PACE
PROVIDER BULLETIN
February 12, 2020

Valid Claim Data- Partial Fills

PACE Providers are responsible for the validity of their claims' data.

- **When medications are dispensed for less than the intended days supply:**
  ***the Fill Status* must be indicated in the claim.**

  - The initial claim for medication dispensed for less than the intended days supply, must be submitted as a *Partial Fill.*
  - The claim completing the dispensing of the intended days supply, must be submitted as the *Completion of the Partial Fill*.

- **Review claim submissions to assure data including the processing of partial fills and the completion of these fills are correctly processed, including the following data fields:**

  - **Dispensing Status (field 343-HD):**
    - P submitted for the initial partial fill
    - C for the associated completion of the Partial Fill
  - **Quantity Intended To Be Dispensed (field 344-HF)**
  - **Days Supply Intended To Be Dispensed (field 345-HG)**
  - **Associated Prescription/Service Date (field 457-EP):**
    - If submitting multiple Partial fills to complete the Intended Quantity, this field is required on ALL partial fills following the first partial fill
    - If submitting the Completion fill to the associated Partial fill, this field is required
  - **Associated Prescription/Services Reference Number (field 456-EN)**
    - If submitting multiple Partial fills to complete the Intended Quantity, this field is required on ALL partial fills following the first partial fill
    - If submitting the Completion fill to the associated Partial fill, this field is required

Invalid data submitted by the provider, either intentionally or unintentionally, (i.e. a programming software error) resulting in full or partial Program reimbursement is prohibited. When identified, these claims will be disapproved and voided. Providers are <u>NOT</u> to bill cardholders for any such claim.

Providers submitting invalid data to receive a paid claim will be referred for audit.

Questions may be directed to Provider Services at 1-800-835-4080.