

**NCPDP Central Pay Reporting on the X12/005010X221A1 Health  
Care Claim Payment/Advice (835)**

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**NCPDP Central Pay Reporting on the X12/005010X221A1 Health Care Claim  
Payment/Advice (835)**

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## **1. DISCLAIMER**

This reference guide must be used in conjunction with the *X12/005010X221A1 Health Care Claim Payment/Advice (835)*. This document does not supersede 005010X221A1. There may be other fields that must be populated that are not noted in this reference guide. This guidance only addresses claims submitted through NCPDP transactions or paper claim forms.

The X12 Technical Report 3 documents (TR3) are available at <http://x12.org/products>.

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## **2. PURPOSE OF THIS DOCUMENT**

Payers may use this guidance to convey a consistent solution for recovering overpayments from a central pay Pharmacy Service Administration Organization (PSAO) and/or financial intermediary via the *X12/005010X221A1 Health Care Claim Payment/Advice (835)*. The document should not be used as a standard form to be filled in by payers to provide information that is important to pharmacy providers, pharmacy reconciliation vendors and other implementation units.

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### 3. 005010X221A1 CENTRAL PAY EXAMPLES

The examples include the following two possible business models:

- [Business Model A: Common Central Pay](#)
  - [With No Transactions in Cycle 2](#)
  - [With Transactions but Monies Owed in Cycle 2](#)
  - [With Transactions to Clear Monies Owed in Cycle 2](#)
- [Business Model B: Pharmacy Joins or Changes PSAO](#)
  - [With No Transaction in Cycle 2](#)
  - [With Transactions to Clear Monies Owed in Cycle 2](#)

**Legend:**

005010X221A1 Field	Values/Comments
CLP02 – Claim Status Code <sup>1</sup>	1 = Processed as Primary 22 = Reversal of previous payment
CLP06 – Claim Filing Indicator Code <sup>2</sup>	13 = Point of service
PLB03-1 – Adjustment Reason Code <sup>3</sup>	AH – Origination Fee CS – Adjustment

The following rules apply to the provider Adjustment Identifier (PLB03-2) to the business models below:

- TB – Starting adjustment – used only on initial reporting of provider to the consolidated entity with no additional identifier used.
- BB – Beginning adjustment – Use previous check or EFT number (TRN02) value as part of this identifier.
- EB – Ending adjustment – Use current check or EFT number (TRN02) value of part of this identifier.

#### 3.1 BUSINESS MODEL A: COMMON CENTRAL PAY

The PSAO central pay expects a check for the three pharmacies' transactions and one of the pharmacies owes the payer money. There is a second cycle with each example.

**Assumptions:**

- There will always be a positive check amount for all pharmacies combined in a central pay transaction group.
- All pharmacies remain in the PSAO.

##### 3.1.1 BUSINESS MODEL A: WITH NO TRANSACTIONS (IN CYCLE 2)

<sup>1</sup> Accredited Standards Committee X12, Insurance Subcommittee, X12N. "Claim Status Code" Health Care Claim Payment/Advice (835) 005010X221A1 page 124. Washington Publishing Company, Apr. 2006. <<http://www.wpc-edi.com>>.

<sup>2</sup> Accredited Standards Committee X12, Insurance Subcommittee, X12N. "Claim Filing Indicator Code" Health Care Claim Payment/Advice (835) 005010X221A1 pages 126-127. Washington Publishing Company, Apr. 2006. <<http://www.wpc-edi.com>>.

<sup>3</sup> Accredited Standards Committee X12, Insurance Subcommittee, X12N. "Adjustment Reason Code" Health Care Claim Payment/Advice (835) 005010X221A1 page 219. Washington Publishing Company, Apr. 2006. <<http://www.wpc-edi.com>>.

**3.1.1.1 CYCLE 1**

In the Cycle 1 example<sup>4</sup>, a check is expected in the amount of \$249.80 for the three pharmacies' transactions. The PSAO central pay expects to pay Pharmacy A \$239.85 and pay Pharmacy C \$9.95. Pharmacy B owes \$45.15.

Loop	Element Name	Cycle 1 (Payment)	
	Total Actual Provider Payment Amount	BPR02:	249.80
	Check or EFT Trace Number	TRN02:	TRN123
<b>2000</b>	Provider Identifier	TS301:	PharmacyA
	Claim Count	TS304:	5
	Total Claim Charge Amount	TS305:	240
<b>2100</b>	Claim Submitter's Identifier	CLP01:	123456
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	40
	Claim Payment Amount	CLP04:	40
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123457
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	35
	Claim Payment Amount	CLP04:	35
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123457
	Claim Status Code	CLP02:	22
	Total Claim Charge Amount	CLP03:	-35
	Claim Payment Amount	CLP04:	-35
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123458
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	100
	Claim Payment Amount	CLP04:	100
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123459
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	100
	Claim Payment Amount	CLP04:	100
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13

<sup>4</sup> Accredited Standards Committee X12, Insurance Subcommittee, X12N. "10.1.2 Data Use by Business Use" Health Care Claim Payment/Advice (835) 005010X221A1. Washington Publishing Company, Apr. 2006. <<http://www.wpc-edi.com>>.

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Loop	Element Name	Cycle 1 (Payment)	
<b>2000</b>	Provider Identifier	TS301:	PharmacyB
	Claim Count	TS304:	3
	Total Claim Charge Amount	TS305:	-45
<b>2100</b>	Claim Submitter's Identifier	CLP01:	612345
	Claim Status Code	CLP02:	22
	Total Claim Charge Amount	CLP03:	-45
	Claim Payment Amount	CLP04:	-45
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	612346
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	25
	Claim Payment Amount	CLP04:	25
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	612346
	Claim Status Code	CLP02:	22
	Total Claim Charge Amount	CLP03:	-25
	Claim Payment Amount	CLP04:	-25
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>2000</b>	Provider Identifier	TS301:	PharmacyC
	Claim Count	TS304:	1
	Total Claim Charge Amount	TS305:	10
<b>2100</b>	Claim Submitter's Identifier	CLP01:	711112
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	10
	Claim Payment Amount	CLP04:	10
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>Summary</b>	Provider Identifier	PLB01:	PharmacyB
	Adjustment Reason Code	PLB03-1:	CS
	Provider Adjustment Identifier	PLB03-2:	EBTRN123
	Provider Adjustment Amount	PLB04:	-45.15
	Provider Identifier	PLB01:	PharmacyA
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.15
	Provider Identifier	PLB01:	PharmacyB
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.15
	Provider Identifier	PLB01:	PharmacyC

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Loop	Element Name	Cycle 1 (Payment)	
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.05

**3.1.1.2 CYCLE 2**

In the Cycle 2 example<sup>5</sup>, a check is expected in the amount of \$129.80 for the three pharmacies' transactions. The PSAO central pay expects to pay Pharmacy A \$109.85 and pay Pharmacy C \$19.95. Pharmacy B owes \$45.15.

Loop	Element Name	Cycle 2 (Payment)	
	Total Actual Provider Payment Amount	BPR02:	129.80
	Check or EFT Trace Number	TRN02:	TRN124
<b>2000</b>	Provider Identifier	TS301:	PharmacyA
	Claim Count	TS304:	3
	Total Claim Charge Amount	TS305:	110
<b>2100</b>	Claim Submitter's Identifier	CLP01:	123460
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	10
	Claim Payment Amount	CLP04:	10
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123463
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	50
	Claim Payment Amount	CLP04:	50
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123464
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	50
	Claim Payment Amount	CLP04:	50
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>2000</b>	Provider Identifier	TS301:	PharmacyC
	Claim Count	TS304:	1
	Total Claim Charge Amount	TS305:	20
<b>2100</b>	Claim Submitter's Identifier	CLP01:	711133
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	20
	Claim Payment Amount	CLP04:	20
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13

<sup>5</sup> Accredited Standards Committee X12, Insurance Subcommittee, X12N. "10.1.2 Data Use by Business Use" Health Care Claim Payment/Advice (835) 005010X221A1. Washington Publishing Company, Apr. 2006. <<http://www.wpc-edi.com>>.

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Loop	Element Name	Cycle 2 (Payment)	
<b>Summary</b>	Provider Identifier	PLB01:	PharmacyB
	Adjustment Reason Code	PLB03-1:	CS
	Provider Adjustment Identifier	PLB03-2:	BBTRN123
	Provider Adjustment Amount	PLB04:	45.15
	Adjustment Reason Code	PLB05-1:	CS
	Provider Adjustment Identifier	PLB05-2:	EBTRN124
	Provider Adjustment Amount	PB06:	-45.15
	Provider Identifier	PLB01:	PharmacyA
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.15
	Provider Identifier	PLB01:	PharmacyC
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.05

**3.1.2 BUSINESS MODEL A: WITH TRANSACTIONS BUT MONIES STILL OWED**  
**3.1.2.1 CYCLE 1**

In the Cycle 1 example<sup>6</sup>, a check is expected in the amount of \$249.80 for the three pharmacies' transactions. The PSAO central pay expects to pay Pharmacy A \$239.85 and pay Pharmacy C \$9.95. Pharmacy B owes \$45.15.

Loop	Element Name	Cycle 1 (Payment)	
	Total Actual Provider Payment Amount	BPR02:	249.80
	Check or EFT Trace Number	TRN02:	TRN123
<b>2000</b>	Provider Identifier	TS301:	PharmacyA
	Claim Count	TS304:	5
	Total Claim Charge Amount	TS305:	240
<b>2100</b>	Claim Submitter's Identifier	CLP01:	123456
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	40
	Claim Payment Amount	CLP04:	40
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123457
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	35
	Claim Payment Amount	CLP04:	35
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123457

<sup>6</sup> Accredited Standards Committee X12, Insurance Subcommittee, X12N. "10.1.2 Data Use by Business Use" Health Care Claim Payment/Advice (835) 005010X221A1. Washington Publishing Company, Apr. 2006. <<http://www.wpc-edi.com>>.

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Loop	Element Name	Cycle 1 (Payment)	
		Code	Value
	Claim Status Code	CLP02:	22
	Total Claim Charge Amount	CLP03:	-35
	Claim Payment Amount	CLP04:	-35
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123458
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	100
	Claim Payment Amount	CLP04:	100
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123459
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	100
	Claim Payment Amount	CLP04:	100
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>2000</b>	Provider Identifier	TS301:	PharmacyB
	Claim Count	TS304:	3
	Total Claim Charge Amount	TS305:	-45
<b>2100</b>	Claim Submitter's Identifier	CLP01:	612345
	Claim Status Code	CLP02:	22
	Total Claim Charge Amount	CLP03:	-45
	Claim Payment Amount	CLP04:	-45
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	612346
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	25
	Claim Payment Amount	CLP04:	25
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	612346
	Claim Status Code	CLP02:	22
	Total Claim Charge Amount	CLP03:	-25
	Claim Payment Amount	CLP04:	-25
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>2000</b>	Provider Identifier	TS301:	PharmacyC
	Claim Count	TS304:	1
	Total Claim Charge Amount	TS305:	10
<b>2100</b>	Claim Submitter's Identifier	CLP01:	711112
	Claim Status Code	CLP02:	1

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Loop	Element Name	Cycle 1 (Payment)	
	Total Claim Charge Amount	CLP03:	10
	Claim Payment Amount	CLP04:	10
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>Summary</b>	Provider Identifier	PLB01:	PharmacyB
	Adjustment Reason Code	PLB03-1:	CS
	Provider Adjustment Identifier	PLB03-2:	EBTRN123
	Provider Adjustment Amount	PLB04:	-45.15
	Provider Identifier	PLB01:	PharmacyA
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.15
	Provider Identifier	PLB01:	PharmacyB
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.15
	Provider Identifier	PLB01:	PharmacyC
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.05

**3.1.2.2 CYCLE 2**

In the Cycle 2 example<sup>7</sup>, a check is expected in the amount of \$129.80 for the three pharmacies' transactions. The PSAO central pay expects to pay Pharmacy A \$109.85 and pay Pharmacy C \$19.95. Pharmacy B owes \$25.20.

Loop	Element Name	Cycle 2 (Payment)	
	Total Actual Provider Payment Amount	BPR02:	129.80
	Check or EFT Trace Number	TRN02:	TRN124
<b>2000</b>	Provider Identifier	TS301:	PharmacyA
	Claim Count	TS304:	3
	Total Claim Charge Amount	TS304:	110
<b>210</b>	Claim Submitter's Identifier	CLP01:	123460
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	10
	Claim Payment Amount	CLP04:	10
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123463
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	50

<sup>7</sup> Accredited Standards Committee X12, Insurance Subcommittee, X12N. "10.1.2 Data Use by Business Use" Health Care Claim Payment/Advice (835) 005010X221A1. Washington Publishing Company, Apr. 2006. <<http://www.wpc-edi.com>>.

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Loop	Element Name	Cycle 2 (Payment)	
	Claim Payment Amount	CLP04:	50
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123464
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	50
	Claim Payment Amount	CLP04:	50
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>2000</b>	Provider Identifier	TS301:	PharmacyB
	Claim Count	TS304:	1
	Total Claim Charge Amount	TS305:	20
<b>2100</b>	Claim Submitter's Identifier	CLP01:	612377
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	20
	Claim Payment Amount	CLP04:	20
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>2000</b>	Provider Identifier	TS301:	PharmacyC
	Claim Count	TS304:	1
	Total Claim Charge Amount	TS305:	20
<b>2100</b>	Claim Submitter's Identifier	CLP01:	711133
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	20
	Claim Payment Amount	CLP04:	20
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>Summary</b>	Provider Identifier	PLB01:	PharmacyB
	Adjustment Reason Code	PLB03-1:	CS
	Provider Adjustment Identifier	PLB03-2:	BBTRN123
	Provider Adjustment Amount	PLB04:	45.15
	Adjustment Reason Code	PLB05-1	CS
	Provider Adjustment Identifier	PLB05-2	EBTRN124
	Provider Adjustment Amount	PB06	-25.20
	Provider Identifier	PLB01:	PharmacyA
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.15
	Provider Identifier	PLB01:	PharmacyB
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.05
	Provider Identifier	PLB01:	PharmacyC

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Loop	Element Name	Cycle 2 (Payment)	
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.05

**3.1.3 BUSINESS MODEL A: WITH TRANSACTIONS TO CLEAR MONIES OWED**

**3.1.3.1 CYCLE 1**

In the Cycle 1 example<sup>8</sup>, a check is expected in the amount of \$249.80 for the three pharmacies' transactions. The PSAO central pay expects to pay Pharmacy A \$239.85 and pay Pharmacy C \$9.95. Pharmacy B owes \$45.20.

Loop	Element Name	Cycle 1 (Payment)	
	Total Actual Provider Payment Amount	BPR02:	249.80
	Check or EFT Trace Number	TRN02:	TRN123
<b>2000</b>	Provider Identifier	TS301:	PharmacyA
	Claim Count	TS304:	5
	Total Claim Charge Amount	TS305:	240
<b>2100</b>	Claim Submitter's Identifier	CLP01:	123456
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	40
	Claim Payment Amount	CLP04:	40
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123457
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	35
	Claim Payment Amount	CLP04:	35
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123457
	Claim Status Code	CLP02:	22
	Total Claim Charge Amount	CLP03:	-35
	Claim Payment Amount	CLP04:	-35
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123458
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	100
	Claim Payment Amount	CLP04:	100
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123459

<sup>8</sup> Accredited Standards Committee X12, Insurance Subcommittee, X12N. "10.1.2 Data Use by Business Use" Health Care Claim Payment/Advice (835) 005010X221A1. Washington Publishing Company, Apr. 2006. <<http://www.wpc-edi.com>>.

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Loop	Element Name	Cycle 1 (Payment)	
		Code	Value
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	100
	Claim Payment Amount	CLP04:	100
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>2000</b>	Provider Identifier	TS301:	PharmacyB
	Claim Count	TS304:	3
	Total Claim Charge Amount	TS305:	-45
<b>2100</b>	Claim Submitter's Identifier	CLP01:	612345
	Claim Status Code	CLP02:	22
	Total Claim Charge Amount	CLP03:	-45
	Claim Payment Amount	CLP04:	-45
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	612346
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	25
	Claim Payment Amount	CLP04:	25
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	612346
	Claim Status Code	CLP02:	22
	Total Claim Charge Amount	CLP013:	-25
	Claim Payment Amount	CLP04:	-25
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>2000</b>	Provider Identifier	TS301:	PharmacyC
	Claim Count	TS304:	1
	Total Claim Charge Amount	TS305:	10
<b>2100</b>	Claim Submitter's Identifier	CLP01:	711112
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	10
	Claim Payment Amount	CLP04:	10
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>Summary</b>	Provider Identifier	PLB01:	PharmacyB
	Adjustment Reason Code	PLB03-1:	CS
	Provider Adjustment Identifier	PLB03-2:	EBTRN123
	Provider Adjustment Amount	PLB04:	-45.15
	Provider Identifier	PLB01:	PharmacyA
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.15

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Loop	Element Name	Cycle 1 (Payment)	
	Provider Identifier	PLB01:	PharmacyB
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.15
	Provider Identifier	PLB01:	PharmacyC
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.05

**3.1.3.2 CYCLE 2**

In the Cycle 2 example<sup>9</sup>, a check is expected in the amount of \$184.60 for the three pharmacies' transactions. The PSAO central pay expects to pay Pharmacy A \$109.85, pay Pharmacy B \$54.80 and pay Pharmacy C \$19.95.

Loop	Element Name	Cycle 2 (Payment)	
	Total Actual Provider Payment Amount	BPR02:	184.60
	Check or EFT Trace Number	TRN02:	TRN124
<b>2000</b>	Provider Identifier	TS301:	PharmacyA
	Claim Count	TS304:	3
	Total Claim Charge Amount	TS305:	110
<b>2100</b>	Claim Submitter's Identifier	CLP01:	123460
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	10
	Claim Payment Amount	CLP04:	10
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123463
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	50
	Claim Payment Amount	CLP04:	50
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123464
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	50
	Claim Payment Amount	CLP04:	50
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>2000</b>	Provider Identifier	TS301:	PharmacyB
	Claim Count	TS304:	1
	Total Claim Charge Amount	TS305:	100

<sup>9</sup> Accredited Standards Committee X12, Insurance Subcommittee, X12N. "10.1.2 Data Use by Business Use" Health Care Claim Payment/Advice (835) 005010X221A1. Washington Publishing Company, Apr. 2006. <<http://www.wpc-edi.com>>.

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Loop	Element Name	Cycle 2 (Payment)	
2100	Claim Submitter's Identifier	CLP01:	612377
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	100
	Claim Payment Amount	CLP04:	100
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
2000	Provider Identifier	TS301:	PharmacyC
	Claim Count	TS304:	1
	Total Claim Charge Amount	TS305:	20
2100	Claim Submitter's Identifier	CLP01:	711133
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	20
	Claim Payment Amount	CLP04:	20
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
Summary	Provider Identifier	PLB01:	PharmacyB
	Adjustment Reason Code	PLB03-1:	CS
	Provider Adjustment Identifier	PLB03-2:	BBTRN123
	Provider Adjustment Amount	PLB04:	45.15
	Provider Identifier	PLB01:	PharmacyA
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.15
	Provider Identifier	PLB01:	PharmacyB
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.05
	Provider Identifier	PLB01:	PharmacyC
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
Provider Adjustment Amount	PLB04:	0.05	

### 3.2 BUSINESS MODEL B: PHARMACY JOINS OR CHANGES PSAO CENTRAL PAY

The PSAO central pay expects a check for pharmacies' transactions and one of the pharmacies is new to the PSAO central pay and has an existing adjustment of \$100.00. There is a second cycle with each example.

Assumptions:

- There will always be a positive check amount for all pharmacies combined in a central pay transaction group.
- No details are available from payer for the previous adjustment for the new pharmacy.

#### 3.2.1 BUSINESS MODEL B: WITH NO TRANSACTIONS (IN CYCLE 2)

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**3.2.1.1 CYCLE 1**

In the Cycle 1 example<sup>10</sup>, a check is expected in the amount of \$249.80 for the three pharmacies' transactions. The PSAO central pay expects to pay Pharmacy A \$239.85 and pay Pharmacy C \$9.95. Pharmacy B owes \$45.15.

Loop	Element Name	Cycle 1 (Payment)	
	Total Actual Provider Payment Amount	BPR02:	249.80
	Check or EFT Trace Number	TRN02:	TRN123
<b>2000</b>	Provider Identifier	TS301:	PharmacyA
	Claim Count	TS304:	5
	Total Claim Charge Amount	TS305:	240
<b>2100</b>	Claim Submitter's Identifier	CLP01:	123456
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	40
	Claim Payment Amount	CLP04:	40
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123457
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	35
	Claim Payment Amount	CLP04:	35
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123457
	Claim Status Code	CLP02:	22
	Total Claim Charge Amount	CLP03:	-35
	Claim Payment Amount	CLP04:	-35
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123458
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	100
	Claim Payment Amount	CLP04:	100
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123459
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	100
	Claim Payment Amount	CLP04:	100
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13

<sup>10</sup> Accredited Standards Committee X12, Insurance Subcommittee, X12N. "10.1.2 Data Use by Business Use" Health Care Claim Payment/Advice (835) 005010X221A1. Washington Publishing Company, Apr. 2006. <<http://www.wpc-edi.com>>.

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Loop	Element Name	Cycle 1 (Payment)	
<b>2000</b>	Provider Identifier	TS301:	PharmacyB
	Claim Count	TS304:	3
	Total Claim Charge Amount	TS305:	-45
<b>2100</b>	Claim Submitter's Identifier	CLP01:	612345
	Claim Status Code	CLP02:	22
	Total Claim Charge Amount	CLP03:	-45
	Claim Payment Amount	CLP04:	-45
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	612346
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	25
	Claim Payment Amount	CLP04:	25
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
Claim Submitter's Identifier	CLP01:	612346	
Claim Status Code	CLP02:	22	
Total Claim Charge Amount	CLP03:	-25	
Claim Payment Amount	CLP04:	-25	
Patient Responsibility Amount	CLP05:	0	
Claim Filing Indicator Code	CLP06:	13	
<b>2000</b>	Provider Identifier	TS301:	PharmacyC
	Claim Count	TS304:	1
	Total Claim Charge Amount	TS305:	10
<b>2100</b>	Claim Submitter's Identifier	CLP01:	711112
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	10
	Claim Payment Amount	CLP04:	10
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>Summary</b>	Provider Identifier	PLB01:	PharmacyB
	Adjustment Reason Code	PLB03-1:	CS
	Provider Adjustment Identifier	PLB03-2:	EBTRN123
	Provider Adjustment Amount	PLB04:	-45.15
	Provider Identifier	PLB01:	PharmacyD
	Adjustment Reason Code	PLB03-1:	CS
	Provider Adjustment Identifier	PLB03-2:	EBTRN123
	Provider Adjustment Amount	PLB04:	-100
	Provider Identifier	PLB01:	PharmacyA
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.15
	Provider Identifier	PLB01:	PharmacyB

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Loop	Element Name	Cycle 1 (Payment)	
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.15
	Provider Identifier	PLB01:	PharmacyC
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.05

**3.2.1.2 CYCLE 2**

In the Cycle 2 example<sup>11</sup>, a check is expected in the amount of \$129.80 for the four pharmacies' transactions. The PSAO central pay expects to pay Pharmacy A \$109.85 and pay Pharmacy C \$19.95. Pharmacy B owes \$45.15 and Pharmacy D has a transfer adjustment of \$100.00.

Loop	Element Name	Cycle 2 (Payment)	
	Total Actual Provider Payment Amount	BPR02:	129.80
	Check or EFT Trace Number	TRN02:	TRN124
<b>2000</b>	Provider Identifier	TS301:	PharmacyA
	Claim Count	TS304:	3
	Total Claim Charge Amount	TS305:	110
<b>2100</b>	Claim Submitter's Identifier	CLP01:	123460
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	10
	Claim Payment Amount	CLP04:	10
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123463
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	50
	Claim Payment Amount	CLP04:	50
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123464
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	50
	Claim Payment Amount	CLP04:	50
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>2000</b>	Provider Identifier	TS301:	PharmacyC
	Claim Count	TS304:	1
	Total Claim Charge Amount	TS305:	20
<b>2100</b>	Claim Submitter's Identifier	CLP01:	711133
	Claim Status Code	CLP02:	1

<sup>11</sup> Accredited Standards Committee X12, Insurance Subcommittee, X12N. "10.1.2 Data Use by Business Use" Health Care Claim Payment/Advice (835) 005010X221A1. Washington Publishing Company, Apr. 2006. <<http://www.wpc-edi.com>>.

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Loop	Element Name	Cycle 2 (Payment)	
	Total Claim Charge Amount	CLP03:	20
	Claim Payment Amount	CLP04:	20
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>Summary</b>	Provider Identifier	PLB01:	PharmacyB
	Adjustment Reason Code	PLB03-1:	CS
	Provider Adjustment Identifier	PLB03-2:	BBTRN123
	Provider Adjustment Amount	PLB04:	45.15
	Adjustment Reason Code	PLB05-1	CS
	Provider Adjustment Identifier	PLB05-2	EBTRN124
	Provider Adjustment Amount	PB06	-45.15
	Provider Identifier	PLB01:	PharmacyD
	Adjustment Reason Code	PLB03-1:	CS
	Provider Adjustment Identifier	PLB03-2:	BBTRN123
	Provider Adjustment Amount	PLB04:	100
	Adjustment Reason Code	PLB05-1	CS
	Provider Adjustment Identifier	PLB05-2	EBTRN124
	Provider Adjustment Amount	PB06	-100
	Provider Identifier	PLB01:	PharmacyA
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.15
	Provider Identifier	PLB01:	PharmacyC
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.05

### 3.2.2 BUSINESS MODEL B: WITH TRANSACTIONS

#### 3.2.2.1 CYCLE 1

In the Cycle 1 example<sup>12</sup>, a check is expected in the amount of \$249.80 for the four pharmacies' transactions. The PSAO central pay expects to pay Pharmacy A \$239.85 and pay Pharmacy C \$9.95. Pharmacy B owes \$45.15 and Pharmacy D has a transfer adjustment if \$100.00.

Loop	Element Name	Cycle 1 (Payment)	
	Total Actual Provider Payment Amount	BPR02:	249.80
	Check or EFT Trace Number	TRN02:	TRN123
<b>2000</b>	Provider Identifier	TS301:	PharmacyA
	Claim Count	TS304:	5
	Total Claim Charge Amount	TS305:	240
<b>2100</b>	Claim Submitter's Identifier	CLP01:	123456
	Claim Status Code	CLP02:	1

<sup>12</sup> Accredited Standards Committee X12, Insurance Subcommittee, X12N. "10.1.2 Data Use by Business Use" Health Care Claim Payment/Advice (835) 005010X221A1. Washington Publishing Company, Apr. 2006. <<http://www.wpc-edi.com>>.

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Loop	Element Name	Cycle 1 (Payment)	
	Total Claim Charge Amount	CLP03:	40
	Claim Payment Amount	CLP04:	40
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123457
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	35
	Claim Payment Amount	CLP04:	35
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123457
	Claim Status Code	CLP02:	22
	Total Claim Charge Amount	CLP03:	-35
	Claim Payment Amount	CLP04:	-35
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123458
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	100
	Claim Payment Amount	CLP04:	100
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123459
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	100
	Claim Payment Amount	CLP04:	100
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>2000</b>	Provider Identifier	TS301:	PharmacyB
	Claim Count	TS304:	3
	Total Claim Charge Amount	TS305:	-45
<b>2100</b>	Claim Submitter's Identifier	CLP01:	612345
	Claim Status Code	CLP02:	22
	Total Claim Charge Amount	CLP03:	-45
	Claim Payment Amount	CLP04:	-45
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	612346
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	25
	Claim Payment Amount	CLP04:	25
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13

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Loop	Element Name	Cycle 1 (Payment)	
	Claim Submitter's Identifier	CLP01:	612346
	Claim Status Code	CLP02:	22
	Total Claim Charge Amount	CLP03:	-25
	Claim Payment Amount	CLP04:	-25
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>2000</b>	Provider Identifier	TS301:	PharmacyC
	Claim Count	TS304:	1
	Total Claim Charge Amount	TS305:	10
<b>2100</b>	Claim Submitter's Identifier	CLP01:	711112
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	10
	Claim Payment Amount	CLP04:	10
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>Summary</b>	Provider Identifier	PLB01:	PharmacyB
	Adjustment Reason Code	PLB03-1:	CS
	Provider Adjustment Identifier	PLB03-2:	EBTRN123
	Provider Adjustment Amount	PLB04:	-45.15
	Provider Identifier	PLB01:	PharmacyD
	Adjustment Reason Code	PLB03-1:	CS
	Provider Adjustment Identifier	PLB03-2:	EBTRN123
	Provider Adjustment Amount	PLB04:	-100
	Provider Identifier	PLB01:	PharmacyA
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.15
	Provider Identifier	PLB01:	PharmacyB
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.15
	Provider Identifier	PLB01:	PharmacyC
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.05

**3.2.2.1 CYCLE 2**

In the Cycle 2 example<sup>13</sup>, a check is expected in the amount of \$204.45 for the four pharmacies' transactions. The PSAO central pay expects to pay Pharmacy A \$109.85, pay Pharmacy B \$54.80, pay Pharmacy C \$19.95 and pay Pharmacy D \$19.85.

<sup>13</sup> Accredited Standards Committee X12, Insurance Subcommittee, X12N. "10.1.2 Data Use by Business Use" Health Care Claim Payment/Advice (835) 005010X221A1. Washington Publishing Company, Apr. 2006. <<http://www.wpc-edi.com>>.

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Loop	Element Name	Cycle 2 (Payment)	
	Total Actual Provider Payment Amount	BPR02:	204.45
	Check or EFT Trace Number	TRN02:	TRN124
<b>2000</b>	Provider Identifier	TS301:	PharmacyA
	Claim Count	TS304:	3
	Total Claim Charge Amount	TS305:	110
<b>2100</b>	Claim Submitter's Identifier	CLP01:	123460
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	10
	Claim Payment Amount	CLP04:	10
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123463
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	50
	Claim Payment Amount	CLP04:	50
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
	Claim Submitter's Identifier	CLP01:	123464
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	50
	Claim Payment Amount	CLP04:	50
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>2000</b>	Provider Identifier	TS301:	PharmacyB
	Claim Count	TS304:	1
	Total Claim Charge Amount	TS305:	100
<b>2100</b>	Claim Submitter's Identifier	CLP01:	612377
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	100
	Claim Payment Amount	CLP04:	100
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>2000</b>	Provider Identifier	TS301:	PharmacyC
	Claim Count	TS304:	1
	Total Claim Charge Amount	TS305:	20
<b>2100</b>	Claim Submitter's Identifier	CLP01:	711133
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	20
	Claim Payment Amount	CLP04:	20
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>2000</b>	Provider Identifier	TS301:	PharmacyD
	Claim Count	TS304:	3

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NCPDP Central Pay Reporting on the X12/005010X221A1 Health Care Claim Payment/Advice (835)

Loop	Element Name	Cycle 2 (Payment)	
	Total Claim Charge Amount	TS305:	120
<b>2100</b>	Claim Submitter's Identifier	CLP01:	453456
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	50
	Claim Payment Amount	CLP04:	50
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>2100</b>	Claim Submitter's Identifier	CLP01:	453457
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	20
	Claim Payment Amount	CLP04:	20
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>21000</b>	Claim Submitter's Identifier	CLP01:	453480
	Claim Status Code	CLP02:	1
	Total Claim Charge Amount	CLP03:	50
	Claim Payment Amount	CLP04:	50
	Patient Responsibility Amount	CLP05:	0
	Claim Filing Indicator Code	CLP06:	13
<b>Summary</b>	Provider Identifier	PLB01:	PharmacyB
	Adjustment Reason Code	PLB03-1:	CS
	Provider Adjustment Identifier	PLB03-2:	BBTRN123
	Provider Adjustment Amount	PLB04:	45.15
	Provider Identifier	PLB01:	PharmacyD
	Adjustment Reason Code	PLB03-1:	CS
	Provider Adjustment Identifier	PLB03-2:	BBTRN123
	Provider Adjustment Amount	PLB04:	100
	Provider Identifier	PLB01:	PharmacyA
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.15
	Provider Identifier	PLB01:	PharmacyB
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.05
	Provider Identifier	PLB01:	PharmacyC
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.05
	Provider Identifier	PLB01:	PharmacyD
	Adjustment Reason Code	PLB03-1:	AH
	Provider Adjustment Identifier	PLB03-2:	Network Fee
	Provider Adjustment Amount	PLB04:	0.15

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#### **4. FREQUENTLY ASKED QUESTIONS**

1. Question: Would a PSAO send the X12 835 reporting the negative balance if they were not sending a check (i.e., there was no claim activity for any provider in the group)?

Response:

- For all scenarios, all information on the X12 835 to the consolidator is to be sent to the corresponding provider regardless of the financial impact.
- For a provider who owes money and does not have any financial activity, the X12 835 should report money owed for that provider regardless of the financial impact to the consolidator.
- The consolidator could receive a \$0.00 X12 835 if all providers have no financial activity.

2. Question: How do you report adjustments done outside the claim activity (e.g., the pharmacy wants to write off an amount due or wants to send the payer a check)?

Response:

Please see the section entitled, “Provider Initiated Payment to Payer” in the 834 & 835 FAQs document located on the [WG45 members’ only page](#) on the MyNCPDP website.

## **5. REVISION HISTORY**

### **5.1 VERSION 1.1 MARCH 2017 –**

Editorial updates to remove slashed zeros (Ø) and replace with zero (0)

Updated the copyright statement as revised 2016, the NCPDP logo and X12 name change from ASC X12 to X12

### **5.2 VERSION 1.1 REPUBLICATION OCTOBER 2022**

Updated NCPDP logo to be registered

Corrected various grammar, formatting and punctuation errors throughout

Changed Prescription Services Administration Organization to Pharmacy Services Administration Organization

Reformatted Revision History section to include subsection numbers

Updated hyperlink to X12 products in the disclaimer

Updated the hyperlink to WG45 page on MyNCPDP

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