
NCPDP’s Telecommunication Standard Version F6 Is Kind of a Big Deal!

We’ve been talking about it for a while but do your product management and programming teams know what to expect? Now is the best time to get all the details your teams need to plan for an effective and successful implementation! Here are just some of the enhancements available in F6:

- Expanded Field for Specialty & Other High-Cost Medications - All dollar fields were increased by three digits except the Other Payer Patient Responsibility Amount (352-NQ), which was increased by one digit.
- Mitigate Risk to Patients When Formulary Changes Are Made - A new field was added to the Response Claim Segment to support proactive communication about upcoming formulary changes and help mitigate risks that impact access to care and medication adherence.
- Expedite Patient Care with New Segment for Federal & State File Source - A new segment, Response Provider Segment, was added with two new fields: Data Source of Invalid Provider Determination and State Code for Data Source of Invalid Provider Determination to help pharmacy providers arrange appropriate access and expedite the resolution of patient care by providing the specific federal or state file source and the associated state code, if applicable.
- Codified DUR Fields Support Patient Safety & Provider, Payer Workflows - The DUR/PPS Response segment was modified to capture within codified fields critical detail regarding the DUR conflict that is currently being returned in text fields. Moving the information into codified fields will increase patient safety and workflow efficiencies, and better support harmonization of the DUR information communicated between the payer, pharmacy, prescriber, and patient.
- Support for Capturing Patient Identifiers Across Multiple Entities - The Request Patient Segment and the Response Patient Segment were updated to include the Patient ID Count, and the Patient ID Qualifier and Patient ID were changed to repeating data elements to support the communication and sharing of multiple universal patient identifiers from different enumerating entities on a single transaction.
- Support for Additional Patient Benefit Information – Two fields were added, Benefit Type Opportunity Count and Benefit Type Opportunity, to the Response Claim Segment to provide additional information on the patient’s benefit. This was done to promote transparency of plan benefit information allowing the patient to take advantage of areas of their plan benefit they may be unaware of.

There Are Also Important, Related Enhancements in Batch Standard Version 15 & Subrogation Implementation Guide for Batch Standard V10!

It’s not all about F6 – the new Batch Standard Implementation Guide Version 15 and Subrogation Implementation Guide for Batch Standard Version 10 have important enhancements to leverage when you implement the Telecommunication Standard Version F6. Among the highlights are an increased length of field to match the Reconciliation ID, and now any payer can perform Subrogation using a standard!

GET READY… START NOW! Register for NCPDP’s 2022 Virtual Educational Summit, Telecommunication F6 & Related Standards: Prepare for Implementation today! Early Bird Savings End October 21st:

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