## MEDICAID DRUG REBATE PROGRAM STATE INVOICE FIELD DEFINITIONS

(Form CMS-R-144) Effective: March 1, 2008

## Data Fields

Record ID: Constant "UTIL"

**State Code:** Two-character post office abbreviation for the state. Alphabetic, 2 digits.

**Labeler Code:** First segment of National Drug Code (NDC 1) that identifies the manufacturer, labeler, relabeler, packager, repackager or distributor of the drug. Numeric values only, 5-digit field, right justified and zero-filled for 4-digit labeler codes.

**Product Code:** Second segment of NDC. Alphanumeric values, 4-digit field, right justified, zero-filled for 3-digit product codes.

**Package Size Code:** Third segment of NDC. Alphanumeric values, 2-digit field, right justified, zero-filled for 1-digit package size codes.

**Period Covered:** Calendar quarter and year covered by data submission. Numeric, 5-digit field, QYYYY

Valid values for Q:

1 = January 1 - March 31

2 = April 1 - June 30

3 = July 1 - September 30

4 = October 1 - December 31

Valid values for YYYY: 4-digit calendar year covered.

**Product FDA Reg. Name:** (Abbreviated) – First 10 characters of product name as approved by the FDA. Alphanumeric values, 10 digits.

**Unit Rebate Amount:** The CMS calculated amount (per reported unit type) to be multiplied by Units Reimbursed by the state during the period covered. Numeric values, 12 digits: 5 whole numbers, 6 decimal places, and a decimal point.

**Units Reimbursed:** The number of units (based on Unit Type) of the drug (11-digit NDC level) reimbursed by the state during the period covered. Numeric values, 15 digits: 11 whole numbers, 3 decimal places and a decimal point.

## **Section 3: Invoice Process (continued)**

**Rebate Amount Claimed:** The rebate amount that the State Agency claims it is owed by the labeler for the period covered for this (11-digit NDC) drug. It is calculated by multiplying the units reimbursed by the rebate amount per unit. Numeric values, 12 digits: 9 whole numbers, 2 decimal places and a decimal point.

**Number of Prescriptions:** The number of prescriptions reimbursed (by the Medicaid Program ONLY) to pharmacies for the (11-digit NDC) drug during the period covered. Numeric values, 8 digits, whole numbers only.

**M'caid Amount Reimb:** Medicaid Amount Reimbursed – The total amount reimbursed (by the Medicaid Program ONLY) to pharmacies for the (11-digit NDC) drug in the period covered. Numeric values, 13 digits: 10 whole numbers, 2 decimal places and a decimal point.

**Non-M'caid Amount Reimb**: Non-Medicaid Amount Reimbursed – The amount reimbursed (by non-Medicaid entities) to pharmacies for the (11-digit NDC) drug in the period covered. The Non-Medicaid Amount Reimbursed includes any reimbursement amount for which the state is not eligible for Federal Matching Funds. Numeric values, 13 digits: 10 whole numbers, 2 decimal places and a decimal point.

**Total Amount Reimbursed:** The total amount reimbursed by both Medicaid and non-Medicaid entities to pharmacies for the (11-digit NDC) drug in the period covered (two previous fields added together). This total is not reduced or affected by Medicaid rebates paid to the state. This amount represents both the Federal and State Reimbursement and is inclusive of dispensing fees. Numeric values, 14 digits: 11 whole numbers, 2 decimal places and a decimal point.

**Correction Flag:** Indictor as to whether this is the first submission (original record) or whether it is a correction to an existing record.

0 = Original record 1 = Correction