

**Adjustment/Dispute Codes* for
Reconciliation of State Invoice and/or Prior Quarter Adjustment Statement**

Adjustment Codes

- A. Rebate per unit amount has been revised by labeler and reported to CMS, as required.
- B. Labeler has calculated RPU and/or rebate where none was reported by state.
- C. Units invoiced adjusted through mutual agreement between labeler/state.
- D. Package size discrepancies.
- E. Units overstated.
- F. Labeler/State Unit Type discrepancy (e.g., GM vs ML).
- G. Labeler/State Units Per Package Size decimal discrepancy (e.g., rounding to whole unit issues or instances whereby a decimal can't be split).
- H. Converted NDC (e.g., package size correction). (Please attach supporting documentation.)
- I. Transferred NDC to another labeler code (Please attach supporting documentation).
- J. Utilization change from the State.
- K. Rebate per unit amount adjusted through correspondence between labeler/State. **USE THIS CODE ONLY** when the State has reported a rebate per unit not based on the CMS tape and adjustment code A is not applicable.

Dispute Codes

- A. Discontinued/Terminated NDC for which the shelf life expired more than one year ago from the dispense date.
- B. Invalid/miscoded NDC.
- C. State units invoiced exceed unit sales (Please attach supporting methodology and data source).
- D. Utilization/quantity is inconsistent with the number of prescriptions.
- E. Utilization/quantity is inconsistent with pharmacy reimbursement levels, including Third Party Payments (This dispute code must be used in conjunction with another code or other supporting documentation).
- F. Utilization/quantity is inconsistent with State historical trends or current State program information (Please attach trend/program information).
- G. Utilization/quantity is inconsistent with lowest dispensable package size.
- H. Product not rebate eligible (e.g., product is for a non-Medicaid State-only program, an HMO non-fee-for-service program, etc...). (Please attach supporting documentation.)
- I. No record of sales directly to State or State history of purchase from out-of-State provider (e.g., border pharmacies, mail order pharmacies, etc...). (Please attach supporting documentation.)
- J. PHS entity not extracted from State data (Please give provider number).
- K. Duplicate Claim.
- L. Generic Substitution.
- M. Closed out. All disputes resolved.