

CY 2020 Indication-Based Coverage File Record Layout

Required File Format = ASCII File – Tab Delimited

Do not include a header record

Filename extension should be “.TXT”

Field Name	Field Type	Maximum Field Length	Field Description	Sample Field Value(s)
RxCUI	Number Always Required	8	RxCUI – must exist on the related formulary file	210597
Indication Code	Alphanumeric Always Required	8	Condition Indication Code	M0010859

Please Note: Certain characters are restricted from HPMS. The submitted file will be rejected if any of the following characters are included in any field: 1) greater than sign (>), 2) less than sign (<), and 3) semi-colon (;).