

EOBs on Denied Claims for June 2019

| EOB | EOB Description | % of Denied Claims |
|------|---|--------------------|
| 9960 | NDC was reimbursed at the NADAC rate. | 19 % |
| 9821 | Professional Dispensing Fee Applied | 14 % |
| 7011 | Early Refill prospective DUR alert | 6 % |
| 0310 | THE SPECIAL PACKAGING INDICATOR/UNIT DOSE INDICATOR IS INVALID | 5 % |
| 0366 | NON-PREFERRED DRUGS REQUIRE PA. | 5 % |
| 0369 | 34 DAYS SUPPLY OR LESS REQUIRED FOR NDC. | 5 % |
| 7015 | Late Refill prospective DUR alert | 4 % |
| 1277 | MEMBER IS NOT ENROLLED FOR THE DISPENSE DATE OF SERVICE. | 3 % |
| 0278 | Member is covered by a commercial health insurance on the Date(s) of Service. | 3 % |
| 1227 | THE OTHER PAYER ID QUALIFIER IS INVALID. | 3 % |
| 0545 | MEMBER ENROLLED IN MEDICARE PART D. SUBMIT CLAIM TO MEDICARE PART D PLAN. | 3 % |
| 1817 | DUPLICATE CLAIM. NDC PREVIOUSLY PAID. | 2 % |
| 0485 | QUANTITY LIMIT EXCEEDED. | 2 % |
| 7005 | Drug-Disease (reported) prospective DUR alert | 2 % |
| 7018 | Three Month Supply Opportunity | 2 % |
| 7003 | Drug-Drug Interaction prospective DUR alert | 2 % |
| 7009 | Therapeutic Duplication prospective DUR alert | 1 % |
| 0510 | A valid Prior Authorization is required. | 1 % |
| 1354 | National Drug Code (NDC) is not on file. | 1 % |
| 1232 | Non-preferred Drug Is Being Dispensed. Please Refer To The PDL For Preferred Drugs In This Therapeutic Class. | 1 % |
| 1356 | NDC INVALID FOR DISPENSE DATE OF SERVICE | 1 % |
| 1565 | DAPO OVERRIDE REQUIRED TO DISPENSE LESS THAN THREE MONTH SUPPLY. | 1 % |
| 1125 | NO FEDERAL DRUG REBATE AGREEMENT. | 1 % |
| 0030 | Prescribing/referring/ordering provider is not currently enrolled. | 1 % |
| 1141 | MEMBER ENROLLED IN MEDICARE PART D. PDP PAYMENT/DENIAL REQUIRED ON CLAIM. | 1 % |
| 1815 | QMB-ONLY MEMBER RESTRICTED TO MEDICARE CROSSOVER CLAIMS. | 1 % |
| 9951 | NDC was reimbursed at brand WAC rate. | 1 % |
| 1358 | NDC RESTRICTED BY MEMBER AGE. | 1 % |

*** End of Report ***