

FAQ for Transaction Facilitator Covid-19 Vaccine (COVAX) claims

Q1. Does a Medicare plan (MA, MA-PD, PDP, PACE, etc) have to accept COVAX “B” transactions from the Transaction Facilitator?

- A. No, the plan can choose to use ABII COVAX reports exclusively; however, the data in those reports can be up to 10 days old and may affect the plan’s ability to coordinate care to their enrollees.

Q2. What will distinguish the COVAX “B” transaction from the Transaction Facilitator from one from a pharmacy?

- A. The 11Ø-AK Software Vendor/Certification ID=PDTCOVAX

Q3. What will the COVAX transaction look like from the transaction facilitator?

- A. See below

TRANSACTION HEADER SEGMENT

1Ø1-A1 BIN Number

1Ø2-A2 Version Release Number

1Ø3-A3 Transaction Code

1Ø4-A4 Processor Control Number

1Ø9-A9 Transaction Count

2Ø2-B2 Service Provider ID Qualifier

2Ø1-B1 Service Provider ID

4Ø1-D1 Date of Service

11Ø-AK Software Vendor/Certification ID=PDTCOVAX

INSURANCE SEGMENT

111-AM Segment Identification

3Ø2-C2 Cardholder ID

312-CC Cardholder First

313-CD Cardholder Last

3Ø1-C1 Group ID

3Ø3-C3 Person Code

3Ø6-C6 Patient Relationship Code

PATIENT SEGMENT

111-AM Segment Identification

304-C4 Date of Birth
305-C5 Patient Gender Code
310-CA Patient First Name
311-CB Patient Last Name
322-CM Patient Street Address
323-CN Patient City Address
324-CO Patient State/Province Address
325-CP Patient Zip/Postal Code
307-C7 Place of Service
384-4X Patient Residence = 0

PRICING SEGMENT

111-AM Segment Identification=11
409-D9 Ingredient Cost Submitted=0
412-DC Dispensing Fee Submitted =0
426-DQ Usual and Customary Charge=0
430-DU Gross Amount Due =0
423-DN Basis of Cost Determination=15

CLAIM SEGMENT

111-AM Segment Identification
455-EM Prescription/Service Reference Number Qualifier=1
402-D2 Prescription/Service Reference Number
436-E1 Product/Service ID Qualifier
407-D7 Product/Service ID
442-E7 Quantity Dispensed
403-D3 Fill Number=0
405-D5 Days Supply=1
406-D6 Compound Code=1
408-D8 Dispense as Written/Product Selection Code =0
414-DE Date Prescription Written
419-DJ Prescription Origin Code=0
147-U7 Pharmacy Service Type=99
354-NX Submission Clarification Code Count
420-DK Submission Clarification Code (if 2, 6 or blank)

PRESCRIBER SEGMENT

111-AM Segment Identification
466-EZ Prescriber ID Qualifier
411-DB Prescriber ID
427-DR Prescriber last name

Color keys:

What is sent on original claim will be passed on
Will always be sent by TF regardless of what is on the original claim
If not sent or blank, it will be included with value specified
Data is derived from CMS eligibility data (4Rx)

Q4. Will the transaction facilitator retry COVAX “B” transactions if they are rejected?

- A. The transaction facilitator will retry if a 90 series reject is returned or if an eligibility reject is returned. Due to potential data transmission and/or file processing delays between CMS and plans, it is possible that the TF has data on file that is not yet available to the plan and therefore will continue to replay the transaction up to 5 days to allow time for eligibility to catch up.

Q5. How should a payer/processor respond to the Transaction Facilitator COVAX “B” transactions?

- A. There are multiple methods that would be acceptable and may include, but are not limited to:
 - a. Returning a rejected response for Drug not covered or eligibility related rejects
 - b. Returning a captured response
 - c. Returning a paid response
 - d. Returning a combination of a rejected response for eligibility related rejects and a different response (P,C) for the rest

Plans should assess the impact of their options with regard to current Part D processing, as these drugs are not a Part D Drug.

Q6. For those Medicare plans that reject the COVAX “B” transactions, will CMS clarify that these transactions are exempt from auditing and should not be reported when an auditor requests rejected transactions?

- A. CMS will work to provide additional guidance regarding this question in the future.

Q7. Will FFS Medicare continue to pay for COVID vaccines beyond 2021?

- A. CMS previously indicated that FFS would only pay for COVID vaccines through 2021; NCPDP is unaware of any decisions beyond that date.

Q8. Are the changes listed above retroactive once the plan opts in?

- A. No, the plan will only receive transactions from the opt-in point forward. Transactions received prior to the opt-in date will not be sent as a B Transaction.