

Real-Time D.0 N Hospice Election Status Transaction Request (N1, N2, N3)

Modified effective 2/9/2023 to include Patient Segment with Date of Birth and Gender fields.

Modified 2/27/23 to remove MBI reference from Cardholder ID.

REQUEST HEADER SEGMENT: MANDATORY

Field	Field Name	Value	Comments
101-A1	BIN NUMBER		Part D plan BIN
102-A2	VERSION/RELEASE NUMBER	D0	Current version
103-A3	TRANSACTION CODE		N1, N2, N3
104-A4	PROCESSOR CONTROL NUMBER		Part D PCN
109-A9	TRANSACTION COUNT	1	1
202-B2	SERVICE PROVIDER ID QUALIFIER	01	01=NPI
201-B1	SERVICE PROVIDER ID		(Hospice NPI)
401-D1	DATE OF SERVICE		The date the transaction facilitator received 837i or the effective date for a record being cancelled or the incorrect effective date being removed
110-AK	SOFTWARE VENDOR /CERTIFICATION ID	HOSPICE	HOSPICE related N transactions

REQUEST INSURANCE SEGMENT: MANDATORY

Field	Field Name	Value	Comments
111-AM	SEGMENT IDENTIFICATION	04	04=Insurance
302-C2	CARDHOLDER ID		Part D Cardholder ID
312-CC	CARDHOLDER FIRST NAME		Cardholder First name of the beneficiary from CMS database. N1 and N3 only
313-CD	CARDHOLDER LAST NAME		Cardholder Last name of the beneficiary from the CMS database. N1 and N3 only
301-C1	GROUP ID		Field is not sent if Group ID is unknown.

REQUEST PATIENT SEGMENT: MANDATORY (Included effective 2/9/2023)

Field	Field Name	Value	Comments
111-AM	SEGMENT IDENTIFICATION	01	01 = Patient Segment
304-C4	DATE OF BIRTH		
305-C5	PATIENT GENDER CODE		

REQUEST CLAIM SEGMENT: MANDATORY

Field	Field Name	Value	Comments
111-AM	SEGMENT	07	07=Claim
455-EM	PRESCRIPTION/SERVICE REFERENCE NUMBER QUALIFIER	2	2
402-D2	PRESCRIPTION/SERVICE REFERENCE NUMBER		999999999999 or 3 -If N2 and = 999999999999 remove entire record for NPI in the Service Provider ID field as the only action to be completed -If N2 and = 3 - multiple actions: remove entire record for NPI in the Service Provider ID and reinstate (remove termination date) of prior NPI
436-E1	PRODUCT/SERVICE ID QUALIFIER	99	99
407-D7	PRODUCT/SERVICE ID		HOSPICE837 or HOSPICECWF
880-K5	TRANSACTION REFERENCE NUMBER		This number is generated by the Transaction Facilitator.

REQUEST CLINICAL SEGMENT: SITUATIONAL (N1 or N3)

Field	Field Name	Value	Comments
111-AM	SEGMENT IDENTIFICATION	13	13=Clinical
493-XE	CLINICAL INFORMATION COUNTER		1
494-ZE	MEASUREMENT DATE		The date associated with the clinical count being reported. If the counter is not applicable to the transaction the date will contain 99999999
493-XE	CLINICAL COUNTER		2
494-ZE	MEASUREMENT DATE		The date associated with the clinical count being reported. If the counter is not applicable to the transaction the date will contain 99999999
493-XE	CLINICAL COUNTER		3
494-ZE	MEASUREMENT DATE		The date associated with the clinical count being reported. If the counter is not applicable to the transaction the date will contain 99999999
493-XE	CLINICAL COUNTER		4

Note: Clinical Information Counter number represents:

1 = Hospice Effective Date of Election – (NOE)

2 = Live Discharge – (NOT and NOTR)

3 = Hospice Transfer Date – (NOC)

4 = This represents the date that needs to be replaced or updated for a previously sent record, used with clinical counters 1, 2 or 3. It is the effective date, termination date or transfer date that needs to be replaced or updated.

Note: The Clinical Segment has been repurposed for the Hospice Election Status Nx transactions. The Clinical Information Counter value, along with the Measurement Date, indicate appropriate application of the transaction by the plan.

Real-Time D.0 N Hospice Election Status Transaction Response (N1, N2, N3)

RESPONSE HEADER SEGMENT: MANDATORY

Field	Field Name	Value	Comment
102-A2	VERSION/ RELEASE NUMBER	D0	Current Version
103-A3	TRANSACTION CODE		N1, N2, or N3
109-A9	TRANSACTION COUNT	1	1
501-F1	HEADER RESPONSE STATUS		A (Accepted) or R (Rejected)
202-B2	SERVICE PROVIDER ID QUALIFIER	01	01-NPI
201-B1	SERVICE PROVIDER ID		Hospice provider from the request
401-D1	DATE OF SERVICE		DOS provided on the N Request Transaction

RESPONSE STATUS SEGMENT: MANDATORY

Field	Field Name	Value	Comments
111-AM	SEGMENT IDENTIFICATION	21	21=Response Status
112-AN	TRANSACTION RESPONSE STATUS		A= Approved (Accepted) or R=Rejected
503-F3	AUTHORIZATION NUMBER		N/A
510-FA	REJECT COUNT		Required when Hospice Nx is rejected.
511-FB	REJECT CODE		See NCPDP D.0 Reject Code list (if required field is missing or syntax error if response
880-K5	TRANSACTION REFERENCE NUMBER		Same information as provided N Request Transaction

RESPONSE CLAIM SEGMENT: MANDATORY

Field	Field Name	Value	Comments
111-AM	SEGMENT IDENTIFICATION	22	22=Response Claim Segment
455-EM	PRESCRIPTION/ SERVICE REFERENCE NUMBER		Same information as provided on the N request from supplemental payer
402-D2	PRESCRIPTION/ SERVICE REFERENCE NUMBER		Same information as provided on the N request file from supplemental payer