

**Appendix B. Part D Manufacturer Discount Program Third Party Administrator (TPA)
Data Entry Fields**

All fields are required.

Organization Information	
Data Element	Field Notes
Name of Organization	
Address	
City, State, ZIP	
P Number(s)	
TIN/EIN Name	Business Name for tax purposes (as registered with the IRS). A W-9 may be required.
Employer/Tax Identification Number (EIN/TIN)	
Mailing Address for 1099 Tax Form	
Address Line #1	
Address Line #2	
City, State, ZIP	
Financial Institution	
Name of Bank	
Name of Bank 2	
Address	
City, State, ZIP	
ACH/EFT Coordination Name	
ACH/EFT Coordination Phone	
Routing Transit (ABA) Number	Must be nine digits.
Depositor Account Number	
EFT Type	
Bank Account Type	