-not
82									currently utilized by MQD
	292	PLAN CUTBACK REASON CODE	S	A/N	1	888	888		Submit if available-not
83									currently utilized by MQD
	293	PREFERRED ALTERNATIVE FILE ID	S	A/N	10	889	898		Submit if available-not
84									currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
85	308-C8	OTHER COVERAGE CODE	М	Ν	2	899	900	 Code indicating whether or not the patient has other insurance coverage. 0 Not Specified by patient. 1 No other coverage. 2 Other coverage exists-payment collected. 3 Other Coverage Billed – claim not covered. 4 Other coverage exists-payment not collected. 	Translates to 'Y' or 'N' on EC215 0 or 1 or 3 = 'N' 2 or 4 = 'Y'
86	291	PLAN BENEFIT CODE	S	A/N	2	901	902		Submit if available-not currently utilized by MQD
	601-01	PLAN TYPE	S	A/N	4	903	906		Submit if available-not
87									currently utilized by MQD
88		SECTION PHARMACY CATEGORY:							
89	202-B2	SERVICE PROVIDER ID QUALIFIER	М	A/N	2	907	908	'01' - National Provider Identifier (NPI)	
90	201-B1	SERVICE PROVIDER ID	M	A/N	15	909	923	10 digit Pharmacy NPI	Limited to 10 characters This NPI must not be associated with a provider that appears in the PMR as Provider Type 01 – Group Payment ID.
91	202-B2	SERVICE PROVIDER ID QUALIFIER (ALTERNATE)	S	A/N	2	924	925		Submit if available-not currently utilized by MQD
92	201-B1	SERVICE PROVIDER ID (ALTERNATE)	S	A/N	15	926	940		Submit if available-not currently utilized by MQD
93	886	SERVICE PROVIDER CHAIN CODE	S	A/N	7	941	947		Submit if available-not currently utilized by MQD
94	833-5P	PHARMACYNAME	S	A/N	35	948	982		Submit if available-not currently utilized by MQD
95	726	ADDRESS LINE 1	S	A/N	55	983	1037		Submit if available-not currently utilized by MQD
96	727	ADDRESS LINE 2	S	A/N	55	1038	1092		Submit if available-not currently utilized by MQD
97	728	CITY	S	A/N	30	1093	1122		Submit if available-not currently utilized by MQD
98	729	STATE	S	A/N	2	1123	1124		Submit if available-not currently utilized by MQD
99	730	ZIP/POSTAL CODE	S	A/N	15	1125	1139		Submit if available-not currently utilized by MQD

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	887	SERVICE PROVIDER COUNTY CODE	ç	A/N	3	1140	1142	Submit if available-not
100			5	An	5	1140	1142	currently utilized by MQD
	732	TELEPHONE NUMBER	0	N	10	1143	1152	Submit if available-not
101			3	IN	10	1143	1152	currently utilized by MQD

	Α	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	146	PHARMACY DISPENSER TYPE QUALIFIER	S	A/N	1	1153	1153		Submit if available-not
102			5	7/11	1	1100	1155		currently utilized by MQD
	290	PHARMACY DISPENSER TYPE	S	A/N	2	1154	1155		Submit if available-not
103			0		2	1104	1100		currently utilized by MQD
	150	PHARMACY CLASS CODE QUALIFIER	S	A/N	1	1156	1156		Submit if available-not
104				,,,,,	-	1100	1100		currently utilized by MQD
	289	PHARMACY CLASS CODE	S	A/N	1	1157	1157		Submit if available-not
105									currently utilized by MQD
100	266	IN NETWORK INDICATOR	S	A/N	1	1158	1158		Submit if available-not
106	545-2F								currently utilized by MQD
107	545-2F	NETWORK REIMBURSEMENT ID	S	A/N	10	1159	1168		Submit if available-not
107									currently utilized by MQD
108		SECTION PRESCRIBER							
108	466-EZ	CATEGORY: PRESCRIBER ID QUALIFIER	М	A/N	2	1169	1170	(01) Notice of Describent Line (Con	MQD requires this field per this
109	400-EZ	PRESCRIBER ID QUALIFIER	IVI	A/IN	2	1109	1170	(NPI)	TP agreement
109	411-DB	PRESCRIBER ID	М	A/N	15	1171	1185	10 digit Prescriber NPI	MQD requires this field per this
	411-00	PRESCRIBER ID	IVI	AVIN	15		1105		TP agreement
									n agreement
110									Limited to 10 characters
									This NPI must not be associated
									with a provider that appears in the
									PMR as Provider Type 01 – Group
									Payment ID.
	466-EZ	PRESCRIBER ID QUALIFIER	S	A/N	2	1186	1187		Submit if available-not
111		(ALTERNATE)							currently utilized by MQD
	411-DB	PRESCRIBER ID (ALTERNATE)	S	A/N	15	1188	1202		Submit if available-not
112									currently utilized by MQD
113	296	PRESCRIBER TAXONOMY	S	A/N	10	1203	1212		Submit if available
	295	PRESCRIBERCERTIFICATIONSTATUS	S	A/N	2	1213	1214		Submit if available-not
114									currently utilized by MQD
115	716		S	A/N	35	1215	1249		Submit if available
116	717	FIRST NAME	S	A/N	25	1250	1274		Submit if available
	732	TELEPHONE NUMBER	S	Ν	10	1275	1284		Submit if available-not
117	100.05					1005	1005		currently utilized by MQD
110	468-2E	PRIMARY CARE PROVIDER ID	S	A/N	2	1285	1286		Submit if available
118			-	A /N I	45	4007	4004	(NPI)	
119	421-DL	PRIMARY CARE PROVIDER ID	S	A/N	15	1287	1301	10 digit Pharmacy NPI	Submit if available
120	716	LAST NAME	S	A/N	35	1302	1336		Submit if available

121	717	FIRST NAME	S	A/N	25	1337	1361	Submit if available	
122		SECTION CLAIM CATEGORY:							

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
123	399	RECORD STATUS CODE	Μ	A/N	1	1362		1 - Paid 2 - Rejected/Denied 3 - Reversed Paid 4-Adjusted	
124	218	CLAIM MEDIA TYPE	Μ	A/N	1	1363		See ECL	
125	395	PROCESSOR PAYMENT CLARIFICATION CODE	М	A/N	2	1364	1365	See ECL	Provides additional information of the status of the payment of the claim.
126	455-EM	PRESCRIPTION/SERVICE REFERENCE NUMBER QUALIFIER	Μ	A/N	1	1366	1366	1 - RX Billing	
127	402-D2	PRESCRIPTION/SERVICE REFERENCE NUMBER	М	N	12	1367	1378	10 digit Rx Number	Limited to 10 digits
128	436-E1	PRODUCT/SERVICE ID QUALIFIER	М	A/N	2	1379		03' - National Drug Code (NDC)	
129	407-D7	PRODUCT/SERVICE ID	М	A/N	19	1381	1399	11 digit ID of the product dispensed or service provided	Limited to 11 characters
130	401-D1	DATE OF SERVICE	Μ	Ν	8	1400	1407	Date the prescription was filled. Format: CCYYMMDD	
131	578	ADJUDICATION DATE	Μ	N	8	1408	1415	Date the claim or adjustment is processed. Format: CCYYMMDD	
132	203	ADJUDICATIONTIME	S	N	6	1416	1421		Submit if available-not currently utilized by MQD
133	283	ORIGINAL CLAIM RECEIVED DATE	S	Ν	8	1422	1429	The date the pharmacy submitted the claim electronically for a paper claim- matching program Format: CCYYMMDD	Submit if available
134	219	CLAIM SEQUENCE NUMBER	S	N	5	1430	1434		Submit if available-not currently utilized by MQD
135	213	BILLING CYCLE END DATE	S	Ν	8	1435	1442		Submit if available-not currently utilized by MQD

	А	В	С	D	Е	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
136	239	COMMUNICATION TYPE INDICATOR	S	A/N	2	1443	1444		Submit if available-not currently utilized by MQD
137	307-C7	PLACE OF SERVICE	S	N	2	1445		Valid values found in the CMS Place of Service Code Set	Submit if available.
									If submitted, must be valid
								https://www.cms.gov/Medicare/ Coding/place-of-service-	value from CMS Place of
								codes/Place of Service Code Set	Service Code Set.
	204.47		6	NI	0	4447			Submit if available-not
138	384-4X	PATIENT RESIDENCE	S	N	2	1447	1448		currently utilized by MQD
	419-DJ	PRESCRIPTION ORIGIN CODE	М	Ν	1	1449	1449	See ECL	MQD requires this field per this
									TP agreement.
									Used to capture E-prescribing
139									statistics.
140	278	MEMBER SUBMITTED CLAIM PAYMENT RELEASE DATE	S	Ν	8	1450	1457		Submit if available-not
140									currently utilized by MQD Submit if available-not
141	217	CLAIM DATE RECEIVED IN THE MAIL	S	N	8	1458	1465		currently utilized by MQD
	268	INTERNAL MAIL ORDER	S	A/N	15	1466	1480	Field designating the internal	Submit if available
		PRESCRIPTION/SERVICE						prescription number assigned	
142		REFERENCE NUMBER						by pharmacies.	
143	102-A2	VERSION/RELEASE NUMBER (OF THE CLAIM)	S	A/N	2	1481	1482		Submit if available-not
143	216	CHECK DATE	S	N	8	1483	1490	Member Claims - Actual	currently utilized by MQD Submit if available
	210				Ŭ	1400	1400	member check date Non	
								member Claims - Pharmacy	
								check date	
144	0.07			A /N 1		4404	4500	Format: CCYYMMDD	
	287	PAYMENT/REFERENCE ID	S	A/N	30	1491	1520	Identifies ID assigned by sender to reference individual	Submit if available
								pharmacy and member	
								reimbursement. Check or EFT	
145								trace number.	
	456-EN		S	N	12	1521	1532		Submit if available-not
146						4500	45.40		currently utilized by MQD
147	457-EP	ASSOCIATED PRESCRIPTION/SERVICE	S	N	8	1533	1540		Submit if available-not
147									currently utilized by MQD

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	442-E7	QUANTITY DISPENSED	Μ	N	10	1541	1550	Expressed in metric decimal	MQD requires this field per this
148								units	TP agreement
	403-D3	FILL NUMBER	S	N	2	1551	1552	0' - Original Dispensing	Submit if available
149								'1' - '99' - Refill number	

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
150	405-D5	DAYS SUPPLY	S	Ν	3	1553	1555	Estimated number of days the prescription will last or '000'	Submit if available
151	414-DE	DATE PRESCRIPTION WRITTEN	S	N	8	1556	1563	Format: CCYYMMDD	Submit if available
152		DISPENSE AS WRITTEN (DAW)/PRODUCT SELECTION CODE	S	A/N	1	1564	1564	See ECL	Submit if available
153		NUMBER OF REFILLS AUTHORIZED	S	N	2	1565		0' - No refills authorized '1' - '99' - Authorized Refill number	Submit if available
154	429-DT	SPECIAL PACKAGING INDICATOR	S	Ν	1	1567	1567	See ECL	Submit if available
155	600-28	UNIT OF MEASURE	S	A/N	2	1568	1569	See ECL	Submit if available
156	418-DI	LEVEL OF SERVICE	S	Ν	2	1570	1571		Submit if available-not currently utilized by MQD
157	343-HD	DISPENSING STATUS	S	A/N	1	1572	1572		Submit if available-not currently utilized by MQD
158	344-HF	QUANTITY INTENDED TO BE DISPENSED	S	Ν	10	1573	1582	Metric decimal quantity of medication that would be dispensed on original filling if inventory were available. Used in association with a 'P' or 'C' in 'Dispensing Status' (343- HD).	Submit if available
159	460-ET	QUANTITY PRESCRIBED	S	N	10	1583	1592	See ECL	Submit if available
160	345-HG	DAYS SUPPLY INTENDED TO BE DISPENSED	S	Ν	3	1593	1595	Days supply for metric decimal quantity of medication that would be dispensed on original dispensing if inventory were available. Used in association with a 'P' or 'C' in 'Dispensing Status' (343-HD).	Submit if available
161	254	FILL NUMBER CALCULATED	S	Ν	2	1596	1597		Submit if available-not currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	406-D6	COMPOUND CODE	S	N	1	1598	1598	'0' - Not Specified	If '2' - Compound is submitted,
								'1' - Not a Compound	then Compound Detail Record
								'2' - Compound (Required if	must also be submitted with at
100								compound)	least two or more ingredients.
162 163	996-G1		S	A/N	2	1599	1600	See ECL	Submit if available
100				,,,,,				replaced by 995-E2	Submit if available-not
164	452-EH	COMPOUND ROUTE OF ADMINISTRATION	S	Ν	2	1601	1602		currently utilized by MQD
165	995-E2	ROUTE OF ADMINISTRATION	S	A/N	11	1603	1613	See ECL	Submit if available
		[See Benefit Category]							Submit if available-not
166									currently utilized by MQD
		[See Prior Auth Category]							Submit if available-not
167									currently utilized by MQD
		[See Prior Auth Category]							Submit if available-not
168									currently utilized by MQD
	492-WE	DIAGNOSIS CODE QUALIFIER	S	A/N	2	1614	1615	00' - Not specified	Submit if available
100								'01' - ICD9	
169	404 50				4=	1010	4000	'02' - ICD10-CM	
170	424-DO	DIAGNOSIS CODE	S	A/N	15	1616	1630	6 digit Code identifying the	Submit if available
170	492-WE	DIAGNOSIS CODE QUALIFIER	S	A/N	2	1631	1632	diagnosis of the patient 00' - Not specified	Limited to 6 characters Submit if available
	492-VVE	DIAGNOSIS CODE QUALIFIER	3	AVIN	2	1031	1032	00 - Not specified	
171								'02' - ICD10-CM	
	424-DO	DIAGNOSIS CODE	S	A/N	15	1633	1647	6 digit Code identifying the	Submit if available
172	121 00		Ũ	,,,,,	10	1000	1017	diagnosis of the patient	Limited to 6 characters
	492-WE	DIAGNOSIS CODE QUALIFIER	S	A/N	2	1648	1649	00' - Not specified	Submit if available
								'01' - ICD9	
173								'02' - ICD10-CM	
	424-DO	DIAGNOSIS CODE	S	A/N	15	1650	1664	6 digit Code identifying the	Submit if available
174								diagnosis of the patient	Limited to 6 characters
	492-WE	DIAGNOSIS CODE QUALIFIER	S	A/N	2	1665	1666	00' - Not specified	Submit if available
								'01' - ICD9	
175						10.05	100	'02' - ICD10-CM	
470	424-DO	DIAGNOSIS CODE	S	A/N	15	1667	1681	6 digit Code identifying the	Submit if available
176	400 14/5		0	A /N I	6	4000	4000	diagnosis of the patient	Limited to 6 characters
	492-WE	DIAGNOSIS CODE QUALIFIER	S	A/N	2	1682	1683	00' - Not specified	Submit if available
177								'01' - ICD9 '02' - ICD10-CM	
1//									

	Α	В	С	D	E	F	G	Н	
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	424-DO	DIAGNOSIS CODE	S	A/N	15	1684	1698	6 digit Code identifying the	Submit if available
178								diagnosis of the patient	Limited to 6 characters
	439-E4	REASON FOR SERVICE CODE	S	A/N	2	1699	1700	See ECL	Submit if available
179									
	440-E5	PROFESSIONAL SERVICE CODE	S	A/N	2	1701	1702	See ECL	Submit if available
	1								If 'MA' (Medication
	1								administration) then 521-FL
	1								should contain the vaccine
	1								administration fee. Only use
	1								'MA' when the drug is a flu
180	1								vaccine.
	1								
	1								**Note: 'MA' calculation will
	1								include Ingredient Cost +
	1								Incent Fee Paid only + Sales
	1								Tax. Exclude Dispense Fee
	1								Paid.
			S	A /N I		4700	4704	See ECL	Output if it southable
181	441-E0	RESULT OF SERVICE CODE	5	A/N	2	1703	1704	See ECL	Submit if available
101	474-8E	DUR/PPS LEVEL OF EFFORT	S	N	2	1705	1706		Submit if available-not
182	474-0L		5	IN IN	2	1705	1700		
102	439-E4	REASON FOR SERVICE CODE	S	A/N	2	1707	1708		currently utilized by MQD Submit if available-not
183	400-04		5		2	1707	1700		currently utilized by MQD
103	440-E5	PROFESSIONAL SERVICE CODE	S	A/N	2	1709	1710		Submit if available-not
184	440 20		U	7014	-	1700	17 10		currently utilized by MQD
104	441-E6	RESULT OF SERVICE CODE	S	A/N	2	1711	1712		Submit if available-not
185			Ũ	,	-				currently utilized by MQD
100	474-8E	DUR/PPS LEVEL OF EFFORT	S	N	2	1713	1714		Submit if available-not
186			_		_				currently utilized by MQD
100	439-E4	REASON FOR SERVICE CODE	S	A/N	2	1715	1716		Submit if available-not
187									currently utilized by MQD
107	440-E5	PROFESSIONAL SERVICE CODE	S	A/N	2	1717	1718		Submit if available-not
188									currently utilized by MQD
100	441-E6	RESULT OF SERVICE CODE	S	A/N	2	1719	1720		Submit if available-not
189							5		currently utilized by MQD
103	474-8E	DUR/PPS LEVEL OF EFFORT	S	N	2	1721	1722		Submit if available-not
190			Ū		_				currently utilized by MQD
190									

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	439-E4	REASON FOR SERVICE CODE	S	A/N	2	1723	1724	Submit if available-not
191								currently utilized by MQD
	440-E5	PROFESSIONAL SERVICE CODE	S	A/N	2	1725	1726	Submit if available-not
192								currently utilized by MQD
	441-E6	RESULT OF SERVICE CODE	S	A/N	2	1727	1728	Submit if available-not
193								currently utilized by MQD

474-8EDUR/PPS LEVEL OF EFFORTSN217291730Submit if a currently u194439-E4REASON FOR SERVICE CODESA/N217311732Submit if a currently u195440-E5PROFESSIONAL SERVICE CODESA/N217331734Submit if a currently u196441-E6RESULT OF SERVICE CODESA/N217351736Submit if a currently u197441-E6RESULT OF SERVICE CODESA/N217351736Submit if a currently u	IQD USAGE available-not utilized by MQD available-not utilized by MQD
194A39-E4REASON FOR SERVICE CODESA/N217311732Currently L195440-E5PROFESSIONAL SERVICE CODESA/N217331734Submit if a currently L196441-E6RESULT OF SERVICE CODESA/N217351736Submit if a currently L197441-E6RESULT OF SERVICE CODESA/N217351736Submit if a currently L	utilized by MQD available-not utilized by MQD available-not utilized by MQD available-not
439-E4REASON FOR SERVICE CODESA/N217311732Submit if a currently u195440-E5PROFESSIONAL SERVICE CODESA/N217331734Submit if a currently u196441-E6RESULT OF SERVICE CODESA/N217351736Submit if a currently u197441-E6RESULT OF SERVICE CODESA/N217351736Submit if a currently u	available-not utilized by MQD available-not utilized by MQD available-not
195Image: state of the state of	utilized by MQD available-not utilized by MQD available-not
440-E5PROFESSIONAL SERVICE CODESA/N217331734Submit if a currently u196441-E6RESULT OF SERVICE CODESA/N217351736Submit if a currently u197197197197197198198198198198198	available-not utilized by MQD available-not
196 441-E6 RESULT OF SERVICE CODE S A/N 2 1735 1736 Submit if a currently to cu	utilized by MQD available-not
441-E6 RESULT OF SERVICE CODE S A/N 2 1735 1736 Submit if a currently u 197 Submit if a currently u	available-not
197	
j j	utilized by MOD
474-8E DUR/PPS LEVEL OF EFFORT S N 2 1737 1738 Submit if a	available-not
	utilized by MQD
439-E4 REASON FOR SERVICE CODE S A/N 2 1739 1740 Submit if a	available-not
199 currently u	utilized by MQD
	available-not
200 currently u	utilized by MQD
441-E6 RESULT OF SERVICE CODE S A/N 2 1743 1744 Submit if a	available-not
201 currently u	utilized by MQD
474-8E DUR/PPS LEVEL OF EFFORT S N 2 1745 1746 Submit if a	available-not
202 currently u	utilized by MQD
	available-not
203 currently u	utilized by MQD
440-E5 PROFESSIONAL SERVICE CODE S A/N 2 1749 1750 Submit if a	available-not
204 currently u	utilized by MQD
441-E6 RESULT OF SERVICE CODE S A/N 2 1751 1752 Submit if a	available-not
205 currently u	utilized by MQD
	available-not
206 currently u	utilized by MQD
439-E4 REASON FOR SERVICE CODE S A/N 2 1755 1756 Submit if a	available-not
207 currently u	utilized by MQD
440-E5 PROFESSIONALSERVICECODE S A/N 2 1757 1758 Submit if a	available-not
208 currently u	utilized by MQD
	available-not
209 currently u	utilized by MQD
	available-not
	utilized by MQD
	available-not
211 currently u	utilized by MQD
	available-not
212 currently u	utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	441-E6	RESULT OF SERVICE CODE	S	A/N	2	1767	1768		Submit if available-not
213									currently utilized by MQD
	474-8E	DUR/PPS LEVEL OF EFFORT	S	N	2	1769	1770		Submit if available-not
214									currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	1771	1772		Submit if available-not
215									currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	1773	1791		Submit if available-not
216									currently utilized by MQD
	878	REJECT OVERRIDE CODE	S	A/N	1	1792	1792		Submit if available-not
217									currently utilized by MQD
	511-FB	REJECT CODE	S	A/N	3	1793	1795		Submit if available-not
218									currently utilized by MQD
	511-FB	REJECT CODE	S	A/N	3	1796	1798		Submit if available-not
219									currently utilized by MQD
	511-FB	REJECT CODE	S	A/N	3	1799	1801		Submit if available-not
220									currently utilized by MQD
	511-FB	REJECT CODE	S	A/N	3	1802	1804		Submit if available-not
221									currently utilized by MQD
	511-FB	REJECT CODE	S	A/N	3	1805	1807		Submit if available-not
222									currently utilized by MQD
		SECTION WORKERS							
223		COMPENSATION CATEGORY:							
	435-DZ	CLAIM/REFERENCE ID	S	A/N	30	1808	1837	Identifies the claim number	Submit if available
								assigned by Worker's	
224								Compensation Program.	
	434-DY	DATE OF INJURY	S	Ν	8	1838	1845	Date on which the injury	Submit if available
225								occurred	
		SECTION PRODUCT CATEGORY:							
226			-						
227	532-FW	DATABASE INDICATOR	S	A/N	1	1846		See ECL	Submit if available
	397	PRODUCT/SERVICE NAME	S	A/N	30	1847	1876	Product or Service Description	Submit if available
								or Product Label Name.	
228									
	261	GENERIC NAME	S	A/N	30	1877	1906	Generic name of the product	Submit if available
								identified in Product/Service	
229								Name.	
230	601-24	PRODUCT STRENGTH	S	A/N	15	1907		The strength of the product.	Submit if available
	243	DOSAGE FORM CODE	S	A/N	4	1922	1925	Dosage form code for product	Submit if available
231								identified	

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
232		FILLER	S	A/N	8	1926	1933	Spaces	
233	425-DP	DRUG TYPE	S	Ν	1	1934	1934	See ECL	Submit if available
	273	MAINTENANCE DRUG INDICATOR	S	A/N	1	1935	1935		Submit if available-not
234									currently utilized by MQD
	244	DRUG CATEGORY CODE	S	A/N	1	1936	1936		Submit if available-not
235									currently utilized by MQD
236	252	FEDERAL DEA SCHEDULE	S	A/N	1	1937	1937	See ECL	Submit if available
	297	PRESCRIPTION OVER THE	S	A/N	1	1938	1938	See ECL	Submit if available
237		COUNTER INDICATOR							
	420-DK	SUBMISSION CLARIFICATION	S	N	2	1939	1940	See ECL	Submit if available
238		CODE							
	420-DK	SUBMISSION CLARIFICATION CODE	s	N	2	1941	1942		Submit if available-not
239	420-DI		0		2	1341	1342		currently utilized by MQD
	420-DK	SUBMISSION CLARIFICATION CODE	s	N	2	1943	1944		Submit if available-not
240			_						currently utilized by MQD
	250	FDA DRUG EFFICACY CODE	S	A/N	1	1945	1945		Submit if available-not
241									currently utilized by MQD
242	601-19	PRODUCT CODE QUALIFIER	S	A/N	1	1946	1946	See ECL	Submit if available
	601-18	PRODUCT CODE	S	A/N	17	1947	1963	Code identifying the product	Submit if available
243								being reported.	
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	1964	1964		Submit if available-not
244									currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	1965	1981		Submit if available-not
245									currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	1982	1982		Submit if available-not
246									currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	1983	1999		Submit if available-not
247									currently utilized by MQD
	251	FEDERAL UPPER LIMIT INDICATOR	S	A/N	1	2000	2000		Submit if available-not
248									currently utilized by MQD
	294	PRESCRIBED DAYS SUPPLY	S	Ν	3	2001	2003		Submit if available-not
249									currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE	S	A/N	1	2004	2004	See ECL	Submit if available
250		QUALIFIER							
a= :	601-25	THERAPEUTIC CLASS CODE	S	A/N	17	2005	2021	Code assigned to product	Submit if available
251								being reported.	
0.00	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	2022	2022		Submit if available-not
252									currently utilized by MQD

1 Field Field Name M/S Format Size State End Ovalues M/QO USAGE 253 001-25 HERAPEUTIC CLASS CODE S A/N 1 202 203 Control (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		А	В	С	D	E	F	G	Н	I
253601-25THERAPEUTIC CLASS CODESAN17202203currently utilized by MQD25401-26THERAPEUTIC CLASS CODE QUALIFIERSAN120402040Currently utilized by MQD255601-25THERAPEUTIC CLASS CODE QUALIFIERSAN1720412057Currently utilized by MQD256601-26THERAPEUTIC CLASS CODE QUALIFIERSAN1720582058Currently utilized by MQD257601-25THERAPEUTIC CLASS CODESA/N1720592075Submit if available-not currently utilized by MQD258SECTION FORMULARYSA/N1120762076Submit if available-not currently utilized by MQD258SECTION FORMULARY STATUSSA/N120772077See ECLSubmit if available-not currently utilized by MQD259257FORMULARY STATUSSA/N120772077See ECLSubmit if available-not currently utilized by MQD260221CLIENT FORMULARY FLAGSA/N120772077See ECLSubmit if available-not currently utilized by MQD261256FORMULARY FLAGSA/N121072077See ECLSubmit if available-not currently utilized by MQD262256FORMULARY FLAGSA/N121072077See ECLSubmit if available-not currently utilized by MQD263256FORMULARY FLEIDSA/N1 </th <th>1</th> <th>Field</th> <th>Field Name</th> <th>M/S</th> <th>Format</th> <th>Size</th> <th>Start</th> <th>End</th> <th>Values</th> <th>MQD USAGE</th>	1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
233		601.25		9	Δ/N	17	2023	2030		Submit if available-not
254 601-26 THERAPEUTIC CLASS CODE QUALIFIER S ANN 1 204 2040 currently utilized by MQD 255 601-25 THERAPEUTIC CLASS CODE S ANN 17 2041 2057 Contraction of currently utilized by MQD 256 601-26 THERAPEUTIC CLASS CODE QUALIFIER S ANN 11 2058 2058 Contraction of currently utilized by MQD 257 601-25 THERAPEUTIC CLASS CODE QUALIFIER S ANN 11 2059 2058 Contraction of currently utilized by MQD 258 601-25 THERAPEUTIC CLASS CODE QUALIFIER S ANN 11 2059 2058 Contraction of currently utilized by MQD 258 CATEGORY: S ANN 11 2077 2075 See ECL Submit if available-not currently utilized by MQD 250 257 FORMULARY STAUS S ANN 11 2076 2076 See ECL Submit if available-not currently utilized by MQD 261 Category: S ANN 12 2077 2077 See ECL Submit if available-not currently utilized by MQD 261 FORMULARY FLEID S ANN 12 2078 2078 See ECL Submit if available-not currently	253	001-20		5		17	2025	2039		
254		601-26	THERAPEUTIC CLASS CODE QUALIEIER	s	A/N	1	2040	2040		
255601-25THERAPEUTIC CLASS CODESA/N1720472057currently utilized by MQD266601-26THERAPEUTIC CLASS CODESA/N120582058Currently utilized by MQD257601-25THERAPEUTIC CLASS CODESA/N1720592075Currently utilized by MQD258601-26THERAPEUTIC CLASS CODESA/N1720592075Currently utilized by MQD258SECTION FORMULARY CATEGORY:SA/N120772076See ECLSubmit if available-not currently utilized by MQD258FORMULARY STATUSSA/N120772077See ECLSubmit if available-not currently utilized by MQD260221CLIENT FORMULARY FLAGSA/N120772077See ECLSubmit if available-not currently utilized by MQD261256FORMULARY FILEIDSA/N1520862100Submit if available-not currently utilized by MQD263256FORMULARY CODE TYPESA/N12112101Submit if available-not currently utilized by MQD264SECTION PRICING CATEGORY:265FORMULARY CODE TYPESA/N121012101Submit if available-not currently utilized by MQD266507-F7DISPENSING FEE PAIDMD821102110Drug ingredient cost paid included in the Total Amount	254	00120			,,,,,		2010	2010		
256601-26THERAPEUTIC CLASS CODE QUALIFIERSA/N120582058Submit if available-not currently utilized by MQD257601-25THERAPEUTIC CLASS CODESA/N1720592075Submit if available-not currently utilized by MQD258SECTION FORMULARY CATEGORY:SA/N120762076See ECLSubmit if available-not currently utilized by MQD260221CLIENT FORMULARY FLAGSA/N120772077See ECLSubmit if available261889THERAPEUTIC CHAPTERSA/N120772077See ECLSubmit if available-not currently utilized by MQD26190THERAPEUTIC CHAPTERSA/N120782085Submit if available-not currently utilized by MQD26190FORMULARY FILEIDSA/N1520862100Submit if available-not currently utilized by MQD26290FORMULARY CODE TYPESA/N121012101Submit if available-not currently utilized by MQD263506-F6INGREDIENT COST PAIDMD821022109Drug igredient cost paid included in the Total Amount Paid' (894)264SECTION PRICING CATEGORY:265506-F6INGREDIENT COST PAIDMD821022109Drug igredient cost paid included in the Total Amount Paid' (894)266-507-F7DISPENSING FEE PAIDMD		601-25	THERAPEUTIC CLASS CODE	s	A/N	17	2041	2057		
256 601-26 INERAPEUTIC CLASS CODE QUALIFIER S AN 1 2058 2039 currently utilized by MQD 257 601-25 THERAPEUTIC CLASS CODE S AN 17 2059 2075 Currently utilized by MQD 258 601-25 THERAPEUTIC CLASS CODE S AN 17 2059 2075 Currently utilized by MQD 258 SECTION FORMULARY STATUS S AN 1 2076 See ECL Submit if available 260 221 CLIENT FORMULARY STATUS S AN 1 2077 2085 See ECL Submit if available 260 221 CLIENT FORMULARY FLAG S AN 18 2077 2085 Submit if available-not currently utilized by MQD 261	255									
257601-25THERAPEUTIC CLASS CODE\$A/N1720592075Submit if available-not currently utilized by MQD258SECTION FORMULARY CATEGORY:SA/N120762076See ECLSubmit if available259257FORMULARY STATUSSA/N120762076See ECLSubmit if available260221CLIENT FORMULARY FLAGSA/N12077See ECLSubmit if available261289THERAPEUTIC CHAPTERSA/N820782086Submit if available-not currently utilized by MQD261256FORMULARY FILEIDSA/N1520862100Submit if available-not currently utilized by MQD262255FORMULARY CODE TYPESA/N121012101Submit if available-not currently utilized by MQD263256FORMULARY CODE TYPESA/N121012101Submit if available-not currently utilized by MQD263256FORMULARY CODE TYPESA/N121012101Submit if available-not currently utilized by MQD263256FORMULARY COST PAIDMD821022109Drug ingredient cost paid included in the Total Amount Paid' (894)264SECTION PRICING CATEGORY:265Son-F6INGREDIENT COST PAIDMD821022109Drug ingredient cost paid included in the Total Amount Paid' (894) <td>050</td> <td>601-26</td> <td>THERAPEUTIC CLASS CODE QUALIFIER</td> <td>S</td> <td>A/N</td> <td>1</td> <td>2058</td> <td>2058</td> <td></td> <td></td>	050	601-26	THERAPEUTIC CLASS CODE QUALIFIER	S	A/N	1	2058	2058		
257 601-25 THERAPEUTIC CLASS CODE S ANN 17 2059 2075 currently utilized by MQD 258 SECTION FORMULARY CATEGORY: S A/N 1 2076 2076 See ECL Submit if available 260 221 CLIENT FORMULARY STATUS S A/N 1 2077 2077 See ECL Submit if available 260 221 CLIENT FORMULARY FLAG S A/N 1 2077 2078 See ECL Submit if available-not currently utilized by MQD 261 7 FORMULARY FILE ID S A/N 8 2078 2086 Concently utilized by MQD 262 FORMULARY CODE TYPE S A/N 1 2101 2101 Currently utilized by MQD 263 FORMULARY CODE TYPE S A/N 1 2101 2101 2101 Submit if available-not currently utilized by MQD 264 SECTION PRICING CATEGORY: A A/N 1 2101 2101 2101 2101 2101 2101 2101 2101 2101 2101 2101 2101	256									
SECTION FORMULARY CATEGORY: S A/N 1 2076 2076 See ECL Submit if available 259 257 FORMULARY STATUS S A/N 1 2077 See ECL Submit if available 260 221 CLIENT FORMULARY FLAG S A/N 1 2077 See ECL Submit if available 261 221 CLIENT FORMULARY FLAG S A/N 8 2078 See ECL Submit if available-not currently utilized by MQD 261 256 FORMULARY CHAPTER S A/N 15 2086 2100 Submit if available-not currently utilized by MQD 262 255 FORMULARY CODE TYPE S A/N 1 2101 2101 Submit if available-not currently utilized by MQD 264 SECTION PRICING CATEGORY: - - - - - 265 SOR-F6 INGREDIENT COST PAID M D 8 2100 Drug ingredient cost paid included in the 'Total Amount Paid' (894) 266 507-F7 DISPENSING FEE PAID M D 8 2110 2117 Dispensing fee paid included in the 'Total Amount Paid' (894) 266 507-F7 DISPENSING FEE PAID M D 8 2118 <	057	601-25	THERAPEUTIC CLASS CODE	S	A/N	17	2059	2075		
258 0 CATEGORY: 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	207									currently utilized by MQD
260221CLIENT FORMULARY FLAGSA/N120772077See ECLSubmit if available889THERAPEUTIC CHAPTERSA/N820782085Submit if available-not currently utilized by MQD261256FORMULARY FILEIDSA/N1520862100Submit if available-not currently utilized by MQD262255FORMULARY CODE TYPESA/N121012101Submit if available-not currently utilized by MQD263255FORMULARY CODE TYPESA/N121012101Submit if available-not currently utilized by MQD264SECTION PRICING CATEGORY:22109Drug ingredient cost paid included in the Total Amount Paid' (894)265507-F7DISPENSING FEE PAIDMD821102117Dispensing fee paid included in the Total Amount Paid' (894)266507-F7DISPENSING FEE PAIDMD821102117Dispensing fee paid included in the Total Amount Paid' (894)266507-F7DISPENSING FEE PAIDMD821182127Total amount of the prescription regardless of party responsible for paryment267523-FNAMOUNT ATTRIBUTED TO SALESMD821262133Amount to be collected from the patient that is included in Patient Pay Amount' (505-F5)268523-FNAMOUNT ATTRIBUTED TO SALESMD821262133Amount to be coll			CATEGORY:							
889THERAPEUTIC CHAPTERSA/N8207820852086Submit if available-not currently utilized by MQD261256FORMULARY FILE IDSA/N1520862100Submit if available-not currently utilized by MQD262255FORMULARY CODE TYPESA/N121012101Submit if available-not currently utilized by MQD263255FORMULARY CODE TYPESA/N121012101Submit if available-not currently utilized by MQD264SECTION PRICING CATEGORY:A/N121012101Submit if available-not currently utilized by MQD264SECTION PRICING CATEGORY:A/N121012101Submit if available-not currently utilized by MQD265506-F6INGREDIENT COST PAIDMD821022109Drug ingredient cost paid included in the 'Total Amount Paid' (894)266507-F7DISPENSING FEE PAIDMD821102117Dispensing fee paid included in the 'Total Amount Paid' (894)266677DISPENSING FEE PAIDMD821182125Total amount of the prescription regardless of party responsible for payment267503-FNAMOUNT ATTRIBUTED TO SALESMD821262133Amount to be collected from the patient that is included in Patient Pay Amount' (505-F5) that is due to sales tax paid.										
261 263 264 Control of the control	260								See ECL	
256FORMULARY FILE IDSA/N1520862100Submit if available-not currently utilized by MQD261255FORMULARY CODE TYPESA/N121012101Submit if available-not currently utilized by MQD263256FORMULARY CODE TYPESA/N121012101Submit if available-not currently utilized by MQD263SECTION PRICING CATEGORY:Submit if available-not currently utilized by MQD264SECTION PRICING CATEGORY:D821022109Drug ingredient cost paid included in the 'Total Amount Paid' (894)265507-F7DISPENSING FEE PAIDMD821102117Dispensing fee paid included in the 'Total Amount Paid' (894)266507-F7DISPENSING FEE PAIDMD821102117Dispensing fee paid included in the 'Total Amount Paid' (894)266507-F7DISPENSING FEE PAIDMD821102117Dispensing fee paid included in the 'Total Amount Paid' (894)266507-F7DISPENSING FEE PAIDMD821182125Total amount of the prescription regardless of party responsible for payment267503-FNAMOUNT ATTRIBUTED TO SALESMD821262133Amount to be collected from the patient that is included in 'Patient Pay Amount' (505-F5) that is due to sales tax paid.		889	THERAPEUTIC CHAPTER	S	A/N	8	2078	2085		
262264265FORMULARY CODE TYPESA/N1210121012101Currently utilized by MQD263255FORMULARY CODE TYPESA/N1210121012101Submit if available-not currently utilized by MQD264SECTION PRICING CATEGORY: </td <td>261</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	261									
255FORMULARY CODE TYPESA/N1210121012101Submit if available-not currently utilized by MQD264SECTION PRICING CATEGORY:<		256	FORMULARY FILE ID	S	A/N	15	2086	2100		
263Image: contract of the section of the secting of the secting of the	262									
264 SECTION PRICING CATEGORY: Image: Constraint of the section of the sectin of the section of the section of the section of the section of		255	FORMULARY CODE TYPE	S	A/N	1	2101	2101		
506-F6INGREDIENT COST PAIDMD821022109Drug ingredient cost paid included in the 'Total Amount Paid' (894)265507-F7DISPENSING FEE PAIDMD821102117Dispensing fee paid included in the 'Total Amount Paid' (894)266707-F7DISPENSING FEE PAIDMD821102117Dispensing fee paid included in the 'Total Amount Paid' (894)266707-F7DISPENSING FEE PAIDMD821102117Dispensing fee paid included in the 'Total Amount Paid' (894)267707-F7TOTAL AMOUNT PAID BY ALL SOURCESMD821182125Total amount of the prescription regardless of party responsible for payment267523-FNAMOUNT ATTRIBUTED TO SALES TAXMD821262133Amount to be collected from the patient that is included in 'Patient Pay Amount' (505-F5) that is due to sales tax paid.										currently utilized by MQD
265265Included in the 'Total Amount Paid' (894)266507-F7DISPENSING FEE PAIDMD821102117Dispensing fee paid included in the 'Total Amount Paid' (894)266111111112671111111126811111111126911111111112691111111111126911111111111126911111111111111111111111111111111111111111111111111111111111111111111111111111111111111111111111111111111	264					-				
265Image: second se		506-F6	INGREDIENT COST PAID	М	D	8	2102	2109		
507-F7DISPENSING FEE PAIDMD821102117Dispensing fee paid included in the 'Total Amount Paid' (894)266894TOTAL AMOUNT PAID BY ALL SOURCESMD821182125Total amount of the prescription regardless of party responsible for payment267523-FNAMOUNT ATTRIBUTED TO SALES TAXMD821262133Amount to be collected from the patient that is included in 'Patient Pay Amount' (505-F5) that is due to sales tax paid.	005									
266and and and and an anti-anti-anti-anti-anti-anti-anti-anti-	265				6		0110	0447		
266Image: Constraint of the sourcesImage: Co		507-F7	DISPENSING FEE PAID	IVI	D	8	2110	2117		
894TOTAL AMOUNT PAID BY ALL SOURCESMD821182125Total amount of the prescription regardless of party responsible for payment267523-FNAMOUNT ATTRIBUTED TO SALES TAXMD821262133Amount to be collected from the patient that is included in 'Patient Pay Amount' (505-F5) that is due to sales tax paid.	266								the Total Amount Paid (894)	
267SOURCESImage: Source of the section of the s	200	904		N/		0	2110	2125	Total amount of the	
267MMDResponsible for payment523-FNAMOUNT ATTRIBUTED TO SALES TAXMD821262133Amount to be collected from the patient that is included in 'Patient Pay Amount' (505-F5) that is due to sales tax paid.		094		IVI	D	0	2110	2125		
523-FN AMOUNT ATTRIBUTED TO SALES M D 8 2126 2133 Amount to be collected from the patient that is included in 'Patient Pay Amount' (505-F5) that is due to sales tax paid.	267									
TAX the patient that is included in 'Patient Pay Amount' (505-F5) that is due to sales tax paid.	201	523-FN	AMOUNT ATTRIBUTED TO SALES	М	D	8	2126	2133		
Patient Pay Amount' (505-F5) that is due to sales tax paid.		020111			U	Ŭ	2120	2100		
that is due to sales tax paid.										
	268									

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	505-F5	PATIENT PAY AMOUNT	М	D	8	2134	2141	TOTAL ;amount to be paid by	
								the patient to the pharmacy;	
								the patient's total cost share,	
								including copayments,	
								amounts applied to deductible,	
								over maximum amounts,	
269								penalties, etc.	
	518-FI	AMOUNT OF COPAY	М	D	8	2142	2149	Amount to be collected from	
								the patient that is included in	
								'Patient Pay Amount' (505-F5)	
070								that is due to a per	
270						0.450	0457	prescription copay.	
	572-4U	AMOUNT OF COINSURANCE	М	D	8	2150	2157	Amount to be collected from	
								the patient that is included in	
								'Patient Pay Amount' (505-F5)	
074								that is due to a per	
271	519-FJ	AMOUNT ATTRIBUTED TO PRODUCT	М	D	8	2158	2165	prescription coinsurance.	Output if suchtable wat
272	519-FJ	ISELECTION	IVI	D	0	2150	2105	Deleted field-not used in Post	Submit if available-not
212	517-FH	AMOUNT APPLIED TO PERIODIC	S	D	8	2166	2173	Adjudication Version 2.Ø	currently utilized by MQD Submit if available
	<u>ЭП-</u> ГП	DEDUCTIBLE	3	D	0	2100	2175		MQD - Health Plan Deductible
273									Amount
210	571-NZ	AMOUNT ATTRIBUTED TO PROCESSOR	S	D	8	2174	2181		Submit if available-not
274		FEE							currently utilized by MQD
		AMOUNT ATTRIBUTED TO PROVIDER							Submit if available-not
275	133-UJ	NETWORK SELECTION	S	D	8	2182	2189		currently utilized by MQD
		AMOUNT ATTRIBUTED TO PRODUCT				Ì			Submit if available-not
276	134-UK	SELECTION/BRAND DRUG	S	D	8	2190	2197		currently utilized by MQD
		AMOUNT ATTRIBUTED TO PRODUCT							Submit if available-not
277	135-UM	SELECTION/NON-PREFERRED	S	D	8	2198	2205		currently utilized by MQD
211		FORMULARY SELECTION AMOUNT ATTRIBUTED TO PRODUCT							Submit if available-not
070	136-UN	SELECTION/BRAND NON-PREFERRED	S	D	8	2206	2213		currently utilized by MQD
278		FORMULARY SELECTION							
070	137-UP	AMOUNT ATTRIBUTED TO COVERAGE	S	D	8	2214	2221		Submit if available-not
279	272	MAC REDUCED INDICATOR	S	A/N	1	2222	2222		currently utilized by MQD
200	212	INDICATOR	3	A/N			2222		Submit if available-not
280	223	CLIENT PRICING BASIS OF COST	S	A/N	2	2223	2224		currently utilized by MQD Submit if available-not
201	223		3	AVIN	2	2223	2224		
281									currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	260	GENERIC INDICATOR	S	A/N	1	2225	2225	Distinguishes if product priced as Generic or Branded product: As defined by processor.	Submit if available
282									
283	284	OUT OF POCKET APPLY AMOUNT	S	D	8	2226	2233		Submit if available-not currently utilized by MQD
284	209	AVERAGE COST PER QUANTITY UNIT PRICE	S	D	9	2234	2242	Average Cost Per Quantity as defined by processor.	Submit if available
285	210	AVERAGE GENERIC UNIT PRICE	S	D	9	2243	2251	Average Generic Price per unit as defined by processor.	
286	211	AVERAGE WHOLESALE UNIT PRICE	S	D	9	2252		Average Wholesale Price per unit for the drug as defined by processor.	Submit if available
287		FEDERAL UPPER LIMIT UNIT PRICE	S	D	9	2261	2269	Federal Upper Limit Unit Price as defined by processor.	Submit if available
288	430-DU	GROSS AMOUNT DUE	S	D	8	2270	2277	Total price claimed from all sources	Submit if available
289	271	MAC PRICE	S	D	9	2278	2286	Indicates the unit maximum allowable cost price for the product/service as defined by the processor.	Submit if available

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
290		INGREDIENT COST SUBMITTED	S	D	8	2287	2294	Submitted product component cost of the dispensed prescription. This amount is included in the 'Gross Amount Due' (430-DU)	
291		USUAL AND CUSTOMARY CHARGE	S	D	8	2295	2302	Amount charged cash customers for the prescription exclusive of sales tax or other amounts claimed	Submit if available
	558-AW	FLAT SALES TAX AMOUNT PAID	S	D	8	2303	2310		Submit if available-not
292									currently utilized by MQD
	559-AX	PERCENTAGE SALES TAX AMOUNT PAID	S	D	8	2311	2318		Submit if available-not
293									currently utilized by MQD
	560-AY	PERCENTAGE SALES TAX RATE PAID	S	D	7	2319	2325		Submit if available-not
294									currently utilized by MQD
	561-AZ	PERCENTAGE SALES TAX BASIS PAID	S	A/N	2	2326	2327		Submit if available-not
295									currently utilized by MQD
296		INCENTIVE AMOUNT PAID	S	D	8	2328	2335		Submit if available MQD Flu Vaccine If 440-E5 (Professional Service Code) = 'MA' (Medication administration) then 521-FL should contain the vaccine administration fee. Only use 'MA' when the drug is a flu vaccine. **Note: 'MA' calculation will include Ingredient Cost + <u>Incent Fee Paid only</u> + Sales Tax. <u>Exclude Dispense Fee</u> <u>Paid.</u>
297		PROFESSIONAL SERVICE FEE PAID	S	D	8	2336	2343	Amount representing the contractually agreed upon fee for professional services rendered. This amount is included in the 'Total Amount Paid' (5Ø9-F9).	Submit if available

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298	564-J3	OTHER AMOUNT PAID QUALIFIER	S	A/N	2	2344	2345	See ECL	Submit if available
	565-J4	OTHER AMOUNT PAID	S	D	8	2346	2353	Amount paid for additional	Submit if available
								costs claimed in 'Other	
								Amount Claimed Submitted'	
299								(48Ø-H9).	
300	564-J3	OTHER AMOUNT PAID QUALIFIER	S	A/N	2	2354	2355	See ECL	Submit if available

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
301	565-J4	OTHER AMOUNT PAID	S	D	8	2356	2363	Amount paid for additional costs claimed in 'Other Amount Claimed Submitted' (48Ø-H9).	Submit if available
302	564-J3	OTHER AMOUNT PAID QUALIFIER	S	A/N	2	2364	2365	See ECL	Submit if available
303	565-J4	OTHER AMOUNT PAID	S	D	8	2366	2373	Amount paid for additional costs claimed in 'Other Amount Claimed Submitted' (48Ø-H9).	Submit if available
304	566-J5	OTHER PAYER AMOUNT RECOGNIZED	S	D	8	2374	2381	Total amount recognized by the processor of any payment from another source.	Submit if available
305	351-NP	OTHER PAYER-PATIENT RESPONSIBILITY AMOUNT QUALIFIER	S	A/N	2	2382	2383		Submit if available-not currently utilized by MQD
306	352-NQ	OTHERPAYER-PATIENT RESPONSIBILITY AMOUNT	S	D	10	2384	2393		Submit if available-not currently utilized by MQD
307	351-NP	OTHERPAYER-PATIENTRESPONSIBILITY AMOUNTQUALIFIER	S	A/N	2	2394	2395		Submit if available-not currently utilized by MQD
308	352-NQ	OTHER PAYER-PATIENT RESPONSIBILITY AMOUNT	S	D	10	2396	2405		Submit if available-not currently utilized by MQD
309	281	NET AMOUNT DUE	Μ	D	8	2406	2413	Net amount paid to provider by the payer or net amount due from the client to the payer, determined by trading partner agreement.	Health Plan Paid Amount
310	522-FM	BASIS OF REIMBURSEMENT DETERMINATION	S	Ν	2	2414	2415	Pricing.	When NCPDP D.0 field 423- DN (Basis of Cost Determination) submitted with a value of "08" indicating 340B Drug Pricing. The corresponding PAH 2.2 field of 522-FM should then contain the value of '12'.
311	512-FC	ACCUMULATED DEDUCTIBLE AMOUNT	S	D	8	2416	2423		Submit if available-not currently utilized by MQD
312	513-FD	REMAINING DEDUCTIBLE AMOUNT	S	D	8	2424	2431		Submit if available-not currently utilized by MQD
313	514-FE	REMAINING BENEFIT AMOUNT	S	D	8	2432	2439		Submit if available-not currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	242	COST DIFFERENCE AMOUNT	S	D	8	2440	2447		Submit if available-not
314									currently utilized by MQD
	249	EXCESS COPAY AMOUNT	S	D	8	2448	2455		Submit if available-not
315									currently utilized by MQD
	277	MEMBER SUBMIT AMOUNT	S	D	8	2456	2463		Submit if available-not
316									currently utilized by MQD
	265	HOLD HARMLESS AMOUNT	S	D	8	2464	2471		Submit if available-not
317									currently utilized by MQD
	520-FK	AMOUNT EXCEEDING PERIODIC BENEFIT	S	D	8	2472	2479		Submit if available-not
318		MAXIMUM							currently utilized by MQD
	346-HH	BASIS OF CALCULATION -	S	A/N	2	2480	2481	See ECL	Submit if available
319		DISPENSING FEE							
	347-HJ	BASIS OF CALCULATION -	S	A/N	2	2482	2483	See ECL	Submit if available
320		COPAY							
	348-HK	BASIS OF CALCULATION – FLAT SALES	S	A/N	2	2484	2485		Submit if available-not
321		ТАХ							currently utilized by MQD
	349-HM	BASIS OF CALCULATION – PERCENTAGE	S	A/N	2	2486	2487		Submit if available-not
322		SALES TAX							currently utilized by MQD
	573-4V	BASIS OF CALCULATION – COINSURANCE	S	A/N	2	2488	2489		Submit if available-not
323									currently utilized by MQD
	557-AV	TAX EXEMPT INDICATOR	S	A/N	1	2490	2490		Submit if available-not
324									currently utilized by MQD
	285	PATIENT MEDICARE FORMULARY REBATE	S	D	8	2491	2498		Submit if available-not
325		AMOUNT							currently utilized by MQD
	276	MEDICARE RECOVERY INDICATOR	S	A/N	1	2499	2499		Submit if available-not
326									currently utilized by MQD
	275	MEDICARE RECOVERY DISPENSING	S	A/N	1	2500	2500		Submit if available-not
327		INDICATOR							currently utilized by MQD
	286	PATIENT SPEND DOWN AMOUNT	S	D	8	2501	2508		Submit if available-not
328									currently utilized by MQD
	263	HEALTH CARE REIMBURSEMENT	S	D	8	2509	2516		Submit if available-not
329		ACCOUNT AMOUNT APPLIED							currently utilized by MQD
	264	HEALTH CARE REIMBURSEMENT	S	D	8	2517	2524		Submit if available-not
330		ACCOUNT AMOUNT REMAINING							currently utilized by MQD
	207	ADMINISTRATIVE FEE EFFECT INDICATOR	S	A/N	1	2525	2525		Submit if available-not
331									currently utilized by MQD
	206	ADMINISTRATIVE FEE AMOUNT	S	D	4	2526	2529		Submit if available-not
332									currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	269	INVOICED AMOUNT	S	D	11	2530	2540		Submit if available-not
333									currently utilized by MQD
334		FILLER	S	A/N	10	2541	2550	Spaces	
	128-UC	SPENDING ACCOUNT AMOUNT	S	D	8	2551	2558		Submit if available-not
335		REMAINING							currently utilized by MQD
	129-UD	HEALTH PLAN-FUNDED ASSISTANCE	S	D	8	2559	2566		Submit if available-not
336		AMOUNT							currently utilized by MQD
		SECTION PRIOR AUTHORIZATION							
337		CATEGORY:							
	461-EU	PRIOR AUTHORIZATION TYPE	S	Ν	2	2567	2568	See ECL	Submit if available
338		CODE							
	462-EV	PRIOR AUTHORIZATION NUMBER	S	N	11	2569	2579	Number submitted by the	Submit if available
		SUBMITTED						provider to identify the prior	
339								authorization.	
	498-PY	PRIOR AUTHORIZATION NUMBER – ASSIGNED	S	N	11	2580	2590		Submit if available-not
340									currently utilized by MQD
	299	PROCESSOR DEFINED PRIOR AUTHORIZATION REASON CODE	S	N	2	2591	2592		Submit if available-not
341									currently utilized by MQD
		SECTION ADJUSTMENT							
342	00.4	CATEGORY:	_			0500	0505		
0.40	204	ADJUSTMENT REASON CODE	S	N	3	2593	2595		Submit if available-not
343	005			A (N I		0500	0500		currently utilized by MQD
044	205	ADJUSTMENT TYPE	S	A/N	1	2596	2596		Submit if available-not
344	007			A (N I		0507	0000		currently utilized by MQD
	897	TRANSACTION ID CROSS	S	A/N	30	2597	2626	Prior CRN (12 or 14 bytes)	MQD only uses first 12 bytes
345		REFERENCE							of Prior CRN to locate claim
345									being adjusted.
346		SECTION COORDINATION OF BENEFITS CATEGORY:							
340	225	COB CARRIER SUBMIT AMOUNT	S	D	8	2627	2634		Submit if available-not
347	225		0		0	2021	2004		
347	245	ELIGIBILITY COB INDICATOR	S	A/N	1	2635	2635		currently utilized by MQD Submit if available-not
348	240		5			2000	2000		currently utilized by MQD
540	226	COB PRIMARY CLAIM TYPE	S	A/N	1	2636	2636		Submit if available-not
349	220		Ũ			2000	2000		currently utilized by MQD
549	232	COB PRIMARY PAYER ID	S	A/N	10	2637	2646	ID assigned to primary payer.	IDs on fields 232 and 238 must be
	232		3	<i>F</i> V/N	10	2037	2040	is assigned to primary payor.	unique; do not specify the same ID -
									like SSN otherwise duplicate error will
									occur. Also do not leave blank
350									otherwise other payer information will be bypassed.

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
351		FILLER	S	A/N	8	2647		Spaces	
	228	COB PRIMARY PAYER AMOUNT	S	D	8	2655	2662	Amount paid by primary payer	Required when 308-C8
352		PAID						for product or service.	indicates COB.
	231	COB PRIMARY PAYER	S	D	8	2663	2670	Deductible amount according	Required when 308-C8
		DEDUCTIBLE						to primary payer for product or	indicates COB.
353								service.	
	229	COB PRIMARY PAYER	S	D	8	2671	2678	Coinsurance amount	Required when 308-C8
		COINSURANCE						according to primary payer for	indicates COB.
354								product or service.	
	230	COB PRIMARY PAYER COPAY	S	D	8	2679	2686	Co-pay amount according to	Required when 308-C8
								primary payer for product or	indicates COB.
355								service.	
	238	COB SECONDARY PAYER ID	S	A/N	10	2687	2696	ID assigned to primary payer.	IDs on fields 232 and 238 must be
									unique; do not specify the same ID - like SSN otherwise duplicate error will
									occur. Also do not leave blank
356									otherwise other payer information will be bypassed.
357		FILLER	S	A/N	8	2697	2704	Spaces	be bypassed.
	234	COB SECONDARY PAYER	S	D	8	2705		Amount paid by secondary	Required when 308-C8
358		AMOUNT PAID			_			payer for product or service.	indicates COB and available
	237	COB SECONDARY PAYER	S	D	8	2713	2720	Deductible amount according	Required when 308-C8
		DEDUCTIBLE						to secondary payer for product	
359								or service.	
	235	COB SECONDARY PAYER	S	D	8	2721	2728	Coinsurance amount	Required when 308-C8
		COINSURANCE						according to secondary payer	indicates COB and available
360								for product or service.	
	236	COB SECONDARY PAYER COPAY	S	D	8	2729	2736	Co-pay amount according to	Required when 308-C8
								secondary payer for product or	indicates COB and available
361								service	
		SECTION REFERENCE							
362		CATEGORY:							
	896	TRANSACTION ID	S	A/N	30	2737	2766	Internally assigned unique	Submit if available
								claim ID by the payer	
									Limited to 20 chararacters
								Health Plan Claim Number (20	
363	500 50		0	A /N1	00	0707	0700	characters max)	
0.4	503-F3	AUTHORIZATION NUMBER	S	A/N	20	2767	2786		Submit if available-not
364	22.4		e e	Δ /ΝΙ	50	0707	2020		currently utilized by MQD
265	224	CLIENT SPECIFIC DATA	S	A/N	50	2787	2836		Submit if available-not
365									currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	396	PROCESSOR SPECIFIC DATA	S	A/N	50	2837	2886	Trading partners mutually	Submit if available-not
								agreed upon specific data	currently utilized by MQD
366								defined by processor.	
	997-G2	CMS PART D DEFINED QUALIFIED	s	A/N	1	2887	2887		Submit if available-not
367		FACILITY	5			2007	2007		currently utilized by MQD
		SECTION FIELDS ADDED IN							
368		VERSIONS CATEGORY							
	393-MV	BENEFIT STAGE QUALIFIER	s	A/N	2	2888	2889		Submit if available-not
369									currently utilized by MQD
070	394-MW	BENEFIT STAGE AMOUNT	S	D	8	2890	2897		Submit if available-not
370									currently utilized by MQD
074	393-MV	BENEFIT STAGE QUALIFIER	S	A/N	2	2898	2899		Submit if available-not
371									currently utilized by MQD
372	394-MW	BENEFIT STAGE AMOUNT	S	D	8	2900	2907		Submit if available-not
312									currently utilized by MQD Submit if available-not
373	393-MV	BENEFIT STAGE QUALIFIER	S	A/N	2	2908	2909		currently utilized by MQD
313									Submit if available-not
374	394-MW	BENEFIT STAGE AMOUNT	S	D	8	2910	2917		currently utilized by MQD
574									Submit if available-not
375	393-MV	BENEFIT STAGE QUALIFIER	S	A/N	2	2918	2919		currently utilized by MQD
010									Submit if available-not
376	394-MW	BENEFIT STAGE AMOUNT	S	D	8	2920	2927		currently utilized by MQD
0.0			_						Submit if available-not
377	690-ZG	INVOICE DATE	S	Ν	8	2928	2935		currently utilized by MQD
			-	6			00.40		Submit if available-not
378	691-ZH	OUT OF POCKET REMAINING AMOUNT	S	D	8	2936	2943		currently utilized by MQD
	202.02		6	A /N I	20	20.4.4	2002		Submit if available-not
379	302-C2	CARDHOLDER ID (ALTERNATE)	S	A/N	20	2944	2963		currently utilized by MQD
	692-ZJ	NUMBER OF GENERIC MANUFACTURERS	s	N	3	2964	2966		Submit if available-not
380	092-ZJ	NOWBER OF GENERIC MANOFACTURERS	3	IN	3	2904	2900		currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	2967	2968		Submit if available-not
381	475-53		5		2	2307	2900		currently utilized by MQD
	476-H6	DUR CO-AGENT ID	s	A/N	19	2969	2987		Submit if available-not
382	110 110		5	7.011	10	2000	2007		currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	2988	2989		Submit if available-not
383				7.013	-	2000	2000		currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	2990	3008		Submit if available-not
384				, , , ,		2000	0000		currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	3009	3010		Submit if available-not
385	475-59	DOR CO-AGENTID QUALIFIER	0	A/IN	2	3009	3010		currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	3011	3029		Submit if available-not
386	470-110	DON CO-AGENTID	5		13	3011	3029		currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	3030	3031		Submit if available-not
387	470 00		0		2	0000	5001		currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	3032	3050		Submit if available-not
388			•	7.011		0002	0000		currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	3051	3052		Submit if available-not
389			•			0001	0002		currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	3053	3071		Submit if available-not
390			•	7.011		0000	0071		currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	3072	3073		Submit if available-not
391			•			0072	0070		currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	3074	3092		Submit if available-not
392				,,,,,,		0071	0002		currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	3093	3094		Submit if available-not
393				7.011			0001		currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	3095	3113		Submit if available-not
394				,,,,,,			0110		currently utilized by MQD
	475-H9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	3114	3115		Submit if available-not
395				,,,,,	-		0110		currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	3116	3134		Submit if available-not
396				,,,,,			0.01		currently utilized by MQD
	351-NP	OTHER PAYER-PATIENT RESPONSIBILITY	S	A/N	2	3135	3136		Submit if available-not
397		AMOUNTQUALIFIER		,,,,,	-		0.00		currently utilized by MQD
	352-NQ	OTHER PAYER-PATIENT RESPONSIBILITY	S	D	10	3137	3146		Submit if available-not
398		AMOUNT					0110		currently utilized by MQD
	351-NP	OTHER PAYER-PATIENT RESPONSIBILITY	S	A/N	2	3147	3148		Submit if available-not
399		AMOUNTQUALIFIER		,,,,,			0110		currently utilized by MQD
	352-NQ	OTHER PAYER-PATIENT RESPONSIBILITY	S	D	10	3149	3158		Submit if available-not
400		AMOUNT							currently utilized by MQD
	351-NP	OTHER PAYER-PATIENT RESPONSIBILITY	S	A/N	2	3159	3160		Submit if available-not
401		AMOUNTQUALIFIER							currently utilized by MQD
	352-NQ	OTHER PAYER-PATIENT RESPONSIBILITY	S	D	10	3161	3170		Submit if available-not
402		AMOUNT							currently utilized by MQD
100	351-NP	OTHER PAYER-PATIENT RESPONSIBILITY	S	A/N	2	3171	3172		Submit if available-not
403		AMOUNTQUALIFIER	-		_				currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	352-NQ	OTHERPAYER-PATIENT RESPONSIBILITY	S	D	10	3173	3182		Submit if available-not
404	552-NQ	AMOUNT	5	U	10	5175	5102		currently utilized by MQD
	351-NP	OTHER PAYER-PATIENT RESPONSIBILITY	S	A/N	2	3183	3184		Submit if available-not
405	00111	AMOUNTQUALIFIER	0		2	0100	5104		currently utilized by MQD
	352-NQ	OTHER PAYER-PATIENT RESPONSIBILITY	s	D	10	3185	3194		Submit if available-not
406		AMOUNT				0.00	0.0.		currently utilized by MQD
	351-NP	OTHER PAYER-PATIENT RESPONSIBILITY	S	A/N	2	3195	3196		Submit if available-not
407		AMOUNTQUALIFIER							currently utilized by MQD
400	352-NQ	OTHERPAYER-PATIENT RESPONSIBILITY	S	D	10	3197	3206		Submit if available-not
408		AMOUNT							currently utilized by MQD
100	351-NP	OTHER PAYER-PATIENT RESPONSIBILITY	S	A/N	2	3207	3208		Submit if available-not
409									currently utilized by MQD
410	352-NQ	OTHER PAYER-PATIENT RESPONSIBILITY AMOUNT	S	D	10	3209	3218		Submit if available-not
410									currently utilized by MQD
411	351-NP	OTHER PAYER-PATIENT RESPONSIBILITY AMOUNT QUALIFIER	S	A/N	2	3219	3220		Submit if available-not currently utilized by MQD
411									Submit if available-not
412	352-NQ	OTHER PAYER-PATIENT RESPONSIBILITY	S	D	10	3221	3230		currently utilized by MQD
- 12		OTHERPAYER-PATIENT RESPONSIBILITY							Submit if available-not
413	351-NP	AMOUNTQUALIFIER	S	A/N	2	3231	3232		currently utilized by MQD
		OTHER PAYER-PATIENT RESPONSIBILITY	_						Submit if available-not
414	352-NQ	AMOUNT	S	D	10	3233	3242		currently utilized by MQD
		OTHER PAYER-PATIENT RESPONSIBILITY	0	A /N I		0040	0044		Submit if available-not
415	351-NP	AMOUNTQUALIFIER	S	A/N	2	3243	3244		currently utilized by MQD
	352-NQ	OTHER PAYER-PATIENT RESPONSIBILITY	S	D	10	3245	3254		Submit if available-not
416	302-NQ	AMOUNT	0	D	10	3245	3234		currently utilized by MQD
	A37	SPECIALTY CLAIM INDICATOR	S	A/N	1	3255	3255		Submit if available-not
417	A31		5	AVIN	1	5255	5255		currently utilized by MQD
	A38	MEMBER SUBMITTED CLAIM REJECT	S	A/N	3	3256	3258		Submit if available-not
418	7.00	CODE	0		<u> </u>	0200	0200		currently utilized by MQD
	A38	MEMBER SUBMITTED CLAIM REJECT	S	A/N	3	3259	3261		Submit if available-not
419		CODE		,,,,,	Ŭ	0200	0201		currently utilized by MQD
	A38	MEMBER SUBMITTED CLAIM REJECT	S	A/N	3	3262	3264		Submit if available-not
420		CODE							currently utilized by MQD
40.1	A38	MEMBER SUBMITTED CLAIM REJECT	S	A/N	3	3265	3267		Submit if available-not
421		CODE							currently utilized by MQD
400	A38	MEMBER SUBMITTED CLAIM REJECT	S	A/N	3	3268	3270		Submit if available-not
422		CODE							currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
100	A39	COPAY WAIVER AMOUNT	S	D	8	3271	3278		Submit if available-not
423						0211	0210		currently utilized by MQD
40.4	A33-ZX	CMS PART D CONTRACT ID	S	A/N	5	3279	3283		Submit if available-not
424									currently utilized by MQD Submit if available-not
425	A34-ZY	MEDICARE PART D PLAN BENEFIT PACKAGE (PBP)	S	Ν	3	3284	3286		currently utilized by MQD
426		FILLER	М	A/N	414	3287	3700	Spaces	
		[See Claim Segment]							Submit if available-not
427		[]							currently utilized by MQD
		[See Claim Segment]							Submit if available-not
428									currently utilized by MQD
		[See Claim Segment]							Submit if available-not
429									currently utilized by MQD
		[See Claim Segment]							Submit if available-not
430									currently utilized by MQD
		[See Claim Segment]							Submit if available-not
431									currently utilized by MQD
		[See Claim Segment]							Submit if available-not
432									currently utilized by MQD
	8.2.1	POST ADJUDICATION HISTORY						Minimum Of Two Ingredients	Required when Compound
		COMPOUND DETAIL RECORD 1						Required	Code (406-D6) = '2' -
433					_				Compound
	601-04	RECORD TYPE	М	A/N	2	1	2	CD - Post Adjudication History	
40.4								Compound Detail Record 1	
434		PRESCRIPTION/SERVICE	N 4	A/N	1	3	2		
	455-EM	REFERENCE NUMBER QUALIFIER	М	A/N	1	3	3	1 - RX Billing	
435		REFERENCE NUMBER QUALIFIER							
435	402-D2	PRESCRIPTION/SERVICE	М	N	12	4	15	10 digit Rx Number	Limited to 10 digits
436	402-02	REFERENCE NUMBER	IVI		12	4	15		
-00	477-EC	COMPOUND INGREDIENT	М	N	2	16	17	Count of compound product	
	477 20	COMPONENT COUNT	101		2	10		IDs (both active and inactive)	
								in the compound mixture	
437								submitted.	
		SECTION FIRST INGREDIENT:						Minimum Of Two Ingredients	
438								Required	
	488-RE	COMPOUND PRODUCT ID	М	A/N	2	18	19	Code qualifying the type of	
		QUALIFIER						product dispensed.	
439								See ECL	

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	489-TE	COMPOUND PRODUCT ID	М	A/N	19	20	38	Product identification of an	
								ingredient used in a	
440								compound.	
	448-ED	COMPOUND INGREDIENT	S	D	10	39	48	Amount expressed in metric	Submit if available
		QUANTITY						decimal units of the product	
								included in the compound	
441			0		0	40	50	mixture.	Output if such the
	449-EE	COMPOUND INGREDIENT DRUG	S	D	8	49	56	Ingredient cost for the metric	Submit if available
		COST						decimal quantity of the product included in the compound	
								mixture indicated in	
								'Compound Ingredient	
442								Quantity' (Field 448-ED).	
442	490-UE	COMPOUND INGREDIENT BASIS	S	A/N	2	57	58	See ECL	Submit if available
443	400-0L	OF COST DETERMINATION	U		2	57	50		
0	221	CLIENT FORMULARY FLAG	S	A/N	1	59	59		Submit if available-not
444			U						currently utilized by MQD
	397	PRODUCT/SERVICE NAME	S	A/N	30	60	89	Product or Service Description	Submit if available
								or Product Label Name.	
445									
	261	GENERIC NAME	S	A/N	30	90	119	Generic name of the product	Submit if available
								identified in Product/Service	
446								Name.	
447	601-24	PRODUCT STRENGTH	S	A/N	10	120	129	The strength of the product.	Submit if available
	243	DOSAGE FORM CODE	S	A/N	4	130	133	Dosage form code for product	Submit if available
448								identified.	
	532-FW	DATABASE INDICATOR	S	A/N	1	134	134		Submit if available-not
449						105	105		currently utilized by MQD
450	425-PD	DRUG TYPE	S	N	1	135	135		Submit if available-not
450				A (N)		100	400		currently utilized by MQD
454	257	FORMULARY STATUS	S	A/N	1	136	136		Submit if available-not
451	244	DRUG CATEGORY CODE		A /NI		137	137		currently utilized by MQD
450	244	DRUG CATEGORY CODE	S	A/N	1	137	137		Submit if available-not
452	252	FEDERAL DEA SCHEDULE	S	A/N	1	138	138		currently utilized by MQD Submit if available-not
453	252		3	AVIN		130	130		
453	250	FDA DRUG EFFICACY CODE	S	A/N	1	139	139		currently utilized by MQD Submit if available-not
454	230	I DA DRUG EFFICACI CODE	3	AVIN		139	139		
454									currently utilized by MQD

	А	В	С	D	Е	F	G	Н	
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	140	140		Submit if available-not
455	001-19	PRODUCT CODE QUALIFIER	3	AVIN	1	140	140		currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	141	157		Submit if available-not
456	001-10	PRODUCT CODE	3	AVIN	17	141	157		currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	158	158		Submit if available-not
457	001-13		5		1	150	150		currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	159	175		Submit if available-not
458	001-10		0		17	100	175		currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	176	176		Submit if available-not
459	001-13		0		1	170	170		currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	177	193		Submit if available-not
460					17				currently utilized by MQD
	251	FEDERAL UPPER LIMIT INDICATOR	S	A/N	1	194	194		Submit if available-not
461									currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	195	195		Submit if available-not
462	001-20		5		1	195	190		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	196	212		Submit if available-not
463	001-20		0		17	150	212		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	213	213		Submit if available-not
464	001-20					210	210		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	214	230		Submit if available-not
465	00120					214	200		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	231	231		Submit if available-not
466						201	201		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	232	248		Submit if available-not
467						202	210		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	S	A/N	1	249	249		Submit if available-not
468				7.011	-	240	240		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	250	266		Submit if available-not
469	00.20			,,,,,		200	200		currently utilized by MQD
	429-DT	SPECIAL PACKAGING INDICATOR	s	N	1	267	267		Submit if available-not
470					-	-	-		currently utilized by MQD
	600-28	UNIT OF MEASURE	S	A/N	2	268	269		Submit if available-not
471									currently utilized by MQD
	299	PROCESSOR DEFINED PRIOR	S	Ν	2	270	271		Submit if available-not
472		AUTHORIZATION REASON CODE							currently utilized by MQD
	272	MACREDUCEDINDICATOR	S	A/N	1	272	272		Submit if available-not
473									currently utilized by MQD

	А	В	С	D	E	F	G	Н	Ι
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	223	CLIENT PRICING BASIS OF COST	S	A/N	2	273	274		Submit if available-not
474									currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	275	276		Submit if available-not
475									currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	277	295		Submit if available-not
476									currently utilized by MQD
	260	GENERIC INDICATOR	S	A/N	1	296	296		Submit if available-not
477									currently utilized by MQD
	292	PLAN CUTBACK REASON CODE	S	A/N	1	297	297		Submit if available-not
478									currently utilized by MQD
	889	THERAPEUTIC CHAPTER	S	A/N	8	298	305		Submit if available-not
479									currently utilized by MQD
	209	AVERAGE COST PER QUANTITY UNIT	S	D	9	306	314		Submit if available-not
480		PRICE							currently utilized by MQD
	210	AVERAGE GENERIC UNIT PRICE	S	D	9	315	323		Submit if available-not
481									currently utilized by MQD
	211	AVERAGE WHOLESALE UNIT PRICE	S	D	9	324	332		Submit if available-not
482									currently utilized by MQD
	253	FEDERAL UPPER LIMIT UNIT PRICE	S	D	9	333	341		Submit if available-not
483									currently utilized by MQD
	271	MAC PRICE	S	D	9	342	350		Submit if available-not
484									currently utilized by MQD
	522-FM	BASIS OF REIMBURSEMENT	S	N	2	351	352		Submit if available-not
485		DETERMINATION							currently utilized by MQD
	285	PATIENT FORMULARY REBATE AMOUNT	S	D	8	353	360		Submit if available-not
486									currently utilized by MQD
		SECTION SECOND INGREDIENT:						Minimum Of Two Ingredients	
487								Required	
	488-RE	COMPOUND PRODUCT ID	М	A/N	2	361	362	Code qualifying the type of	
		QUALIFIER						product dispensed.	
488								See ECL	
	489-TE	COMPOUND PRODUCT ID	М	A/N	19	363	381	Product identification of an	
								ingredient used in a	
489								compound.	
	448-ED	COMPOUND INGREDIENT	S	D	10	382	391	Amount expressed in metric	Submit if available
		QUANTITY						decimal units of the product	
								included in the compound	
490								mixture.	

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
491	449-EE	Compound ingredient drug Cost	S	D	8	392	399	Ingredient cost for the metric decimal quantity of the product included in the compound mixture indicated in 'Compound Ingredient Quantity' (Field 448-ED).	Submit if available
492	490-UE	COMPOUND INGREDIENT BASIS OF COST DETERMINATION	S	A/N	2	400	401	See ECL	Submit if available
493	221	CLIENT FORMULARY FLAG	S	A/N	1	402	402		Submit if available-not currently utilized by MQD
494	397	PRODUCT/SERVICE NAME	S	A/N	30	403	432	Product or Service Description or Product Label Name.	Submit if available
495	261	GENERIC NAME	S	A/N	30	433	462	Generic name of the product identified in Product/Service Name.	Submit if available
496	601-24	PRODUCT STRENGTH	S	A/N	10	463	472	The strength of the product.	Submit if available
497	243	DOSAGE FORM CODE	S	A/N	4	473	476	Dosage form code for product identified.	Submit if available
498	532-FW	DATABASE INDICATOR	S	A/N	1	477	477		Submit if available-not currently utilized by MQD
499	425-PD	DRUG TYPE	S	N	1	478	478		Submit if available-not currently utilized by MQD
500	257	FORMULARY STATUS	S	A/N	1	479	479		Submit if available-not currently utilized by MQD
501	244	DRUG CATEGORY CODE	S	A/N	1	480	480		Submit if available-not currently utilized by MQD
502	252	FEDERAL DEA SCHEDULE	S	A/N	1	481	481		Submit if available-not currently utilized by MQD
503	250	FDA DRUG EFFICACY CODE	S	A/N	1	482	482		Submit if available-not currently utilized by MQD
504	601-19	PRODUCT CODE QUALIFIER	S	A/N	1	483	483		Submit if available-not currently utilized by MQD
505	601-18	PRODUCT CODE	S	A/N	17	484	500		Submit if available-not currently utilized by MQD
506	601-19	PRODUCT CODE QUALIFIER	S	A/N	1	501	501		Submit if available-not currently utilized by MQD
507	601-18	PRODUCT CODE	S	A/N	17	502	518		Submit if available-not currently utilized by MQD

	А	В	С	D	Е	F	G	H	
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	519	519		Submit if available-not
508	001-19	PRODUCT CODE QUALIFIER	3	AVIN	1	519	519		currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	520	536		Submit if available-not
509	001-10	PRODUCT CODE	3	AVIN	17	520	550		currently utilized by MQD
	251	FEDERAL UPPER LIMIT INDICATOR	s	A/N	1	537	537		Submit if available-not
510	201	FEDERAL OFFER LIMIT INDICATOR	3	AVIN	1	557	557		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	538	538		Submit if available-not
511	001-20		5		1	550	550		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	539	555		Submit if available-not
512	001-25		5		17	555	555		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	556	556		Submit if available-not
513	001-20		5		1	550	550		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	557	573		Submit if available-not
514	001-25		5		17	557	575		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	574	574		Submit if available-not
515	001-20		5		1	574	574		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	575	591		Submit if available-not
516	001-25		5		17	575	591		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	592	592		Submit if available-not
517	001-20		5		1	552	552		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	593	609		Submit if available-not
518	001-25		5		17	595	003		currently utilized by MQD
	429-DT	SPECIAL PACKAGING INDICATOR	s	N	1	610	610		Submit if available-not
519									currently utilized by MQD
	600-28	UNIT OF MEASURE	S	A/N	2	611	612		Submit if available-not
520									currently utilized by MQD
	299	PROCESSOR DEFINED PRIOR	S	N	2	613	614		Submit if available-not
521		AUTHORIZATION REASON CODE							currently utilized by MQD
	272	MAC REDUCED INDICATOR	S	A/N	1	615	615		Submit if available-not
522									currently utilized by MQD
	223	CLIENT PRICING BASIS OF COST	S	A/N	2	616	617		Submit if available-not
523									currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	618	619		Submit if available-not
524									currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	620	638		Submit if available-not
525									currently utilized by MQD
	260	GENERIC INDICATOR	S	A/N	1	639	639		Submit if available-not
526									currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	292	PLAN CUTBACK REASON CODE	S	A/N	1	640	640		Submit if available-not
527									currently utilized by MQD
	889	THERAPEUTIC CHAPTER	S	A/N	8	641	648		Submit if available-not
528									currently utilized by MQD
	209	AVERAGE COST PER QUANTITY UNIT	S	D	9	649	657		Submit if available-not
529		PRICE							currently utilized by MQD
	210	AVERAGE GENERIC UNIT PRICE	S	D	9	658	666		Submit if available-not
530									currently utilized by MQD
	211	AVERAGE WHOLESALE UNIT PRICE	S	D	9	667	675		Submit if available-not
531									currently utilized by MQD
	253	FEDERAL UPPER LIMIT UNIT PRICE	S	D	9	676	684		Submit if available-not
532									currently utilized by MQD
	271	MACPRICE	S	D	9	685	693		Submit if available-not
533									currently utilized by MQD
	522-FM	BASIS OF REIMBURSEMENT	S	N	2	694	695		Submit if available-not
534		DETERMINATION							currently utilized by MQD
	285	PATIENT FORMULARY REBATE AMOUNT	S	D	8	696	703		Submit if available-not
535									currently utilized by MQD
		SECTION THIRD INGREDIENT:						Submit if a 3rd ingredient	
536									
	488-RE	COMPOUND PRODUCT ID	М	A/N	2	704	705	Code qualifying the type of	
		QUALIFIER						product dispensed.	
537								See ECL	
	489-TE	COMPOUND PRODUCT ID	М	A/N	19	706	724	Product identification of an	
								ingredient used in a	
538								compound.	
	448-ED	COMPOUND INGREDIENT	S	D	10	725	734	Amount expressed in metric	Submit if available
		QUANTITY						decimal units of the product	
								included in the compound	
539								mixture.	
	449-EE	COMPOUND INGREDIENT DRUG	S	D	8	735	742	Ingredient cost for the metric	Submit if available
		COST						decimal quantity of the product	
								included in the compound	
								mixture indicated in	
								'Compound Ingredient	
540								Quantity' (Field 448-ED).	
	490-UE	COMPOUND INGREDIENT BASIS	S	A/N	2	743	744	See ECL	Submit if available
541		OF COST DETERMINATION							

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	221	CLIENT FORMULARY FLAG	S	A/N	1	745	745		Submit if available-not
542					•		745		currently utilized by MQD
	397	PRODUCT/SERVICE NAME	S	A/N	30	746	775		Submit if available
								or Product Label Name.	
543									
	261	GENERIC NAME	S	A/N	30	776	805	Generic name of the product	Submit if available
								identified in Product/Service	
544								Name.	
545	601-24	PRODUCT STRENGTH	S	A/N	10	806	815	The strength of the product.	Submit if available
- 10	243	DOSAGE FORM CODE	S	A/N	4	816	819	Dosage form code for product	Submit if available
546	532-FW	DATABASE INDICATOR	S	A/N				identified.	
F 4 7	532-FVV	DATABASE INDICATOR	5	A/N	1	820	820		Submit if available-not
547	425-PD	DRUG TYPE	S	N					currently utilized by MQD
E 4 0	420-PD	DRUGTTPE	3	IN	1	821	821		Submit if available-not
548	257	FORMULARY STATUS	S	A/N					currently utilized by MQD Submit if available-not
549	231	FORMULART STATUS	3	AVIN	1	822	822		
549	244	DRUG CATEGORY CODE	S	A/N					currently utilized by MQD Submit if available-not
550	277				1	823	823		currently utilized by MQD
550	252	FEDERAL DEA SCHEDULE	S	A/N					Submit if available-not
551	202			,,,,,	1	824	824		currently utilized by MQD
001	250	FDA DRUG EFFICACY CODE	S	A/N					Submit if available-not
552					1	825	825		currently utilized by MQD
002									Submit if available-not
553	601-19	PRODUCT CODE QUALIFIER	S	A/N	1	826	826		currently utilized by MQD
					· _				Submit if available-not
554	601-18	PRODUCT CODE	S	A/N	17	827	843		currently utilized by MQD
						0.4.4	0.4.4		Submit if available-not
555	601-19	PRODUCT CODE QUALIFIER	S	A/N	1	844	844		currently utilized by MQD
	004.40		s	A /N1	47	845	861		Submit if available-not
556	601-18	PRODUCTCODE	5	A/N	17	840	801		currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	862	862		Submit if available-not
557	001-19	PRODUCT CODE QUALIFIER	3	AVIN	I	002	002		currently utilized by MQD
	601-18	PRODUCT CODE	S	A/N	17	863	879		Submit if available-not
558									currently utilized by MQD
	251	FEDERAL UPPER LIMIT INDICATOR	S	A/N	1	880	880		Submit if available-not
559									currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	881	881		Submit if available-not
560	001 20			,,,,,					currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	882	898		Submit if available-not
561	001-25	THERAFEOTIC CLASS CODE	3	AVIN	17	002	090		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	899	899		Submit if available-not
562	001-20		3		•	033	033		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	900	916		Submit if available-not
563	001-20		0		17	300	310		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	917	917		Submit if available-not
564	001-20		0		•	517	517		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	918	934		Submit if available-not
565	001-20		0		17	510	334		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	935	935		Submit if available-not
566	001-20		3		•	300	900		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	936	952		Submit if available-not
567	001-20		0		17	330	352		currently utilized by MQD
	429-DT	SPECIAL PACKAGING INDICATOR	s	A/N	1	953	953		Submit if available-not
568				-					currently utilized by MQD
	600-28	UNIT OF MEASURE	S	A/N	2	954	955		Submit if available-not
569									currently utilized by MQD
	299	PROCESSOR DEFINED PRIOR	S	N	2	956	957		Submit if available-not
570		AUTHORIZATION REASON CODE							currently utilized by MQD
	272	MAC REDUCED INDICATOR	S	A/N	1	958	958		Submit if available-not
571									currently utilized by MQD
	223	CLIENT PRICING BASIS OF COST	S	A/N	2	959	960		Submit if available-not
572									currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	961	962		Submit if available-not
573									currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	963	981		Submit if available-not
574									currently utilized by MQD
	260	GENERIC INDICATOR	S	A/N	1	982	982		Submit if available-not
575									currently utilized by MQD
	292	PLAN CUTBACK REASON CODE	S	A/N	1	983	983		Submit if available-not
576									currently utilized by MQD
	889	THERAPEUTIC CHAPTER	S	A/N	8	984	991		Submit if available-not
577									currently utilized by MQD
	209	AVERAGE COST PER QUANTITY UNIT	S	D	9	992	1000		Submit if available-not
578		PRICE							currently utilized by MQD
	210	AVERAGE GENERIC UNIT PRICE	S	D	9	1001	1009		Submit if available-not
579									currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	211	AVERAGE WHOLESALE UNIT PRICE	S	D	9	1010	1018		Submit if available-not
580									currently utilized by MQD
	253	FEDERAL UPPER LIMIT UNIT PRICE	S	D	9	1019	1027		Submit if available-not
581									currently utilized by MQD
	271	MACPRICE	S	D	9	1028	1036		Submit if available-not
582									currently utilized by MQD
	522-FM	BASIS OF REIMBURSEMENT DETERMINATION	S	Ν	2	1037	1038		Submit if available-not
583									currently utilized by MQD
	285	PATIENT FORMULARY REBATE AMOUNT	S	D	8	1039	1046		Submit if available-not
584									currently utilized by MQD
585		SECTION FOURTH INGREDIENT:							
	488-RE	COMPOUND PRODUCT ID QUALIFIER	М	A/N	2	1047	1048		Submit if available-not
586			.		40	10.40	40.07		currently utilized by MQD
	489-TE	COMPOUND PRODUCT ID	М	A/N	19	1049	1067		Submit if available-not
587									currently utilized by MQD
	448-ED	COMPOUNDINGREDIENTQUANTITY	S	D	10	1068	1077		Submit if available-not
588									currently utilized by MQD
	449-EE	COMPOUND INGREDIENT DRUG COST	S	D	8	1078	1085		Submit if available-not
589						4000	4007		currently utilized by MQD
	490-UE	COMPOUND INGREDIENT BASIS OF COST DETERMINATION	S	A/N	2	1086	1087		Submit if available-not
590	004			A (b)		1000	4000		currently utilized by MQD
50.4	221	CLIENT FORMULARY FLAG	S	A/N	1	1088	1088		Submit if available-not
591	007			A (b)		1000	4440		currently utilized by MQD
	397	PRODUCT/SERVICE NAME	S	A/N	30	1089	1118		Submit if available-not
592	261	GENERIC NAME		A /NI	30	4440	1148		currently utilized by MQD
500	201	GENERIC NAME	S	A/N	30	1119	1148		Submit if available-not
593	601-24	PRODUCT STRENGTH	S	A/N	10	1149	1158		currently utilized by MQD
504	001-24	PRODUCT STRENGTH	5	A/IN	10	1149	1158		Submit if available-not
594	243	DOSAGE FORM CODE	S	A/N	4	1159	1162		currently utilized by MQD
505	243	DOSAGE FORM CODE	5	A/IN	4	1159	1102		Submit if available-not
595	532-FW	DATABASE INDICATOR	S	A/N	1	1163	1163		currently utilized by MQD
500	552-FW	DATABASE INDICATOR	3	AVIN		1103	1103		Submit if available-not
596	425-PD	DRUG TYPE	S	N	1	1164	1164		currently utilized by MQD
507	420-PD		3	IN		1164	1104		Submit if available-not
597	257	FORMULARY STATUS	S	A/N	1	1165	1165		currently utilized by MQD
500	257	CRWIDLART STATUS	5	AVIN		1105	1105		Submit if available-not
598	244	DRUG CATEGORY CODE	S	A/N	1	1166	1166		currently utilized by MQD
500	244	DRUGCATEGORTCODE	3	AVIN		1100	1100		Submit if available-not
599									currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	252	FEDERAL DEA SCHEDULE	S	A/N	1	1167	1167		Submit if available-not
600									currently utilized by MQD
	250	FDA DRUG EFFICACY CODE	S	A/N	1	1168	1168		Submit if available-not
601									currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	1169	1169		Submit if available-not
602	001-19	PRODUCT CODE QUALIFIER	3	AVIN	1	1109	1109		currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	1170	1186		Submit if available-not
603	001-10	FRODUCT CODE	3	ANN	17	1170	1100		currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	1187	1187		Submit if available-not
604	001-19	FRODUCT CODE QUALIFIER	3	ANN	1	1107	1107		currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	1188	1204		Submit if available-not
605	001-10	FRODUCTCODE	3	AVIN	17	1100	1204		currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	1205	1205		Submit if available-not
606	001-19		3		1	1205	1205		currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	1206	1222		Submit if available-not
607			-						currently utilized by MQD
	251	FEDERAL UPPER LIMIT INDICATOR	S	A/N	1	1223	1223		Submit if available-not
608									currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1224	1224		Submit if available-not
609	001-20		0		1	1227	1227		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1225	1241		Submit if available-not
610	001-20		0		17	1220	1271		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1242	1242		Submit if available-not
611	001 20		Ŭ			1272	1272		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1243	1259		Submit if available-not
612	001 20					1210	1200		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1260	1260		Submit if available-not
613	001 20					1200	1200		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1261	1277		Submit if available-not
614									currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1278	1278		Submit if available-not
615			-						currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1279	1295		Submit if available-not
616									currently utilized by MQD
	429-DT	SPECIAL PACKAGING INDICATOR	s	N	1	1297	1296		Submit if available-not
617			_						currently utilized by MQD
	600-28	UNIT OF MEASURE	S	A/N	2	1297	1298		Submit if available-not
618									currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	299	PROCESSOR DEFINED PRIOR	S	N	2	1299	1300		Submit if available-not
619		AUTHORIZATION REASON CODE							currently utilized by MQD
	272	MAC REDUCED INDICATOR	S	A/N	1	1301	1301		Submit if available-not
620									currently utilized by MQD
	223	CLIENT PRICING BASIS OF COST	S	A/N	2	1302	1303		Submit if available-not
621									currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	1304	1305		Submit if available-not
622									currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	1306	1324		Submit if available-not
623									currently utilized by MQD
	260	GENERIC INDICATOR	S	A/N	1	1325	1325		Submit if available-not
624									currently utilized by MQD
	292	PLAN CUTBACK REASON CODE	S	A/N	1	1326	1326		Submit if available-not
625									currently utilized by MQD
	889	THERAPEUTIC CHAPTER	S	A/N	8	1327	1334		Submit if available-not
626									currently utilized by MQD
	209	AVERAGE COST PER QUANTITY UNIT	S	D	9	1335	1343		Submit if available-not
627		PRICE							currently utilized by MQD
	210	AVERAGE GENERIC UNIT PRICE	S	D	9	1344	1352		Submit if available-not
628									currently utilized by MQD
	211	AVERAGE WHOLESALE UNIT PRICE	S	D	9	1353	1361		Submit if available-not
629									currently utilized by MQD
	253	FEDERAL UPPER LIMIT UNIT PRICE	S	D	9	1362	1370		Submit if available-not
630									currently utilized by MQD
	271	MACPRICE	S	D	9	1371	1379		Submit if available-not
631									currently utilized by MQD
	522-FM	BASIS OF REIMBURSEMENT	S	N	2	1380	1381		Submit if available-not
632		DETERMINATION							currently utilized by MQD
	285	PATIENT FORMULARY REBATE AMOUNT	S	D	8	1382	1389		Submit if available-not
633									currently utilized by MQD
634		SECTION FIFTH INGREDIENT							
034	488-RE	COMPOUND PRODUCT ID QUALIFIER	М	A/N	2	1390	1391		Submit if available-not
635	400-112		IVI		2	1330	1551		currently utilized by MQD
035	489-TE	COMPOUND PRODUCT ID	М	A/N	19	1392	1410		Submit if available-not
636	403-12		IVI		13	1332	1410		currently utilized by MQD
030	448-ED	COMPOUNDINGREDIENTQUANTITY	S	D	10	1411	1420		Submit if available-not
637	440-LD		3	D	10	1411	1420		
037	449-EE	COMPOUND INGREDIENT DRUG COST	S	D	8	1421	1428		currently utilized by MQD Submit if available-not
638	443-CC		3	U	0	1421	1420		
030									currently utilized by MQD

	А	В	С	D	E	F	G	Н	
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	490-UE	COMPOUND INGREDIENT BASIS OF COST	S	A/N	2	1429	1430		Submit if available-not
639		DETERMINATION							currently utilized by MQD
	221	CLIENT FORMULARY FLAG	S	A/N	1	1431	1431		Submit if available-not
640									currently utilized by MQD
	397	PRODUCT/SERVICE NAME	S	A/N	30	1432	1461		Submit if available-not
641									currently utilized by MQD
	261	GENERIC NAME	S	A/N	30	1462	1491		Submit if available-not
642									currently utilized by MQD
	601-24	PRODUCT STRENGTH	S	A/N	10	1492	1501		Submit if available-not
643									currently utilized by MQD
	243	DOSAGE FORM CODE	S	A/N	4	1502	1505		Submit if available-not
644									currently utilized by MQD
	532-FW	DATABASE INDICATOR	S	A/N	1	1506	1506		Submit if available-not
645									currently utilized by MQD
	425-PD	DRUG TYPE	S	N	1	1507	1507		Submit if available-not
646									currently utilized by MQD
	257	FORMULARY STATUS	S	A/N	1	1508	1508		Submit if available-not
647									currently utilized by MQD
	244	DRUG CATEGORY CODE	S	A/N	1	1509	1509		Submit if available-not
648									currently utilized by MQD
	252	FEDERAL DEA SCHEDULE	S	A/N	1	1510	1510		Submit if available-not
649									currently utilized by MQD
	250	FDA DRUG EFFICACY CODE	S	A/N	1	1511	1511		Submit if available-not
650									currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	S	A/N	1	1512	1512		Submit if available-not
651	001-19	PRODUCT CODE QUALIFIER	5	A/N					currently utilized by MQD
	601 10	PRODUCT CODE	S	A/N	17	1513	1529		Submit if available-not
652	601-18	PRODUCT CODE	5	A/N	17	1513	1529		currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	S	A/N	1	1530	1530		Submit if available-not
653	001-19	PRODUCT CODE QUALIFIER	5	A/N		1530	1530		currently utilized by MQD
	601-18	PRODUCT CODE	S	A/N	17	1531	1547		Submit if available-not
654	001-18	PRODUCTCODE	5	A/N	17	1531	1547		currently utilized by MQD
	601.10		S	A /N1	1	1540	1540		Submit if available-not
655	601-19	PRODUCT CODE QUALIFIER	3	A/N	1	1548	1548		currently utilized by MQD
	601 40	RRODUCT CODE	S	۸ /۸۱	17	1549	1565		Submit if available-not
656	601-18	PRODUCTCODE	5	A/N	17	1549			currently utilized by MQD
	251	FEDERAL UPPER LIMIT INDICATOR	S	A/N	1	1566	1566		Submit if available-not
657									currently utilized by MQD

	Α	В	С	D	Е	F	G	Н	Ι
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1567	1567		Submit if available-not
658	001-20	THERAPEUTIC CLASS CODE QUALIFIER	3	AVIN	1	1507	1507		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1568	1584		Submit if available-not
659	001-25	THERAPEONIC CLASS CODE	3	ANN	17	1500	1504		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1585	1585		Submit if available-not
660	001-20		0		1	1505	1000		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1586	1602		Submit if available-not
661	00120		Ŭ	,,,,,,		1000	1002		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1603	1603		Submit if available-not
662				,,,,,		1000	1000		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1604	1620		Submit if available-not
663				,,,,,		1001	1020		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1621	1621		Submit if available-not
664				,,,,,		1021	1021		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1622	1638		Submit if available-not
665									currently utilized by MQD
	429-DT	SPECIAL PACKAGING INDICATOR	s	N	1	1639	1639		Submit if available-not
666									currently utilized by MQD
	600-28	UNIT OF MEASURE	S	A/N	2	1640	1641		Submit if available-not
667									currently utilized by MQD
	299	PROCESSOR DEFINED PRIOR	S	Ν	2	1642	1643		Submit if available-not
668		AUTHORIZATION REASON CODE							currently utilized by MQD
	272	MAC REDUCED INDICATOR	S	A/N	1	1644	1644		Submit if available-not
669									currently utilized by MQD
	223	CLIENT PRICING BASIS OF COST	S	A/N	2	1645	1646		Submit if available-not
670									currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	1647	1648		Submit if available-not
671									currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	1649	1667		Submit if available-not
672						4000	1000		currently utilized by MQD
0-0	260	GENERIC INDICATOR	S	A/N	1	1668	1668		Submit if available-not
673	000					4000	1000		currently utilized by MQD
0-1	292	PLAN CUTBACK REASON CODE	S	A/N	1	1669	1669		Submit if available-not
674	000					4070	1077		currently utilized by MQD
0	889	THERAPEUTIC CHAPTER	S	A/N	8	1670	1677		Submit if available-not
675	000			_		4070	1000		currently utilized by MQD
0-0	209	AVERAGE COST PER QUANTITY UNIT	S	D	9	1678	1686		Submit if available-not
676									currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	210	AVERAGE GENERIC UNIT PRICE	S	D	9	1687	1695		Submit if available-not
677									currently utilized by MQD
	211	AVERAGE WHOLESALE UNIT PRICE	S	D	9	1696	1704		Submit if available-not
678									currently utilized by MQD
	253	FEDERAL UPPER LIMIT UNIT PRICE	S	D	9	1705	1713		Submit if available-not
679									currently utilized by MQD
	271	MACPRICE	S	D	9	1714	1722		Submit if available-not
680									currently utilized by MQD
	522-FM	BASIS OF REIMBURSEMENT	S	N	2	1723	1724		Submit if available-not
681		DETERMINATION							currently utilized by MQD
	285	PATIENT FORMULARY REBATE AMOUNT	S	D	8	1725	1732		Submit if available-not
682									currently utilized by MQD
		SECTION SIXTH INGREDIENT							
683									
	488-RE	COMPOUND PRODUCT ID QUALIFIER	М	A/N	2	1733	1734		Submit if available-not
684									currently utilized by MQD
	489-TE	COMPOUND PRODUCT ID	М	A/N	19	1735	1753		Submit if available-not
685									currently utilized by MQD
	448-ED	COMPOUND INGREDIENT QUANTITY	S	D	10	1754	1763		Submit if available-not
686									currently utilized by MQD
	449-EE	COMPOUND INGREDIENT DRUG COST	S	D	8	1764	1771		Submit if available-not
687									currently utilized by MQD
	490-UE	COMPOUND INGREDIENT BASIS OF COST	S	A/N	2	1772	1773		Submit if available-not
688		DETERMINATION							currently utilized by MQD
	221	CLIENT FORMULARY FLAG	S	A/N	1	1774	1774		Submit if available-not
689									currently utilized by MQD
	397	PRODUCT/SERVICE NAME	S	A/N	30	1775	1804		Submit if available-not
690									currently utilized by MQD
	261	GENERICNAME	S	A/N	30	1805	1834		Submit if available-not
691									currently utilized by MQD
	601-24	PRODUCT STRENGTH	S	A/N	10	1835	1844		Submit if available-not
692									currently utilized by MQD
	243	DOSAGE FORM CODE	S	A/N	4	1845	1848		Submit if available-not
693									currently utilized by MQD
	532-FW	DATABASE INDICATOR	S	A/N	1	1849	1849		Submit if available-not
694									currently utilized by MQD
	425-PD	DRUG TYPE	S	N	1	1850	1850		Submit if available-not
695									currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	257	FORMULARY STATUS	S	A/N	1	1851	1851		Submit if available-not
696									currently utilized by MQD
	244	DRUG CATEGORY CODE	S	A/N	1	1852	1852		Submit if available-not
697									currently utilized by MQD
	252	FEDERAL DEA SCHEDULE	S	A/N	1	1853	1853		Submit if available-not
698									currently utilized by MQD
	250	FDA DRUG EFFICACY CODE	S	A/N	1	1854	1854		Submit if available-not
699									currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	1855	1855		Submit if available-not
700	001-13		0		•				currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	1856	1872		Submit if available-not
701	001-10		0		17	1000	1072		currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	1873	1873		Submit if available-not
702	001-13		0			1075	107.5		currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	1874	1890		Submit if available-not
703	001-10		0		17	1074	1030		currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	1891	1891		Submit if available-not
704	001-13		0			1001	1031		currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	1892	1908		Submit if available-not
705									currently utilized by MQD
	251	FEDERAL UPPER LIMIT INDICATOR	S	A/N	1	1909	1909		Submit if available-not
706									currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1910	1910		Submit if available-not
707	001 20				•	1010	1010		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1911	1927		Submit if available-not
708	001 20						1021		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1928	1928		Submit if available-not
709	00120			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	1020	1020		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1929	1945		Submit if available-not
710	001 20		Ŭ			1020	1010		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1946	1946		Submit if available-not
711	001 20				•		1010		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1947	1963		Submit if available-not
712	00120								currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1964	1964		Submit if available-not
713	00720						1004		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1965	1981		Submit if available-not
714	00720			, , , , ,			1001		currently utilized by MQD

	А	В	С	D	E	F	G	Н	
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	429-DT	SPECIAL PACKAGING INDICATOR	s	N	1	1982	1982		Submit if available-not
715	429-D1	SPECIAL PACKAGING INDICATOR	5	IN	1	1962	1982		currently utilized by MQD
	600-28	UNIT OF MEASURE	S	A/N	2	1983	1984		Submit if available-not
716									currently utilized by MQD
	299	PROCESSOR DEFINED PRIOR	S	N	2	1985	1986		Submit if available-not
717		AUTHORIZATION REASON CODE							currently utilized by MQD
	272	MAC REDUCED INDICATOR	S	A/N	1	1987	1987		Submit if available-not
718									currently utilized by MQD
	223	CLIENT PRICING BASIS OF COST	S	A/N	2	1988	1989		Submit if available-not
719									currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	1990	1991		Submit if available-not
720									currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	1992	2010		Submit if available-not
721									currently utilized by MQD
	260	GENERIC INDICATOR	S	A/N	1	2011	2011		Submit if available-not
722									currently utilized by MQD
	292	PLAN CUTBACK REASON CODE	S	A/N	1	2012	2012		Submit if available-not
723									currently utilized by MQD
	889	THERAPEUTIC CHAPTER	S	A/N	8	2013	2020		Submit if available-not
724									currently utilized by MQD
	209	AVERAGE COST PER QUANTITY UNIT	S	D	9	2021	2029		Submit if available-not
725		PRICE							currently utilized by MQD
	210	AVERAGE GENERIC UNIT PRICE	S	D	9	2030	2038		Submit if available-not
726									currently utilized by MQD
	211	AVERAGE WHOLESALE UNIT PRICE	S	D	9	2039	2047		Submit if available-not
727									currently utilized by MQD
	253	FEDERAL UPPER LIMIT UNIT PRICE	S	D	9	2048	2056		Submit if available-not
728									currently utilized by MQD
	271	MAC PRICE	S	D	9	2057	2065		Submit if available-not
729									currently utilized by MQD
	522-FM	BASIS OF REIMBURSEMENT	S	N	2	2066	2067		Submit if available-not
730		DETERMINATION							currently utilized by MQD
	285	PATIENT FORMULARY REBATE AMOUNT	S	D	8	2068	2075		Submit if available-not
731									currently utilized by MQD
		SECTION SEVENTH INGREDIENT							
732									
	488-RE	COMPOUND PRODUCT ID QUALIFIER	М	A/N	2	2076	2077		Submit if available-not
733									currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	489-TE	COMPOUND PRODUCT ID	М	A/N	19	2078	2096		Submit if available-not
734									currently utilized by MQD
	448-ED	COMPOUND INGREDIENT QUANTITY	S	D	10	2097	2106		Submit if available-not
735									currently utilized by MQD
	449-EE	COMPOUND INGREDIENT DRUG COST	S	D	8	2107	2114		Submit if available-not
736									currently utilized by MQD
	490-UE	COMPOUND INGREDIENT BASIS OF COST	S	A/N	2	2115	2116		Submit if available-not
737		DETERMINATION							currently utilized by MQD
	221	CLIENT FORMULARY FLAG	S	A/N	1	2117	2117		Submit if available-not
738									currently utilized by MQD
	397	PRODUCT/SERVICE NAME	S	A/N	30	2118	2147		Submit if available-not
739									currently utilized by MQD
	261	GENERIC NAME	S	A/N	30	2148	2177		Submit if available-not
740									currently utilized by MQD
	601-24	PRODUCT STRENGTH	S	A/N	10	2178	2187		Submit if available-not
741									currently utilized by MQD
	243	DOSAGE FORM CODE	S	A/N	4	2188	2191		Submit if available-not
742									currently utilized by MQD
	532-FW	DATABASE INDICATOR	S	A/N	1	2192	2192		Submit if available-not
743									currently utilized by MQD
	425-PD	DRUG TYPE	S	N	1	2193	2193		Submit if available-not
744									currently utilized by MQD
	257	FORMULARY STATUS	S	A/N	1	2194	2194		Submit if available-not
745									currently utilized by MQD
	244	DRUG CATEGORY CODE	S	A/N	1	2195	2195		Submit if available-not
746									currently utilized by MQD
	252	FEDERAL DEA SCHEDULE	S	A/N	1	2196	2196		Submit if available-not
747									currently utilized by MQD
	250	FDA DRUG EFFICACY CODE	S	A/N	1	2197	2197		Submit if available-not
748									currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	S	A/N	1	2198	2198		Submit if available-not
749	001-19	PRODUCT CODE QUALIFIER	5	A/IN	1				currently utilized by MQD
	604 40	PRODUCT CODE	S	۸ /۸۱	17	2199	2215		Submit if available-not
750	601-18	PRODUCT CODE	5	A/N	17	2199	2215		currently utilized by MQD
	601 10		s	A /NI	1	2216	0010		Submit if available-not
751	601-19	PRODUCT CODE QUALIFIER	5	A/N	1	2216	2216		currently utilized by MQD
	601 10	PRODUCT CODE	s	A (N1	17	0017	0000		Submit if available-not
752	601-18	PRODUCT CODE	5	A/N	17	2217	2233		currently utilized by MQD

	А	В	С	D	E	F	G	Н	
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	601-19	PRODUCT CODE QUALIFIER	S	A/N	1	2234	2234		Submit if available-not
753	001-19	PRODUCT CODE QUALIFIER	3	A/IN	1	2234	2234		currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	2235	2251		Submit if available-not
754	001-10	PRODUCT CODE	3	A/IN	17	2235	2201		currently utilized by MQD
	251	FEDERAL UPPER LIMIT INDICATOR	S	A/N	1	2252	2252		Submit if available-not
755									currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	S	A/N	1	2253	2253		Submit if available-not
756	001-20		5		•	2200	2200		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	S	A/N	17	2254	2270		Submit if available-not
757	001-20		0			2204	2210		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	2271	2271		Submit if available-not
758	001-20		5		· ·	2271	2271		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	S	A/N	17	2272	2288		Submit if available-not
759	001-20		0			2212	2200		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	2289	2289		Submit if available-not
760	001-20		0		· ·	2205	2205		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	2290	2306		Submit if available-not
761	00120		0	7,010		2200	2000		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	2307	2307		Submit if available-not
762				,,,,,		2007	2001		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	2308	2324		Submit if available-not
763	001 20		Ŭ	,,,,,		2000	2021		currently utilized by MQD
	429-DT	SPECIAL PACKAGING INDICATOR	s	N	1	2325	2325		Submit if available-not
764									currently utilized by MQD
	600-28	UNIT OF MEASURE	S	A/N	2	2326	2327		Submit if available-not
765									currently utilized by MQD
	299	PROCESSOR DEFINED PRIOR AUTHORIZATION REASON CODE	S	Ν	2	2328	2329		Submit if available-not
766					<u> </u>				currently utilized by MQD
	272	MACREDUCEDINDICATOR	S	A/N	1	2330	2330		Submit if available-not
767									currently utilized by MQD
	223	CLIENT PRICING BASIS OF COST	S	A/N	2	2331	2332		Submit if available-not
768	175 10						0004		currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	2333	2334		Submit if available-not
769	470.110			A () 1		0005	0050		currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	2335	2353		Submit if available-not
770	000			A () 1		0051	0054		currently utilized by MQD
	260	GENERIC INDICATOR	S	A/N	1	2354	2354		Submit if available-not
771									currently utilized by MQD

	А	В	С	D	E	F	G	Н	Ι
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	292	PLAN CUTBACK REASON CODE	S	A/N	1	2355	2355		Submit if available-not
772									currently utilized by MQD
	889	THERAPEUTIC CHAPTER	S	A/N	8	2356	2363		Submit if available-not
773									currently utilized by MQD
	209	AVERAGE COST PER QUANTITY UNIT	S	D	9	2364	2372		Submit if available-not
774		PRICE							currently utilized by MQD
	210	AVERAGE GENERIC UNIT PRICE	S	D	9	2373	2381		Submit if available-not
775									currently utilized by MQD
	211	AVERAGE WHOLESALE UNIT PRICE	S	D	9	2382	2390		Submit if available-not
776									currently utilized by MQD
	253	FEDERAL UPPER LIMIT UNIT PRICE	S	D	9	2391	2399		Submit if available-not
777									currently utilized by MQD
	271	MACPRICE	S	D	9	2400	2408		Submit if available-not
778									currently utilized by MQD
	522-FM	BASIS OF REIMBURSEMENT	S	N	2	2409	2410		Submit if available-not
779		DETERMINATION							currently utilized by MQD
	285	PATIENT FORMULARY REBATE AMOUNT	S	D	8	2411	2418		Submit if available-not
780									currently utilized by MQD
781		SECTION EIGHTH INGREDIENT							
	488-RE	COMPOUND PRODUCT ID QUALIFIER	М	A/N	2	2419	2420		Submit if available-not
782									currently utilized by MQD
	489-TE	COMPOUND PRODUCT ID	М	A/N	19	2421	2439		Submit if available-not
783									currently utilized by MQD
	448-ED	COMPOUNDINGREDIENTQUANTITY	S	D	10	2440	2449		Submit if available-not
784									currently utilized by MQD
	449-EE	COMPOUND INGREDIENT DRUG COST	S	D	8	2450	2457		Submit if available-not
785									currently utilized by MQD
	490-UE	COMPOUND INGREDIENT BASIS OF COST	S	A/N	2	2458	2459		Submit if available-not
786		DETERMINATION							currently utilized by MQD
	221	CLIENT FORMULARY FLAG	S	A/N	1	2460	2460		Submit if available-not
787									currently utilized by MQD
	397	PRODUCT/SERVICE NAME	S	A/N	30	2461	2490		Submit if available-not
788									currently utilized by MQD
	261	GENERIC NAME	S	A/N	30	2491	2520		Submit if available-not
789									currently utilized by MQD
	601-24	PRODUCT STRENGTH	S	A/N	10	2521	2530		Submit if available-not
790									currently utilized by MQD
	243	DOSAGE FORM CODE	S	A/N	4	2531	2534		Submit if available-not
791									currently utilized by MQD

	А	В	С	D	E	F	G	Н	
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	532-FW	DATABASE INDICATOR	S	A/N	1	2535	2535		Submit if available-not
792									currently utilized by MQD
	425-PD	DRUG TYPE	S	N	1	2536	2536		Submit if available-not
793									currently utilized by MQD
	257	FORMULARY STATUS	S	A/N	1	2537	2537		Submit if available-not
794									currently utilized by MQD
	244	DRUG CATEGORY CODE	S	A/N	1	2538	2538		Submit if available-not
795									currently utilized by MQD
	252	FEDERAL DEA SCHEDULE	S	A/N	1	2539	2539		Submit if available-not
796									currently utilized by MQD
	250	FDA DRUG EFFICACY CODE	S	A/N	1	2540	2540		Submit if available-not
797									currently utilized by MQD
	601 10		6	A /NI	4	2541	2541		Submit if available-not
798	601-19	PRODUCT CODE QUALIFIER	S	A/N	1				currently utilized by MQD
	004.40		s	A /N1	17	0540	0550		Submit if available-not
799	601-18	PRODUCT CODE	5	A/N	17	2542	2558		currently utilized by MQD
	004.40		s	A /N1	4	0550	2559		Submit if available-not
800	601-19	PRODUCT CODE QUALIFIER	5	A/N	1	2559	2559		currently utilized by MQD
	601 10		s	A /NI	17	2560	0576		Submit if available-not
801	601-18	PRODUCT CODE	5	A/N	17	2560	2576		currently utilized by MQD
	004.40		s	A /N1		0577	0577		Submit if available-not
802	601-19	PRODUCT CODE QUALIFIER	5	A/N	1	2577	2577		currently utilized by MQD
	601 10		s	A /NI	17	0570	2594		Submit if available-not
803	601-18	PRODUCT CODE	5	A/N	17	2578			currently utilized by MQD
	251	FEDERAL UPPER LIMIT INDICATOR	S	A/N	1	2595	2595		Submit if available-not
804									currently utilized by MQD
	004.00		s	A /N1		0500	0500		Submit if available-not
805	601-26	THERAPEUTIC CLASS CODE QUALIFIER	5	A/N	1	2596	2596		currently utilized by MQD
	004.05		s	A /N1	47	0507	0040		Submit if available-not
806	601-25	THERAPEUTIC CLASS CODE	5	A/N	17	2597	2613		currently utilized by MQD
	601.06		s	A /N1	1	2014	2614		Submit if available-not
807	601-26	THERAPEUTIC CLASS CODE QUALIFIER	5	A/N	1	2614	2614		currently utilized by MQD
	604.05			۸ /۱۱	47	0045	2624		Submit if available-not
808	601-25	THERAPEUTIC CLASS CODE	S	A/N	17	2615	2631		currently utilized by MQD
	604.00			A /N1		0000	2622		Submit if available-not
809	601-26	THERAPEUTIC CLASS CODE QUALIFIER	S	A/N	1	2632	2632		currently utilized by MQD
	604.05			۸ /۱۱	47	0000	26.40		Submit if available-not
810	601-25	THERAPEUTIC CLASS CODE	S	A/N	17	2633	2649		currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	2650	2650		Submit if available-not
811	601-26	THERAPEUTIC CLASS CODE QUALIFIER	5	A/N	1	2650	2650		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	2651	2667		Submit if available-not
812	001-20	THERAPEUTIC CLASS CODE	5	A/IN	17	2001	2007		currently utilized by MQD
	429-DT	SPECIAL PACKAGING INDICATOR	s	N	1	2668	2668		Submit if available-not
813		SPECIAL PACKAGING INDICATOR	_						currently utilized by MQD
	600-28	UNIT OF MEASURE	S	A/N	2	2669	2670		Submit if available-not
814									currently utilized by MQD
	299	PROCESSOR DEFINED PRIOR	S	N	2	2671	2672		Submit if available-not
815		AUTHORIZATION REASON CODE							currently utilized by MQD
	272	MAC REDUCED INDICATOR	S	A/N	1	2673	2673		Submit if available-not
816									currently utilized by MQD
	223	CLIENT PRICING BASIS OF COST	S	A/N	2	2674	2675		Submit if available-not
817									currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	2676	2677		Submit if available-not
818									currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	2678	2696		Submit if available-not
819									currently utilized by MQD
	260	GENERIC INDICATOR	S	A/N	1	2697	2697		Submit if available-not
820									currently utilized by MQD
	292	PLAN CUTBACK REASON CODE	S	A/N	1	2698	2698		Submit if available-not
821									currently utilized by MQD
	889	THERAPEUTIC CHAPTER	S	A/N	8	2699	2706		Submit if available-not
822									currently utilized by MQD
	209	AVERAGE COST PER QUANTITY UNIT	S	D	9	2707	2715		Submit if available-not
823		PRICE							currently utilized by MQD
	210	AVERAGE GENERIC UNIT PRICE	S	D	9	2716	2724		Submit if available-not
824									currently utilized by MQD
	211	AVERAGE WHOLESALE UNIT PRICE	S	D	9	2725	2733		Submit if available-not
825									currently utilized by MQD
	253	FEDERAL UPPER LIMIT UNIT PRICE	S	D	9	2734	2742		Submit if available-not
826									currently utilized by MQD
	271	MACPRICE	S	D	9	2743	2751		Submit if available-not
827									currently utilized by MQD
	522-FM	BASIS OF REIMBURSEMENT	S	Ν	2	2752	2753		Submit if available-not
828		DETERMINATION							currently utilized by MQD
	285	PATIENT FORMULARY REBATE AMOUNT	S	D	8	2754	2761		Submit if available-not
829									currently utilized by MQD
830		FILLER	М	A/N	939	2762	3700	Spaces	

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	8.2.2	POST ADJUDICATION HISTORY						Only if more than 8 ingredients	
831		COMPOUND DETAIL RECORD 2							
	601-04	RECORD TYPE	М	A/N	2	1	2	CD - Post Adjudication History	
								Compound Detail Record 1	
832									
	455-EM	PRESCRIPTION/SERVICE	М	A/N	1	3	3	1 - RX Billing	
		REFERENCE NUMBER QUALIFIER							
833									
	402-D2	PRESCRIPTION/SERVICE	М	N	12	4	15	10 digit Rx Number	Limited to 10 digits
834		REFERENCE NUMBER			-				
	477-EC	COMPOUND INGREDIENT	М	N	2	16	17	Count of compound product	
		COMPONENT COUNT						IDs (both active and inactive)	
005								in the compound mixture	
835								submitted.	
836		SECTION NINTH INGREDIENT							
000	488-RE	COMPOUND PRODUCT ID QUALIFIER	М	A/N	2	18	19		Submit if available-not
837					_				currently utilized by MQD
007	489-TE	COMPOUND PRODUCT ID	М	A/N	19	20	38		Submit if available-not
838									currently utilized by MQD
	448-ED	COMPOUND INGREDIENT QUANTITY	S	D	10	39	48		Submit if available-not
839									currently utilized by MQD
	449-EE	COMPOUND INGREDIENT DRUG COST	S	D	8	49	56		Submit if available-not
840									currently utilized by MQD
	490-UE	COMPOUND INGREDIENT BASIS OF COST	S	A/N	2	57	58		Submit if available-not
841		DETERMINATION							currently utilized by MQD
	221	CLIENT FORMULARY FLAG	S	A/N	1	59	59		Submit if available-not
842									currently utilized by MQD
	397	PRODUCT/SERVICE NAME	S	A/N	30	60	89		Submit if available-not
843									currently utilized by MQD
	261	GENERICNAME	S	A/N	30	90	119		Submit if available-not
844									currently utilized by MQD
	601-24	PRODUCT STRENGTH	S	A/N	10	120	129		Submit if available-not
845									currently utilized by MQD
	243	DOSAGE FORM CODE	S	A/N	4	130	133		Submit if available-not
846									currently utilized by MQD
	532-FW	DATABASE INDICATOR	S	A/N	1	134	134		Submit if available-not
847									currently utilized by MQD

	А	В	С	D	E	F	G	Н	
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	425-PD	DRUG TYPE	S	N	1	135	135		Submit if available-not
848									currently utilized by MQD
	257	FORMULARY STATUS	S	A/N	1	136	136		Submit if available-not
849									currently utilized by MQD
	244	DRUG CATEGORY CODE	S	A/N	1	137	137		Submit if available-not
850									currently utilized by MQD
	252	FEDERAL DEA SCHEDULE	S	A/N	1	138	138		Submit if available-not
851									currently utilized by MQD
	250	FDA DRUG EFFICACY CODE	S	A/N	1	139	139		Submit if available-not
852									currently utilized by MQD
	004.40			A /N1		110	440		Submit if available-not
853	601-19	PRODUCT CODE QUALIFIER	S	A/N	1	140	140		currently utilized by MQD
	004.40			A (b)	47		4 - 7		Submit if available-not
854	601-18	PRODUCT CODE	S	A/N	17	141	157		currently utilized by MQD
	004.40			A (b)		450	450		Submit if available-not
855	601-19	PRODUCT CODE QUALIFIER	S	A/N	1	158	158		currently utilized by MQD
	004.40			A (b)	47	450	475		Submit if available-not
856	601-18	PRODUCT CODE	S	A/N	17	159	175		currently utilized by MQD
	004.40			A /N1		470	470		Submit if available-not
857	601-19	PRODUCT CODE QUALIFIER	S	A/N	1	176	176		currently utilized by MQD
	004.40		s	A /N1	17	177	193		Submit if available-not
858	601-18	PRODUCT CODE	5	A/N	17				currently utilized by MQD
	251	FEDERAL UPPER LIMIT INDICATOR	S	A/N	1	194	194		Submit if available-not
859									currently utilized by MQD
	601.06		s	A/N	1	195	195		Submit if available-not
860	601-26	THERAPEUTIC CLASS CODE QUALIFIER	5	A/IN	1	195	195		currently utilized by MQD
	601.05		s	A /NI	17	196	212		Submit if available-not
861	601-25	THERAPEUTIC CLASS CODE	5	A/N	17	196	212		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	213	213		Submit if available-not
862	001-20	Therapeonic class code qualifier	3	AVIN	1	213	213		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	214	230		Submit if available-not
863	001-25		3	<i>P</i> VIN	17	214	230		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	231	231		Submit if available-not
864	001-20		3	<i>P</i> VIN		231	231		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	232	248		Submit if available-not
865	001-25		3	<i>P</i> VIN	17	232	240		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	S	A/N	1	249	249		Submit if available-not
866	001-20	THERAPEUTIC CLASS CODE QUALIFIER	5	A/IN		249	249		currently utilized by MQD

	А	В	С	D	E	F	G	Н	
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	004.05				47	050	266		Submit if available-not
867	601-25	THERAPEUTIC CLASS CODE	S	A/N	17	250	266		currently utilized by MQD
	400 DT		S	NI	4	007	267		Submit if available-not
868	429-DT	SPECIAL PACKAGING INDICATOR	5	Ν	1	267	267		currently utilized by MQD
	600-28	UNIT OF MEASURE	S	A/N	2	268	269		Submit if available-not
869									currently utilized by MQD
	299	PROCESSOR DEFINED PRIOR	S	N	2	270	271		Submit if available-not
870		AUTHORIZATION REASON CODE							currently utilized by MQD
	272	MAC REDUCED INDICATOR	S	A/N	1	272	272		Submit if available-not
871									currently utilized by MQD
	223	CLIENT PRICING BASIS OF COST	S	A/N	2	273	274		Submit if available-not
872									currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	275	276		Submit if available-not
873									currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	277	295		Submit if available-not
874									currently utilized by MQD
	260	GENERIC INDICATOR	S	A/N	1	296	296		Submit if available-not
875									currently utilized by MQD
	292	PLAN CUTBACK REASON CODE	S	A/N	1	297	297		Submit if available-not
876									currently utilized by MQD
	889	THERAPEUTIC CHAPTER	S	A/N	8	298	305		Submit if available-not
877									currently utilized by MQD
	209	AVERAGE COST PER QUANTITY UNIT	S	D	9	306	314		Submit if available-not
878		PRICE							currently utilized by MQD
	210	AVERAGE GENERIC UNIT PRICE	S	D	9	315	323		Submit if available-not
879									currently utilized by MQD
	211	AVERAGE WHOLESALE UNIT PRICE	S	D	9	324	332		Submit if available-not
880									currently utilized by MQD
	253	FEDERAL UPPER LIMIT UNIT PRICE	S	D	9	333	341		Submit if available-not
881									currently utilized by MQD
	271	MACPRICE	S	D	9	342	350		Submit if available-not
882									currently utilized by MQD
	522-FM	BASIS OF REIMBURSEMENT	S	N	2	351	352		Submit if available-not
883		DETERMINATION							currently utilized by MQD
	285	PATIENT FORMULARY REBATE AMOUNT	S	D	8	353	360		Submit if available-not
884									currently utilized by MQD
885		SECTION TENTH INGREDIENT							
	488-RE	COMPOUND PRODUCT ID QUALIFIER	М	A/N	2	361	362		Submit if available-not
886									currently utilized by MQD
000									

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	489-TE	COMPOUND PRODUCT ID	М	A/N	19	363	381		Submit if available-not
887									currently utilized by MQD
	448-ED	COMPOUND INGREDIENT QUANTITY	S	D	10	382	391		Submit if available-not
888									currently utilized by MQD
	449-EE	COMPOUND INGREDIENT DRUG COST	S	D	8	392	399		Submit if available-not
889									currently utilized by MQD
	490-UE	COMPOUND INGREDIENT BASIS OF COST	S	A/N	2	400	401		Submit if available-not
890		DETERMINATION							currently utilized by MQD
	221	CLIENT FORMULARY FLAG	S	A/N	1	402	402		Submit if available-not
891									currently utilized by MQD
	397	PRODUCT/SERVICE NAME	S	A/N	30	403	432		Submit if available-not
892									currently utilized by MQD
	261	GENERICNAME	S	A/N	30	433	462		Submit if available-not
893									currently utilized by MQD
	601-24	PRODUCT STRENGTH	S	A/N	10	463	472		Submit if available-not
894									currently utilized by MQD
	243	DOSAGE FORM CODE	S	A/N	4	473	476		Submit if available-not
895									currently utilized by MQD
	532-FW	DATABASE INDICATOR	S	A/N	1	477	477		Submit if available-not
896									currently utilized by MQD
	425-PD	DRUG TYPE	S	N	1	478	478		Submit if available-not
897									currently utilized by MQD
	257	FORMULARY STATUS	S	A/N	1	479	479		Submit if available-not
898									currently utilized by MQD
	244	DRUG CATEGORY CODE	S	A/N	1	480	480		Submit if available-not
899									currently utilized by MQD
	252	FEDERAL DEA SCHEDULE	S	A/N	1	481	481		Submit if available-not
900									currently utilized by MQD
	250	FDA DRUG EFFICACY CODE	S	A/N	1	482	482		Submit if available-not
901									currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	S	A/N	1	483	483		Submit if available-not
902	001-19	FRODUCT CODE QUALIFIER	3	AVIN	1	403	403		currently utilized by MQD
	601-18	PRODUCT CODE	S	A/N	17	484	500		Submit if available-not
903	001-18		3	A/IN	17	404	500		currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	s	Δ/ΝΙ	1	501	501		Submit if available-not
904	001-19		3	A/N		501	501		currently utilized by MQD
	601-18	PRODUCT CODE	s	Δ/ΝΙ	17	502	518		Submit if available-not
905	001-18		3	A/N	17	502	518		currently utilized by MQD

	А	В	С	D	E	F	G	Н	
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	519	519		Submit if available-not
906	601-19	PRODUCT CODE QUALIFIER	5	A/IN	1	519	519		currently utilized by MQD
	601-18	PRODUCT CODE	S	A/N	17	520	536		Submit if available-not
907	001-10	PRODUCT CODE	3	AVIN	17	520	550		currently utilized by MQD
	251	FEDERAL UPPER LIMIT INDICATOR	s	A/N	1	537	537		Submit if available-not
908	201		3	AVIN	1	557	557		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	538	538		Submit if available-not
909	001-20		0		1	000	550		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	539	555		Submit if available-not
910	001 20					000	000		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	556	556		Submit if available-not
911	00120					000	000		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	557	573		Submit if available-not
912	001 20					007	0/0		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	574	574		Submit if available-not
913	00120			,,,,,,		0/4	014		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	575	591		Submit if available-not
914	001 20			,,,,,		010			currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	592	592		Submit if available-not
915	00120					002	002		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	593	609		Submit if available-not
916	001 20			,,,,,					currently utilized by MQD
	429-DT	SPECIAL PACKAGING INDICATOR	s	N	1	610	610		Submit if available-not
917									currently utilized by MQD
	600-28	UNIT OF MEASURE	S	A/N	2	611	612		Submit if available-not
918									currently utilized by MQD
	299	PROCESSOR DEFINED PRIOR AUTHORIZATION REASON CODE	S	Ν	2	613	614		Submit if available-not
919									currently utilized by MQD
	272	MACREDUCEDINDICATOR	S	A/N	1	615	615		Submit if available-not
920							0.17		currently utilized by MQD
	223	CLIENT PRICING BASIS OF COST	S	A/N	2	616	617		Submit if available-not
921	475 10			A / N I		0.10	040		currently utilized by MQD
000	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	618	619		Submit if available-not
922	476 110		6	Δ /ΝΙ	10	600	600		currently utilized by MQD
000	476-H6	DUR CO-AGENT ID	S	A/N	19	620	638		Submit if available-not
923	000			A (N1		620	000		currently utilized by MQD
	260	GENERIC INDICATOR	S	A/N	1	639	639		Submit if available-not
924									currently utilized by MQD

	А	В	С	D	E	F	G	Н	
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	292	PLAN CUTBACK REASON CODE	S	A/N	1	640	640		Submit if available-not
925									currently utilized by MQD
	889	THERAPEUTIC CHAPTER	S	A/N	8	641	648		Submit if available-not
926									currently utilized by MQD
	209	AVERAGE COST PER QUANTITY UNIT	S	D	9	649	657		Submit if available-not
927		PRICE							currently utilized by MQD
	210	AVERAGE GENERIC UNIT PRICE	S	D	9	658	666		Submit if available-not
928									currently utilized by MQD
	211	AVERAGE WHOLESALE UNIT PRICE	S	D	9	667	675		Submit if available-not
929									currently utilized by MQD
	253	FEDERAL UPPER LIMIT UNIT PRICE	S	D	9	676	684		Submit if available-not
930									currently utilized by MQD
	271	MAC PRICE	S	D	9	685	693		Submit if available-not
931									currently utilized by MQD
	522-FM	BASIS OF REIMBURSEMENT	S	N	2	694	695		Submit if available-not
932		DETERMINATION							currently utilized by MQD
	285	PATIENT FORMULARY REBATE AMOUNT	S	D	8	696	703		Submit if available-not
933									currently utilized by MQD
		SECTION ELEVENTH							
934		INGREDIENT							
	488-RE	COMPOUND PRODUCT ID QUALIFIER	Μ	A/N	2	704	705		Submit if available-not
935					2	104	100		currently utilized by MQD
	489-TE	COMPOUND PRODUCT ID	Μ	A/N	19	706	724		Submit if available-not
936					10	100	124		currently utilized by MQD
	448-ED	COMPOUNDINGREDIENT QUANTITY	S	D	10	725	734		Submit if available-not
937					10	120	104		currently utilized by MQD
	449-EE	COMPOUND INGREDIENT DRUG COST	S	D	8	735	742		Submit if available-not
938					0	155	742		currently utilized by MQD
	490-UE	COMPOUND INGREDIENT BASIS OF COST	S	A/N	2	743	744		Submit if available-not
939		DETERMINATION			2	745	744		currently utilized by MQD
	221	CLIENT FORMULARY FLAG	S	A/N	1	745	745		Submit if available-not
940					1	745	743		currently utilized by MQD
	397	PRODUCT/SERVICE NAME	S	A/N	30	746	775		Submit if available-not
941					30	740	115		currently utilized by MQD
	261	GENERIC NAME	S	A/N	30	776	805		Submit if available-not
942					30	110	805		currently utilized by MQD
	601-24	PRODUCT STRENGTH	S	A/N	10	806	815		Submit if available-not
943					10	806	815		currently utilized by MQD

	А	В	С	D	E	F	G	Н	
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	243	DOSAGE FORM CODE	S	A/N	4	816	819		Submit if available-not
944					4	810	819		currently utilized by MQD
	532-FW	DATABASE INDICATOR	S	A/N	1	820	820		Submit if available-not
945					1	820	820		currently utilized by MQD
	425-PD	DRUG TYPE	S	N	1	821	821		Submit if available-not
946					1	021	021		currently utilized by MQD
	257	FORMULARY STATUS	S	A/N	1	822	822		Submit if available-not
947					1	022	022		currently utilized by MQD
	244	DRUG CATEGORY CODE	S	A/N	1	823	823		Submit if available-not
948					1	023	023		currently utilized by MQD
	252	FEDERAL DEA SCHEDULE	S	A/N	1	824	824		Submit if available-not
949					1	824	824		currently utilized by MQD
	250	FDA DRUG EFFICACY CODE	S	A/N	1	825	825		Submit if available-not
950					1	820	820		currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	S	A/N	1	826	826		Submit if available-not
951	601-19	PRODUCT CODE QUALIFIER	5	A/IN	1	020	020		currently utilized by MQD
	601-18	PRODUCT CODE	S	A/N	17	827	843		Submit if available-not
952	001-18	PRODUCT CODE	5	A/IN	17	021	643		currently utilized by MQD
	601-19		S	A/N	1	844	844		Submit if available-not
953	001-19	PRODUCT CODE QUALIFIER	3	AVIN	1	044	044		currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	845	861		Submit if available-not
954	001-10	PRODUCTCODE	3	A/IN	17	040	001		currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	862	862		Submit if available-not
955	001-19	PRODUCT CODE QUALIFIER	3	A/N	1	002	002		currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	863	879		Submit if available-not
956	001-10	PRODUCTCODE	3	A/IN	17	003	0/9		currently utilized by MQD
	251	FEDERAL UPPER LIMIT INDICATOR	S	A/N	1	880	880		Submit if available-not
957									currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	881	881		Submit if available-not
958	001-20	I HERAPEOTIC CLASS CODE QUALIFIER	3	A/IN	1	001	001		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	882	898		Submit if available-not
959	001-25		3	A/IN	17	002	090		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	899	899		Submit if available-not
960	001-20	THE CAPEON COLASS CODE QUALIFIER	3	A/IN		099	099		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	900	9016		Submit if available-not
961	001-25	THERAPEUTIC CLASS CODE	5	A/IN	17	900	9010		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	917	917		Submit if available-not
962	001-20	THERAPEUTIC CLASS CODE QUALIFIER	5	A/IN		917	917		currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	918	934		Submit if available-not
963	001-25	THERAPEOTIC CLASS CODE	3	ANN	17	910	934		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	935	935		Submit if available-not
964	001-20	THERAPEONC CLASS CODE QUALIFIER	3	AVIN	1	935	933		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	936	952		Submit if available-not
965	001-20		0		17	330	352		currently utilized by MQD
	429-DT	SPECIAL PACKAGING INDICATOR	s	A/N	1	953	953		Submit if available-not
966					•				currently utilized by MQD
	600-28	UNIT OF MEASURE	S	A/N	2	954	955		Submit if available-not
967									currently utilized by MQD
	299	PROCESSOR DEFINED PRIOR	S	N	2	956	957		Submit if available-not
968		AUTHORIZATION REASON CODE							currently utilized by MQD
	272	MAC REDUCED INDICATOR	S	A/N	1	958	958		Submit if available-not
969									currently utilized by MQD
	223	CLIENT PRICING BASIS OF COST	S	A/N	2	959	960		Submit if available-not
970									currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	961	962		Submit if available-not
971									currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	963	981		Submit if available-not
972									currently utilized by MQD
	260	GENERIC INDICATOR	S	A/N	1	982	982		Submit if available-not
973									currently utilized by MQD
	292	PLAN CUTBACK REASON CODE	S	A/N	1	983	983		Submit if available-not
974									currently utilized by MQD
	889	THERAPEUTIC CHAPTER	S	A/N	8	984	991		Submit if available-not
975									currently utilized by MQD
	209	AVERAGE COST PER QUANTITY UNIT	S	D	9	992	1000		Submit if available-not
976		PRICE							currently utilized by MQD
	210	AVERAGE GENERIC UNIT PRICE	S	D	9	1001	1009		Submit if available-not
977									currently utilized by MQD
	211	AVERAGE WHOLESALE UNIT PRICE	S	D	9	1010	1018		Submit if available-not
978									currently utilized by MQD
	253	FEDERAL UPPER LIMIT UNIT PRICE	S	D	9	1019	1027		Submit if available-not
979									currently utilized by MQD
	271	MAC PRICE	S	D	9	1028	1036		Submit if available-not
980									currently utilized by MQD
	522-FM	BASIS OF REIMBURSEMENT	S	N	2	1037	1038		Submit if available-not
981		DETERMINATION							currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	285	PATIENT FORMULARY REBATE AMOUNT	S	D	8	1039	1046		Submit if available-not
982									currently utilized by MQD
		SECTION TWELFTH INGREDIENT							
983									
	488-RE	COMPOUND PRODUCT ID QUALIFIER	М	A/N	2	1047	1048		Submit if available-not
984									currently utilized by MQD
	489-TE	COMPOUND PRODUCT ID	М	A/N	19	1049	1067		Submit if available-not
985									currently utilized by MQD
	448-ED	COMPOUNDINGREDIENTQUANTITY	S	D	10	1068	1077		Submit if available-not
986									currently utilized by MQD
	449-EE	COMPOUND INGREDIENT DRUG COST	S	D	8	1078	1085		Submit if available-not
987									currently utilized by MQD
	490-UE	COMPOUND INGREDIENT BASIS OF COST	S	A/N	2	1086	1087		Submit if available-not
988		DETERMINATION							currently utilized by MQD
	221	CLIENT FORMULARY FLAG	S	A/N	1	1088	1088		Submit if available-not
989									currently utilized by MQD
	397	PRODUCT/SERVICE NAME	S	A/N	30	1089	1118		Submit if available-not
990									currently utilized by MQD
	261	GENERICNAME	S	A/N	30	1119	1148		Submit if available-not
991									currently utilized by MQD
	601-24	PRODUCT STRENGTH	S	A/N	10	1049	1158		Submit if available-not
992									currently utilized by MQD
	243	DOSAGE FORM CODE	S	A/N	4	1159	1162		Submit if available-not
993									currently utilized by MQD
	532-FW	DATABASE INDICATOR	S	A/N	1	1163	1163		Submit if available-not
994									currently utilized by MQD
	425-PD	DRUG TYPE	S	N	1	1164	1164		Submit if available-not
995									currently utilized by MQD
	257	FORMULARY STATUS	S	A/N	1	1165	1165		Submit if available-not
996									currently utilized by MQD
	244	DRUG CATEGORY CODE	S	A/N	1	1166	1166		Submit if available-not
997									currently utilized by MQD
	252	FEDERAL DEA SCHEDULE	S	A/N	1	1167	1167		Submit if available-not
998									currently utilized by MQD
	250	FDA DRUG EFFICACY CODE	S	A/N	1	1168	1168		Submit if available-not
999									currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	S	A/N	1	1169	1169		Submit if available-not
1000	001-13		0			1103	1103		currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	601-18	PRODUCT CODE	s	A/N	17	1170	1186		Submit if available-not
1001	001-10	PRODUCT CODE	3	AVIN	17	1170	1100		currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	1187	1187		Submit if available-not
1002	001-19	PRODUCT CODE QUALIFIER	3	AVIN	1	1107	1107		currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	1188	1204		Submit if available-not
1003	001-10		3	AVIN	17	1100	1204		currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	1205	1205		Submit if available-not
1004	001-13		0		1	1200	1200		currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	1206	1222		Submit if available-not
1005									currently utilized by MQD
	251	FEDERAL UPPER LIMIT INDICATOR	S	A/N	1	1223	1223		Submit if available-not
1006									currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1224	1224		Submit if available-not
1007	001-20		0		1	1227	1227		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1225	1241		Submit if available-not
1008	001-23		5		17	1225	1241		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1242	1242		Submit if available-not
1009	001-20		0		1	1272	1272		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1243	1259		Submit if available-not
1010	001-23		5		17	1245	1200		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1260	1260		Submit if available-not
1011	001-20		5		1	1200	1200		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1261	1277		Submit if available-not
1012	001-23		5		17	1201	1277		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1278	1278		Submit if available-not
1013	001-20		5		1	1270	1270		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1279	1295		Submit if available-not
1014	001-23		5		17	1275	1235		currently utilized by MQD
	429-DT	SPECIAL PACKAGING INDICATOR	s	N	1	1297	1296		Submit if available-not
1015	-								currently utilized by MQD
	600-28	UNIT OF MEASURE	S	A/N	2	1297	1298		Submit if available-not
1016									currently utilized by MQD
	299	PROCESSOR DEFINED PRIOR	S	N	2	1299	1300		Submit if available-not
1017		AUTHORIZATION REASON CODE							currently utilized by MQD
	272	MAC REDUCED INDICATOR	S	A/N	1	1301	1301		Submit if available-not
1018									currently utilized by MQD
	223	CLIENT PRICING BASIS OF COST	S	A/N	2	1302	1303		Submit if available-not
1019									currently utilized by MQD

	А	В	С	D	E	F	G	Н	
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	1304	1305		Submit if available-not
1020									currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	1306	1324		Submit if available-not
1021									currently utilized by MQD
	260	GENERIC INDICATOR	S	A/N	1	1325	1325		Submit if available-not
1022									currently utilized by MQD
	292	PLAN CUTBACK REASON CODE	S	A/N	1	1326	1326		Submit if available-not
1023									currently utilized by MQD
	889	THERAPEUTIC CHAPTER	S	A/N	8	1327	1334		Submit if available-not
1024									currently utilized by MQD
	209	AVERAGE COST PER QUANTITY UNIT	S	D	9	1335	1343		Submit if available-not
1025		PRICE							currently utilized by MQD
	210	AVERAGE GENERIC UNIT PRICE	S	D	9	1344	1352		Submit if available-not
1026									currently utilized by MQD
	211	AVERAGE WHOLESALE UNIT PRICE	S	D	9	1353	1361		Submit if available-not
1027									currently utilized by MQD
	253	FEDERAL UPPER LIMIT UNIT PRICE	S	D	9	1362	1370		Submit if available-not
1028									currently utilized by MQD
	271	MAC PRICE	S	D	9	1371	1379		Submit if available-not
1029									currently utilized by MQD
	522-FM	BASIS OF REIMBURSEMENT	S	N	2	1380	1381		Submit if available-not
1030		DETERMINATION							currently utilized by MQD
	285	PATIENT FORMULARY REBATE AMOUNT	S	D	8	1382	1389		Submit if available-not
1031									currently utilized by MQD
		SECTION THIRTEENTH							
1032		INGREDIENT							
	488-RE	COMPOUND PRODUCT ID QUALIFIER	М	A/N	2	1390	1391		Submit if available-not
1033									currently utilized by MQD
	489-TE	COMPOUND PRODUCT ID	М	A/N	19	1392	1410		Submit if available-not
1034									currently utilized by MQD
	448-ED	COMPOUND INGREDIENT QUANTITY	S	D	10	1411	1420		Submit if available-not
1035									currently utilized by MQD
	449-EE	COMPOUND INGREDIENT DRUG COST	S	D	8	1421	1428		Submit if available-not
1036									currently utilized by MQD
	490-UE	COMPOUND INGREDIENT BASIS OF COST	S	A/N	2	1429	1430		Submit if available-not
1037		DETERMINATION							currently utilized by MQD
	221	CLIENT FORMULARY FLAG	S	A/N	1	1431	1431		Submit if available-not
1038									currently utilized by MQD

1FieldField NameM/SFormatSizeStartEndValuesMQD U397PRODUCT/SERVICE NAMESA/N3014321461Submit if availa currently utilized currently utilized currently utilized261GENERIC NAMESA/N3014621491Submit if availa currently utilized currently utilized currently utilized currently utilized1040601-24PRODUCT STRENGTHSA/N1014921501Submit if availa currently utilized currently utilized currently utilized currently utilized243DOSAGE FORM CODESA/N415021505Submit if availa currently utilized currently utilized currently utilized1042532-FWDATABASE INDICATORSA/N115061506Submit if availa currently utilized currently utilized currently utilized1044257FORMULARY STATUSSA/N11508Submit if availa currently utilized currently utilized currently utilized1045254FEDERAL DEA SCHEDULESA/N11509Submit if availa currently utilized currently utilized currently utilized currently utilized1047250FDA DRUG EFFICACY CODESA/N115111511Submit if availa currently utilized currently utilized currently utilized1048250FDA DRUG EFFICACY CODESA/N115111510Submit if availa currently utilized currently ut	ble-not by MQD ble-not by MQD ble-not by MQD ble-not by MQD ble-not by MQD ble-not
1039261GENERIC NAMESA/N3014621491Currently utilized currently utilized 	by MQD ble-not by MQD ble-not by MQD ble-not by MQD ble-not by MQD ble-not
261GENERIC NAMESA/N3014621491Submit if availa currently utilized currently utilized 	ble-not by MQD ble-not by MQD ble-not by MQD ble-not by MQD ble-not
1040Market ControlControlControlCurrently utilized601-24PRODUCT STRENGTHSA/N1014921501Submit if availa currently utilized1041243DOSAGE FORM CODESA/N415021505Submit if availa currently utilized1042532-FWDATABASE INDICATORSA/N115061506Submit if availa currently utilized1043532-FWDATABASE INDICATORSA/N115061506Submit if availa currently utilized1043425-PDDRUG TYPESN115071507Submit if availa currently utilized1044257FORMULARY STATUSSA/N115081508Submit if availa currently utilized1045244DRUG CATEGORY CODESA/N115091509Submit if availa currently utilized1046252FEDERAL DEA SCHEDULESA/N115101510Submit if availa currently utilized1047250FDA DRUG EFFICACY CODESA/N11511151115111511	by MQD ble-not ble-not by MQD ble-not by MQD ble-not by MQD ble-not
601-24PRODUCT STRENGTHSA/N1014921501Submit if availa currently utilized currently utilized currently utilized243DOSAGE FORM CODESA/N415021505Submit if availa currently utilized currently utilized currently utilized currently utilized1042532-FWDATABASE INDICATORSA/N115061506Submit if availa currently utilized currently utilized 	ble-not by MQD ble-not by MQD ble-not by MQD ble-not
1041Image: Constraint of the second seco	by MQD ble-not by MQD ble-not by MQD ble-not
243DOSAGE FORM CODESA/N415021505Submit if availa currently utilized currently utilized 	ble-not by MQD ble-not by MQD ble-not
1042Image: Second of the second o	by MQD ble-not by MQD ble-not
532-FWDATABASE INDICATORSA/N115061506Submit if availa currently utilized currently utilized currently utilized425-PDDRUG TYPESN115071507Submit if availa currently utilized currently utilized1044257FORMULARY STATUSSA/N115081508Submit if availa currently utilized currently utilized1045244DRUG CATEGORY CODESA/N115091509Submit if availa currently utilized currently utilized currently utilized currently utilized1046252FEDERAL DEA SCHEDULESA/N115101510Submit if availa currently utilized currently utilized currently utilized currently utilized1047250FDA DRUG EFFICACY CODESA/N115111511Submit if availa currently utilized	ble-not by MQD ble-not
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425-PDDRUG TYPESN115071507Submit if availa currently utilized currently utilized currently utilized 	ole-not
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1045 244 DRUG CATEGORY CODE S A/N 1 1509 1509 Submit if availa currently utilized	by MQD
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1046 252 FEDERAL DEA SCHEDULE S A/N 1 1510 1510 Submit if availa currently utilized currently utilize	by MQD
252 FEDERAL DEA SCHEDULE S A/N 1 1510 1510 Submit if availa currently utilized 1047 250 FDA DRUG EFFICACY CODE S A/N 1 1511 1511 Submit if availa	ole-not
1047 Currently utilized 250 FDA DRUG EFFICACY CODE S A/N 1 1511 1511 Submit if availa	by MQD
250 FDA DRUG EFFICACY CODE S A/N 1 1511 1511 Submit if availa	ole-not
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1048	ble-not
	by MQD
601-19 PRODUCT CODE QUALIFIER S A/N 1 1512 1512 Submit if availa	ple-not
1049 601-19 PRODUCT CODE QUALIFIER S A/N 1 currently utilized	by MQD
601-18 PRODUCT CODE S A/N 17 1513 1529 Submit if availa	ple-not
1050 601-18 PRODUCT CODE S A/N 17 1513 1529 currently utilized	by MQD
Submit if availa	
1051 601-19 PRODUCT CODE QUALIFIER S A/N 1 1530 Currently utilized	by MQD
Submit if availa	
1052 601-18 PRODUCT CODE S A/N 17 1531 1547 Currently utilized	by MQD
Submit if availa	ole-not
1053 601-19 PRODUCT CODE QUALIFIER S A/N 1 1548 Currently utilized	by MQD
Submit if availa	
1054 601-18 PRODUCT CODE S A/N 17 1549 1565 currently utilized	by MQD
251 FEDERAL UPPER LIMIT INDICATOR S A/N 1 1566 1566 Submit if availa	
1055 currently utilized	by MQD
Submit if availa	
1056 601-26 THERAPEUTIC CLASS CODE QUALIFIER S A/N 1 1567 1567 currently utilized	
Submit if availa	by MQD
1057 601-25 THERAPEUTIC CLASS CODE S A/N 17 1568 1584 currently utilized	

	А	В	С	D	Е	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1585	1585		Submit if available-not
1058	001-20	THERAPEOTIC CLASS CODE QUALIFIER	3	AVIN	1	1565	1565		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1586	1602		Submit if available-not
1059	001-25	THERAFEOTIC CLASS CODE	3	ANN	17	1560	1002		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1603	1603		Submit if available-not
1060	001-20		3		•	1005	1005		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1604	1620		Submit if available-not
1061	001-23		3		17	1004	1020		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1621	1621		Submit if available-not
1062	001-20		3		1	1021	1021		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1622	1638		Submit if available-not
1063	001-23		3		17	1022	1030		currently utilized by MQD
	429-DT	SPECIAL PACKAGING INDICATOR	s	N	1	1639	1639		Submit if available-not
1064	-		_		•				currently utilized by MQD
	600-28	UNIT OF MEASURE	S	A/N	2	1640	1641		Submit if available-not
1065									currently utilized by MQD
	299	PROCESSOR DEFINED PRIOR	S	N	2	1642	1643		Submit if available-not
1066		AUTHORIZATION REASON CODE							currently utilized by MQD
	272	MAC REDUCED INDICATOR	S	A/N	1	1644	1644		Submit if available-not
1067									currently utilized by MQD
	223	CLIENT PRICING BASIS OF COST	S	A/N	2	1645	1646		Submit if available-not
1068									currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	1647	1648		Submit if available-not
1069									currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	1649	1667		Submit if available-not
1070									currently utilized by MQD
	260	GENERIC INDICATOR	S	A/N	1	1668	1668		Submit if available-not
1071									currently utilized by MQD
	292	PLAN CUTBACK REASON CODE	S	A/N	1	1669	1669		Submit if available-not
1072									currently utilized by MQD
	889	THERAPEUTIC CHAPTER	S	A/N	8	1670	1677		Submit if available-not
1073									currently utilized by MQD
	209	AVERAGE COST PER QUANTITY UNIT	S	D	9	1678	1686		Submit if available-not
1074		PRICE							currently utilized by MQD
	210	AVERAGE GENERIC UNIT PRICE	S	D	9	1687	1695		Submit if available-not
1075									currently utilized by MQD
	211	AVERAGE WHOLESALE UNIT PRICE	S	D	9	1696	1704		Submit if available-not
1076									currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	253	FEDERAL UPPER LIMIT UNIT PRICE	S	D	9	1705	1713		Submit if available-not
1077									currently utilized by MQD
	271	MAC PRICE	S	D	9	1714	1222		Submit if available-not
1078									currently utilized by MQD
	522-FM	BASIS OF REIMBURSEMENT	S	N	2	1723	1724		Submit if available-not
1079		DETERMINATION							currently utilized by MQD
	285	PATIENT FORMULARY REBATE AMOUNT	S	D	8	1725	1732		Submit if available-not
1080									currently utilized by MQD
1001		SECTION FOURTEENTH							
1081	488-RE	INGREDIENT COMPOUND PRODUCT ID QUALIFIER	М	A/N	2	1733	1734		
1000	488-RE	COMPOUND PRODUCT ID QUALIFIER	IVI	A/N	2	1733	1734		Submit if available-not
1082	489-TE	COMPOUND PRODUCT ID	М	A/N	19	1735	1753		currently utilized by MQD
1000	489-1E	COMPOUND PRODUCT ID	IVI	AVIN	19	1/35	1755		Submit if available-not
1083	448-ED		S	D	10	1754	1763		currently utilized by MQD
1001	440-ED	COMPOUNDINGREDIENT QUANTITY	5	D	10	1/54	1703		Submit if available-not
1084	449-EE	COMPOUND INGREDIENT DRUG COST	S	D	8	1764	1771		currently utilized by MQD
1005	449-EE	COMPOUND INGREDIENT DRUG COST	5	D	0	1764	1771		Submit if available-not
1085	490-UE	COMPOUND INGREDIENT BASIS OF COST	S	A/N	2	1772	1773		currently utilized by MQD
1000	490-0E	DETERMINATION	5	AVIN	2	1//2	1773		Submit if available-not
1086	221	CLIENT FORMULARY FLAG	S	A/N	1	1774	1774		currently utilized by MQD
1007	221	CLIENT FORMULARY FLAG	5	AVIN	1	1//4	1774		Submit if available-not
1087	397	PRODUCT/SERVICE NAME	S	A/N	30	1775	1804		currently utilized by MQD
1000	397	PRODUCT/SERVICE NAME	3	AVIN	30	1775	1004		Submit if available-not
1088	261	GENERICNAME	S	A/N	30	1805	1834		currently utilized by MQD
1089	201	GENERIC NAME	3	AVIN	30	1605	1034		Submit if available-not
1069	601-24	PRODUCT STRENGTH	S	A/N	10	1835	1844		currently utilized by MQD Submit if available-not
1090	001-24	FRODUCT STRENGTH	3	AVIN	10	1055	1044		
1090	243	DOSAGE FORM CODE	S	A/N	4	1845	1848		currently utilized by MQD Submit if available-not
1001	243	DOSAGEFORMCODE	3	AVIN	4	1045	1040		
1091	532-FW	DATABASE INDICATOR	S	A/N	1	1849	1849		currently utilized by MQD
1000	55Z-FVV		3	AVIN		1049	1049		Submit if available-not
1092	425-PD	DRUG TYPE	S	N	1	1850	1850		currently utilized by MQD Submit if available-not
1000	420-PD		3	IN		1650	1650		
1093	257	FORMULARY STATUS	S	A/N	1	1851	1851		currently utilized by MQD
1004	207	I CRIVILART STATUS	3	AVIN		1001	1001		Submit if available-not
1094	244	DRUG CATEGORY CODE	S	A/N	1	1852	1852		currently utilized by MQD
1005	244	DRUG CATEGORY CODE	5	A/N	1	1852	1852		Submit if available-not
1095									currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	252	FEDERAL DEA SCHEDULE	S	A/N	1	1853	1853		Submit if available-not
1096									currently utilized by MQD
	250	FDA DRUG EFFICACY CODE	S	A/N	1	1854	1854		Submit if available-not
1097									currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	1855	1855		Submit if available-not
1098	001-19	FRODUCT CODE QUALIFIER	3	AVIN	I				currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	1856	1872		Submit if available-not
1099	001-10		3		17	1000	1072		currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	1873	1873		Submit if available-not
1100	001-13		3		'	1075	1075		currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	1874	1890		Submit if available-not
1101	001-10		3		17	1074	1090		currently utilized by MQD
	601-19	PRODUCT CODE QUALIFIER	s	A/N	1	1891	1891		Submit if available-not
1102	001-13		0			1031	1031		currently utilized by MQD
	601-18	PRODUCT CODE	s	A/N	17	1892	1908		Submit if available-not
1103									currently utilized by MQD
	251	FEDERAL UPPER LIMIT INDICATOR	S	A/N	1	1909	1909		Submit if available-not
1104									currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1910	1910		Submit if available-not
1105	001-20		3		· ·	1910	1910		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1911	1927		Submit if available-not
1106	001-23		3		17	1911	1927		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1928	1928		Submit if available-not
1107	001-20		3		'	1920	1920		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1929	1945		Submit if available-not
1108	001-20		0		17	1525	1343		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1946	1946		Submit if available-not
1109	001-20		0		· ·	1340	1340		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1947	1963		Submit if available-not
1110	001-20					1047	1000		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	1964	1964		Submit if available-not
1111	007-20					1004	1004		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	s	A/N	17	1965	1981		Submit if available-not
1112	001-20					1000	1301		currently utilized by MQD
	429-DT	SPECIAL PACKAGING INDICATOR	s	N	1	1982	1982		Submit if available-not
1113									currently utilized by MQD
	600-28	UNIT OF MEASURE	S	A/N	2	1983	1984		Submit if available-not
1114									currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	299	PROCESSOR DEFINED PRIOR	S	N	2	1985	1986		Submit if available-not
1115		AUTHORIZATION REASON CODE							currently utilized by MQD
	272	MAC REDUCED INDICATOR	S	A/N	1	1987	1987		Submit if available-not
1116									currently utilized by MQD
	223	CLIENT PRICING BASIS OF COST	S	A/N	2	1988	1989		Submit if available-not
1117									currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	1990	1991		Submit if available-not
1118									currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	1992	2010		Submit if available-not
1119									currently utilized by MQD
	260	GENERIC INDICATOR	S	A/N	1	2011	2011		Submit if available-not
1120									currently utilized by MQD
	292	PLAN CUTBACK REASON CODE	S	A/N	1	2012	2012		Submit if available-not
1121									currently utilized by MQD
	889	THERAPEUTIC CHAPTER	S	A/N	8	2013	2020		Submit if available-not
1122									currently utilized by MQD
	209	AVERAGE COST PER QUANTITY UNIT	S	D	9	2021	2029		Submit if available-not
1123		PRICE							currently utilized by MQD
	210	AVERAGE GENERIC UNIT PRICE	S	D	9	2030	2038		Submit if available-not
1124									currently utilized by MQD
	211	AVERAGE WHOLESALE UNIT PRICE	S	D	9	2039	2047		Submit if available-not
1125									currently utilized by MQD
	253	FEDERAL UPPER LIMIT UNIT PRICE	S	D	9	2048	2056		Submit if available-not
1126									currently utilized by MQD
	271	MAC PRICE	S	D	9	2057	2065		Submit if available-not
1127									currently utilized by MQD
	522-FM	BASIS OF REIMBURSEMENT	S	N	2	2066	2067		Submit if available-not
1128		DETERMINATION							currently utilized by MQD
	285	PATIENT FORMULARY REBATE AMOUNT	S	D	8	2068	2075		Submit if available-not
1129									currently utilized by MQD
		SECTION FIFTEENTH							
1130		INGREDIENT							
	488-RE	COMPOUND PRODUCT ID QUALIFIER	М	A/N	2	2076	2077		Submit if available-not
1131									currently utilized by MQD
	489-TE	COMPOUND PRODUCT ID	М	A/N	19	2078	2096		Submit if available-not
1132									currently utilized by MQD
	448-ED	COMPOUND INGREDIENT QUANTITY	S	D	10	2097	2106		Submit if available-not
1133									currently utilized by MQD

1FieldField NameM/SFormatSizeStartEndValuesMQD USAGE449-EECOMPOUND INGREDIENT DRUG COSTSD821072114Submit if available-not currently utilized by Mit1134490-UECOMPOUND INGREDIENT BASIS OF COST DETERMINATIONSA/N221152116Submit if available-not currently utilized by Mit1135221CLIENT FORMULARY FLAGSA/N1211721172117Submit if available-not currently utilized by Mit1136397PRODUCT/SERVICE NAMESA/N3021182147Submit if available-not currently utilized by Mit1137397PRODUCT/SERVICE NAMESA/N30021482177Submit if available-not currently utilized by Mit1138261GENERIC NAMESA/N30021482177Submit if available-not currently utilized by Mit1139601-24PRODUCT STRENGTHSA/N1021782187Submit if available-not currently utilized by Mit1140423DOSAGE FORM CODESA/N121922192Submit if available-not currently utilized by Mit1141425-PDDRUG TYPESN121932193Submit if available-not currently utilized by Mit currently utilized by Mit available-not currently utilized by Mit currently utilized by Mit available-not currently utilized by Mit currently utilized by Mit currently utilized by Mit s	
1134Compound INGREDIENT BASIS OF COST DETERMINATIONSA/N221152116Currently utilized by M1135221CLIENT FORMULARY FLAGSA/N121172117Submit if available-not currently utilized by M1136221CLIENT FORMULARY FLAGSA/N121172117Submit if available-not currently utilized by M1136397PRODUCT/SERVICE NAMESA/N3021182147Submit if available-not currently utilized by M1137261GENERIC NAMESA/N3021482177Submit if available-not currently utilized by M1138601-24PRODUCT STRENGTHSA/N1021782187Submit if available-not currently utilized by M1139601-24PRODUCT STRENGTHSA/N1021782187Submit if available-not currently utilized by M1140532-FWDATABASE INDICATORSA/N121922192Submit if available-not currently utilized by M1141425-PDDRUG TYPESN121932193Submit if available-not currently utilized by M1142257FORMULARY STATUSSA/N121942194Submit if available-not currently utilized by M	
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532-FWDATABASE INDICATORSA/N121922192Submit if available-not currently utilized by Monocurrently utilized by Monocurrentl	
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1142 257 FORMULARY STATUS S A/N 1 2194 2194 Submit if available-not	JD
257 FORMULARY STATUS S A/N 1 2194 2194 Submit if available-not	
257 FORMULARY STATUS S A/N 1 2194 2194 Submit if available-not	2D
1143 currently utilized by M	
	DC
244 DRUG CATEGORY CODE S A/N 1 2195 2195 Submit if available-not	
1144 currently utilized by Mo	DC
252 FEDERAL DEA SCHEDULE S A/N 1 2196 2196 Submit if available-not	
1145 currently utilized by Mo	DC
250 FDA DRUG EFFICACY CODE S A/N 1 2197 2197 Submit if available-not	
1146 currently utilized by Mo	DC
Submit if available-not	
1147 601-19 PRODUCT CODE QUALIFIER S A/N 1 currently utilized by Mo	DC
Submit if available-not	
1148 601-18 PRODUCT CODE S A/N 17 2199 2215 currently utilized by Mo	DC
Submit if available-not	
1149 601-19 PRODUCT CODE QUALIFIER S A/N 1 2216 2216 currently utilized by Mo	DC
Submit if available not	
1150 601-18 PRODUCT CODE S A/N 17 2217 2233 currently utilized by Mo	DC
Submit if available-not	
1151 601-19 PRODUCT CODE QUALIFIER S A/N 1 2234 2234 currently utilized by Mo	D
Submit if available-not	
1152 601-18 PRODUCT CODE S A/N 17 2235 2251 currently utilized by Mo	חכ

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	251	FEDERAL UPPER LIMIT INDICATOR	S	A/N	1	2252	2252		Submit if available-not
1153									currently utilized by MQD
	601.06		s	A/N	1	2253	2253		Submit if available-not
1154	601-26	THERAPEUTIC CLASS CODE QUALIFIER	5	A/N	1	2253	2253		currently utilized by MQD
	601-25		s	A/N	17	2254	2270		Submit if available-not
1155	001-20	THERAPEUTIC CLASS CODE	5	A/IN	17	2204	2270		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	S	A/N	1	2271	2271		Submit if available-not
1156	001-20	THERAPEOTIC CLASS CODE QUALIFIER	3	AVIN	1	2271	2271		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	S	A/N	17	2272	2288		Submit if available-not
1157	001-25	THERAFEOTIC CLASS CODE	3	AVIN	17	2212	2200		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	S	A/N	1	2289	2289		Submit if available-not
1158	001-20	THERAPEUTIC CLASS CODE QUALIFIER	3	AVIN	1	2209	2209		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	S	A/N	17	2290	2306		Submit if available-not
1159	001-25	THERAPEOTIC CLASS CODE	3	AVIN	17	2290	2300		currently utilized by MQD
	601-26	THERAPEUTIC CLASS CODE QUALIFIER	s	A/N	1	2307	2307		Submit if available-not
1160	001-20	THERAPEOTIC CLASS CODE QUALIFIER	3	AVIN	1	2307	2307		currently utilized by MQD
	601-25	THERAPEUTIC CLASS CODE	S	A/N	17	2308	2324		Submit if available-not
1161	001-25	THERAPEOTIC CLASS CODE	3	AVIN	17	2300	2324		currently utilized by MQD
	429-DT	SPECIAL PACKAGING INDICATOR	S	N	1	2325	2325		Submit if available-not
1162	429-01	SPECIAL PACKAGING INDICATOR	3	IN	1	2325	2325		currently utilized by MQD
	600-28	UNIT OF MEASURE	S	A/N	2	2326	2327		Submit if available-not
1163									currently utilized by MQD
	299	PROCESSOR DEFINED PRIOR	S	N	2	2328	2329		Submit if available-not
1164		AUTHORIZATION REASON CODE							currently utilized by MQD
	272	MAC REDUCED INDICATOR	S	A/N	1	2330	2330		Submit if available-not
1165									currently utilized by MQD
	223	CLIENT PRICING BASIS OF COST	S	A/N	2	2331	2332		Submit if available-not
1166									currently utilized by MQD
	475-J9	DUR CO-AGENT ID QUALIFIER	S	A/N	2	2333	2334		Submit if available-not
1167									currently utilized by MQD
	476-H6	DUR CO-AGENT ID	S	A/N	19	2335	2353		Submit if available-not
1168									currently utilized by MQD
	260	GENERIC INDICATOR	S	A/N	1	2354	2354		Submit if available-not
1169									currently utilized by MQD
	292	PLAN CUTBACK REASON CODE	S	A/N	1	2355	2355		Submit if available-not
1170									currently utilized by MQD
	889	THERAPEUTIC CHAPTER	S	A/N	8	2356	2363		Submit if available-not
1171									currently utilized by MQD

	А	В	С	D	E	F	G	Н	I
1	Field	Field Name	M/S	Format	Size	Start	End	Values	MQD USAGE
	209	AVERAGE COST PER QUANTITY UNIT	S	D	9	2364	2372		Submit if available-not
1172		PRICE							currently utilized by MQD
	210	AVERAGE GENERIC UNIT PRICE	S	D	9	2373	2381		Submit if available-not
1173									currently utilized by MQD
	211	AVERAGE WHOLESALE UNIT PRICE	S	D	9	2382	2390		Submit if available-not
1174									currently utilized by MQD
	253	FEDERAL UPPER LIMIT UNIT PRICE	S	D	9	2391	2399		Submit if available-not
1175									currently utilized by MQD
	271	MACPRICE	S	D	9	2400	2408		Submit if available-not
1176									currently utilized by MQD
	522-FM	BASIS OF REIMBURSEMENT	S	N	2	2409	2410		Submit if available-not
1177		DETERMINATION							currently utilized by MQD
	285	PATIENT FORMULARY REBATE AMOUNT	S	D	8	2411	2418		Submit if available-not
1178									currently utilized by MQD
1179		FILLER	М	A/N	1282	2419	3700	Spaces	
	8.3	POST ADJUDICATION HISTORY							
1180		TRAILER RECORD							
	601-04	RECORD TYPE	М	A/N	2	1	2	PT - Post Adjudication History	
1181								Trailer Record	
	601-09	TOTAL RECORD COUNT	М	Ν	10	3	12	Total number of records being	
								submitted, including header	
1182								and trailer	
	895	TOTAL NET AMOUNT DUE	М	D	12	13	24	Summarization of Net Amount	
1183					10			Due (281)	
4404	693	TOTAL GROSS AMOUNT DUE	М	D	12	25	36	Total sum of the gross amount	MQD requires this field per this
1184								due fields on the claim level.	TP agreement
	694	TOTAL PATIENT PAY AMOUNT	М	D	12	37	48	Total sum of the patient pay	
110-								amount fields on the claim	
1185								level.	
1186		FILLER	М	A/N	3652	49	3700	Spaces	