

01.09.2024

Coordination of Benefit Processing Reminder

Please follow NCPDP D.0 standard messaging and Express Scripts secondary messaging when processing Medicaid secondary COB claims. Claims will reject when pharmacies fail to submit the required COB information appropriately.

Please resubmit COB claims using the following information:

Reject Code	Description	Submission Issue	How to Resolve
DV	M/I Other Payer Amount Paid	Submitted COB claim contains both OPAP and OPPRA values	Remove OPPRA values and resubmit only OPAP values
41	Submit Bill to Other Processor or Primary Payer	Primary claim submitted to secondary only coverage (or COB claim submitted with OCC \leq 1).	Submit claim to primary coverage before submitting secondary/COB claim with all required fields (including OCC value > 1)
52	Non-Matched Cardholder ID	Cardholder ID does not match other data elements submitted	Resubmit using information from the patient's prescription ID card
442	M/I Other Payer Amount Paid	COB claim submitted as OPAP, should be OPPRA	Remove values for OPAP and resubmit with OPPRA values
443	Other Payer-Patient Responsibility Amount Grouping Incorrect	COB claim submitted as OPPRA, should be OPAP	Remove values for OPPRA and resubmit with OPAP values
5E	M/I Other Payer Reject Count	COB claim submitted with missing # of rejects from primary payer or provided some reject details on non-OCC 3 (e.g. OCC 2)	If submitting OCC 3, ensure count of rejects from primary payer are submitted If not submitting OCC 3, remove count of rejects (invalid scenario)
6C	M/I Other Payer ID Qualifier	BIN # was not provided for the primary payer	Resubmit with BIN# for primary payer

8W	Discrepancy Between Other Coverage Code and Other Payer Amount Paid	COB claim submitted with an OCC that conflicts with the Other Payer Amount field	If OCC 2, ensure the Other Payer Amount is >\$0 If OCC 3, 4 or 8, ensure the Other Payer Amount is \$0
HB	M/I Other Payer Amount Paid Count	COB claim submitted indicating other payers, but count of Other Payer Amounts missing (e.g. Other Payer Amount Paid = \$10, but Other Payer Amount Count is zero or blank)	Provide the number of Other Payer Amount counts and resubmit
NQ	M/I Other Payer-Patient Responsibility Amount	COB claim submitted both OPAP and OPPRA values	Remove values for OPAP and resubmit with just the OPPRA values
PE	M/I COB/Other Payment Segments	COB claim submitted with required COB fields missing	Resubmit with all required COB fields

If you need a member's specific prescription processing information or other help with a claim, please visit our Pharmacist Resource Center at <https://prc.express-scripts.com>.