



DELAWARE HEALTH AND SOCIAL SERVICES
Division of Medicaid & Medical Assistance

DMAP Provider Alert

June 12, 2009

Attention Pharmacy Providers

The Delaware Medical Assistance Program (DMAP) will modify its electronic remittance advice to enable pharmacies to more easily identify claims voided at Point-of-Service (POS). This modification will provide additional patient-level detail, which will permit pharmacies to perform the automated posting of prescription claims voided at POS and to adjust the patient accounts receivable status.

As an electronic remittance advice, the 835 transaction provides detailed payment information about healthcare claims. This remittance information provides justification for the payment as well as input to the pharmacy's accounts receivable and general ledger applications. The 835 transaction information consists of two separate levels:

- **Level One (claim and service information).** This is contained in the Claim Payment Information Segment (CLP) and Claim Level Adjustment Segment (CAS).
- **Level Two (information not specific to the claims and services in Level One).** This is contained in the Provider Adjustment Segment (PLB).

Previously, POS void information for drug claims that had reached final payment was reported in the "PLB" segment of the 835 transaction as **Level Two - financial activity**. As a result of this modification, the POS void information will be removed from the 835 PLB segment and reported instead in the 835 "CLP" and "CAS" segments as **Level One - claim activity**.

Because an adjusted claim is considered Level One information on the 835 remittance advice transaction, a POS void of a paid claim will be processed as a "claim adjustment" within the MMIS.

If you have any questions, call EDS Provider Relations at 302-454-7154 and follow the prompts for the Provider Relations Call Center.

Contact Provider Relations at:

302-454-7154

or

1-800-999-EDS1 (3371) in DE, MD, NJ, PA, and DC

