FEHB Rx Costs, Utilization and Rebates File Instructions 2020

To be submitted in 2020 based on plan year 2019 pharmacy benefit experience with a three-month runout.

Please read and follow these instructions carefully before providing the requested information. Files will be processed automatically, and incorrect/incomplete files will be rejected.
After producing the pipe-delimited text files as explained below, please transfer them via SFTP as indicated in Attachment 2.

If you have questions or concerns, please email OPMPharmacy@OPM.gov.

Instructions

New

- Patient Age Bands have been added in column M of the RxCostUtilization sheet. They are based on the attained age at the date the prescription was filled. Please see the FullECLDefinition sheet for details.
- The MediSpan GPI8 which more clearly identifies the drug name has been added in column C of the RxRebates sheet.
- The file naming convention has changed to allow plan codes belonging to the same carrier to be included in the same file and thus reduce the number of files prepared and transmitted by carriers.
- All files should be encrypted and transferred to OPM via SFTP as indicated in Attachment 2.

RxCostUtilization File

The information provided should be based on all records with a date of adjudication (National Council for Prescription Drug Programs (NCPDP) data field 578) in the reporting year paid by 31 March of the following year (three-month runout period).

The first row of the pipe delimited text file should contain the variable names exactly as provided by OPM in row 10 of the <RxCostUtilization> sheet, in the same order, separated by the pipe operator |. Variable names are case sensitive.

Carriers can append multiple plan codes in the same file. The three-digit FEHB enrollment codes as they appear in the brochure(s) must be filled for all records.

The information provided should be the number of scripts, sum totals of quantities dispensed, days supplied, and amounts in each column between N-W for each unique combination of values in columns A-M.

Each file must contain all fields for each three-digit FEHB enrollment code that appears in your plan brochure(s) and each drug/product/service ID by pharmacy type, specialty claim indicator, age band etc.

Please provide the breakdown of utilization/costs (columns N-W in blue) for each unique combination of values in columns A-M (in orange).

There should be multiple records (rows) for each product/service ID, as many as the unique combinations of values of columns in orange (columns A-M) for which there is utilization or non-zero amounts in any of the N-W columns.

The three-character FEHB enrollment codes are the codes that appear in FEHB plan brochure(s) and capture the plan, option, and Self / Self + 1 / Family enrollment.

Carriers are responsible for providing the FEHB Enrollment Codes to other entities that help produce these files (PBMs).

Please submit NDCs in HIPAA 11-digit format without dashes for all drugs/products that have an NDC. Submit other appropriate IDs only for non-drug products or services that do not have NDCs.

The instructions and variable names refer to drug, product, or service ID and qualifier somewhat interchangeably to accommodate non-drug items, but most products should be drugs and most IDs should be National Drug Codes (NDCs).

The NCPDP list of valid values for the drug/product/service id qualifier is included in the <FullECLDefinition> sheet. The value for NDC for example is 03. Please provide a detailed mapping if other codes are used.

Please provide the pharmacy information described in the <RxCostUtilization> sheet as pipe-delimited text files. The pipe delimiter is |.

Encrypt the files and follow the file naming convention as outlined below and in Attachment 3.

FEHB_CarrierID_FileType_ExtractStartDate_ExtractEndDate_TransferDate.FileExtention.pgp

A four-character Carrier ID will be provided by OPM, the same as the one used to submit enrollment information to HIDW and the CLER system

The file type for prescription drug cost and utilization files is RXCU.

All dates should be in YYYYMMDD format.

Example file names for the 2019 and 2020 prescription drug cost and utilization files, assuming they will be transmitted on 30 Apr 2021:
    FEHB_ATOZ_RXCU_20190101_20191231_20210430.txt.pgp
    FEHB_ATOZ_RXCU_20200101_20201231_20210430.txt.pgp

Rebates File

The information provided should be based on all rebates and other credits and fees (such as price protection and manufacturer administrative fees) for the plan year utilization/costs (the rebates and other credits associated with drug costs/utilization included in the RxCostUtilization file).

The first row of the pipe delimited text file should contain the variable names exactly as provided by OPM in row 9 of the <RxRebates> sheet, in the same order, separated by the pipe operator |. Variable names are case sensitive.

Please provide an accompanying rebates file for each cost and utilization file. Carriers can append multiple plan codes in the same rebates file. The three-digit FEHB enrollment codes as they appear in the brochure(s) must be filled for all records.

Please allocate the total rebates and other credits such as price protection and manufacturer administrative fees for the drug/product to the respective three-character FEHB enrollment code and distribution channel.

Please use your standard allocation methodology or allocate proportionally to FEHB Plan and Enrolment Code and Pharmacy Type.

If rebates or other credits are based on a market basket of drugs/products and are not specific for the drug/product, please calculate the separate rebate and other credit for each drug/product by multiplying the total rebates and credits on the market basket by the percentage represented by each drug/product in the market basket (and distribute by FEHB enrollment code and Pharmacy Type).

If the last quarter information is not available, please estimate the total rebates and other credits for the year from the experience over the first three quarters.

Please provide the pharmacy information described in the <RxRebates> sheet as pipe-delimited text files. The pipe delimiter is |.

Encrypt the files and follow the file naming convention as outlined below and in Attachment 3.

FEHB_CarrierID_FileType_ExtractStartDate_ExtractEndDate_TransferDate.FileExtention.pgp

A four-character Carrier ID will be provided by OPM, the same as the one used to submit enrollment information to HIDW and the CLER system.

The file type for prescription drug cost and utilization files is RXRB.

All dates should be in YYYYMMDD format.

Example file names for the 2019 and 2020 prescription drug rebate files, assuming they will be transmitted on 30 Apr 2021:
> **FEHB_ATOZ_RXRB_20190101_20191231_20210430.txt.pgp**
> **FEHB_ATOZ_RXRB_20200101_20201231_20210430.txt.pgp**

Formatting Instructions for Both Types of Files

The pipe character | should not appear inside any of the variables. It should be used only to delimit fields. If there are n variables in the file, there should be n-1 pipe operators in each record, one after each field except the last one.

Each row in the text file should represent a separate record.

Zero values for numeric fields (e.g. zero copay) should be represented as 0, not null or missing values.

Do not pad amounts with zeroes and do not pad character variables with spaces or any other characters.

Dollar amounts should include the dot but no commas or dollar sign.

Null values should be represented by || (do not include space(s), dot(s), quotations, NA or any other character(s) between the pipe characters delimiting the end of the previous variable and the end of the null variable).

The pipe-delimited text files should be ASCII or UTF8 (UTF8 is a character encoding capable of encoding a large number of characters in multiple languages. ASCII is a subset of Unicode UTF8, developed for the English Language that includes only 128 characters, primarily letters, numbers, and punctuation signs).