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Subject: Suggested Change for Chapter 14
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Attachments: [image003.png](#)

The NCPDP Work Group 1 Information Reporting Problems Task Group would like to recommend the following modifications to Chapter 14 of the Medicare Prescription Drug Benefit Manual. This recommendation is intended to provide consistency between the two sections and address a concern with the use of the word “must” in section 50.3.2.

Replace the highlighted text in both 50.3.2 and 50.4.1 (referenced below) with the following text:
Once a sponsor becomes aware of these other payers where OHI is not reported via a COBC file, CMS encourages sponsors to subsequently follow up by contacting the supplemental payers and/or the beneficiary for verification of secondary coverage. Once the sponsor receives this information, except for SPAP/ADAP coverage, it should be transmitted to the BCRC for verification of the supplemental coverage.

50.3.2 – Data from Sponsors to the COB system

The data provided by the *BCRC* on supplemental payers and order of payment is generally the best available information for Part D sponsors and pharmacies to act upon. However, it is important to note that Part D sponsors must coordinate benefits with *all other payers where an Information Reporting (Nx) Transaction is provided by the CMS Part D Transaction Facilitator for* covered Part D drugs. *Coordination is required* even if the *BCRC* is unaware of some payers who have submitted batched claims after the point-of-sale transaction at a network pharmacy. **Once a sponsor becomes aware of these other payers, it must submit this information via ECRS to the *BCRC*.**

50.4.1 – Receiving an Nx Transaction, Without Supplemental Payer on File

(Rev. 17, Issued: 08-23-13, Effective Date: 06-07-10, Implementation Date: 01-01-11)

Part D sponsors should accept Nx transactions even in those instances where they have no supplemental payer information on file to identify the payer. In instances when the Part D Sponsor does not have matching or any supplemental payer information on file, the Nx transactions should be applied to the member's TrOOP as non-qualified and not TrOOP eligible *unless the payer is on the CMS SPAP/ADAP list*. CMS encourages sponsors to subsequently follow up by contacting the beneficiary to identify the supplemental payer. Once the sponsor receives this information, except for SPAP/ADAP coverage, it should be transmitted to the *BCRC* for verification of the secondary coverage.

Regards,

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Work Group Meetings | November 6-8, 2019 | Hilton St. Petersburg Bayfront Hotel | St. Petersburg, FL

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