

(1,1)

**BPS\_CLAIMS\_9002313\_02\_9002313\_0201**

- ◆ TRANSACTION\_ORDER
- ◆ MEDICATION\_NAME
- ◆ PRESCRIPTION\_NUMBER
- ◆ MEDICAID\_PAID\_AMOUNT
- ◆ BILLING\_ENTITY\_TYPE\_INDICATOR
- ◆ PAY\_TO\_QUALIFIER
- ◆ PAY\_TO\_ID
- ◆ PAY\_TO\_NAME
- ◆ PAY\_TO\_STREET\_ADDRESS
- ◆ PAY\_TO\_CITY\_ADDRESS
- ◆ PAY\_TO\_STATE/PROVINCE\_ADDRESS
- ◆ PAY\_TO\_ZIP/POSTAL\_ZONE
- ◆ GENERIC\_EQVLNT\_PRODUCT\_ID\_QLFR
- ◆ GENERIC\_EQUIVALENT\_PRODUCT\_ID
- ◆ PHARMACY\_SERVICE\_TYPE
- ◆ OTHER\_COVERAGE\_CODE
- ◆ EMPLOYER\_NAME
- ◆ EMPLOYER\_STREET\_ADDRESS
- ◆ EMPLOYER\_CITY\_ADDRESS
- ◆ EMPLOYER\_STATE\_PROV\_ADDRESS
- ◆ EMPLOYER\_ZIP\_POSTAL\_ZONE
- ◆ EMPLOYER\_PHONE\_NUMBER
- ◆ EMPLOYER\_CONTACT\_NAME
- ◆ CARRIER\_ID
- ◆ ALTERNATE\_ID

(1,2)

**BPS\_RESPONSES\_9002313\_03\_9002313\_03**

◆ TRANSACTION\_ORDER  
◆ TRANSACTION\_RESPONSE\_STATUS  
◆ MEDICAID\_SUBROGATION\_ICN/TCN  
◆ SPENDING\_ACCOUNT\_AMT\_REMAINING  
◆ HEALTH\_PLAN-FUNDED\_ASSTNCE\_AMT  
◆ ADDITIONAL\_MESSAGE\_INFO\_COUNT  
◆ ADDITIONAL\_MESSAGE\_MLTP  
◆ AMT\_ATTRIB\_TO\_PRVDR\_NTWK\_SEL  
◆ AMT\_ATTR\_PROD\_SEL\_BRAND\_DRUG  
◆ AMT\_ATTR\_PRD\_NON-PREF\_FRMLRY  
◆ AMT\_ATTR\_BRAND\_NON-PREF\_FRMLR'  
◆ AMOUNT\_ATTRIB\_TO\_COVERAGE\_GAP  
◆ CMS\_LICS\_LEVEL  
◆ MEDICARE\_PART\_D\_COVERAGE\_CODE  
◆ NEXT\_MEDICARE\_PART\_D\_EFFCTV\_DT  
◆ NEXT\_MEDICARE\_PART\_D\_TERM\_DATE  
◆ INGRED\_COST\_CNTRCTD\_REIMB\_AMT  
◆ DISP\_FEE\_CNTRCTD\_REIMB\_AMOUNT  
◆ CONTRACT\_NUMBER  
◆ BASIS\_OF\_CALC-DISPENSING\_FEE  
◆ BASIS\_FOR\_COPAY  
◆ BASIS\_OF\_CALC-FLAT\_SALES\_TAX  
◆ BASIS\_FOR\_PERCENTAGE\_TAX  
◆ OTHER\_PAYER\_ID\_COUNT

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◆ COB\_OTHER\_PAYMENTS\_COUNT  
◆ COB\_OTHER\_PAYMENTS  
◆ DISPENSING\_STATUS  
◆ QUANTITY\_ORDERED  
◆ DAYS\_SUPPLY\_ORDERED  
◆ SUBM\_CLARIFICATION\_CODE\_COUNT  
◆ SUBMISSION\_CLARIFICATION\_MLTPL  
◆ DELAY\_REASON\_CODE  
◆ PRESCRIBER\_FIRST\_NAME  
◆ PRESCRIBER\_STREET\_ADDRESS  
◆ PRESCRIBER\_CITY\_ADDRESS  
◆ PRESCRIBER\_STATE/PROV\_ADDRESS  
◆ PRESCRIBER\_ZIP/POSTAL\_ZONE  
◆ ADDITIONAL\_DOCUMNTN\_TYPE\_ID  
◆ LENGTH\_OF\_NEED  
◆ LENGTH\_OF\_NEED\_QUALIFIER  
◆ PRESCRIBER/SUPPLIER\_DT\_SIGNED  
◆ REQUEST\_STATUS  
◆ REQUEST\_PERIOD\_BEGIN\_DATE  
◆ REQUEST\_PD\_RECERT/REVISED\_DATE  
◆ SUPPORTING\_DOCUMENTATION  
◆ QUESTION\_NUMBER/LETTER\_COUNT  
◆ QUESTION\_NUMBER/LETTER\_MLTPL  
◆ FACILITY\_NAME  
◆ FACILITY\_STREET\_ADDRESS  
◆ FACILITY\_STATE/PROV\_ADDRESS  
◆ FACILITY\_CITY\_ADDRESS  
◆ FACILITY\_ZIP/POSTAL\_ZONE  
◆ NARRATIVE\_MESSAGE  
◆ PATIENT\_ASSIGNMENT\_INDICATOR  
◆ PRESCRIPTION/SERVICE\_REF\_NO  
◆ FILL\_NUMBER  
◆ DAYS\_SUPPLY  
◆ COMPOUND\_CODE  
◆ PRODUCT\_SERVICE\_ID  
◆ DISPENSE\_AS\_WRITTEN  
◆ INGREDIENT\_COST\_SUBMITTED  
◆ PRESCRIBER\_ID  
◆ DISPENSING\_FEE\_SUBMITTED  
◆ DATE\_PRESCRIPTION\_WRITTEN  
◆ NUMBER\_OF\_REFILLS\_AUTHORIZED  
◆ LEVEL\_OF\_SERVICE  
◆ PRESCRIPTION\_ORIGIN\_CODE  
◆ PRIMARY\_CARE\_PROVIDER\_ID  
◆ BASIS\_OF\_COST\_DETERMINATION  
◆ DIAGNOSIS\_CODE  
◆ USUAL\_AND\_CUSTOMARY\_CHARGE  
◆ PRESCRIBER\_LAST\_NAME  
◆ SPECIAL\_PACKAGING\_INDICATOR  
◆ GROSS\_AMOUNT\_DUE  
◆ OTHER\_PAYER\_AMOUNT  
◆ PATIENT\_PAID\_AMOUNT\_SUBMITTED  
◆ DATE\_OF\_INJURY  
◆ CLAIM\_REFERENCE\_ID  
◆ PRODUCT\_SERVICE\_ID\_QUALIFIER  
◆ INCENTIVE\_AMOUNT\_SUBMITTED

(2,2)

**BPS\_RESPONSES\_9002313\_03\_9002313\_39999**

◆ RAW\_DATA\_RECEIVED

**BPS\_RESPONSES\_9002313\_03**

◆ BPS\_CLAIM  
◆ DATE\_RESPONSE\_RECEIVED  
◆ VERSION\_RELEASE\_NUMBER  
◆ TRANSACTION\_CODE  
◆ TRANSACTION\_COUNT  
◆ MEDICAID\_ID\_INDICATOR  
◆ MEDICAID\_AGENCY\_NUMBER  
◆ SERVICE\_PROVIDER\_ID  
◆ SERVICE\_PROVIDER\_ID\_QUALIFIER  
◆ GROUP\_ID  
◆ CARDHOLDER\_ID  
◆ DATE\_OF\_BIRTH  
◆ PATIENT\_FIRST\_NAME  
◆ PATIENT\_LAST\_NAME  
◆ DATE\_OF\_SERVICE  
◆ RESPONSE\_STATUS  
◆ MESSAGE

◆ OTHER\_PAYER\_ID\_MLTPL  
◆ BENEFIT\_STAGE\_COUNT  
◆ BENEFIT\_STAGE\_INFO  
◆ PRESCRIPTION\_REFERENCE\_NUMBER  
◆ RX\_REFERENCE\_NUMBER\_QUALIFIER  
◆ PRIOR\_AUTH\_NUMBER-ASSIGNED  
◆ DATE\_OF\_PRIOR\_AUTHORIZATION  
◆ PRIOR\_AUTHORIZATION\_START  
◆ PRIOR\_AUTHORIZATION\_END  
◆ PRIOR\_AUTH\_NO\_REFILLS\_AUTHRZD  
◆ PRIOR\_AUTH\_QTY\_ACCUMULATED  
◆ PRIOR\_AUTHORIZATION\_QUANTITY  
◆ PRIOR\_AUTHORIZATION\_AMOUNT  
◆ HEADER\_RESPONSE\_STATUS  
◆ AUTHORIZATION\_NUMBER  
◆ MESSAGE  
◆ PATIENT\_PAY\_AMOUNT  
◆ INGREDIENT\_COST\_PAID  
◆ DISPENSING\_FEE\_PAID  
◆ TOTAL\_AMOUNT\_PAID  
◆ REJECT\_COUNT  
◆ REJECT\_CODE  
◆ ACCUMULATED\_DEDUCTIBLE\_AMOUNT  
◆ REMAINING\_DEDUCTIBLE\_AMOUNT  
◆ REMAINING\_BENEFIT\_AMOUNT  
◆ AMT\_APPLD\_PERIODIC\_DEDUCTIBLE  
◆ AMOUNT\_OF\_COPAY  
◆ AMT\_ATTRIB\_TO\_PROD\_SELECTION  
◆ AMT\_EXCEEDING\_PERIOD\_BNFT\_MAX  
◆ INCENTIVE\_AMOUNT\_PAID  
◆ BASIS\_OF\_REIMB\_DETERMINATION  
◆ AMOUNT\_ATTRIBUTED\_TO\_SALES\_TAX  
◆ DUR\_RESPONSE\_DATA  
◆ \*ADDITIONAL\_MESSAGE\_INFORMATIO  
◆ APPROVED\_MESSAGE\_CODE\_COUNT  
◆ APPROVED\_MESSAGE\_CODE  
◆ HELP\_DESK\_PHONE\_QUALIFIER  
◆ HELP\_DESK\_PHONE\_NUMBER  
◆ PREFERRED\_PRODUCT\_COUNT  
◆ PREFERRED\_PRODUCT\_REPEATING  
◆ TAX\_EXEMPT\_INDICATOR  
◆ FLAT\_SALES\_TAX\_PAID  
◆ PERCENTAGE\_SALES\_TAX\_PAID  
◆ PERCENTAGE\_SALES\_TAX\_RATE\_PAID  
◆ PERCENTAGE\_SALES\_TAX\_BASIS\_PD  
◆ PROFESSIONAL\_SERVICE\_FEE\_PAID  
◆ OTHER\_AMOUNT\_PAID\_COUNT  
◆ OTHER\_AMOUNTS\_PAID  
◆ OTHER\_PAYER\_AMOUNT\_RECOGNIZED  
◆ DUR\_PPS  
◆ AMOUNT\_ATTRIBUTED\_TO\_PROC\_FEE  
◆ AMOUNT\_OF\_COINSURANCE  
◆ BASIS\_OF\_CALC-COINSURANCE  
◆ PLAN\_SALES\_TAX\_AMOUNT  
◆ PATIENT\_SALES\_TAX  
◆ ESTIMATED\_GENERIC\_SAVINGS

**BILL/CLAIMS\_399**

◆ BILL\_NUMBER

**INSURANCE\_COMPANY\_36**

NAME

**BPS\_CERTIFICATION\_9002313\_31**

◆ NAME

**GROUP\_INSURANCE\_PLAN\_355\_3**

◆ INSURANCE\_COMPANY

**BPS\_NCPDP\_FORMATS\_9002313\_92**

◆ RECORD\_FORMAT\_NAME

**RATE\_TYPE\_399\_3****BPS\_TRANSACTION\_9002313\_59\_9002313**

◆ PLAN\_ID  
◆ B1\_PAYER\_SHEET  
◆ BIN  
◆ PCN  
◆ GROUP\_ID  
◆ CARDHOLDER\_ID  
◆ PATIENT\_RELATIONSHIP\_CODE  
◆ CARDHOLDER\_FIRST\_NAME  
◆ CARDHOLDER\_LAST\_NAME  
◆ PERSON\_CODE  
◆ HOME\_PLAN\_STATE  
◆ DISPENSING\_FEE\_SUBMITTED  
◆ BASIS\_OF\_COST\_DETERMINATION  
◆ USUAL\_CUSTOMARY\_CHARGE  
◆ GROSS\_AMOUNT\_DUE  
◆ ADMINISTRATIVE\_FEE  
◆ VA\_FILL\_NUMBER  
◆ SOFTWARE\_VENDOR\_CERT\_ID  
◆ B2\_PAYER\_SHEET  
◆ INGREDIENT\_COST  
◆ B3\_PAYER\_SHEET  
◆ CERTIFY\_MODE  
◆ CERTIFICATION  
◆ INSURANCE\_NAME  
◆ GROUP\_NAME  
◆ INSURANCE\_CO\_PHONE  
◆ PHARMACY\_PLAN\_ID  
◆ ELIGIBILITY  
◆ RATE\_TYPE  
◆ PRIMARY\_PAYER\_BILL  
◆ PRIOR\_PAYMENT  
◆ PLAN\_COB  
◆ INSURANCE\_COMPANY  
◆ E1\_PAYER\_SHEET  
◆ POLICY\_NUMBER  
◆ MAXIMUM\_NCPDP\_TRANSACTIONS

(2,4)

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(3,1)

◆ QUANTITY\_DISPENSED  
◆ OTHER\_PAYER\_DATE  
◆ PROVIDER\_ID  
◆ ORIGINAL\_PRESCRIBED\_PROD\_CODE  
◆ ORIGINALLY\_PRESCRIBED\_QUANTITY  
◆ COMPOUND\_INGREDIENT\_COUNT  
◆ COMPOUND\_REPEATING\_FIELDS  
◆ COMPOUND\_DOSAGE\_DESCRIPTION  
◆ COMPOUND\_DISPENSING\_INDICATOR  
◆ COMPOUND\_ROUTE\_OF\_ADMIN  
◆ ORIGINAL\_PRODUCT\_SERVICE\_ID  
◆ SCHEDULED\_RX\_ID\_NUMBER  
◆ PRESCRIPTION\_SERVICE\_REFERENCE  
◆ ASSOCIATED\_RX/SERVICE\_REF\_NO  
◆ ASSOCIATED\_PRESCRIPTION\_DATE  
◆ PROCEDURE\_MODIFIER\_CODE\_COUNT  
◆ PROCEDURE\_MODIFIER\_CODE  
◆ QUANTITY\_PRESCRIBED  
◆ PRIOR\_AUTHORIZATION\_TYPE\_CODE  
◆ PRIOR\_AUTHORIZATION\_SUBMITTED  
◆ INTERMEDIARY\_AUTH\_TYPE\_ID  
◆ INTERMEDIARY\_AUTHORIZATION\_ID  
◆ PROVIDER\_ID\_QUALIFIER  
◆ PRESCRIBER\_ID\_QUALIFIER  
◆ PRESCRIBER\_LOCATION\_CODE  
◆ PC\_PROVIDER\_ID\_QUALIFIER  
◆ PC\_PROVIDER\_LOCATION\_CODE  
◆ PC\_PROVIDER\_LAST\_NAME  
◆ OTHER\_PAYER\_REJECT\_COUNT  
◆ DUR\_PPS\_REPEATING\_FIELDS  
◆ PROFESSIONAL\_FEE\_SUBMITTED  
◆ OTHER\_AMT\_CLAIMED\_SUBMITTED\_CNT  
◆ OTHER\_AMT\_CLAIMED\_MULTIPLE  
◆ FLAT\_SALES\_TAX\_SUBMITTED  
◆ PERCENTAGE\_SALES\_TAX\_SUBMITTED  
◆ PERCENTAGE\_SALES\_TAX\_RATE  
◆ PERCENTAGE\_SALES\_TAX\_BASIS  
◆ COUPON\_TYPE  
◆ COUPON\_NUMBER  
◆ COUPON\_VALUE\_AMOUNT  
◆ DIAGNOSIS\_CODE\_COUNT  
◆ CLINICAL\_DIAGNOSIS  
◆ CLINICAL\_INFORMATION\_COUNT  
◆ CLINICAL\_INFORMATION  
◆ REQUEST\_TYPE  
◆ REQUEST\_PERIOD\_END\_DATE  
◆ BASIS\_OF\_REQUEST  
◆ AUTHORIZED\_REP\_FIRST\_NAME  
◆ AUTHORIZED\_REP\_LAST\_NAME  
◆ AUTHORIZED\_REP\_STREET\_ADDRESS  
◆ AUTHORIZED\_REP\_CITY\_ADDRESS  
◆ AUTHORIZED\_REP\_STATE\_PROV  
◆ AUTHORIZED\_REP\_ZIP  
◆ PRESCRIBER\_PHONE\_NUMBER  
◆ PRIOR\_AUTH\_SUPPORTING\_DOCUMENTN  
◆ PRIOR\_AUTH\_NUMBER\_ASSIGNED  
◆ AUTHORIZATION\_NUMBER

(3,2)

- ◆ PLAN\_IDENTIFICATION
- ◆ NETWORK\_REIMBURSEMENT\_ID
- ◆ PAYER\_ID\_QUALIFIER
- ◆ PAYER\_ID
- ◆ RESPONSES
- ◆ RAW\_DATA\_RECEIVED

- ◆ BENEFIT\_ID
- ◆ TRANSACTION\_REFERENCE\_NUMBER
- ◆ FORMULARY\_ID
- ◆ URL
- ◆ INTERNAL\_CONTROL\_NUMBER
- ◆ DUPLICATE\_RESPONSE\_DATA
- ◆ ADJUDICATED\_PAYMENT\_TYPE
- ◆ NEXT\_AVAIL\_FILL\_DATE

#### CLAIMS\_TRACKING\_NON-BILLABLE\_REASONS\_356\_8

◆ NAME

#### BPS\_CLAIMS\_9002313\_02

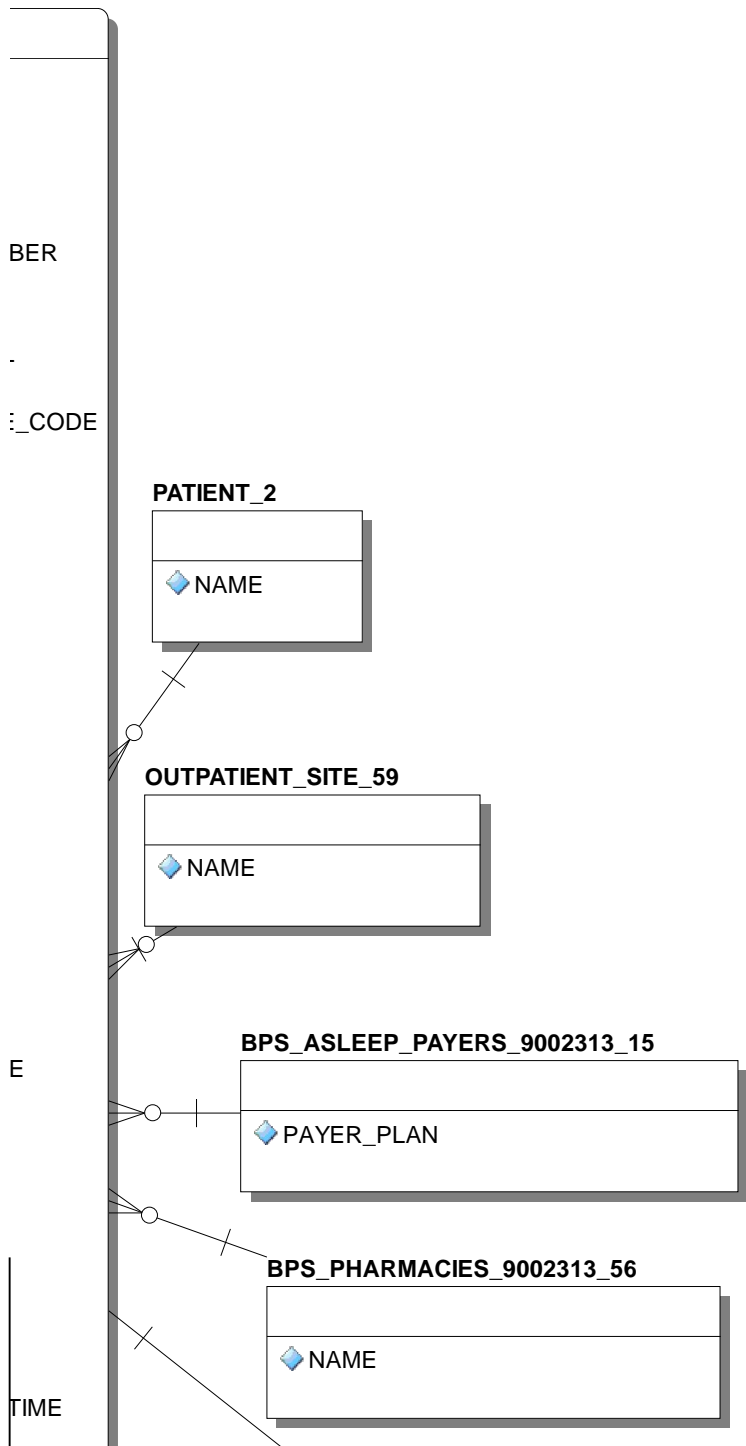
- ◆ CLAIM\_ID
- ◆ ELECTRONIC\_PAYER
- ◆ TRANSMIT\_FLAG
- ◆ TRANSMITTED\_ON
- ◆ CREATED\_ON
- ◆ AUTO\_REVERSE\_FLAG
- ◆ TRANSACTION
- ◆ PATIENT\_NAME
- ◆ GROUP\_INSURANCE\_PLAN
- ◆ BIN\_NUMBER
- ◆ VERSION\_RELEASE\_NUMBER
- ◆ TRANSACTION\_CODE
- ◆ PROCESSOR\_CONTROL\_NUMBER
- ◆ TRANSACTION\_COUNT
- ◆ SOFTWARE\_VENDER\_CERT\_ID
- ◆ MEDICAID\_SUBROGATION\_ICN/TCN
- ◆ MEDICAID\_ID\_NUMBER
- ◆ MEDICAID\_AGENCY\_NUMBER
- ◆ SERVICE\_PROVIDER\_ID
- ◆ SERVICE\_PROVIDER\_ID\_QUAL
- ◆ GROUP\_ID
- ◆ CARDHOLDER\_ID
- ◆ PERSON\_CODE
- ◆ DATE\_OF\_BIRTH
- ◆ PATIENT\_GENDER\_CODE
- ◆ PATIENT\_RELATIONSHIP\_CODE
- ◆ PLACE\_OF\_SERVICE
- ◆ ELIGIBILITY\_CLARIFICATION\_CODE
- ◆ PATIENT\_FIRST\_NAME
- ◆ PATIENT\_LAST\_NAME
- ◆ CARDHOLDER\_FIRST\_NAME
- ◆ CARDHOLDER\_LAST\_NAME
- ◆ HOME\_PLAN
- ◆ PATIENT\_STREET\_ADDRESS
- ◆ PATIENT\_CITY\_ADDRESS
- ◆ PATIENT\_STATE\_PROV\_ADDRESS
- ◆ PATIENT\_ZIP\_POSTAL\_ZONE
- ◆ PATIENT\_PHONE\_NUMBER
- ◆ PATIENT\_ID\_QUALIFIER
- ◆ PATIENT\_ID
- ◆ EMPLOYER\_ID
- ◆ SMOKER\_INDICATOR
- ◆ PREGNANCY\_INDICATOR
- ◆ FACILITY\_ID

#### BPS\_CLAIMS\_9002313\_02\_9002313\_29999

◆ RAW\_DATA\_SENT



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(4,1)

▲ AUTHORIZATION\_NUMBER  
◆ SERVICE\_PROVIDER\_ID\_QUALIFIER  
◆ SERVICE\_PROVIDER\_ID  
◆ SERVICE\_REFERENCE\_NUMBER\_QUAL  
◆ SERVICE\_FILL\_NUMBER  
◆ SERVICE\_PROVIDER\_NAME  
◆ SERVICE\_PROVIDER\_STREET  
◆ SERVICE\_PROVIDER\_CITY  
◆ SERVICE\_PROVIDE\_STATE/PROVINCE  
◆ SERVICE\_PROVIDER\_ZIP/POST\_CODE  
◆ SELLER\_INITIALS  
◆ PURCHASER\_ID\_QUALIFIER  
◆ PURCHASER\_ID  
◆ PURCHASER\_ID\_STATE/PROVINCE  
◆ PURCHASER\_DATE\_OF\_BIRTH  
◆ PURCHASER\_GENDER\_CODE  
◆ PURCHASER\_FIRST\_NAME  
◆ PURCHASER\_LAST\_NAME  
◆ PURCHASER\_STREET\_ADDRESS  
◆ PURCHASER\_CITY\_ADDRESS  
◆ UNIT\_OF\_MEASURE  
◆ PURCHASER\_STATE/PROVINCE\_CODE  
◆ PURCHASER\_ZIP/POSTAL\_CODE  
◆ PURCHASER\_COUNTRY\_CODE  
◆ TIME\_OF\_SERVICE  
◆ SELLER\_ID  
◆ SELLER\_ID\_QUALIFIER  
◆ SALES\_TRANSACTION\_ID  
◆ TRANSACTION\_REFERENCE\_NUMBER  
◆ ROUTE\_OF\_ADMINISTRATION  
◆ COMPOUND\_TYPE  
◆ PURCHASER\_RELATIONSHIP\_CODE  
◆ PRESCRIBER\_ID\_STATE/PROVINCE  
◆ PRESCRIBER\_ALTERNATE\_ID\_QUAL  
◆ PRESCRIBER\_ALTERNATE\_ID  
◆ PRESCRIBER\_ALTERNATE\_STATE  
◆ REPORTED\_PAYMENT\_TYPE  
◆ RELEASED\_DATE  
◆ RELEASED\_TIME  
◆ COMPOUND\_PREPARATION\_TIME

(4,2)

- ◆ PATIENT\_E-MAIL\_ADDRESS
- ◆ OTHER\_PAYER\_CARDHOLDER\_ID
- ◆ MEDIGAP\_ID
- ◆ MEDICAID\_INDICATOR
- ◆ PROVIDER\_ACCEPT\_ASSGNMT\_IN
- ◆ PATIENT\_RESIDENCE
- ◆ TRANSACTIONS
- ◆ DATE\_OF\_SERVICE
- ◆ PLAN\_ID
- ◆ CLOSED
- ◆ DATE\_CLOSED
- ◆ CLOSED\_BY
- ◆ CLOSED\_REASON
- ◆ DROP\_TO\_PAPER
- ◆ DATE\_REOPENED
- ◆ REOPENED\_BY
- ◆ REOPENED\_COMMENT
- ◆ OTHER\_PAYER\_BIN\_NUMBER
- ◆ OTHER\_PAYER\_PROCESSOR\_CNT
- ◆ OTHER\_PAYER\_GROUP\_ID
- ◆ CMS\_PART\_D\_DEFINED\_QLFD\_FAC
- ◆ PATIENT\_ID\_STATE/PROVINCE
- ◆ PATIENT\_COUNTRY\_CODE
- ◆ VETERINARY\_USE\_INDICATOR
- ◆ RAW\_DATA\_SENT

**PRESCRIPTION\_52**

◆ RX_#

DCTR

RL\_NO

CLTY

DATE

USER

COMMENT

UNIT\_PRICE

SUBTOTAL

DISPENSING\_FEE

TOTAL\_PRICE

ADMINISTRATIVE\_FEE

UNIT\_OF\_MEASURE

BILLING\_QUANTITY

BILLING\_UNIT

ASLEEP\_PAYER

CURRENT\_VA\_INSURER

ELIGIBILITY

PATIENT\_INSURANCE\_MULTIP

RX\_ACTION

DATE\_OF\_SERVICE

SUBMISSION\_CLARIFICATION\_

COB\_OTHER\_PAYMENTS\_COL

OTHER\_COVERAGE\_CODE

DUR\_DATA

COB\_OTHER\_PAYERS

NET\_PAID\_BY\_INSURER

ELAPSED\_TIME\_(PRINTABLE)

ELAPSED\_TIME\_(SECONDS)

RESULT\_CATEGORY

**BPS\_TRANSACTION\_9002313\_59\_9002313\_5913**

<div><div></div>DUR_COUNTER</div> <div><div></div>DUR_PROFESSIONAL_SERVICE_CODE</div> <div><div></div>DUR_REASON_FOR_SERVICE_CODE</div> <div><div></div>DUR_RESULT_OF_SERVICE_CODE</div>

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.CODE  
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