<u>DCS and NYSIF Prescription Drug Programs</u> Layout Specifications for Exhibit V.B.2 Offeror's Re-Priced Claims Files

Purpose: To define data layout specifications for Offerors' Re-Priced Claims Files (based on DCS Program claim data only), submitted with their Cost Proposal as Exhibit V.B.2. This layout contains the claims data fields originally provided by the Procuring Agencies, along with the following nine additional fields at the end of each record that are to be filled out by the Offeror in accordance with the Re-pricing Instructions set forth in Exhibit V.B:

Field 1:	Pharmacy Type
Field 2:	Drug Type
Field 3:	Therapeutic Category For Formulary
Field 4:	AWP
Field 5:	Ingredient Cost
Field 6:	Dispensing Fee
Field 7:	Co-payment
Field 8:	Therapeutic Category for Pharma Revenue Agreements
Field 9:	Generic Product Indicator (GPI)

Note: The last 9 fields listed in this layout contain the required field format, field length, and definitions of field values for Fields 1 through 9 above.

Media: Data files should be provided on CD and labeled as Exhibit V.B2 with the Offeror's name.

Format: Flat file format; (text file, comma delimited pipe delimited) (Comma delimited criteria deleted 4/27/12 and pipe delimited criteria added 4/27/12)

NOTE: As specified in Section III.G, a data file of NYSIF Program claims for the period November 1, 2010 through November 1, 2011 in the following format is provided for informational purposes to those Offeror's that request said file. Do not submit a Re-Price claims file for the NYSIF Program claims data.

NYS Dept of Civil Service Field Name	Name of Field	Field Format	Field Length	Definition of Field Value/Comments
DATE_OF_SERVICE	Date of service (DOS)	Text	8	Date of Service for the dispensed drug. Format = <i>CCYYMMDD</i>
NDC	NDC	Text	11	NDC for the drug dispensed
PRODUCT_NAME	Product name	Text	70	The name for the drug dispensed based on the manufacturing code, product code and package code

NYS Dept of Civil Service Field Name	Name of Field	Field Format	Field Length	Definition of Field Value/Comments
NEW_REFILL_CD	New/Refill code	Text	2	Indicator that identifies if the prescription was new or a refill on the drug dispensed. 00 = New script 01 -99 = Refill Number
QUANTITY_DISPENSED	Quantity Dispensed	Number	(13,3)	Metric quantity for the drug dispensed. Format is a right-justified numeric field up to 13 total positions including a decimal point and up to 3 characters after the decimal point. Examples: Value of 180 will show as 180 Value of 30.5 will show as 30.5 Value of 1.258 will show as 1.258
DAYS_SUPPLY	Days Supply	Number	(4,0)	Days supply for the drug dispensed. Format is right-justified numeric field. Examples: Value of 120 will show as 120 Value of 90 will show as 90 Value of 2 will show as 2
DATE_OF_BIRTH	Date of Birth	Text	8	Date of birth for the member. Format = <i>CCYYMMDD</i>
MEMBER_SUBSCRIBER_ID (Field deleted on 3-8-12 – DCS file only)	Member Subscriber Id	T ext	<mark>9</mark>	Nine character encrypted member subscriber id.
PART_B_INDICATOR (Field added on 3-8-12 - DCS file only)	Part B Indicator	Text	1	Y = Member had Medicare Part B primary coverage on claim adjudication date N = Member did not have Medicare Part B primary coverage on claim adjudication date ("N" added on 3-9-12)
PERSON_CD	Person Code	Text	2	Person code that claim processed against
BENEFIT_PROGRAM	Benefit Program	Text	3	Member's Benefit Program indicator

NYS Dept of Civil Service Field Name	Name of Field	Field Format	Field Length	Definition of Field Value/Comments
SPECIALTY PROGRAM PARTICIPATION INDICATOR	Specialty Program Participation Indicator	Text	1	\mathbf{Y} = Member participates in the Specialty Pharmacy Program \mathbf{N} = Member does not participate in Specialty Pharmacy Program
PRODUCT_SELECTION_DAW_CD	DAW code	Text	1	Drug Dispensed As Written 0 = None indicated 1 = Physician prescribed brand 2 = Physician allowed substitution, patient selected brand 3 = Physician allowed substitution, pharmacist substituted brand 4 = No generic available 5 = Brand was dispensed as generic 6 = Override 7 = Substitution not allowed - brand drug mandated by law 8 = Substitution allowed - generic drug not available in marketplace 9 = Other
PHARMACY_NPI	Pharmacy NPI	Text	10	Unique number assigned to the dispensing pharmacy from the National Council for Prescription Drug Programs.
GCN	Generic Code Number	Text	5	The (First Data Bank) generic code number associated with the NDC dispensed.
PROVIDER_CLASS	Provider Class	Text	3	Provider Class: $\mathbf{E} = \text{Direct Member Submit}$ $\mathbf{F} = \text{Retail}$ $\mathbf{P} = \text{Mail Order}$
CLAIM_STATUS	Claim Status	Text	1	Claim status for the claim $\mathbf{P} = Paid$
NYS_GENERIC_BRAND_CD	NYS Generic Brand Code	Text	1	The NYS brand/generic product indicator for the pharmacy submitted drug 0 = Brand 1 = Generic

NYS Dept of Civil Service Field Name	Name of Field	Field Format	Field Length	Definition of Field Value/Comments
PROVIDER_ZIP_CD	Provider Zip Code	Text	5	Pharmacy Zip Code
BILL_DATE	Bill Date	Text	8	Date that the claim was billed to the client. Format = <i>CCYYMMDD</i>
ROW_NUMBER	Row Number	Number	(8,0)	Row number assigned sequentially. Format is right-justified numeric field. Example: Value of 234567 will show as 234567
PHARMACY_TYPE (Field 1)	Pharmacy Type	Text	1	 R = Retail Network Pharmacy M = Mail Service Pharmacy D = Direct Submit (Enrollee) Claim N = Non-network Pharmacy S = Specialty (See Instructions)
DRUG_TYPE (Field 2)	Drug Type	Text	1	 1 = Generic Rx 2 = Preferred Brand Rx 3 = Non Preferred Brand Rx 4 = Excluded Rx
THER_CAT_FORM (Field 3)	Therapeutic Category For Formulary	Text	100	For each drug, provide the same level of therapeutic classification detail used in the development of the submitted formulary.
AWP (Field 4)	AWP	Number	(13,5)	AWP for dispensed Rx as of 4/1/11. Format is right-justified numeric field, totaling 13 positions including a decimal point and up to 5 positions after the decimal point. Examples: Value of \$1.22095 should be coded as 1.22095 Value of \$288.50 should be coded as 288.5 Value of \$30.12345 should be coded as 30.12345

NYS Dept of Civil Service Field Name	Name of Field	Field Format	Field Length	Definition of Field Value/Comments
INGREDIENT_COST (Field 5)	Ingredient Cost	Number	(11,2)	Ingredient cost of the dispensed drug, as calculated using the re- pricing instructions included in Exhibit V.B. Format is right- justified numeric field totaling 11 positions including a decimal point and up to 2 positions after the decimal point. Examples: Value of \$1028.61 should be coded as 1028.61 Value of \$131.00 should be coded as 131 Value of \$22.69 should be coded as 22.69 Value of \$1.55 should be coded as 1.55 Value of .85 should be coded as .85
DISPENSING_FEE (Field 6)	Dispensing Fee	Number	(8,2)	Dispensing fee of the dispensed drug, as calculated using the repricing instructions included in Exhibit V.B. Format is right- justified numeric totaling 8 positions including a decimal point and up to 2 positions after the decimal point. Examples: Value of \$16.50 should be coded as 16.50 Value of \$1.65 should be coded as 1.65 Value of .65 should be coded as 1.65
CO_PAYMENT (Field 7)	Co-Payment	Number	(8,2)	Copayment of the dispensed drug, as calculated using the re- pricing instructions included in Exhibit V.B. Format is right- justified numeric field totaling 8 positions, including a decimal point and up to 2 positions after the decimal point. Examples: Value of \$30.00 should be coded as 30 Value of \$17.31 should be coded as 17.31 Value of \$5.00 should be coded as 5 Value of zero should be coded as 0
THER_CAT_PHARMA (Field 8)	Therapeutic Category for Pharma Revenue Agreements	Text	100	Therapeutic classification system used for negotiating pharma revenue agreements for each drug.
GPI (Field 9)	Generic Product Indicator	Text	14	If proposing to use Medispan as the source of AWP in Field 4, fill in the Generic Product Indicator associated with the NDC dispensed. If using Red Book as the source of the AWP in Field 4, leave this field blank.