

NCPDP Batch Standard

To implement the Batch Standard for HIPAA, the Batch Standard Implementation Guide Version 1.2 is used. Since the Batch Standard uses the data elements, parsing routine and many of the rules of the Telecommunication Standard, the following are used:

- Telecommunication Standard Implementation Guide (for transactions, segments, fields, rules)
- Data Dictionary (for field definitions and formats)
- External Code List (for field values)

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Many of the pharmacy transactions today are processed online, real-time; hence the NCPDP Telecommunication Standard is used. There was a business need to support the same functionality as the Telecommunication Standard, except in a batch environment.

The NCPDP Batch Standard was created to use the functionality of the Telecommunication Standard. The Batch Standard uses the same syntax, formatting, data set, and rules as the Telecommunication Standard. The Batch Standard “wraps” the Telecommunication Standard around a detail record; then adds a batch header and trailer. This allows implementers to “code once”. It was intended that once a NCPDP Data Record (containing the Telecommunication Standard transaction) was built, it could then be “wrapped” with the Detail Data Record. Then the Transmission Header Record and the Transmission Trailer Record are created. The Batch consisting of Header, Detail Data Records, and Trailer are formed into a batch file. The creation of the Detail Data Record could be processed in the same manner as the online, real-time transaction, since they both began as the Telecommunication Standard transaction.

Detailed information of the transactions, segments, fields, rules, syntax is found in the Telecommunication Standard Implementation Guide. While there is much more information for a developer contained in the guide, for purposes of this information, note that the Transaction Header Segment in the request, and the Response Header Segment in the response are fixed length segments containing fixed length fields. The rest of the segments in the request or response (such as Patient Segment, Insurance Segment, Claim Segment, Response Status Segment, Response Claim Segment, etc) are variable segments with variable fields (where applicable) and variable field lengths.

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