## **340B Claims Response File Design**

The State rebate vendor processes all submitted 340B claims files each Monday. Once a 340B claims file is processed, a response file will be generated and delivered back into the submitters EDI mailbox. Below is the file format for the response file or error report:

| Mstr       |  | E: -14          | Tiald.          | Field               | Definition of Field  | Notes                               |
|------------|--|-----------------|-----------------|---------------------|--|-------------------------------------|
| Seq<br>Nbr | NAME OF FIELD  | Field<br>Format | Field<br>Length | Location<br>From-To | Value/Comments   |                                     |
| 1          | Trading Partner ID   | A/N             | 8               | 1-8                 | Sender Trading<br>Partner ID.  | (e.g. "MB123456")                   |
| 2          | Comma<br>Delimiter1  | A/N             | 1               | 9-9                 | Comma Delimiter  |                                     |
| 3          | File Submission<br>Date                                      | DT              | 8               | 10-17               | Date the 340b<br>Claims file was<br>submitted to<br>ORXIX.           | Format=CCYYMMDD                     |
| 4          | Comma<br>Delimiter2  | A/N             | 1               | 18-18               | Comma Delimiter  |                                     |
| 5          | 340b Claim<br>Count  | N               | 9               | 19-27               | Number of 340B claims in the file.                                   | Format: 999999999<br>Leading Zeroes |
| 6          | Comma<br>Delimiter3  | A/N             | 1               | 28-28               | Comma Delimiter  |                                     |
| 7          | 340b Invalid<br>Field Format<br>Claim Count                  | N               | 9               | 29-37               | Number of 340B claims with an invalid field format in the file.      | Format: 999999999<br>Leading Zeroes |
| 8          | Comma<br>Delimiter4  | A/N             | 1               | 38-38               | Comma Delimiter  |                                     |
| 9          | 340b NDC Not<br>Found In MMIS<br>Claim Count                 | N               | 9               | 39-47               | Number of 340B claims with an NDC not found in the MMIS.             | Format: 999999999<br>Leading Zeroes |
| 10         | Comma<br>Delimiter5  | A/N             | 1               | 48-48               | Comma Delimiter  |                                     |
| 11         | 340b Medicaid<br>ID Not Found<br>In MMIS Claim<br>Count      | N               | 9               | 49-57               | Number of 340B claims with a Medicaid ID not found in the MMIS.      | Format: 999999999<br>Leading Zeroes |
| 12         | Comma<br>Delimiter6  | A/N             | 1               | 58-58               | Comma Delimiter  |                                     |
| 13         | 340b Billing<br>Provider Not<br>Found In MMIS<br>Claim Count | N               | 9               | 59-67               | Number of 340B claims with a Billing Provider not found in the MMIS. | Format: 999999999<br>Leading Zeroes |

| Mstr<br>Seq<br>Nbr | NAME OF FIELD  | Field<br>Format | Field<br>Length | Field<br>Location<br>From-To | Definition of Field<br>Value/Comments  | Notes                               |
|--------------------|--|-----------------|-----------------|------------------------------|--|-------------------------------------|
| 14                 | Comma<br>Delimiter7  | A/N             | 1               | 68-68                        | Comma Delimiter  |                                     |
| 15                 | 340b No<br>Encounter<br>Claim Match In<br>MMIS Claim<br>Count                      | N               | 9               | 69-77                        | Number of 340B claims with no Encounter Claim Match in the MMIS.                         | Format: 999999999<br>Leading Zeroes |
| 16                 | Comma<br>Delimiter8  | A/N             | 1               | 78-78                        | Comma Delimiter  |                                     |
| 17                 | 340b Record<br>Submitted For<br>Removal Not<br>Found In The<br>MMIS Claim<br>Count | N               | 9               | 79-87                        | Number of 340B<br>claims Submitted<br>For Removal But<br>Not Found In The<br>MMIS Claim. | Format: 999999999<br>Leading Zeroes |
| 18                 | Comma<br>Delimiter9  | A/N             | 1               | 88-88                        | Comma Delimiter  |                                     |
| 19                 | 340b Claims In<br>Error Count  | N               | 9               | 89-97                        | Number of 340B claims in error in the file.  | Format: 999999999<br>Leading Zeroes |