

Basic PPLAN Settings

1. Patient Markup Schedule Plan:			
<code><sample></code>	Title: <code><sample></code>	Default: 1	ID:

2. Third Party Info 1. Provider # : Phcy NPI# 2. Reconcile? : N 3. Formulary : 0 4. Form type : 0 5. ID length : 35 ID type : ? Group length : 15 Full length : N Checksum : 0 6. Relationship : 1 7. Copay : R 1st copay \$: None	3. Plan Options 1. Log? : N 2. EDS? : Y 3. Drug? : N 4. A/R Type: N Acct# 5. ECS# : 1 BIN# : ***** PC# : ***** Option 1: 20 Option 2: 15 Option 3: 82 Carrier#	4. Pricing Options 1. Costs : A 2. LB-PT \$: None 3. Class 2 \$: None 4. Class 3,4,5\$: None 5. More Fee \$: None 6. Min Price \$: 10.00 7. Min Fee \$: None 8. Max Fee \$: None 9. Round : 0
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5. RX Pricing		
From\$	Mult	Fee
None	1.00	7.25
None	None	None
None	None	None
None	None	None
None	None	None
None	None	None

5. OTC Pricing		
From\$	Mult	Fee
None	1.60	7.25

Use the above settings along with the BIN and Processor Control Number (RxPCN or PC#) as shown on patient ID Cards.

IMPORTANT NOTES:

Rx and OTC Pricing:

These values are samples only, and not intended for actual use.

You should enter pricing formulas based on your contract with the payor.

If you wish to RECONCILE this plan set "Reconcile?" to "Y" (box 2, line 1).

You may use any Abbreviation and Title you wish.

Settings for transmitting doctor #'s (Option 1 in box #3):

- To transmit:
- State License Only.....0
 - DEA Only.....4
 - UPIN Only.....32

 - NPI (default to State Lic# if no NPI#).....16
 - NPI (default to DEA# if no NPI#).....20
 - NPI (default to UPIN if no NPI#).....48

If the claim is for work comp, change Option 2 to 47.