



TO: Pharmacy Providers
RE: Quantity Prescribed (460-ET) Guidance

The purpose of this bulletin is to notify providers that in compliance with the Centers for Medicare and Medicaid (CMS) final rule, CMS-0055-F, effective September 21, 2020, National Council for Prescription Drug Programs (NCPDP) Quantity Prescribed (460-ET) field will be required on all pharmacy claims for a Schedule II drug or when a compound claim contains a Schedule II drug.

Claims submitted without a quantity prescribed in NCPDP field 460-ET will deny for edit 631 and post the following Explanation of Benefits (EOB) “CII QTY Prescribed (460-ET) missing.”

The use of the Quantity Prescribed (460-ET) field is intended to address the inability to identify a Schedule II controlled substance claim that is a partial or incremental fill versus a prescription refill. The modification enables covered entities to distinguish whether a prescription is a “partial fill,” where less than the full amount prescribed is dispensed, or a refill, where the full amount prescribed is dispensed, in the Health Insurance Portability and Accountability Act (HIPAA) retail pharmacy transactions.

The [Pharmacy NCPDP Reject Codes](#) document located on the www.ctdssmap.com Web site under Trading Partner < EDI < Miscellaneous will be updated to reflect the new pharmacy edits related to the Quantity Prescribed field.