



# NCPDP DUR Reference Guide

## Reject Codes 88, 925, 922

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National Council for Prescription Drug Programs (NCPDP) maintains standards that are used to facilitate drug utilization reviews (DUR) for pharmacy claims. A DUR is completed automatically every time a claim is submitted to identify any therapy concerns that could place the patient at an adverse risk and to ensure there are no harmful interactions for the patient, based on recent prescription history and the patient's own demographic information. This includes, but is not limited to:

- Potential interaction with a medication the patient has already received
- Effectiveness concerns based on the dose dispensed
- An overlap in therapies with another medication the patient has already received
- A potential danger based on the patient's age or gender

If any potential concerns are identified, the claim will reject until the concerns have been addressed. Reject code 88 will be generated to alert the dispensing pharmacy to a potential concern. Reject codes 925 or 922 may be generated for opioid DUR rejections. Depending on the severity of the alert, it will be presented as one of the following:

- Hard rejection – cannot be overridden by the pharmacy, a prior authorization is usually required
- Soft rejection – can be overridden by the pharmacy using Professional Pharmacy Service Codes
- Informational message only – does not need to be resolved for claim to adjudicate

The following table contains details on the NCPDP fields which are used to communicate the DUR information of the rejected claim.

Field #	Field Name	Definition
473-7E	DUR/Professional Pharmacy Service (PPS) Response Code Counter	Counter number for each unique DUR/PPS
439-E4	Reason for Service Code	Identifies the type of DUR conflict detected
440-E5	Professional Service Code	Identifies the type of intervention made
441-E6	Result of Service Code	Identifies the outcome of the intervention

When a DUR reject is received, the entire claim response should be reviewed to locate the DUR errors that are preventing the claim from processing. There may be more than one conflict within a single claim. After reviewing the errors and taking appropriate action, the claim must be resubmitted with all three of the following components to resolve the rejection:

- [Reason for Service Code](#)
- [Professional Service Code](#)
- [Result of Service Code](#)



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### Reason for Service Codes – NCPDP Field 439-E4

The Reason for Service Code is a two-character code used to identify the type of DUR problem that was detected. This information is returned on the claim response in field 439-E4. It may also be referred to as the DUR Conflict Code. If a claim was rejected for multiple Reason for Service Codes, each code must be resolved individually but responded to via one single claim resubmission. Any codes that are not addressed will continue to cause the claim to be rejected. Reference the table below for a list of commonly occurring Reason for Service Codes.

Code	Description	Example
AT	Additive Toxicity	Detects drugs with similar side effects that, when used in combination, could exhibit a toxic potential greater than either agent by itself
DA	Drug-Allergy	An adverse immune event may occur due to the patient's previously demonstrated heightened allergic response to the drug product
DC	Drug-Disease (Inferred)	Potentially inappropriate drug due to a patient's medical condition. The condition is inferred from drugs in the patient's medication history
DD	Drug-Drug Interaction	A drug combination in which the net pharmacologic response may be different from the result expected when each drug is given separately
DR	Dose Range Conflict	Submitted dose does not follow recommended medication dosage
ER	Overutilization	The current prescription refill is occurring before the days supply of the previous filling should have been exhausted
HD	High Dose	The submitted drug dose falls above the standard dosing range
ID	Ingredient Duplication	Detects simultaneous use of drug products containing one or more identical generic chemical entities
LD	Low Dose	The submitted drug dose falls below the standard dosing range
LR	Underutilization	The current prescription refill is occurring after the days supply of the previous fill should have been exhausted
MC	Drug-Disease (Reported)	Potentially inappropriate drug due to a patient's medical condition. The condition was provided by the prescriber, patient, or pharmacist
MX	Excessive Duration	Detects regimens that are longer than the maximal limit of therapy for a drug product based on the product's common uses
PA	Drug-Age Alert	Drug and/or dose may not be appropriate for the patient's age
PG	Drug-Pregnancy	Intended to assist healthcare professionals in weighing the therapeutic value of a drug against possible adverse effects on the fetus
SD	Suboptimal Drug/Indication	Potentially incorrect, inappropriate, or less than optimal drug prescribed for the patient's condition
SX	Drug-Gender	The therapy is potentially inappropriate or contraindicated in either male or female patients
TD	Therapeutic Duplication	Detects simultaneous use of different primary generic chemical entities that have the same therapeutic effect



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### Professional Service Codes – NCPDP Field 440-E5

The Professional Service Code is a two-character alphanumeric code used to identify what type of intervention has occurred or what source has been consulted. It may also be referred to as the DUR Intervention Code. The following table contains common codes that can be used to resolve a DUR rejection based on what action was taken. For some DUR Conflict Codes, only certain Intervention Codes will be accepted to resolve the DUR rejection.

Code	Description
DE	Dosing Evaluation/Determination
M0	Prescriber Consulted
MR	Medication Review
P0	Patient Consulted
R0	Pharmacist Consulted Other Source

### Result of Service Codes – NCPDP Field 441-E6

The Result of Service Code is a two-character alphanumeric code used to identify the outcome of the intervention. It may also be referred to as the DUR Outcome Code. The following table contains common codes that can be used to resolve a DUR rejection based on the result of the claim review and/or consultation. Codes 1B and 1G are the most commonly accepted and are used to indicate that a prescription was filled either with the pharmacist's judgment or the prescriber's approval. Codes 4C, 4D, 4J, and 4R are generally reserved for claims that need an opioid DUR rejection resolved. For some DUR Conflict Codes, only certain Outcome Codes will be accepted to resolve the rejected claim.

Code	Description
1A	Filled As Is, False Positive
1B	Filled Prescription As Is
1C	Filled, With Different Dose
1D	Filled, With Different Directions
1E	Filled, With Different Drug
1F	Filled, With Different Quantity
1G	Filled, With Prescriber Approval
2A	Prescription Not Filled
2B	Not Filled, Directions Clarified
3B	Recommendation Not Accepted
3G	Drug Therapy Unchanged
4C	Dispensed, Hospice
4D	Dispensed, Cancer Treatment
4J	Dispensed, Patient Is Not Opioid Naïve
4R	Dispensed, Sickle Cell Disease



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### Examples

- 1) The pharmacy receives a reject code 88 due to a drug-drug interaction. The pharmacist reviews the claim response to determine what other drug is part of the interaction. The patient is consulted, who confirms that they are no longer taking the drug which caused the alert. The pharmacist documents the intervention and resubmits the claim with the following codes:

Reason for Service Code	Professional Service Code	Result of Service Code
DD: Drug-Drug Interaction	P0: Patient Consulted	1B: Filled Prescription As Is

- 2) The pharmacy receives a reject code 925 on an opioid prescription that is being filled for greater than a 7 days supply in an opioid naïve patient. The pharmacist reviews the prescription information and the patient's medication records. It is determined that this opioid prescription is being used for cancer treatment, and the length of therapy is appropriate for this patient. The pharmacist documents the intervention and resubmits the claim with the following codes:

Reason for Service Code	Professional Service Code	Result of Service Code
MX: Excessive Duration	MR: Medication Review	4D: Dispensed, Cancer Treatment

- 3) The pharmacy receives a reject code 88 due to a drug-age conflict for a patient who is over 65 years old and is filling a medication that is potentially inappropriate in this age group. The pharmacist consults the prescriber who acknowledges the alert and gives approval to continue with dispensing the prescription to this patient. The pharmacist documents the intervention and resubmits the claim with the following codes:

Reason for Service Code	Professional Service Code	Result of Service Code
PA: Drug-Age Alert	M0: Prescriber Consulted	1G: Filled, With Prescriber Approval