DATE: February 3, 2014

TO: All Medicare Advantage, Prescription Drug Plan, Cost, PACE, and Demonstration Organizations Systems Staff

FROM: Tracey McCutcheon, MHSA, MBA
Acting Director, Medicare Drug Benefit and C & D Data Group


The purpose of this memo is to provide Part D sponsors with an advanced draft of the Reporting Identified Drug Overutilizers section within the Plan Communications User Guide (PCUG), Main Guide, Version 8.0 in the event the February release occurs before the user guide is available. This document will provide additional details on submitting beneficiary-specific point of sale (POS) Drug Edit information in MARx and provide information on updated data values and file layouts. The PCUG main guide is planned for release on February 25, 2014 and will be available here: http://www.cms.gov/Research-Statistics-Data-and-Systems/CMS-Information-technology/mapdhelpdesk/Plan_Communications_User_Guide.html. The PCUG main guide Version 8.0 will supersede this document.

Additional relevant HPMS memorandums include:

2. Requirement to Complete Revised Overutilization Attestation in HPMS (December 23, 2013)
3. UPDATE-Announcement of February 2014 Software Release (December 6, 2013)

Please review the attached Reporting Identified Drug Overutilizers User Guide section prior to the new functionality being released in MARx in February. If you have any questions, please contact the Part D Policy mailbox at PartDPolicy@cms.hhs.gov and put “User Guide” in the subject line.

Thank you in advance for your continued support.
Chapter 11: Reporting Identified Drug Overutilizers

In the section entitled, “Improving Drug Utilization Review Controls in Part D” of the Final Contract Year (CY) 2013 Call Letter issued on April 2, 2012 and in supplemental guidance issued on September 6, 2012, CMS described how Medicare Part D sponsors can comply with drug utilization management (DUM) requirements of 42 C.F.R §423.153 et seq. to prevent overutilization of opioids.1 In general, the guidance addressed the following expectations for sponsors to address overutilization of opioids effective January 1, 2013:

- Appropriate controls at point of sale (POS), including beneficiary-level claim edits.
- Improved retrospective drug utilization review (DUR) to identify at-risk beneficiaries.
- Case management with the beneficiaries’ prescribers.
- Data-sharing between Part D sponsors regarding beneficiary overutilization.

This chapter provides instructions for sponsors to submit beneficiary-level POS drug edit information to CMS, which will automate the current process of providing this information to CMS as well as data-sharing regarding such edits between Part D sponsors.

**CMS Notification of Identified Drug Overutilizers with a POS Drug Edit by Sponsors**

(General Instructions)

Sponsors will submit beneficiary-level POS drug edit information for Identified Drug Overutilizers of opioids to CMS through a new POS Drug Edit batch transaction (Transaction Type 90). Sponsors should continue to provide a copy of the notification letter and beneficiary data to the CMS mailbox and their CMS account manager per previous CMS guidance.

POS Drug Edit transactions are submitted in the same way enrollment transactions are submitted to MARx using the MARx Batch Input Transaction Data File. They can be incorporated into batches of enrollment transactions or can be submitted as a separate batch file. Transaction reply codes are returned in the Daily Transaction Reply Report (DTRR) data file to relay the results of the transaction processing. For an overview of transaction processing see Chapter 4 Transaction Processing within the PCUG.

Sponsors should submit POS Drug Edit data to MARx when any of the following occurs:

- The sponsor notifies the beneficiary that a POS Drug Edit will be implemented (Notification).
- The sponsor implements the POS Drug Edit (Implementation).
- The sponsor terminates the POS Drug Edit (Termination).
- The sponsor modifies the POS Drug Edit record after Notification or Implementation.

Table 1: TC 90 File Layout.
Table 2: Notes for All Plan-Submitted Transaction Type 90

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1 Additional information about the CMS overutilization policy is available on the CMS website at: [http://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovContra/RxUtilization.html](http://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovContra/RxUtilization.html).
POS Drug Edits are at the contract level (not contract/PBP). Contracts are only allowed to access or modify beneficiary POS Drug Edit information during periods of the beneficiary’s enrollment within that contract with a drug plan. If a beneficiary changes from a PBP with a drug plan to a PBP without a drug plan and the contract remains the same, the contract is only allowed to submit POS Drug Edit records for the time period when the beneficiary is enrolled in the PBP with a drug plan. A plan can submit a TR 90 record after the beneficiary disenrolls, as long as the notification, implementation and/or termination dates occur during the beneficiary’s enrollment within the contract with a drug plan.

**Contract Notification of Active POS Drug Edit**

MARx associates an Active POS Drug Edit indicator with a beneficiary-contract enrollment if the latest POS Drug Edit status for at least one drug class is either Notification (Status = ‘N’) or Implementation (Status = ‘I’). When a beneficiary enrolls in a new contract, the new contract (“gaining”) is notified if a newly enrolled beneficiary had an Active POS Drug Edit indicator while enrolled in the immediately preceding Part D contract (“losing”). This notification is provided to the new contract via the DTRR with TRC 322, New Enrollee POS Drug Edit Notification. The reply with TRC 322 accompanies the TRCs associated with the enrollment acceptance and has a transaction type code of 61 (Enrollment).

Once the New Enrollee POS Drug Edit Notification (TRC 322) is provided to the new contract, an Active POS Drug Edit indicator is no longer associated with the beneficiary. Since the reply does not include the drug class or real-time status of the POS Drug Edit, identification of the prior contract is provided in the DTRR to facilitate communication between the contracts. The contract is advised to contact the previous contract’s Medicare Part D overutilization contact for more information about the beneficiary’s POS opioid edit and overutilization case file. This information may be used by the ‘gaining’ contract to determine if a beneficiary-specific POS drug edit is appropriate per previous CMS guidance. If so, the contract should provide 30-day advance notice to the beneficiary per previous CMS guidance and submit the information through MARx to CMS per the instructions above.

LiNet or retrospective short-enrollments are not considered a ‘losing’ contract or new enrollment for purposes of the New Enrollee POS Drug Edit Notification, and are therefore excluded (i.e., they will not receive TRC 322).

**Table 3: Reporting Drug Overutilizer Transaction Reply Codes (TRC)**

**CMS and Contract Communications**

CMS users have the ability to flag information that is possibly erroneous. After the CMS user flags the information, the contract is notified via the DTRR with TRC 720, CMS Audit Review POS Drug Edit. If the contract has questions after receiving TRC 720, they should contact CMS via email at PartDPolicy@cms.hhs.gov with subject “POS Edit Reporting” to discuss the POS Drug Edit information.

An example of a situation that may be flagged by CMS is receipt of two notification records for the same contract, beneficiary, POS Drug Edit Class and Code but neither notification is implemented or terminated.
11.1 Notification, Implementation, and Termination of POS Drug Edits
(Specific Instructions)

The contract should submit the POS Drug Edit Notification, Implementation, and Termination records to CMS when issuing the written notification of a POS Drug Edit to the beneficiary, implementing such an edit, and deciding that a termination record is warranted. (Deletion of POS Drug Edits Records and Modified POS Drug Edit Code Implementations are covered in Sections 11.2 and 11.4 respectively below).

**Notification Status ‘N’**

POS Drug Edit Notification record (status = ‘N’) should be submitted to CMS using a POS Drug Edit transaction (TC 90). In addition to beneficiary and contract information, the following details are required for a notification record:

- POS Drug Edit Status = ‘N’
- POS Drug Edit Drug Class = ‘OPI’ (opioids)
- POS Drug Edit Code either
  - PS1 = No drugs in this class are approved by the plan or
  - PS2 = Selected drugs in this class are approved by the plan
- POS Drug Edit Notification Date
  - Actual date of the POS Drug Edit Notification written notice that was sent to the beneficiary
- POS Drug Edit Update/Delete Flag = ‘U’

Since the beneficiary has 30 days to contest the POS Drug Edit, at the end of this time period, the POS Drug Edit will be:

- Implemented as stated in the POS Drug Edit Notification provided to the beneficiary, or
- Implemented with a modified POS Drug Edit (see 11.4), or
- Terminated – not implemented.

Therefore, the contract should submit a POS Drug Edit Implementation (status = ‘I’) or Termination (status = ‘T’) record to CMS using a POS Drug Edit transaction (TC 90).

**Notification Status “I”**

A contract should submit a POS Drug Edit Implementation (status ‘I’) if the edit is implemented as stated in the POS Drug Edit Notification provided to the beneficiary. In addition to beneficiary and contract information, the following details are required for an Implementation record:

- POS Drug Edit Status = ‘I’
- POS Drug Edit Drug Class = ‘OPI’ (opioids)
- POS Drug Edit Code – must be the same or less restrictive than the POS Drug Edit Notification Record, either
  - PS1 = No drugs in this class are approved by the plan, or
  - PS2 = Selected drugs in this class are approved by the plan
Note: PS2 is less restrictive than PS1.

- POS Drug Edit Notification Date
  - Actual date the POS Drug Edit Notification was sent to the beneficiary
    - MUST match an existing POS Drug Edit Notification record for the beneficiary and contract
- POS Drug Edit Implementation Date
  - Actual date the POS Drug Edit was implemented
- POS Drug Edit Update/Delete Flag = ‘U’

Notification Status ‘T’

A contract should submit a POS Drug Edit Termination (status = ‘T’) record if a determination was made not to implement a POS Drug Edit for a beneficiary who was notified of a potential POS Drug Edit. A contract may also terminate a POS Drug Edit that was implemented if the contract determines at any point that it is no longer appropriate. In addition to beneficiary and contract information, the following details are required for a termination record:

- POS Drug Edit Status = ‘T’
- POS Drug Edit Drug Class = ‘OPI’
- POS Drug Edit Code – must be the same as an existing notification or implementation (if it exists) record(s), either
  - PS1 = No drugs in this class are approved by the plan, or
  - PS2 = Selected drugs in this class are approved by the plan
- POS Drug Edit Notification Date
  - Actual date the POS Drug Edit Notification was sent to the beneficiary
    - MUST match an existing POS Drug Edit Notification record for the beneficiary and contract
- POS Drug Edit Implementation Date (if it exists)
  - Actual date the POS Drug Edit was implemented
    - MUST match an existing POS Drug Edit Implementation record for the beneficiary and contract
- POS Drug Edit Termination Date
  - Actual date the POS Drug Edit was terminated
- POS Drug Edit Update/Delete Flag = ‘U’

11.2 Deletion of POS Drug Edit Records

There are instances when an existing POS Drug Edit record must be removed from the MARx system. A deletion record can be submitted via batch.

Examples of scenarios when the deletion of a POS Drug Edit record is appropriate:

- Date, Class, or Code corrections following a data-entry error.
  - The plan must then submit the correct record AFTER deleting the error record.
- “Future-dated” (Status ‘I’) records that are determined to be incorrect.
- A record is erroneously submitted.
The deletion of a POS edit record is not appropriate if the sponsor modifies the POS Drug Edit after Notification or Implementation. A record should not be deleted if a POS Drug Edit determination was made by the sponsor, the beneficiary was notified, and the edit was or was not implemented.

For example, if a beneficiary is notified of a potential POS Drug Edit and the sponsor subsequently decides not to implement the POS Drug Edit, then the notification record should NOT be deleted. The contract should terminate the POS Drug Edit by submitting a termination record as described above. However, if the Notification record is erroneous, such as a notification record for the wrong beneficiary was submitted, then that Notification record should be deleted.

For the record to be deleted, a deletion record is submitted by providing all of the applicable fields with matching values to the original record with a POS Drug Edit Update/Delete Flag = ‘D’. For example, a future-dated ‘Implementation’ record was submitted to CMS, and the POS edit was never implemented. In this case, the contract should provide the following information in addition to beneficiary and contract information:

- POS Drug Edit Status = ‘I’
- POS Drug Edit Drug Class = ‘OPI’
- POS Drug Edit Code
  - MUST match an existing POS Drug Edit Implementation record
- POS Drug Edit Notification and Implementation Dates
  - MUST match an existing POS Drug Edit Notification and Implementation record
- POS Drug Edit Update/Delete Flag = ‘D’

A deletion record must have the same beneficiary data, contract, POS Drug Edit Class, Code, Status and Dates as an existing POS Drug Edit record.

11.3 General Rules for POS Drug Edit Records

The user may read this section in its entirety, but it is also designed as a reference.

It is important that contracts note that Notification, Implementation, and Termination records are associated with each other in the MARx system. A POS Drug Edit Event consists of a POS Drug Edit Notification and any POS Drug Edit Implementation and Termination records that are associated with that POS Drug Edit Notification. Below is a list of rules for submitting updated records:

- A POS Drug Edit Notification record can only be associated with one Implementation and Termination record at a time (see section 11.4 Modified POS Drug Edit Implementation).
- An Implementation record must contain the POS Drug Edit Notification Date of the associated POS Drug Edit Notification record.
- An Implementation record must have the same or less restrictive POS Drug Edit Code as the associated POS Drug Edit Notification record.
  - PS2 is less restrictive than PS1.
- A POS Drug Edit Termination record must contain the POS Drug Edit Notification Date and Implementation Date (if it exists) of the associated POS Drug Edit Notification and POS Drug Edit Implementation (if it exists) records.
In order to make any corrections via batch, an existing erroneous POS Drug Edit Record should be deleted and then the corrected record should be submitted, if applicable. If a POS Drug Edit determination was made, the notification letter was mailed to the beneficiary, and CMS has the correct POS Drug Edit Notification dates, there is usually no valid reason for deleting the POS Drug Edit Notification record (an exception is if the wrong beneficiary was sent a POS Drug Edit Notification letter). This is because, in order to avoid unassociated records and to improve efficiency, the system will automatically perform deletes for POS Drug Edit Notification and Implementation Records as detailed below:

- If a delete (update/delete flag = ‘D’) transaction is received for a POS Drug Edit Notification (status = ‘N’) record with associated POS Drug Edit Implementation and/or Termination records, the associated POS Drug Edit Implementation and/or Termination records will also be deleted.
- If a delete transaction (update/delete flag = ‘D’) is received for a POS Drug Edit Implementation (status = ‘I’) record with an associated POS Drug Edit Termination record, the associated POS Drug Edit Termination record will also be deleted.

If a POS Drug Edit event contains POS Drug Edit Notification and Termination records without a POS Drug Edit Implementation record, it is not possible to add a POS Drug Edit Implementation record without first deleting the existing POS Drug Edit Termination record. After adding the POS Drug Edit Implementation record, the POS Drug Edit Termination record can be re-submitted, if appropriate.

POS Drug Edit records received on a batch file are sorted in the following order by the MARx system:

- Delete records are sorted before update (add) records. The delete records are sorted in the following order:
  - POS Drug Edit Termination records
  - POS Drug Edit Implementation records
  - POS Drug Edit Notification records

- Update (add) records are sorted in the following order:
  - POS Drug Edit Notification records
  - POS Drug Edit Implementation records
  - POS Drug Edit Termination records

Duplicate update (add) POS Drug Edit records are not allowed. A duplicate POS Drug Edit record is one with the same beneficiary data, Contract, POS Drug Edit Class, Status, Code and dates as an existing record.

If a beneficiary disenrolls from the contract that notified the beneficiary of the POS, the plan should not submit a POS Drug Edit Termination record. If a Termination record is submitted, the “gaining” contract will not receive the Active POS Drug Edit indicator. In addition, if the beneficiary dies it is un-necessary for the plan to submit a termination record.

“Future Dated” Notification, Implementation or Termination records are allowed (but not recommended) and limited to the current and upcoming calendar month.
For example, if the current date is 12/19/2013, a notification date that is between 12/20/2013 and 1/31/2014 is accepted but a notification date of 2/1/2014 would be rejected. Similarly, if the current date and notification date are 1/20/2014, the “future-dated” implementation date must be between 2/20/2014 and 2/28/2014.

Below are rules related to POS Drug Edit dates:

- A POS Drug Edit Notification (status = ‘N’) record must have blank POS Drug Edit Implementation and Termination dates.
- A POS Drug Edit Implementation (‘I’) record must have a blank POS Drug Edit Termination date.
- POS Drug Edit Notification, Implementation and Termination dates must be within the beneficiary’s contract enrollment period of an applicable drug plan.
- A POS Drug Edit Implementation (status = ‘I’) record’s Implementation date must be 30 or more days after the associated POS Drug Edit Notification record’s notification date.
- A POS Drug Edit Termination (status = ‘T’) record’s Termination date must be on or after the associated POS Drug Edit Notification record’s notification date if there is not an associated POS Drug Edit Implementation record.
- A POS Drug Edit Termination (status = ‘T’) record’s Termination date must be on or after the associated POS Drug Edit Implementation record’s Implementation date.

11.4 Modified POS Drug Edit Code Implementations

This section discusses situations where the modifications to records would be appropriate.

Situation 1: A contract determines that a more restrictive POS Drug Edit (PS1) is appropriate, provides written notice to the beneficiary, but before or after implementation, determines that a less restrictive POS Drug Edit (PS2) is appropriate.

If the contract determines that a less restrictive POS Drug Edit (PS2) is appropriate than was stated in the original submitted POS Drug Edit (PS1) Notification record, and the POS Drug Edit (PS1) Implementation record was not submitted, the contract should provide the following information in addition to beneficiary and contract information:

- POS Drug Edit Status = ‘I’
- POS Drug Edit Drug Class = ‘OPI’
- POS Drug Edit Code = PS2
- POS Drug Edit Notification Date
  - MUST match an existing POS Drug Edit Notification Record (originally submitted with PS1 Drug Edit Code)
- POS Drug Edit Update/Delete Flag = ‘U’

In the scenario above, if the POS Drug Edit (PS1) Implementation record was submitted, the contract should submit a POS Drug Edit Termination record with the following information in addition to beneficiary and contract information:

- POS Drug Edit Status = ‘T’
• POS Drug Edit Drug Class = ‘OPI’
• POS Drug Edit Code = PS1
• POS Drug Edit Notification Date
  o MUST match the existing POS Drug Edit Notification record for the beneficiary and contract
• POS Drug Edit Implementation Date
  o MUST match the existing POS Drug Edit Implementation record for the beneficiary and contract
• POS Drug Edit Termination date
  o Actual date the POS Drug Edit was terminated
• POS Drug Edit Update/Delete Flag = ‘U’

Next, the contract should submit a new POS Drug Edit Implementation record with the less restrictive POS Drug Edit Code (PS2) and the original POS Drug Edit Notification date (same as above example implementation).

Situation 2: A contract determines that a more restrictive POS Drug Edit (PS1) is appropriate after providing written notice to the beneficiary that a less restrictive POS Drug Edit (PS2) would be implemented. The more restrictive POS Drug Edit (PS1) may or may not have been implemented.

If a contract notified the beneficiary that a less restrictive POS Drug Edit (PS2) would be implemented, the contract cannot implement a more restrictive POS Drug Edit (PS1) than was stated in the notice without providing the beneficiary an additional 30-day advance notice that a more restrictive POS Drug Edit (PS1) would be implemented. In this instance, the plan has two options after sending the beneficiary a new notification letter and submitting a new POS Drug Edit Notification record with the new notification date and the more restrictive POS Drug Edit Code (PS1):

• Implement the less restrictive POS Drug Edit (PS2) on the date noted in the original notification letter to the beneficiary which overlaps with the 30-day advance notice for the more restrictive POS Drug Edit.
  o When the more restrictive POS Drug Edit (PS1) is implemented and the implementation record is submitted to MARx, the contract should also terminate the less restrictive POS Drug Edit record by submitting a POS Drug Edit Termination record with the Notification and Implementation dates of the less restrictive POS Drug Edit (PS2).
• Terminate the less restrictive POS Drug Edit Notification (PS2) by submitting a POS Drug Edit Termination record with the Notification date of the less restrictive POS Drug Edit Notification (PS2). Then, implement the more restrictive POS Drug Edit (PS1) following the 30-day advance notice.

If the less restrictive POS Drug Edit (PS2) was implemented following the 30-day notification, the contract can keep the less restrictive POS Drug Edit (PS2) in place while the new 30 day notification period is in effect. Once the contract implements the more restrictive POS Drug Edit (PS1), the less restrictive POS Drug Edit (PS2) Implementation record should be terminated by submitting a POS Drug Edit Termination record with the Notification and Implementation dates of the less restrictive POS Drug Edit (PS2).
Contracts should only submit POS Drug Edit changes that result in either a more or less restrictive POS Drug Edit code. Modifications that only modify the condition (e.g., quantity, strengths) of a current active POS edit that would result in the same POS Drug Edit code should not be submitted.

### 11.5 Future Enhancements

The user interface (UI) is in development for direct entry of POS Drug Edit information as an alternative to batch transactions. The expected release date is unknown at this time.

If you have any questions, please contact the Part D Policy mailbox at PartDPolicy@cms.hhs.gov and put “User Guide” in the subject line.

#### Table 1: Transaction Type 90 File Layout

<table>
<thead>
<tr>
<th>Item</th>
<th>Field</th>
<th>Size</th>
<th>Position</th>
<th>Required/Optional</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>HIC#</td>
<td>12</td>
<td>1 – 12</td>
<td>Required</td>
</tr>
<tr>
<td>2</td>
<td>Surname</td>
<td>12</td>
<td>13 – 24</td>
<td>Required</td>
</tr>
<tr>
<td>3</td>
<td>First Name</td>
<td>7</td>
<td>25 – 31</td>
<td>Required</td>
</tr>
<tr>
<td>4</td>
<td>M. Initial</td>
<td>1</td>
<td>32</td>
<td>Optional</td>
</tr>
<tr>
<td>5</td>
<td>Gender Code</td>
<td>1</td>
<td>33</td>
<td>Required</td>
</tr>
<tr>
<td>6</td>
<td>Birth Date (YYYYMMDD)</td>
<td>8</td>
<td>34 – 41</td>
<td>Required</td>
</tr>
<tr>
<td>7</td>
<td>Filler</td>
<td>5</td>
<td>42 – 46</td>
<td>N/A</td>
</tr>
<tr>
<td>8</td>
<td>Contract #</td>
<td>5</td>
<td>47 – 51</td>
<td>Required</td>
</tr>
<tr>
<td>9</td>
<td>Filler</td>
<td>8</td>
<td>52 – 59</td>
<td>N/A</td>
</tr>
<tr>
<td>10</td>
<td>Transaction Code</td>
<td>2</td>
<td>60 – 61</td>
<td>Required</td>
</tr>
<tr>
<td>11</td>
<td>Filler</td>
<td>13</td>
<td>62 – 74</td>
<td>N/A</td>
</tr>
<tr>
<td>12</td>
<td>Update/Delete Flag</td>
<td>1</td>
<td>75</td>
<td>Required</td>
</tr>
<tr>
<td>13</td>
<td>POS Drug Edit Status</td>
<td>1</td>
<td>76</td>
<td>Required</td>
</tr>
<tr>
<td>14</td>
<td>POS Drug Edit Class</td>
<td>3</td>
<td>77 - 79</td>
<td>Required</td>
</tr>
<tr>
<td>15</td>
<td>POS Drug Edit Code</td>
<td>3</td>
<td>80 - 82</td>
<td>Required</td>
</tr>
<tr>
<td>16</td>
<td>Notification Date</td>
<td>8</td>
<td>83 – 90</td>
<td>Required</td>
</tr>
<tr>
<td>17</td>
<td>Implementation Date</td>
<td>8</td>
<td>91 – 98</td>
<td>Required if Status is I or Status is T and an Implementation record exists.</td>
</tr>
<tr>
<td>18</td>
<td>Termination Date</td>
<td>8</td>
<td>99 - 106</td>
<td>Required if Status is T</td>
</tr>
<tr>
<td>19</td>
<td>Filler</td>
<td>103</td>
<td>107 - 209</td>
<td>N/A</td>
</tr>
<tr>
<td>20</td>
<td>Plan Assigned Transaction Tracking ID</td>
<td>15</td>
<td>210 - 224</td>
<td>Optional</td>
</tr>
<tr>
<td>21</td>
<td>Filler</td>
<td>76</td>
<td>225 - 300</td>
<td>N/A</td>
</tr>
</tbody>
</table>
### Table 2: Notes for All Plan-Submitted Transaction Type 90

<table>
<thead>
<tr>
<th>Item</th>
<th>Field</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>HICN</td>
<td>Health Insurance Claim Number - CAN plus BIC</td>
</tr>
<tr>
<td>2</td>
<td>Surname</td>
<td>Beneficiary’s last name</td>
</tr>
<tr>
<td>3</td>
<td>First Name</td>
<td>Beneficiary’s first name</td>
</tr>
<tr>
<td>4</td>
<td>M. Initial</td>
<td>Beneficiary’s middle initial</td>
</tr>
</tbody>
</table>
| 5    | Gender Code            | • 1 = male  
  • 2 = female  
  • 0 = unknown                                                                  |
| 6    | Birth Date (YYYYMMDD)  | The date of the beneficiary’s birth                                           |
| 8    | Contract #             | The contract number associated with the transaction.  
  • Hxxxx = local Plans  
  • Rxxxx = regional Plans  
  • Sxxxx = PDPs  
  • Fxxxx = fallback Plans  
  • Exxxx = employer sponsored MA/MAPD and PDP Plans.                            |
| 10   | TC                     | This identifies the type of transaction submitted on this record.            |
| 12   | Update/Delete Flag     | This flag indicates whether the POS Drug Edit Record is an update or delete. |
| 13   | POS Drug Edit Status   | The POS Drug Edit Status for the Beneficiary.                                |
| 14   | POS Drug Class         | The POS Drug Edit Class                                                      |
| 15   | POS Drug Edit Code     | The POS Drug Edit Code that details the level of drug usage allowed. The higher number the less restrictive the allowance code.  
  • PS1 = No drugs allowed in the drug class (most restrictive drug allowance code)  
  • PS2 = One or more drugs in the class allowed (less restrictive drug allowance code) |
<p>| 16   | Notification Date      | The date of the POS Drug Edit Notification to the beneficiary.               |
| 17   | Implementation Date    | The date of the POS Drug Edit Implementation.                                |
| 18   | Termination Date       | The date of the POS Drug Edit Termination.                                   |</p>
<table>
<thead>
<tr>
<th>Code</th>
<th>Type</th>
<th>Title</th>
<th>Short Definition</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>001</td>
<td>F</td>
<td>Invalid Transaction Code</td>
<td>BAD TRANS CODE</td>
<td>A transaction failed because the Transaction Type Code (field 16) contained an invalid value. Valid Transaction Type Code values are 01, 51, 61, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83 and 90. This transaction should be resubmitted with a valid Transaction Type Code. Note: Transaction Types 41, 42 and 54 are valid but not submitted by the Plans. This TRC is returned in the Batch Completion Status Summary (BCSS) Report along with the failed record and is not returned in the DTRR. Plan Action: Correct the Transaction Type Code and resubmit if appropriate.</td>
</tr>
<tr>
<td>003</td>
<td>F</td>
<td>Invalid Contract Number</td>
<td>BAD CONTRACT #</td>
<td>A transaction (Transaction Types 01, 51, 61, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83 and 90) failed because CMS did not recognize the contract number. This TRC is returned in the Batch Completion Status Summary (BCSS) Report along with the failed record. This TRC will not be returned in the DTRR. Plan Action: Correct the Contract Number and resubmit if appropriate.</td>
</tr>
<tr>
<td>004</td>
<td>R</td>
<td>Beneficiary Name Required</td>
<td>NEED MEMB NAME</td>
<td>A transaction (Transaction Types 01, 41, 51, 61, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, and 90) was rejected, because both of the beneficiary name fields (Surname and First Name) were blank. The beneficiary’s name must be provided. Plan Action: Populate the Beneficiary Name fields and resubmit if appropriate.</td>
</tr>
<tr>
<td>006</td>
<td>R</td>
<td>Incorrect Birth Date</td>
<td>BAD BIRTH DATE</td>
<td>A transaction (Transaction Types 01, 51, 61, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83 and 90) was rejected because the Birth Date, while non-blank and formatted correctly as YYYYMMDD (year, month, and day), is before 1870 or greater than the current year. The system tried to identify the beneficiary with the remaining demographic information but could not. Note: A blank Birth Date does not result in TRC 006 but may affect the ability to identify the appropriate beneficiary. See TRC 009. Plan Action: Correct the Birth Date and resubmit if appropriate.</td>
</tr>
<tr>
<td>007</td>
<td>R</td>
<td>Invalid Claim Number</td>
<td>BAD HICN FORMAT</td>
<td>A transaction (Transaction Types 01, 51, 61, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83 and 90) was rejected, because the beneficiary claim number was not in a valid format. The valid format for a claim number could take one of two forms: HICN is an 11-position value, with the first 9 positions numeric and the last 2 positions alphanumeric. RRB is a 7 to 12 position value, with the first 1 to 3 positions alpha and the last 6 or 9 positions numeric. Plan Action: Determine the correct claim number (HICN or RRB) for the beneficiary and resubmit the transaction if appropriate.</td>
</tr>
<tr>
<td>Code</td>
<td>Type</td>
<td>Title</td>
<td>Short Definition</td>
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<tr>
<td>009</td>
<td>R</td>
<td>No beneficiary match</td>
<td>NO BENE MATCH</td>
<td>A transaction (Transaction Types 01, 51, 61, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83 and 90) attempted to process but the system was unable to find the beneficiary based on the identifying information submitted in the transaction. A match on claim number (HICN) is required, along with a match on 3 of the following 4 fields: surname, first initial, date of birth and sex code. Plan Action: Correct the beneficiary identifying information and resubmit if appropriate.</td>
</tr>
<tr>
<td>257</td>
<td>F</td>
<td>Failed; Birth Date Invalid for Database Insertion</td>
<td>INVALID DOB</td>
<td>An Enrollment transaction (Transaction Type 61), change transaction (Transaction Types 72, 73, 74, 75, 77, 78, 79, 83), residence address transaction (Transaction Type 76), cancellation transaction (Transaction Types 80, 81, 82), or POS drug edit (Transaction Type 90) failed because the submitted birth date was either Not formatted as YYYYMMDD (e.g., “Aug 1940”), or Formatted correctly but contained a nonexistent month or day (e.g., “19400199”). As a result, the beneficiary could not be identified. The transaction record will not appear on the Daily Transaction Reply Report (DTRR) data file but will be returned on the Batch Completion Status Summary (BCSS) data file along with the failed record. Plan Action: Correct the date format and resubmit transaction.</td>
</tr>
<tr>
<td>321</td>
<td>A</td>
<td>POS Drug Edit Accepted as Submitted</td>
<td>PSDE ACC</td>
<td>A submitted POS Drug Edit transaction (Transaction Type code 90) was successfully processed. The TRC is applicable for both update and delete transactions. The TRC will also be issued when a POS Drug Edit record is submitted via the MARx UI by a Plan User with POS Drug Edit Update Authority. Plan Action: None.</td>
</tr>
<tr>
<td>322</td>
<td>I</td>
<td>New Enrollee POS Drug Edit Notification</td>
<td>PSDE ENR NOT</td>
<td>The beneficiary had an active POS Drug Edit associated with the enrollment immediately preceding this enrollment. The contract ID associated with this earlier enrollment is supplied in DTRR data record field 24. This TRC supplies additional information about an accepted enrollment transaction. It accompanies the transaction reply with the enrollment acceptance TRC. Plan action: Contact the Plan associated with the previous enrollment for pertinent details about the beneficiary’s POS Drug Edit and overutilization case file.</td>
</tr>
<tr>
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</tr>
<tr>
<td>323</td>
<td>R</td>
<td>POS Drug Edit Invalid Enrollment</td>
<td>PSDE INV</td>
<td>A POS drug edit transaction (Transaction Type 90) was rejected because the notification, implementation, or termination date is outside of the contract enrollment period. Plan Action: Correct the date(s) and resubmit the transaction if appropriate.</td>
</tr>
</tbody>
</table>
| 324  | R    | POS Drug Edit Invalid Contract             | PSDE INV         | A POS drug edit transaction (Transaction Type 90) was rejected because the submitting contract is:  
- LiNet Plan  
- Not a Part D Plan  

Plan Action: Correct the contract number and resubmit the POS Drug Edit transaction, if appropriate. |
| 325  | R    | POS Drug Edit Status/Date Error            | PSDE DATE ERR    | A POS drug edit transaction (Transaction Type code 90) was rejected due to one of the following date errors:  
- POS status of N and:  
  - Implementation or Termination date is populated (these must be blank)  
- POS status of I and:  
  - Required Implementation date is blank  
  - Termination date is populated (this must be blank)  
- POS status of T and:  
  - Required Implementation (if exists) and/or Termination dates are blank  

Plan Action: Correct the dates and resubmit the POS Drug Edit Transaction, if appropriate. |
| 326  | R    | POS Drug Edit Implementation Date LT 30 Days | PSDE IMP DT LT 30 | A POS drug edit transaction (Transaction Type 90) with a status of I was rejected because the implementation date is less than 30 days of the notification date.  
Plan Action: Correct the dates and resubmit the POS Drug Edit Transaction, if appropriate. |
| 327  | R    | POS Drug Edit Termination Date Incorrect   | PSDE TERM DT INC | A POS drug edit transaction (Transaction Type Code 90) with a status of T was rejected because:  
- the termination date is before the implementation date if the latest status is I, or  
- the termination date is before the notification date if the latest status is N.  

Plan Action: Correct the dates and resubmit the POS Drug Edit Transaction, if appropriate. |
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<tr>
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</thead>
</table>
| 328  | R    | POS Drug Edit Duplicate Transaction | PSDE DUP | A POS Drug Edit transaction (Transaction Type 90) was rejected because it was a duplicate record. The submitted transaction matched the following values on an existing POS Drug Edit transaction:  
- Status  
- POS Drug Edit Class  
- POS Drug Edit Code  
- POS Drug Edit dates (notification, implementation and/or termination)  

This TRC will only be issued for update transactions not delete.  
Plan Action: None required. |
| 329  | R    | POS Drug Edit Delete Error | PSDE DEL ERR | A POS Drug Edit transaction (Transaction Type 90) was rejected because the transaction attempted to delete an existing POS Drug Edit but there was no corresponding existing record.  
Plan Action: Correct the information provided and resubmit the transaction, if appropriate. |
| 330  | R    | POS Drug Edit Without Associated Records | PSDE WO ASSOC | A POS Drug Edit transaction (Transaction Type Code 90) was rejected because it was submitted for a beneficiary without a corresponding POS Drug Edit record.  
- When Status = I - Submitted notification date must match an existing record  
- When Status = T - Both the submitted notification date and implementation date (if exists) must match an existing record(s)  
- When Status = I or T - POS Drug Edit Class must match an existing notification record with the same notification date  
- When Status = I or T - POS Drug Edit Code must be the same or less restrictive as the notification record with the same notification date  
- When Status = T – POS Drug Edit Code must be the same as the implementation record with the same implementation date provided.  
- A notification record can only be associated with one implementation and termination record (same POS Drug Edit Class and POS Drug Edit Code)  

Plan Action: Verify the dates associated with the POS Drug Edit to be updated. Verify that the correct POS Drug Edit Code and Class were submitted. Correct and resubmit the transaction, if appropriate. |
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</table>
| 330  | R    | POS Drug Edit Without Associated Records   | PSDE WO ASSOC      | A POS Drug Edit transaction (Transaction Type Code 90) was rejected because it was submitted for a beneficiary without a corresponding POS Drug Edit record.  
  • When Status = I - Submitted notification date must match an existing record  
  • When Status = T - Both the submitted notification date and implementation date (if exists) must match an existing record(s)  
  • When Status = I or T - POS Drug Edit Class must match an existing notification record with the same notification date  
  • When Status = I or T - POS Drug Edit Code must be the same or less restrictive as the notification record with the same notification date  
  • When Status = T – POS Drug Edit Code must be the same as the implementation record with the same implementation date provided.  
  • A notification record can only be associated with one implementation and termination record (same POS Drug Edit Class and POS Drug Edit Code)  
  Plan Action: Verify the dates associated with the POS Drug Edit to be updated. Verify that the correct POS Drug Edit Code and Class were submitted. Correct and resubmit the transaction, if appropriate. |
| 331  | R    | Future POS Drug Edit Date Exceeds CCM Plus One | PSDE DT FUT        | A POS Drug Edit transaction (Transaction Type 90) was rejected because a submitted notification, implementation or termination date is later than the end of the month that follows the current calendar month.  
  Plan Action: Correct the date(s) and resubmit the transaction, as appropriate.                                                                                     |
| 332  | F    | Failed, PSDE Dates Invalid for Database Insertion | PSDE DT INVALID    | A POS Drug Edit transaction (Transaction Type 90) failed because one of the following dates was either not formatted as YYYYMMDD (e.g., “Aug 1940”) or was formatted correctly but contained a nonexistent month or day (e.g., “19400199”):  
  • Notification Date  
  • Implementation Date  
  • Termination Date  
  The failed transaction record is not returned in the DTRR data file. It is returned on the Batch Completion Status Summary (BCSS) data file.  
  Plan Action: Correct the date(s) and resubmit the transaction, as appropriate.                                                                                   |
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<tbody>
<tr>
<td>333</td>
<td>R</td>
<td>Reject, Invalid POS Drug Edit Status</td>
<td>PSDE INV STATUS</td>
<td>A POS Drug Edit transaction (Transaction Type 90) was rejected because the submitted POS Drug Edit Status field was blank or contained an invalid value. Valid values are N (Notification), I (Implementation), T (Termination). Plan Action: Correct the POS Drug Edit Status and resubmit the transaction, if appropriate.</td>
</tr>
<tr>
<td>334</td>
<td>R</td>
<td>Reject, Invalid POS Drug Edit Class</td>
<td>PSDE INV CLASS</td>
<td>A POS Drug Edit transaction (Transaction Type 90) was rejected because the submitted POS Drug Edit Class field was blank or contained an invalid value. Plan Action: Correct the POS Drug Edit Class and resubmit the transaction, if appropriate.</td>
</tr>
<tr>
<td>335</td>
<td>R</td>
<td>Reject, Invalid POS Drug Edit Code</td>
<td>PSDE INV CODE</td>
<td>A POS Drug Edit transaction (Transaction Type 90) was rejected because the submitted POS Drug Edit Code field was blank or contained an invalid value. Plan Action: Correct the POS Drug Edit Code and resubmit the transaction, if appropriate.</td>
</tr>
<tr>
<td>336</td>
<td>R</td>
<td>Reject, Invalid POS Drug Edit U/D</td>
<td>PSDE INV U/D</td>
<td>A POS Drug Edit transaction (Transaction Type 90) was rejected because the submitted POS Drug Edit Update/Delete flag was blank or contained an invalid value. Valid values are U (Update) or D (Delete). Plan Action: Correct the POS Drug Edit Update/Delete flag and resubmit the transaction, if appropriate.</td>
</tr>
<tr>
<td>337</td>
<td>A</td>
<td>POS Drug Edit Event Deleted - Plan</td>
<td>PSDE EVT DEL P</td>
<td>A Plan User with POS Drug Edit update Authority deleted a POS Drug Edit event via the MARx UI for this beneficiary. If the latest status was T (Termination), the associated Notification, Implementation (if exists) and Termination POS Drug Edit records were deleted. If the latest status was I (Implementation), the associated Notification and Implementation POS Drug Edit records were deleted. If the latest status was N, the Notification POS Drug Edit record was deleted. Plan Action: None.</td>
</tr>
<tr>
<td>720</td>
<td>I</td>
<td>CMS Audit Review POS Drug Edit</td>
<td>PSDE REVIEW</td>
<td>A CMS User flagged this beneficiary’s POS Drug Edit for review. Plan Action: Review the POS Drug Edit transactions for this beneficiary and submit corrections if appropriate. Contact CMS via email at <a href="mailto:PartDPolicy@cms.hhs.gov">PartDPolicy@cms.hhs.gov</a> with subject “POS Edit Reporting” to discuss the flagged POS Drug Edit information.</td>
</tr>
<tr>
<td>721</td>
<td>A</td>
<td>POS Drug Edit Accepted as submitted – UI</td>
<td>PSDE ACC UI</td>
<td>A CMS User added (updated) or deleted a POS Drug Edit record via the MARx UI for this beneficiary. Plan Action: None.</td>
</tr>
<tr>
<td>Code</td>
<td>Type</td>
<td>Title</td>
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<tr>
<td>722</td>
<td>A</td>
<td>POS Drug Edit Event Deleted - CMS</td>
<td>PSDE EVT DEL C</td>
<td>A CMS User deleted a POS Drug Edit event via the MARx UI for this beneficiary. If the latest status was T (Termination), the associated Notification, Implementation (if exists) and Termination POS Drug Edit records were deleted. If the latest status was I (Implementation), the associated Notification and Implementation POS Drug Edit records were deleted. If the latest status was N, the Notification POS Drug Edit record was deleted. Plan Action: None.</td>
</tr>
</tbody>
</table>