



APPENDIX S2 – Alabama ADAP (Aids Drug Assistance Program)

Help Desk Phone Number

Phone Number 888-311-7632 Opt. 7
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BIN/PCN

Plan Name / Group Name	BIN	PCN
ADAPRx Uninsured	004519	ALADAP
MEDCAP - Medicare	004519	MCALADAP

Group Number

Group Number Description	Group Number
ADAPRx Uninsured	22005
MEDCAP – Medicare D	22902

Private Insurance Billing

NCPDP Field #	Segment & Field Name	Submitted Value
308-C8	OTHER COVERAGE CODE VALUES	8 - Accepted Without Authorization

Submission of Delivery Fees

Alabama ADAP allows submission of the delivery fee by submitting NDC: 98765-4321-09. Pharmacies may also use the NCPDP fields indicated below to submit the delivery fees.

NCPDP Field #	Segment & Field Name	Submitted Value
478-H7	OTHER AMOUNT CLAIMED SUBMITTED COUNT	
479-H8	OTHER AMOUNT CLAIMED SUBMITTED QUALIFIER	02 – Shipping Cost
48Ø-H9	OTHER AMOUNT CLAIMED SUBMITTED	<Submit Contract delivery fee>

**Effective 2/1/2014 these amounts will no longer display in the pharmacy response (amount paid) during adjudication the delivery fee will be added during actual payment and displayed on Explanation of Benefits (EOB).*

