

Michigan Medicaid Acceptable Other Payer Reject Codes

Beginning 5/15/2006, claims billed with Other Coverage Code 3 – “*Other Coverage Exists, Claim Not Covered*” will pay when a drug product is not covered by the beneficiary’s other insurance but is covered by MDCH **AND** claim is submitted with COB segment containing a valid Other Payer Reject Code (NCPDP Field 472-6E). Claims submitted with Other Coverage Code 3 that do not meet the above criteria will reject with NCPDP Reject Code 6E – “*M/I Other Payer Reject Code*”.

Other Coverage Code 3 Acceptable NCPDP Reject Codes

NCPDP Reject Codes	Description/Explanation
17	M/I Fill Number
19	M/I Days Supply
22	M/I Dispense as Written Code/Product Selection Code
39	M/I Diagnosis Code
54	Non-Matched Product/Service ID
60	Product/Service Not Covered for Patient Age
61	Product/Service Not Covered for Patient Gender
63	Institutionalized Patient Product/Service Not Covered
66	Patient Age Exceeds Maximum Age
70	Product/Service Not Covered
71	Prescriber is Not Covered
72	Primary Prescriber is Not Covered
73	Refills Not Covered
75	Prior Authorization Required
76	Plan Limitations Exceeded
77	Discontinued/Product Service ID
78	Cost Exceeds Maximum
79	Refill Too Soon
80	Drug-Diagnosis Mismatch
81	Claim Too Old
88	DUR Reject Error
AC	Product Not Covered Non-Participating Manufacturer
AD	Billing Provider Not Eligible To Bill This Claim Type
AG	Days Supply Limitation for Product/Service
AJ	Generic Drug Required
M1	Patient Not Covered In This Aid Category
RN	Plan Limits Exceeded on Intended Partial Fill Values
R6	Product/Service Not Appropriate for this Location

Other Coverage Code 1 – “*No Other Coverage Exists*” should be utilized when active other insurance coverage is listed on the MDCH TPL/Eligibility file **AND** data submitted on the claim verifies that the other insurance was billed (represented by submitting the COB segment containing the Other Payer Date and Other Payer ID), but no other insurance coverage exists. Currently, Other Payer Reject Codes are not required for Other Coverage Code 1. However, with Phase 2C of MDCH’s Upcoming COB changes planned for late summer 2006, valid Other Payer Reject Codes for Other Coverage Code 1 will be required -see list below.

Other Coverage Code 1 Acceptable NCPDP Reject Codes (coming late summer 2006)

NCPDP Reject Codes	Description/Explanation
07	M/I Cardholder ID Number
52	Non-Matched Cardholder ID
65	Patient is Not Covered
66	Patient Age Exceeds Max Age
67	Filled Before Coverage Effective
68	Filled After Coverage Expired
69	Filled After Coverage Terminated
CY	M/I Patient ID
M1	Patient Not Covered in this Aid Category