

# Dispenser's Implementation Guide

ASAP 4.2

Washington State Department of Health  
Washington State Prescription Monitoring Program



September 2018

**Note**

This document is periodically updated. Please refer to the WA PMP website, [www.wapmp.org](http://www.wapmp.org), for the most current version.

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# 1 Document Overview

The *RxSentry® Dispenser's Implementation Guide* serves as a step-by-step implementation and training guide for dispensers in the state of Washington who use RxSentry as a repository for the reporting of their Schedule II, III, IV, and V controlled substance prescriptions dispensed in the state of Washington. It includes such topics as:

- Reporting requirements for dispensers in the state of Washington
- Data file submission guidelines and methods
- Creating an upload account
- Creating a data file
- Uploading or reporting data
- Understanding upload error codes and definitions

This guide has been customized to target the specific training needs of Washington dispensers. It is intended for use by all dispensers in the state of Washington required to report the dispensing of controlled substances.

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## 2 Data Collection and Tracking

### Overview

In the spring of 2007, legislation was passed authorizing the Washington State Department of Health to implement a prescription monitoring program ([chapter 70.225 RCW](#)); and in the fall of 2010, the department received two federal grants to implement the program. The legislation requires that dispensers who deliver a controlled substance electronically report such dispensing to the Washington State Prescription Monitoring Program (WA PMP), or Prescription Review program, database.

The purpose of the program is to promote public health and welfare and to help improve patient care. The goal is to provide practitioners and pharmacists 24/7 access to accurate and timely prescription history data to help determine appropriate medical treatment and interventions. In addition, the data may help identify patients who could benefit from referral to a pain-management specialist, or those who are at risk for addiction and may need substance abuse treatment.

### Reporting Requirements

All professionals licensed in the state of Washington to prescribe or dispense Schedule II, III, IV, and V controlled substances, and any other drugs identified by the Board of Pharmacy as demonstrating a potential for abuse, are required to collect and report their dispensing information. [RCW 70.225.020](#) requires each dispenser to submit their information to the Department of Health. [RCW246-480-030](#) states, a dispenser shall submit data to the department electronically, not later than one business day from the date of dispensing, and in the format required by the department. When the dispenser has not dispensed any drugs during a business day which require reporting, then within seven days the dispenser shall report that no drugs requiring reporting were dispensed. Exclusions to this requirement for reporting are described in the Excluded from Reporting section.

A "dispenser" means a practitioner or pharmacy that delivers a controlled substance, or other identified drug of abuse, to an ultimate user, but does not include:

- Practitioners who only administer a controlled substance in an office setting
- Licensed wholesale distributors or manufacturers as defined in [chapter 18.64RCW](#)

For detailed information on each of the fields required by the state of Washington, see Data Collection Requirements. For detailed information about the fields required by the American Society for Automation in Pharmacy (ASAP), see Appendix A: ASAP 4.2 Specifications.

### HIPAA Compliance

Disclosure of prescription monitoring information must comply with the federal Health Insurance Portability and Accountability Act of 1996 (P.L. 104-191) and regulations adopted under it, including 45 C.F.R. parts 160 and 164, federal alcohol and drug treatment confidentiality laws and regulations adopted under those laws, including 42 C.F.R. part 2, and state health information confidentiality laws, including [RCW 70.225](#) and [70.02](#).

## Zero Reports

If a dispenser usually dispenses controlled substances in Washington but has no dispenses to report for the preceding seven day period, the pharmacy must report this information to the Prescription Review program. They will do this by filing a zero report as described in the [Reporting Zero Dispensing](#) topic in this guide.

## Reporting Noncompliance

A dispenser that knowingly fails to submit their controlled substance dispensing as required by this legislation may be subject to disciplinary action. The Department of Health recommends that dispensers report on the same day of each week (for example, if the first report is Wednesday 09/07/2011, then subsequent reports would be on 09/14/2011, 09/21/2011, and so on).

## Excluded from Reporting

The following are excluded from reporting:

- Pharmacies operating in the Department of Corrections or pharmacies providing medications to offenders who are in state or county correctional institutions. A pharmacy in a county or correctional institution must submit data to the Prescription Review program related to the offender's current prescriptions for controlled substances upon the offender's release from the county or state correctional institution.
- Pharmacies that provide medications to inpatients in a hospital licensed under chapter 70.41 RCW or at clinics, day surgery areas, or other settings within the hospital where medication is administered in single doses; or medications for patients in an outpatient ambulatory surgical facility licensed under chapter 70.230 RCW.
- Dispensing for one-day use (24-hour supply or less)
- A practitioner or other authorized person who administers a controlled substance



## Data Collection Requirements

The fields described in the following table are required for collection by the state of Washington. Refer to the [Data Submission](#) chapter for instructions for submitting this data.

### Notes:

- If you are a chain pharmacy, your home office will likely submit your data. Please verify this with your home office. If you are an independent pharmacy or other entity, please forward the reporting requirements to your software vendor. They will need to create the data file, and they may be able to submit the data on your behalf. If not, follow the instructions provided in the [Data Submission](#) chapter to submit the data.
- If you are a reporting veterinarian, please refer to the *Implementation Guide for Dispensing Veterinarians*, which can be downloaded from the WA PMP website at [www.wapmp.org](http://www.wapmp.org).

Field Name	Field ID
Pharmacy Header	
DEA Number	PHA03
Patient Information	
Patient ID Qualifier <b>Note:</b> At a minimum, supply code 03 in this field, and then supply the associated value in PAT03. If you wish to provide additional identifiers, use fields PAT 04 and PAT05.	PAT02
Patient Identifier	PAT03
Last Name	PAT07
First Name	PAT08
Middle Initial	PAT09 (situational)
Name Suffix	PAT11 (situational)
Address Information – 1	PAT12
City Address	PAT14
State Address	PAT15
ZIP Code Address	PAT16
Date of Birth	PAT18
Gender Code	PAT19
Dispensing Record	
Prescription Number	DSP02
Date Written	DSP03
Refills Authorized	DSP04
Date Filled	DSP05

Field Name	Field ID
Refill Number	DSP06
Product ID Qualifier <b>*Note:</b> NDC is required.	DSP07
Product ID	DSP08
Quantity Dispensed	DSP09
Days Supply	DSP10
Classification Code for Payment Type	DSP16
<b>Prescriber Information</b>	
DEA Number	PRE02
Last Name	PRE05
First Name	PRE06
<b>Additional Information Reporting</b>	
ID Qualifier of Person Dropping Off or Picking Up Rx	AIR04 (situational)
ID of Person Dropping Off or Picking Up Rx	AIR05 (situational)
Last Name of Person Dropping Off or Picking Up Rx	AIR07 (situational)
First Name of Person Dropping Off or Picking Up Rx	AIR08 (situational)

## 3 Data Submission

### Overview

This chapter provides information and instructions for submitting data to the RxSentry repository.

### Timeline and Requirements

Dispensers or software vendors can establish submission accounts upon receipt of this guide. Instructions for setting up an account are listed below. See [Creating Your Account](#) for more information.

The WA PMP began accepting data in the American Society for Automation in Pharmacy (ASAP) 4.2 format on October 1, 2013. Data reporting is required within seven days of dispensing of the substance. However, dispensers are encouraged to report more frequently if they would like.

### Upload Specifications

Files should be in the ASAP format as defined in [Appendix A: ASAP 4.2 Specifications](#). Files for upload should be named in a unique fashion, with a prefix constructed from the date (YYYYMMDD) and a suffix of “.dat”. An example file name would be “20110914.dat”. **All of your upload files will be kept separate from the files of others.**

Reports for multiple pharmacies can be in the same upload file in any order.

Prescription information must be reported weekly for the preceding seven days.

### Creating Your Account

Prior to submitting data, you must create an account. If you have already created your account, proceed to the appropriate section of this document that provides the steps you must follow to upload your data.

**Note:** Data from multiple pharmacies can be uploaded in the same file. For example, chain pharmacies may send in one file containing controlled substance dispensing information for all of their pharmacies licensed in the state of Washington. Therefore, chains with multiple stores only have to set up one account to upload a file.

Perform the following steps to create an account:

1. Open an Internet browser window and type the following URL in the address bar:  
[www.wapmp.org](http://www.wapmp.org).
2. Click **WA PMP Data Uploader**.
3. Click **WA PMP Data Uploader Site Login**.

A login window is displayed:



4. Type *newacct* in the **User name** field.
5. Type *welcome* in the **Password** field.
6. Click **OK**.

A window similar to the following is displayed:



7. Click **Setup Upload Account**.

A window similar to the following is displayed:



8. Enter your DEA number in the **Physician or Pharmacy DEA number** field.
9. Type your ZIP code in the **ZIP Code** field, and then click **Next**.

A window similar to the following is displayed:

The screenshot shows a web form titled "New Account Setup for WA PDMP Upload Access ( wapdm )". It contains several sections:
 

- Pharmacy Information:** Fields for HID, Phone, and Fax.
- Account Selection:** A section asking for the user's choice between keeping the current account or creating a new one using a suggested ID.
- Contact Information:** Fields for Contact Name, Address, Email, Phone, and Fax.
- Anticipated Upload Method:** A dropdown menu with options like "Secure FTP using SSL" and "Upload with Internet Browser using SSL".
- Pharmacy Selection:** A list of pharmacies with a note to hold down CTRL to select multiple.
- Dispenser Information:** Radio buttons for Dispenser Type (Pharmacy, Dispensing Practitioner) and Dispenser Location (In-State, Out-of-State).

10. Complete all required fields (indicated by an asterisk) on the **New Account Setup for Upload Access** window, using the information in the following table as a guideline:

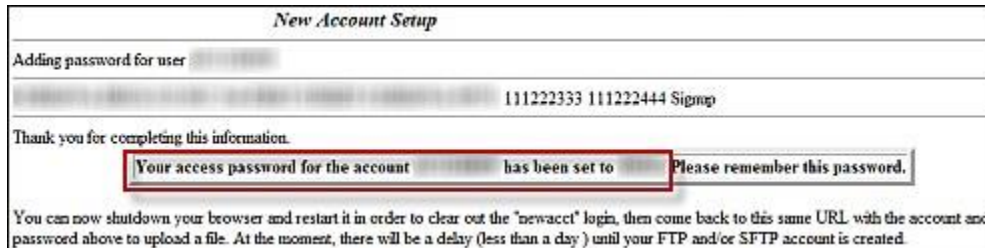
Field	Description/Usage
Account selection	<ul style="list-style-type: none"> <li>Choose <b>Keep &lt;account number&gt; as my account for a single Pharmacy</b> if you wish to use the suggested account name.</li> <li>Choose <b>Create an account using &lt;suggested account name&gt; as my ID for uploading more than one Pharmacy's Data</b> if you wish to enter an account name of your choosing. If this option is selected, type the desired account name in this field.</li> </ul>
<b>Contact Information</b>	
<b>Note:</b> Information in this section is used for contact purposes in the event a problem occurs with a data upload.	
Contact Name	Type the first and last name of the contact person.
Contact Address	Type the contact's street address, city, state, and ZIP code in the appropriate fields.

Field	Description/Usage				
Contact Email	(Required) Type the contact's e-mail address. Click the down arrow in the field to the right of the <b>Contact Email</b> field to select <b>Email Edit Reports for All Uploads</b> .				
Contact Phone	Type the contact's phone number, using the format <i>999-999-9999</i> .				
Contact Fax	(Required) Type the contact's fax number, using the format <i>999-999-9999</i> . Click the down arrow in the field to the right of the <b>Contact Fax</b> field to select <b>Fax Edit Reports for All Uploads</b>				
Anticipated Upload Method	Select the method of data upload you plan to use to report your data. <b>Note:</b> The upload method is determined by your software vendor. If you are unsure of the method that will be used, select one of the available options and change it once this information is known by performing the steps described in the <b>Modifying Your Upload Account</b> topic in this guide.				
Pharmacies I will be reporting	A list of all pharmacies with names similar to your store name/pharmacy name is displayed in this field. To select additional pharmacies for which you will be reporting, press the <b>[CTRL]</b> key, and then click the name of each pharmacy you wish to select. The pharmacies you select will be tied to your user name.				
Dispenser Type	(Required) Select whether you are a <b>Pharmacy</b> or a <b>Dispensing Practitioner</b> . <b>Note:</b> If you select the wrong dispenser type, you will be required to re-enter all of your account setup information once the dispenser type has been corrected.				
Dispenser Sub-Type	<p>(Required) Select the appropriate dispenser sub-type.  <b>Note:</b> The options that display in this field are dependent on whether you answered "Pharmacy" or "Dispensing Practitioner" in the <b>Dispenser Type</b> field.</p> <table border="1" data-bbox="727 1415 1412 1879"> <thead> <tr> <th data-bbox="727 1415 1019 1499">Pharmacy Sub-types</th> <th data-bbox="1024 1415 1412 1499">Dispensing Practitioner Sub-types</th> </tr> </thead> <tbody> <tr> <td data-bbox="727 1505 1019 1879"> <ul style="list-style-type: none"> <li>▪ Chain</li> <li>▪ Independent</li> <li>▪ IHS</li> <li>▪ Tribal Pharmacy</li> <li>▪ Veteran Affairs</li> </ul> </td> <td data-bbox="1024 1505 1412 1879"> <ul style="list-style-type: none"> <li>▪ AP (Advanced Registered Nurse Practitioner)</li> <li>▪ DE (Dentist)</li> <li>▪ MD (Physician and Surgeon)</li> <li>▪ NT (Naturopathic Physician)</li> <li>▪ OA (Osteopathic Physician Assistant)</li> <li>▪ OD (Optometrist)</li> <li>▪ OP (Osteopathic Physician)</li> <li>▪ PA (Physician Assistant)</li> <li>▪ PO (Podiatric Physician)</li> <li>▪ VT (Veterinarian)</li> </ul> </td> </tr> </tbody> </table>	Pharmacy Sub-types	Dispensing Practitioner Sub-types	<ul style="list-style-type: none"> <li>▪ Chain</li> <li>▪ Independent</li> <li>▪ IHS</li> <li>▪ Tribal Pharmacy</li> <li>▪ Veteran Affairs</li> </ul>	<ul style="list-style-type: none"> <li>▪ AP (Advanced Registered Nurse Practitioner)</li> <li>▪ DE (Dentist)</li> <li>▪ MD (Physician and Surgeon)</li> <li>▪ NT (Naturopathic Physician)</li> <li>▪ OA (Osteopathic Physician Assistant)</li> <li>▪ OD (Optometrist)</li> <li>▪ OP (Osteopathic Physician)</li> <li>▪ PA (Physician Assistant)</li> <li>▪ PO (Podiatric Physician)</li> <li>▪ VT (Veterinarian)</li> </ul>
Pharmacy Sub-types	Dispensing Practitioner Sub-types				
<ul style="list-style-type: none"> <li>▪ Chain</li> <li>▪ Independent</li> <li>▪ IHS</li> <li>▪ Tribal Pharmacy</li> <li>▪ Veteran Affairs</li> </ul>	<ul style="list-style-type: none"> <li>▪ AP (Advanced Registered Nurse Practitioner)</li> <li>▪ DE (Dentist)</li> <li>▪ MD (Physician and Surgeon)</li> <li>▪ NT (Naturopathic Physician)</li> <li>▪ OA (Osteopathic Physician Assistant)</li> <li>▪ OD (Optometrist)</li> <li>▪ OP (Osteopathic Physician)</li> <li>▪ PA (Physician Assistant)</li> <li>▪ PO (Podiatric Physician)</li> <li>▪ VT (Veterinarian)</li> </ul>				

Field	Description/Usage
Dispenser Location	(Required) Select whether you are an <b>In-State</b> or <b>Out-of-State</b> dispenser.

11. After completing all required fields, click **Next**.

A window similar to the following is displayed:



The system will provide you with a randomly-assigned password for the SFTP and SSL website upload processes.

Software vendors setting up multiple accounts may choose from the following options:

- Create each account separately by using the method listed above. After you finish one pharmacy's account, click **Setup Upload Account** on the home page, and repeat the process;  
OR
- Create multiple accounts using one pharmacy's DEA number and ZIP code. If you choose this method, select **Set up user name as a group**.

**Note:** The system sends data error reports to the e-mail address(es) supplied for the account(s).

## Update Your Information

**Note:** This section applies only to existing users. New users will complete this step during account registration.

If you are an existing WA PMP user, you will be required to complete a one-time update to your account information. This update will establish your Dispenser Type, Dispenser Sub-Type, and Dispenser Location.

Upon logging in to RxSentry, **Update Your Information** will be the only menu option available to you. You must complete this update before you will be permitted to continue. Once you have updated your account information, you will not see this menu option again.

Perform the following steps to update your account information:

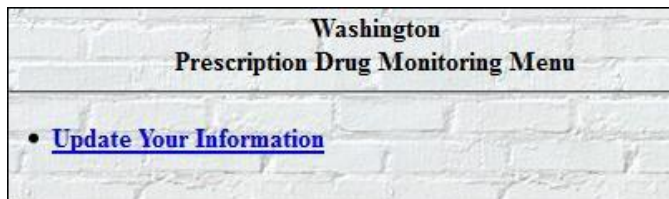
1. Open an Internet browser window and type the following URL in the address bar:  
[www.wapmp.org](http://www.wapmp.org).
2. Click **WA PMP Data Uploader**.
3. Click **WA PMP Data Uploader Site Login**.

A login window is displayed:



4. Type your user name in the **User name** field.
5. Type your password in the **Password** field.
6. Click **OK**.

A window similar to the following is displayed:



7. Click **Update Your Information**.

The **Modify Account Setup** window is displayed similar to the following:

Click Next after modifications are completed.	
<b>Pharmacy Name:</b>	No pharmacy name found
<b>Contact Name:</b>	Nanook
<b>Contact Address:</b>	PHARMACY, INC <b>City:</b> FAIRBANKS <b>State:</b> AK <b>Zip:</b> 99701
<b>Contact Email:</b>	Nanook@nanook.com      Don't Email Edit Reports
<b>Contact Phone:</b>	1234567890
<b>Contact Fax:</b>	0987654321      Don't Fax Edit Reports
<b>Anticipated Upload Method:</b>	Secure FTP using SSH Upload with Internet Browser using SSL Mail a Diskette Mail a CDR
<b>*Dispenser Type:</b>	<input type="radio"/> Pharmacy <input type="radio"/> Dispensing Practitioner
<b>*Dispenser Location:</b>	<input type="radio"/> In-State <input type="radio"/> Out-of-State

8. In the **Dispenser Type** field, select one of the following options:
  - Pharmacy
  - Dispensing Practitioner

**Note:** **Dispenser Type** is a required field. If this field is left empty, a message will display instructing you to press the **Back** button and fill in the **Dispenser Type**.

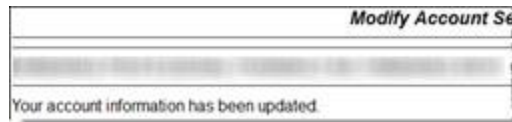


- The **Dispenser Sub-Type** field is displayed, based on the dispenser type you chose. Select the appropriate dispenser sub-type.

**Note:** **Dispenser Sub-Type** is a required field. If this field is left empty, a message will display instructing you to press the **Back** button and fill in the **Dispenser Sub-Type**.

Pharmacy Sub-Types	Dispensing Practitioner Sub-Types
<ul style="list-style-type: none"><li>Chain</li><li>Independent</li><li>IHS</li><li>Tribal Pharmacy</li><li>Veteran Affairs</li></ul>	<ul style="list-style-type: none"><li>AP (Advanced Registered Nurse Practitioner)</li><li>DE (Dentist)</li><li>MD (Physician and Surgeon)</li><li>NT (Naturopathic Physician)</li><li>OA (Osteopathic Physician)</li><li>OD (Optometrist)</li><li>OP (Osteopathic Physician)</li><li>PA (Physician Assistant)</li><li>PO (Podiatric Physician)</li><li>VT (Veterinarian)</li></ul>

- In the **Dispenser Location** field, select one of the following options:
  - In-State
  - Out-of-State
- Click **Next**. A message is displayed confirming that your account information has been updated:



## Modifying Your Upload Account

Use this function if you need to modify the information supplied when you originally created your account.

Perform the following steps to update your information:

- If you do not have an account, perform the steps in [Creating Your Account](#).
- Open an Internet browser window and type the following URL in the address bar:  
[www.wapmp.org](http://www.wapmp.org).
- Click **WA PMP Data Uploader**.
- Click **WA PMP Data Uploader Site Login**.

A login window is displayed:



5. Type your user name in the **User name** field.
6. Type your password in the **Password** field.
7. Click **OK**.
8. From the RxSentry home page, click **Modify Upload Account**.
9. Update the information as necessary, using the field descriptions provided in the [Creating Your Account](#) topic as a guideline.
10. Click **Next**. A message displays confirming that your account information was successfully updated.

## Reporting Zero Dispensing

If you have no dispenses to report for the preceding seven day period, you must report this information to the Washington State Department of Health.

You may report zero dispensing by using the functionality provided within RxSentry via the **Report Zero Activity** menu item or by creating and uploading a zero report data file. The steps you must perform for each method are provided in the following topics.

### Report Zero Activity – RxSentry

The information in the following topics explains the processes single dispensers and dispensers reporting for a group of pharmacies should use to report zero activity using RxSentry's Report Zero Activity menu item.

#### Single Dispensers

If you are a single dispenser, perform the following steps to report zero activity using RxSentry:

1. If you do not have an account, perform the steps in [Creating Your Account](#).

2. Open an Internet browser window and type the following URL in the address bar:  
[www.wapmp.org](http://www.wapmp.org).
3. Click **WA PMP Data Uploader**.
4. Click **WA PMP Data Uploader Site Login**.  
A login window is displayed.
5. Type your user name in the **User name** field.
6. Type your password in the **Password** field.
7. Click **OK**.
8. From the RxSentry home page, click **Report Zero Activity**.

A window similar to the following is displayed:

**Report Zero Activity**

This utility will allow you to record periods of zero activity for a given pharmacy.  
Note that if you are responsible for a group of pharmacies, you may enter the pharmacy's ID and/or Name in the fields provided or you may request a list of potential names to choose from.

Dispenser:	<input type="text"/>
Address:	<input type="text"/>
Phone:	<input type="text"/>
Fax:	<input type="text"/>
Email:	<input type="text"/>
Period Start Date:	<input type="text"/>
Period End Date:	09/21/09

9. Type the start date for this report in the **Period Start Date** field, using the *mm/dd/yy* format.

**Notes:**

- The system populates the **Period End Date** field with the current date. You may adjust this date, if necessary.
- The system populates all other pharmacy information with the information provided when you created your account.

10. Click **Continue**.

A message is displayed confirming that your zero report has been registered:

**Report Zero Activity**

**Zero report for 02/15/13 through 2/25/13  
has been registered for:**  
[redacted] DRUGS, INC

## Group Pharmacies

If you are responsible for reporting for a group of pharmacies, perform the following steps to report zero activity using RxSentry.

**Note:** You are required to repeat this process for every pharmacy for which you are responsible for reporting.

1. If you do not have an account, perform the steps in [Creating Your Account](#).
2. Open an Internet browser window and type the following URL in the address bar:  
[www.wapmp.org](http://www.wapmp.org).
3. Click **WA PMP Data Uploader**.
4. Click **WA PMP Data Uploader Site Login**.

You will see a login window.

5. Type your user name in the **User name** field.
6. Type your password in the **Password** field.
7. Click **OK**.
8. From the RxSentry home page, click **Report Zero Activity**.

A window similar to the following is displayed:

**Report Zero Activity**

This utility will allow you to record periods of zero activity for a given pharmacy. Note that if you are responsible for a group of pharmacies, you may enter the pharmacy's ID and/or Name in the fields provided or you may request a list of potential names to choose from.

Dispenser: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Email: april@hidine.com

Period  
Start Date: \_\_\_\_\_  
End Date: 04/01/13

Pharmacy  
ID/Name: \_\_\_\_\_

\* Use ID/Name listed above  Choose from list

Continue

9. Type the start date for this report in the **Period Start Date** field, using the *mm/dd/yy* format.

### Notes:

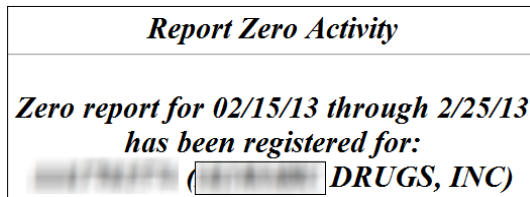
- The **Period End Date** field is populated with the current date. You may adjust this date to reflect the dates during which no dispensing occurred.
  - All other pharmacy information is populated with the information provided when you created your account.
10. Select the **Use ID/Name listed above** option to manually enter the pharmacy ID whose information you are reporting. If you choose to enter the pharmacy ID manually, type the pharmacy ID in the **Pharmacy ID/Name** field.

Or

Select the **Choose from list** option to select the pharmacy ID whose information you are reporting from a list of pharmacies with a name similar to your pharmacy.

11. Click **Continue**.

If you selected the **Use ID/Name listed above** option, a message similar to the following is displayed:



Or

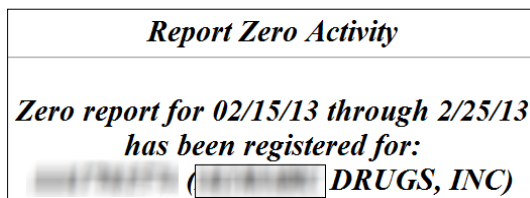
If you selected the **Choose from list** option, a window similar to the following is displayed:



12. Click the radio button next to the correct pharmacy ID.

13. Click **Continue**.

A message is displayed confirming that your zero report has been registered:



## Report Zero Activity – File Upload

1. If you have not created an account, perform the steps in [Creating Your Account](#).
2. Prepare the zero report data file for submission, using the specifications described in [Appendix B: Zero Report Specifications](#).

### Important Notes:

- The file name should be constructed using the date of submission to Appriss Health as the file name and should have a *.dat* extension. For example, name the file *20110914.dat* if you submit it on September 14, 2011.
- Do not include spaces in the file name.
- If you submit more than one file within the same day, you must uniquely name each file so the system does not overwrite existing uploaded files. For example, if uploading three files within the same day, you could use the following file names: *20110914a.dat*, *20110914b.dat*, and *20110914c.dat*.
- The system will accept zipped files and you should name them using the date of submission to Appriss Health. For example, name the file *20110914.zip* if you submit it on September 14, 2011.
- Before transmitting your file, rename it to include the suffix *.up* (e.g., *20110914.dat.up*). This will ensure that we do not try to load the file while you are transmitting it. Once transmission is complete, rename the file back to the original name (e.g., *20110914.dat*).

3. Upload the file using the steps provided in one of the following data delivery topics:
  - [Secure FTP over SSH](#)
  - [SSL Website](#)

Appriss Health tracks the use of the web-based tool, date stamps incoming files, and notifies you of a successful file transmission. After the file is reviewed for accuracy, you are notified of the status of the submitted file.

## 4 Data Delivery Methods

### Overview

This chapter provides information about data delivery methods you can use to upload your controlled substance reporting data file(s).

For quick reference, click the desired hyperlink in the following table to view the step-by-step instructions for your chosen data delivery method:

Delivery Method	Page
<a href="#">Secure FTP over SSH</a>	19
<a href="#">SSL Website</a>	20
<a href="#">Universal Claim Form (UCF) Submission</a>	21
<a href="#">Notes about NDC Numbers</a>	21
<a href="#">Online UCF Submission</a>	21

### Secure FTP over SSH

There are many free software products that support Secure FTP. Neither the Washington State Department of Health nor Appriss Health is in a position to direct or support your installation of operating system software for Secure FTP; however, we have information that other dispensers have used WinSCP (<http://winscp.net>) successfully.

1. If you have not created an account, perform the steps in [Creating Your Account](#).
2. Prepare the data file for submission, using the ASAP specifications described in [Appendix A: ASAP 4.2 Specifications](#).

#### Important Notes:

- The file name should be constructed using the date of submission to Appriss Health as the file name and should have a *.dat* extension. For example, name the file *20110914.dat* if you submit it on September 14, 2011.
- Do not include spaces in the file name.
- If you submit more than one file within the same day, you must uniquely name each file so the system does not overwrite existing uploaded files. For example, if uploading three files within the same day, you could use the following file names: *20110914a.dat*, *20110914b.dat*, and *20110914c.dat*.
- The system will accept zipped files and you should name them using the date of submission to Appriss Health. For example, name the file *20110914.zip* if you submit it on September 14, 2011.
- Before transmitting your file, rename it to include the suffix *.up* (e.g., *20110914.dat.up*). This will ensure that we do not try to load the file while you are transmitting it. Once transmission is complete, rename the file back to the original name (e.g., *20110914.dat*).

3. SFTP the file to <sftp://wapmpreporting.hidinc.com>.
4. When prompted, type *wapdm* (lower case) in front of your DEA number, Washington license number, or Generic ID as your user ID, and enter the password supplied when you created your account.
5. Place the file in the new directory.
6. If desired, view the results of the transfer/upload in your user directory. The file name is **YYYYMMDD.rpt**.
7. Log off when the file transfer/upload is complete.

Appriss Health tracks the use of the web-based tool, date stamps incoming files, and notifies you of a successful file transmission. After the file is reviewed for accuracy, you are notified of the status of the submitted file.

## SSL Website

1. If you have not created an account, perform the steps in [Creating Your Account](#).
2. Prepare the data file for submission, using the ASAP specifications described in [Appendix A: ASAP 4.2 Specifications](#).

### Important notes:

- Construct the file name using the date of submission to Appriss Health as the file name. It should have a *.dat* extension. For example, name the file *20110914.dat* if you submit it on September 14, 2011.
- Do not include spaces in the file name.
- If you submit more than one file within the same day, uniquely name each file so that existing uploaded files are not overwritten. For example, if uploading three files within the same day, you could use the following file names: *20110914a.dat*, *20110914b.dat*, and *20110914c.dat*.
- The system can accept zipped files. You should name them using the date of submission to Appriss Health. For example, name the file *20110914.zip* if you submit it on September 14, 2011.

3. Open a web browser and enter the following URL: <https://wapmpreporting.hidinc.com>.
4. When prompted, type the user ID and password supplied when you created the account.
5. Click **Upload a File**.
6. Click **Browse** to navigate to the location where you saved the file created in step 2.
7. If not previously named according to upload requirements, rename the file using the format *YYYYMMDD.dat*, for example, *20110914.dat*.
8. Click to select the file, and then click **Open**.
9. Click **Send File**.



Appriss Health tracks the use of the web-based tool, date stamps incoming files, and notifies you of a successful file transmission. After the file is reviewed for accuracy, you are notified of the status of the submitted file.

## Online Universal Claim Form (UCF) Submission

When using the online submission method, you must provide complete and accurate information; only complete and accurate submissions are entered into the WA PMP database. For a list of reporting requirements, see the [Reporting Requirements](#) topic.

Please use the information in the [Notes about NDC Numbers](#) topic as a guideline for providing accurate NDC numbers.

### Notes about NDC Numbers

Use the following information when entering NDC numbers on the UCF:

- NDCs are 11 digits and use the format *99999-9999-99*.
- When adding an NDC, do not include the dashes, for example, *99999999999*.
- NDCs are typically located on the original medication bottle on the top right corner of the label, prefaced with "NDC-" and followed by the number.
- Manufacturers often leave off a zero in the NDC. In these instances, you should add the 0 where appropriate, using the following examples as a guideline:

If the NDC appears this way ...	Enter it this way ...
1234-5678-90 (missing 0 in first segment)	01234568790
54321-123-98 (missing 0 in second segment)	54321012398

### Online UCF Submission

You may submit prescription information using RxSentry's online UCF.

The following new terms are introduced in this topic:

- **Record** – the patient, pharmacy, and prescription information you enter for one patient on the UCF
- **Batch** – a single record, or group of records, you upload using the **Submit Batch** function

**Note:** Records can be continually added to a batch—a convenient feature that allows you to enter records at your convenience and not all at one time. We recommend that you add as many records as possible to a batch before submitting it; however, you should submit and close batches in accordance with your state's reporting time frame.

Perform the following steps to use the online UCF to submit prescription information:

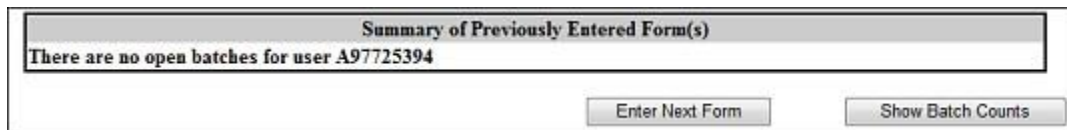
1. If you do not have an account, perform the steps in [Creating Your Account](#).
2. Open an Internet browser window and type the following URL in the address bar:  
[www.wapmp.org](http://www.wapmp.org).

3. Click **WA PMP Data Uploader**.
4. Click **WA PMP Data Uploader Site Login**.

A login window is displayed:



5. Type your user name in the **User name** field.
6. Type your password in the **Password** field.
7. Click **OK**.
8. From the RxSentry home page, click **UCF Form Entry**. You will see a window similar to the following:



- **Enter Next Form** allows you to prepare one or more records for submission.
  - **Show Batch Counts** displays the number of records in the batch currently being prepared for submission and the number of records you have previously submitted.
9. Click **Enter Next Form**.

The UCF is displayed as shown on the following page.

The screenshot displays the 'UCF Form/Manual Entry' interface, which is divided into three main sections:

- Patient Information:** Includes fields for Identification Number (with an example 1234567890), Identification Number Identifier (with radio buttons for Military ID, State Issued ID, Unique System ID, Passport ID, Driver's License ID, Social Security Number, Tribal ID, and Other), First Name, Middle Initial, Last Name, DOB (with an example 01/01/2006), Species (Human or Veterinarian Patient), and Address (City, State, Zip).
- Dispenser Information:** Includes fields for DEA#, Dispenser Name, Phone, Fax, and Address (City, State, Zip).
- Prescription Information:** Labeled 'Prescription #1', it includes fields for Rx#, Date Filled (example 01/25/2008), Date Written (example 01/25/2008), NDC, Drug Name (Strength), Quantity, Days Supply, Refill #, and Prescriber (DEA, Name). There are also radio buttons for 'New' and 'Refill'.

The UCF contains three sections—Patient Information, Dispenser Information, and Prescription Information. Refer to the following information to complete these sections on the UCF:

- **Patient Information** – Complete all fields in this section.
- **Dispenser Information** – In this section, supply your **DEA** number in the **DEA** field. Once you provide this information, all associated pharmacy information available within the RxSentry database is populated in the appropriate fields.
- **Prescription Information** – You may enter information for up to three prescriptions in this section. You must complete all fields for each prescription.

If entering more than one prescription for the same prescriber, you may select the **Use Prescriber Information From Above** check box to auto-populate each prescription with the previously-used prescriber information.

10. Once you enter all the information, click **Submit**.

**Notes:**

- If information is missing from any required fields on the UCF, the UCF window will display again with the required fields indicated. Click **Modify** to add the missing information, and then click **Submit**.
- If the system indicates that the DEA number or the NDC number you have provided is invalid, and you are certain you have provided the correct number, contact Appriss Health using the information supplied in [Assistance and Support](#).

11. The UCF is displayed for your review. If all information is correct, click **Submit**. If you need to modify any information, click **Modify**.

Once you click **Submit**, a window similar to the following is displayed:

Summary of Previously Entered Form(s)	
Patient Name JANE DOE	DOB 04/19/73
Prescriber	Pharmacy PAYSON APOTHECARY PHARMACY, LLC
Rx# 1234	Drug Name HYDROCODONE SYRUP
Filed 09/02/09	Written 09/02/09
Load Status ENTERED	

There are 1 Record(s) in Current Batch for A97725394

12. Perform one of the following functions:

- Click **Enter Next Form** to add additional records to this batch.
- Click **Show Batch Counts** to display the number of records in the current batch.
- Click **Submit/Close Batch** to upload this batch of records.

## 5 Upload Reports and Edit Definitions

### Overview

Appriss Health provides all submitters of data with an upload report that shows the result of the edits performed during the data upload. When creating an account, you must submit an e-mail address and a fax number. You can specify if you wish to receive your upload report by either of these methods. If you SFTP the data, a report will be placed in your home directory on the FTP server.

### Upload Report Details

The following is an example of an upload report for an upload with errors:

Record	Numeric Error Code*	Error Description*	Data that was incorrect	RX Number
Record 10:	25-Prescriber ID not found		Data: [000000 ] AB9876543	04034558
Record 52:	25-Prescriber ID not found		Data: [870000001] AB9876543	04033470
Record 84:	25-Prescriber ID not found		Data: [A00000004] AB9876543	04031888
Record 99:	54-Customer Zip Code conflicts with Stat		Data: [000000000] AB9876543	04034458
Record 152:	25-Prescriber ID not found		Data: [805555555] AB9876543	04034493
Record 185:	25-Prescriber ID not found		Data: [805555555] AB9876543	04034459
Record 200:	25-Prescriber ID not found		Data: [85110011 ] AB9876543	04034489
Record 215:	54-Customer Zip Code conflicts with Stat		Data: [432780000] AB9876543	04033520
Record 224:	25-Prescriber ID not found		Data: [A51111119] AB9876543	04034542
Record 350:	25-Prescriber ID not found		Data: [M45555555] AB9876543	04034481
Record 351:	25-Prescriber ID not found		Data: [M45555555] AB9876543	04034482
Record 373:	54-Customer Zip Code conflicts with Stat		Data: [000000000] AB9876543	04032245

Total #Records: 398 (TOTAL NUMBER OF RECORDS YOU SUBMITTED)  
# Records with Errors: 12 ( 3%)  
# Records with SERIOUS Errors: 3 ( 1%) (WE REJECT ENTIRE FILE ONLY IF OVER 20% SERIOUS)  
# Records with FATAL Errors: 0 ( 0%) (WE REJECT ALL FATAL ERRORS OR AN ENTIRE FILE IF OVER 10% FATAL)  
# Records with Duplicates: 0 ( 0%) (WE AUTOMATICALLY REJECT ANY RECORD WE HAVE ALREADY RECEIVED)  
0 Records Imported 05/31/2012 (TOTAL NUMBER OF RECORDS WE ACCEPTED)

\*References to error codes and descriptions of specific error codes can be found in your state's Implementation guide.

The system may reject a single record or, if a certain percentage of records are rejected in an individual file, it may reject the entire file. We track three types of errors:

- Minor – Incorrect data in non-vital field
- Serious – Record can be loaded with missing or inappropriate data
- Fatal – Record cannot be loaded

The system will reject a single record if it contains a fatal error.

It will reject an entire batch if:

- ALL records have Fatal or Serious errors
- More than 10% of the records have Fatal errors
- More than 20% of the records have Serious errors

**Pharmacies are required to correct fatal errors and resubmit the records within seven (7) days of the initial record submission.**

## View Upload Reports

This function provides uploaders access to upload reports previously delivered via e-mail or fax following a data submission. By default, the reports that display for reviewing are provided for a 31-day period. However, uploaders can view reports outside of the 31-day default period by entering start and end dates for the desired date range.

Perform the following steps to view upload reports:

1. Open an Internet browser window and type the following URL in the address bar:  
[www.wapmp.org](http://www.wapmp.org).
2. Click **WA PMP Data Uploader**.
3. Click **WA PMP Data Uploader Site Login**.

A login window is displayed:



4. Type your user name in the **User name** field.
5. Type your password in the **Password** field.
6. Click **OK**.
7. From the RxSentry home page, click **View Upload Reports**.

A window similar to the following is displayed:

<b>Report Timeframe:</b> 10/18/10 - 11/18/10		<input type="button" value="Submit"/>
Date and Time	Report Name	Process Date
11/11/10 9:17:18 AM	<a href="#">20101111.dat.rpt</a>	11/11/10
10/21/10 9:58:52 AM	<a href="#">20101021.dat.rpt</a>	10/21/10

8. Click a hyperlink in the **Report Name** field to open an upload report for viewing.
9. To view reports for a different time frame, type a start and end date in the **Report Timeframe** fields, and then click **Submit**.

## View Zero Reports

This function provides uploaders the ability to view previously submitted zero reports. By default, the reports that display for reviewing are provided for a 31-day period. However, uploaders can view reports outside of the 31-day default period by entering start and end dates for the desired date range.

Perform the following steps to view zero reports:

1. Open an Internet browser window and type the following URL in the address bar:  
[www.wapmp.org](http://www.wapmp.org).
2. Click **WA PMP Data Uploader**.
3. Click **WA PMP Data Uploader Site Login**.

A login window is displayed:



4. Type your user name in the **User name** field.
5. Type your password in the **Password** field.
6. Click **OK**.
7. From the RxSentry home page, click **View Zero Reports**.

A window similar to the following is displayed:

Zero Reports					
Report Timeframe:		02/09/13	-	03/12/13	Submit
From Date	To Date	Pharmacy ID	Pharmacy Name	Upload Date	
No zero reports uploaded for selected timeframe.					

## Error Correction

Fatal errors will cause the system NOT to load a record. If this occurs, correct the data that caused the error and resubmit the entire record. You must resubmit fatal error corrections with seven (7) days of the initial record submission. If a record with a serious or minor error is loaded and a correction is required, records can be corrected using the DSP01 values as explained below.

**Note:** Edit Number V1 as shown in the [Edit Definitions](#) table should not be resubmitted. The system will load all other records with errors that are not fatal unless the batch thresholds are reached. Error thresholds are defined in the [Upload Report Details](#) section.

The ASAP 4.2 standard requires a pharmacy to select an indicator in the **DSP01** (Reporting Status) field. Pharmacies may submit new records, revise and resubmit records, and void (delete) erroneous records. These actions are indicated by supplying one of the following values in the **DSP01** field:

- **00 New Record** – indicates a new record
- **01 Revise** – indicates that one or more data elements in a previously-submitted record have been revised
- **02 Void** – indicates that the original record should be removed

Use the information in the following topics to create a new record, revise and resubmit a record, or void an erroneous record.

### Submit a New Record

Perform the following steps to submit a new record:

1. Create a record with the value **00** in the **DSP01** field.
2. Populate all other required fields and submit the record.

**Note:** Use these steps to submit new records or to submit records that were previously submitted but received a fatal status on your error report. **Records with fatal errors are not loaded to the system.** You must correct the errors in these records in your system and resubmit them using the 00 status in the **DSP01** field.

### Revise a Record

Perform the following steps to revise a record:

1. Create a record with the value **01** in the **DSP01** field.
2. Populate the following fields with the same information originally submitted in the erroneous record:
  - PHA03 (DEA Provider ID)
  - DSP02 (Prescription Number)
  - DSP05 (Date Filled)



3. Fill in all other data fields with the correct information. This information will override the original data linked to the fields referenced in step 2.
4. Submit the record.

**Important note:** If any of the fields referenced in step 2 are part of the correction, the record must first be voided using the steps provided in the [Void a Record](#) section, and then you must resubmit the record using the value 00 in the **DSP01** field.

## Void a Record

Perform the following steps to void (delete) a record:

1. Send a record with the value **02** in the **DSP01** field.
2. Fill in all other data identical to the original record. This will void the original record submission.

## Edit Definitions

The following table describes the current list of edits:

Edit Number	Message	Severity
Edit 01	Format of File Error	Fatal
Edit 02	Pharmacy DEA is blank	Fatal
Edit 05	Pharmacy ID not found	Fatal
Edit 07	Customer ID blank	Minor
Edit 09	Invalid DOB	Serious
Edit 14	Reporting status is invalid	Fatal
Edit 15	Date Dispensed is invalid or irrational	Serious
Edit 17	Refill Code must be a valid number	Minor
Edit 18	Quantity is invalid	Serious
Edit 19	Days Supply is invalid	Minor
	Days Supply is 999	Fatal
Edit 20	Days Supply > 360	Serious
Edit 21	NDC not found	Serious
	NDC not found (used when CDI segment is used)	Fatal
Edit 22	Product ID Qualifier is invalid	Fatal
Edit 25	Prescriber ID not found	Minor
	Prescriber ID cannot be blank	Fatal
Edit 26	Prescriber Last Name is blank	Minor
Edit 27	Prescriber First Name is blank	Minor
Edit 28	Date RX Written is invalid	Serious

Edit Number	Message	Severity
Edit 29	Number of Refills Authorized is invalid	Minor
Edit 31	Classification Code for Payment Type is invalid	Serious
Edit 50	Customer Last Name blank	Fatal
Edit 51	Customer First Name blank	Fatal
Edit 52	Customer Address blank	Serious
Edit 53	Customer ZIP Code is blank	Serious
Edit 54	Customer ZIP and State Code conflict	Serious
Edit 56	Customer City is blank	Minor
Edit 60	Customer State Code is blank	Serious
Edit 61	Customer State Code is invalid	Serious
Edit 200	Prescription Number is blank	Serious
Edit 354	Patient ID Qualifier is invalid	Minor
Edit V1	Record already exists <b>Note:</b> Duplicate records are not loaded. The number of duplicate records, if any, is displayed on the upload report produced after data file transmission has completed.	Minor

## 6 Assistance and Support

### Technical Assistance

If you need additional help with any of the procedures outlined in this guide, you can:

Contact Appriss Health at [wamp-info@apprisshealth.com](mailto:wamp-info@apprisshealth.com);

**OR**

Call 877-719-3121.

Technical assistance is available from 8:00 a.m. – 5:00 p.m. PST (Pacific Standard Time).

### Administrative Assistance

If you have non-technical questions about the Washington PMP, please contact:

Chris Baumgartner, PMP Director  
Washington Department of Health  
P.O. Box 47852  
Olympia, WA 98504-7852

Phone: 360.236.4806

Fax: 360.236.2901

E-mail: [prescriptionmonitoring@doh.wa.gov](mailto:prescriptionmonitoring@doh.wa.gov)

Web:

<http://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/HealthcareProfessionsandFacilities/PrescriptionMonitoringProgramPMP>

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## 7 Glossary

### **ASAP**

American Society for Automation in Pharmacy

### **Authentication**

Information, electronic device, or certificate provided by the department or the designee to a data requestor to electronically access prescription monitoring information

### **Dispenser**

Practitioner or pharmacy that delivers a controlled substance to an ultimate user, but does not include practitioners who only administer a controlled substance in an office setting or licensed wholesale distributors or manufacturers as defined in chapter 18.64RCW

### **NDC**

National Drug Code; describes specific drugs by manufacturer drug and package size

### **Patient**

Person or animal who is the ultimate user of a drug for whom a prescription is issued or whom a drug is dispensed

### **Patient Address**

Current geographic location of the patient's residence, as would be identified when a telephone is used to place a 911 call or as listed by the USPS

### **Pharmacist**

Person licensed to engage in the practice of pharmacy

### **PMP**

Prescription Monitoring Program

### **Prescriber**

A practitioner who is authorized by state and federal agencies to prescribe controlled substances

### **Prescription Monitoring Information**

Information submitted to and maintained by the prescription monitoring program

### **Program**

Prescription monitoring program established under chapter 70.225 RCW

### **RxSentry**

Prescription drug monitoring program owned by Appriss Inc.

### **SFTP**

Secure File Transfer Protocol (also referred to as "SSH File Transfer Protocol"); provides file transfer and manipulation functionality over any reliable data stream

### **SSL**

Secure Sockets Layer; cryptographic protocol that provides secure communications for data transfers

### **Uploader**

A pharmacy or group of pharmacies that upload a data file containing controlled substance dispensing information

### **Valid photographic identification**

- A driver's license or instruction permit issued by any state in the United States or province of Canada
- A state identification card issued by any state in the United States or province of Canada
- An official passport issued by any nation
- A U.S. armed forces identification card issued to active duty, reserve, and retired personnel and the personnel's dependents
- A merchant marine identification card issued by the U.S. Coast Guard
- A state liquor control identification card. An official age identification card issued by the liquor control authority of any state in the United States or province of Canada
- An enrollment card issued by the governing authority of a federally recognized Indian tribe located in Washington, if the enrollment card incorporates security features comparable to those implemented by the department of licensing for Washington driver's licenses and are recognized by the liquor control board

## 8 Document Information

### Version History

The Version History records the publication history of this document. See the Change Log for more details regarding the changes and enhancements included in each version.

Publication Date	Version Number	Comments
03/07/2013	1.0	Initial publication
04/18/2013	1.1	Updated publication
05/01/2013	1.2	Updated publication
06/06/2013	1.3	Updated publication
08/21/2013	1.4	Updated publication
09/06/2013	1.5	Updated publication
10/14/2013	1.6	Updated publication
11/13/2013	1.7	Updated publication
05/05/2016	2.0	Updated publication
04/18/2017	2.1	Updated publication

### Change Log

The Change Log records the changes and enhancements included in each version.

Version Number	Chapter/Section	Change
1.0	N/A	N/A
1.1	Chapter 3/Timeline and Requirements	Updated section to include the date the WA PMP will begin accepting data in the ASAP 4.2 format
1.2	Chapter 3/Reporting Zero Dispensing	Separated the "Report Zero Dispensing – RxSentry" topic into two sub-topics, Single Dispensers and Group Pharmacies, to clarify the way zero reports must be submitted for each group
	Chapter 5/View Zero Reports	Added new topic
1.3	Chapter 2/Excluded from reporting	Based on a rule change, removed the word "immediate" from the following statement: Dispensing for immediate, one-day use (24-hour supply or less)

Version Number	Chapter/Section	Change
1.4	Appendix A/ASAP 4.2 Specifications	Changed field usage for PHA01, DSP14, and PRE01 from "N" to "S"
1.5	Chapter 5/Revise a Record	Updated the steps for revising a record to indicate the fields that cannot be revised
1.6	Appendix A/ASAP 4.2 Specifications	Added information to the CDI field description to specify that if CDI is filled in, the NDC of DSP08 must be 99999999999.
1.7	Chapter 3/Timeline and Requirements	Updated the language to indicate that the WA PMP is now accepting data in the ASAP 4.2 format
2.0	Global	Updated to new HID document template
	Chapter 6/Technical Assistance	Updated HID Help Desk e-mail address
2.1	Global	Removed HID references and replace with Appriss Health



## Appendix A: ASAP 4.2 Specifications

The information on the following pages contains the definitions for the specific contents required of uploaded records in the American Society for Automation in Pharmacy (ASAP) format to comply with WA PMP requirements.

The following elements are used in each upload file:

- **Segment Identifier** – indicates the beginning of a new segment, for example, *PHA*.
- **Data Delimiter** – character used to separate segments and the data elements within a segment, for example, an asterisk (\*).

Each completed field should be followed by an asterisk, and each blank field should contain a single asterisk.

If the last field in the segment is blank, it should contain an asterisk and a tilde (~).

- **Segment Terminator** – character used to mark the end of a segment, for example, the tilde (~).

**Note:** Field TH09 in the Transaction Header segment contains a built-in segment terminator. Since TH09 also signifies the end of the segment, it should contain two tildes (~~).

- **Field Usage**
  - R = Required by ASAP
  - N = Not used
  - RR = Required by WA PMP
  - S = Situational (not required; however, supply if available)

Both "R" and "RR" fields must be reported.

**Note:** For more information, contact the American Society for Automation in Pharmacy for the full *Implementation Guide for the ASAP Standard for Prescription-Monitoring Programs*. This guide includes field lengths, acceptable attributes, and examples.

Segment	Field ID	Field Name	Field Usage
<b>TH: Transaction Header</b>			
Required segment; used to indicate the start of a transaction. It also assigns the data element separator, segment terminator, and control number.			
	TH01	<b>Version/Release Number</b> Code uniquely identifying the transaction. Format = xx.x	R
	TH02	<b>Transaction Control Number</b> Sender assigned code uniquely identifying a transaction.	R
	TH03	<b>Transaction Type</b> <b>Identifies the purpose of initiating the transaction.</b> <ul style="list-style-type: none"> <li>▪ 01 Send/Request Transaction</li> <li>▪ 02 Acknowledgement (used in Response only)</li> <li>▪ 03 Error Receiving (used in Response only)</li> <li>▪ 04 Void (used to void a specific Rx in a real-time transmission or an entire batch that has been transmitted)</li> </ul>	N
	TH04	<b>Response ID</b> Contains the Transaction Control Number of a transaction that initiated the transaction. Required in response transaction only.	N
	TH05	<b>Creation Date</b> Date the transaction was created. Format: CCYYMMDD.	R
	TH06	<b>Creation Time</b> Time the transaction was created. Format: HHMMSS or HHMM.	R
	TH07	<b>File Type</b> <ul style="list-style-type: none"> <li>▪ P = Production</li> <li>▪ T = Test</li> </ul>	R
	TH08	<b>Routing Number</b> Reserved for real-time transmissions that go through a network switch to indicate, if necessary, the specific state PMP the transaction should be routed to.	N
	TH09	<b>Segment Terminator Character</b> This terminates the TH segment and sets the actual value of the data segment terminator for the entire transaction.	R
<b>IS: Information Source</b>			
Required segment; used to convey the name and identification numbers of the entity supplying the information.			
	IS01	<b>Unique Information Source ID</b> Reference number or identification number. (Example: phone number)	R
	IS02	<b>Information Source Entity Name</b> Entity name of the Information Source.	R
	IS03	<b>Message</b> Free-form text message.	N

Segment	Field ID	Field Name	Field Usage
<b>PHA: Pharmacy Header</b>			
Required segment; used to identify the pharmacy.			
<b>Note:</b> It is required that information be provided in at least one of the following fields: PHA01, PHA02, or PHA03.			
	PHA01	<b>National Provider Identifier (NPI)</b> Identifier assigned to the pharmacy by CMS.	S
	PHA02	<b>NCPDP/NABP Provider ID</b> Identifier assigned to pharmacy by the National Council for Prescription Drug Programs.	N
	PHA03	<b>DEA Number</b> Identifier assigned to the pharmacy by the Drug Enforcement Administration.	RR
	PHA04	<b>Pharmacy Name</b> Free-form name of the pharmacy or dispensing practitioner's name.	N
	PHA05	<b>Address Information – 1</b> Free-form text for address information.	N
	PHA06	<b>Address Information – 2</b> Free-form text for address information.	N
	PHA07	<b>City Address</b> Free-form text for city name.	N
	PHA08	<b>State Address</b> U.S. Postal Service state code.	N
	PHA09	<b>ZIP Code Address</b> U.S. Postal Service ZIP Code.	N
	PHA10	<b>Phone Number</b> Complete phone number including area code.	N
	PHA11	<b>Contact Name</b> Free-form name.	N
	PHA12	<b>Chain Site ID</b> Store number assigned by the chain to the pharmacy location. Used when the PMP needs to identify the specific pharmacy from which information is required.	N
<b>PAT: Patient Information</b>			
Required segment; used to report the patient's name and basic information as contained in the pharmacy record.			
	PAT01	<b>ID Qualifier of Patient Identifier</b> Code identifying the jurisdiction that issues the ID in PAT03.	N

Segment	Field ID	Field Name	Field Usage
	<b>PAT02</b>	<b>ID Qualifier</b> Code to identify the type of ID in PAT03. If PAT02 is used, PAT03 is required. <ul style="list-style-type: none"> <li>▪ 01 Military ID</li> <li>▪ 02 State Issued ID</li> <li>▪ 03 Unique System ID</li> <li>▪ 04 Permanent Resident Card (Green Card)</li> <li>▪ 05 Passport ID</li> <li>▪ 06 Driver's License ID</li> <li>▪ 07 Social Security Number</li> <li>▪ 08 Tribal ID</li> <li>▪ 99 Other (agreed upon ID)</li> </ul>	RR
	<b>PAT03</b>	<b>ID of Patient</b> Identification number for the patient as indicated in PAT02. An example would be the driver's license number.	RR
	<b>PAT04</b>	<b>ID Qualifier of Additional Patient Identifier</b> Code identifying the jurisdiction that issues the ID in PAT06. Used if the PMP requires such identification.	N
	<b>PAT05</b>	<b>Additional Patient ID Qualifier</b> Code to identify the type of ID in PAT06 if the PMP requires a second identifier. If PAT05 is used, PAT06 is required. <ul style="list-style-type: none"> <li>▪ 01 Military ID</li> <li>▪ 02 State Issued ID</li> <li>▪ 03 Unique System ID</li> <li>▪ 04 Permanent Resident Card</li> <li>▪ 05 Passport ID</li> <li>▪ 06 Driver's License ID</li> <li>▪ 07 Social Security Number</li> <li>▪ 08 Tribal ID</li> <li>▪ 99 Other (agreed upon ID)</li> </ul>	N
	<b>PAT06</b>	<b>Additional ID</b> Identification that might be required by the PMP to further identify the individual. An example might be that in PAT03 driver's license is required and in PAT06 Social Security number is also required.	N
	<b>PAT07</b>	<b>Last Name</b> Patient's last name.	RR
	<b>PAT08</b>	<b>First Name</b> Patient's first name.	RR
	<b>PAT09</b>	<b>Middle Name</b> Patient's middle name or initial if available.	S
	<b>PAT10</b>	<b>Name Prefix</b> Patient's name prefix such as Mr. or Dr.	N
	<b>PAT11</b>	<b>Name Suffix</b> Patient's name suffix such as <i>Jr.</i> or <i>the III.</i>	S

Segment	Field ID	Field Name	Field Usage
	PAT12	<b>Address Information – 1</b> Free-form text for street address information.	RR
	PAT13	<b>Address Information – 2</b> Free-form text for additional address information.	N
	PAT14	<b>City Address</b> Free-form text for city name.	RR
	PAT15	<b>State Address</b> U.S. Postal Service state code <b>Note:</b> Field has been sized to handle international patients not residing in the U.S.	RR
	PAT16	<b>ZIP Code Address</b> U.S. Postal Service ZIP code. Populate with zeros if patient address is outside the U.S.	RR
	PAT17	<b>Phone Number</b> Complete phone number including area code.	N
	PAT18	<b>Date of Birth</b> Date patient was born. Format: CCYYMMDD	RR
	PAT19	<b>Gender Code</b> Code indicating the sex of the patient. <ul style="list-style-type: none"> <li>▪ F Female</li> <li>▪ M Male</li> <li>▪ U Unknown</li> </ul>	RR
	PAT20	<b>Species Code</b> Used if required by the PMP to differentiate a prescription for an individual from one prescribed for an animal. <ul style="list-style-type: none"> <li>▪ 01 Human</li> <li>▪ 02 Veterinary Patient</li> </ul>	S
	PAT21	<b>Patient Location Code</b> Code indicating where patient is located when receiving pharmacy services. <ul style="list-style-type: none"> <li>▪ 01 Home</li> <li>▪ 02 Intermediary Care</li> <li>▪ 03 Nursing Home</li> <li>▪ 04 Long-Term/Extended Care</li> <li>▪ 05 Rest Home</li> <li>▪ 06 Boarding Home</li> <li>▪ 07 Skilled-Care Facility</li> <li>▪ 08 Sub-Acute Care Facility</li> <li>▪ 09 Acute Care Facility</li> <li>▪ 10 Outpatient</li> <li>▪ 11 Hospice</li> <li>▪ 98 Unknown</li> <li>▪ 99 Other</li> </ul>	N

Segment	Field ID	Field Name	Field Usage
	<b>PAT22</b>	<b>Country of Non-U.S. Resident</b> Used when the patient's address is a foreign country and PAT12 through PAT16 are left blank.	N
	<b>PAT23</b>	<b>Name of Animal</b> Used if required by the PMP for prescriptions written by a veterinarian and the pharmacist has access to this information at the time of dispensing the prescription.	S
<b>DSP: Dispensing Record</b>			
Required Segment; used to identify the basic components of a dispensing of a given prescription order including the date and quantity.			
	<b>DSP01</b>	<b>Reporting Status</b> DSP01 requires one of the following codes, and an empty or blank field no longer indicates a new prescription transaction: <ul style="list-style-type: none"> <li>▪ 00 New Record (indicates a new prescription dispensing transaction)</li> <li>▪ 01 Revise (indicates that one or more data element values in a previously submitted transaction are being revised)</li> <li>▪ 02 Void (message to the PMP to remove the original prescription transaction from its data, or to mark the record as invalid or to be ignored).</li> </ul>	R
	<b>DSP02</b>	<b>Prescription Number</b> Serial number assigned to the prescription by the pharmacy.	R
	<b>DSP03</b>	<b>Date Written</b> Date the prescription was written (authorized). Format: CCYYMMDD	RR
	<b>DSP04</b>	<b>Refills Authorized</b> The number of refills authorized by the prescriber.	RR
	<b>DSP05</b>	<b>Date Filled</b> Date prescription was filled. Format: CCYYMMDD	RR
	<b>DSP06</b>	<b>Refill Number</b> Number of the fill of the prescription. 0 indicates New Rx; 01-99 is the refill number.	RR
	<b>DSP07</b>	<b>Product ID Qualifier</b> Used to identify the type of product ID contained in DSP08. <ul style="list-style-type: none"> <li>▪ 01 NDC</li> <li>▪ 06 Compound (indicates a compound; if used, the CDI segment becomes a required segment)</li> </ul>	RR
	<b>DSP08</b>	<b>Product ID</b> Full product identification as indicated in DSP07, including leading zeros without punctuation.	RR
	<b>DSP09</b>	<b>Quantity Dispensed</b> Number of metric units dispensed in metric decimal format. Example: 2.5 <b>Note:</b> For compounds show the first quantity in CDI04.	RR

Segment	Field ID	Field Name	Field Usage
	<b>DSP10</b>	<b>Days Supply</b> Estimated number of days the medication will last.	RR
	<b>DSP11</b>	<b>Drug Dosage Units Code</b> Identifies the unit of measure for the quantity dispensed in DSP09. <ul style="list-style-type: none"> <li>▪ 01 Each</li> <li>▪ 02 Milliliters (ml)</li> <li>▪ 03 Grams (gm)</li> </ul>	N
	<b>DSP12</b>	<b>Transmission Form of Rx Origin Code</b> Code indicating how the pharmacy received the prescription. <ul style="list-style-type: none"> <li>▪ 01 Written Prescription</li> <li>▪ 02 Telephone Prescription</li> <li>▪ 03 Telephone Emergency Prescription</li> <li>▪ 04 Fax Prescription</li> <li>▪ 05 Electronic Prescription</li> <li>▪ 99 Other</li> </ul>	N
	<b>DSP13</b>	<b>Partial Fill Indicator</b> Used when the quantity in DSP 09 is less than the metric quantity per dispensing authorized by the prescriber. This dispensing activity is often referred to as a split filling. <ul style="list-style-type: none"> <li>▪ 00 Not a Partial Fill</li> <li>▪ 01 First Partial Fill</li> </ul> <p><b>Note:</b> For additional fills per prescription, increment by 1. So the second partial fill would be reported as 02, up to a maximum of 99.</p>	N
	<b>DSP14</b>	<b>Pharmacist National Provider Identifier (NPI)</b> Identifier assigned to the pharmacist by CMS. This number can be used to identify the pharmacist dispensing the medication.	S
	<b>DSP15</b>	<b>Pharmacist State License Number</b> This data element can be used to identify the pharmacist dispensing the medication. Assigned to the pharmacist by the State Licensing Board.	N
	<b>DSP16</b>	<b>Classification Code for Payment Type</b> Code identifying the type of payment (i.e., how it was paid for). <ul style="list-style-type: none"> <li>▪ 01 Private Pay</li> <li>▪ 02 Medicaid</li> <li>▪ 03 Medicare</li> <li>▪ 04 Commercial Insurance</li> <li>▪ 05 Military Installations and VA</li> <li>▪ 06 Workers' Compensation</li> <li>▪ 07 Indian Nations</li> <li>▪ 99 Other</li> </ul>	RR
	<b>DSP17</b>	<b>Date Sold</b> Usage of this field depends on the pharmacy having a point-of-sale system that is integrated with the pharmacy management system to allow a bidirectional flow of information.	N

Segment	Field ID	Field Name	Field Usage
	<b>DSP18</b>	<b>RxNorm Product Qualifier</b> <ul style="list-style-type: none"> <li>▪ 01 Semantic Clinical Drug (SCD)</li> <li>▪ 02 Semantic Branded Drug (SBD)</li> <li>▪ 03 Generic Package (GPCK)</li> <li>▪ 04 Branded Package (BPCK)</li> </ul> <b>Note:</b> DSP18 and DSP19 are placeholder fields pending RxNorm becoming an industry standard and should not be required until such time.	N
	<b>DSP19</b>	<b>RxNorm Code</b> Used for electronic prescriptions to capture the prescribed drug product identification. <b>Note:</b> DSP18 and DSP19 are placeholder fields pending RxNorm becoming an industry standard and should not be required until such time.	N
	<b>DSP20</b>	<b>Electronic Prescription Reference Number</b> Used to provide an audit trail for electronic prescriptions. <b>Note:</b> DSP20 and DSP21 should be reported as a pair to the prescription drug monitoring program, and each program decides which one, if not both, it decides to capture.	N
	<b>DSP21</b>	<b>Electronic Prescription Order Number</b> <b>Note:</b> DSP20 and DSP21 should be reported as a pair to the prescription drug monitoring program, and each program decides which one, if not both, it decides to capture.	S
<b>PRE: Prescriber Information</b>			
Required segment; used to identify the prescriber of the prescription.			
	<b>PRE01</b>	<b>National Provider Identifier (NPI)</b> Identifier assigned to the prescriber by CMS.	S
	<b>PRE02</b>	<b>DEA Number</b> Identifying number assigned to a prescriber or an institution by the Drug Enforcement Administration (DEA).	RR
	<b>PRE03</b>	<b>DEA Number Suffix</b> Identifying number assigned to a prescriber by an institution when the institution's number is used as the DEA number.	N
	<b>PRE04</b>	<b>Prescriber State License Number</b> Identification assigned to the prescriber by the State Licensing Board.	N
	<b>PRE05</b>	<b>Last Name</b> Prescriber's last name.	RR
	<b>PRE06</b>	<b>First Name</b> Prescriber's first name.	RR
	<b>PRE07</b>	<b>Middle Name</b> Prescriber's middle name or initial.	N
	<b>PRE08</b>	<b>Phone Number</b>	S



Segment	Field ID	Field Name	Field Usage
<p><b>CDI: Compound Drug Ingredient Detail</b></p> <p>Use of this segment is situational; required when medication dispensed is a compound and one of the ingredients is a PMP reporting drug. If more than one ingredient is for a prescription monitoring program reporting drug, then this would be incremented by one for each compound ingredient being reported.</p> <p>If CDI is filled in, the NDC of DSP08 must be 9999999999.</p>			
	CDI01	<p><b>Compound Drug Ingredient Sequence Number</b></p> <p>First reportable ingredient is 1; each additional reportable ingredient is incremented by 1.</p>	R
	CDI02	<p><b>Product ID Qualifier</b></p> <p>Code to identify the type of product ID contained in CDI03.</p> <ul style="list-style-type: none"> <li>▪ 01 NDC</li> <li>▪ 02 UPC</li> <li>▪ 03 HRI</li> <li>▪ 04 UPN</li> <li>▪ 05 DIN</li> <li>▪ 06 Compound (this code is not used in this segment)</li> </ul>	R
	CDI03	<p><b>Product ID</b></p> <p>Full product identification as indicated in CDI02, including leading zeros without punctuation.</p>	R
	CDI04	<p><b>Compound Ingredient Quantity</b></p> <p>Metric decimal quantity of the ingredient identified in CDI03.</p> <p>Example: 2.5</p>	R
	CDI05	<p><b>Compound Drug Dosage Units Code</b></p> <p>Identifies the unit of measure for the quantity dispensed in CDI04.</p> <ul style="list-style-type: none"> <li>▪ 01 Each (used to report as package)</li> <li>▪ 02 Milliliters (ml) (for liters, adjust to the decimal milliliter equivalent)</li> <li>▪ 03 Grams (gm) (for milligrams, adjust to the decimal gram equivalent)</li> </ul>	N
<p><b>AIR: Additional Information Reporting</b></p> <p>Use of this segment is situational; used when state-issued serialized Rx pads are used, the state requires information on the person dropping off or picking up the prescription, or for data elements not included in other detail segments.</p> <p><b>Note:</b> If this segment is used, at least one of the data elements (fields) will be required.</p>			
	AIR01	<p><b>State Issuing Rx Serial Number</b></p> <p>U.S.P.S. state code of state that issued serialized prescription blank. This is required if AIR02 is used.</p>	N
	AIR02	<p><b>State Issued Rx Serial Number</b></p> <p>Number assigned to state issued serialized prescription blank.</p>	N
	AIR03	<p><b>Issuing Jurisdiction</b></p> <p>Code identifying the jurisdiction that issues the ID in AIR05.</p>	N

Segment	Field ID	Field Name	Field Usage
	<b>AIR04</b>	<b>ID Qualifier of Person Dropping Off or Picking Up Rx</b> Used to identify the type of ID contained in AIR05 for person dropping off or picking up the prescription. <ul style="list-style-type: none"> <li>▪ 01 Military ID</li> <li>▪ 02 State Issued ID</li> <li>▪ 03 Unique System ID</li> <li>▪ 04 Permanent Resident Card (Green Card)</li> <li>▪ 05 Passport ID</li> <li>▪ 06 Driver's License ID</li> <li>▪ 07 Social Security Number</li> <li>▪ 08 Tribal ID</li> <li>▪ 99 Other (agreed upon ID)</li> </ul>	S
	<b>AIR05</b>	<b>ID of Person Dropping Off or Picking Up Rx</b> ID number of patient or person picking up or dropping off the prescription.	S
	<b>AIR06</b>	<b>Relationship of Person Dropping Off or Picking Up Rx</b> Code indicating the relationship of the person. <ul style="list-style-type: none"> <li>▪ 01 Patient</li> <li>▪ 02 Parent/Legal Guardian</li> <li>▪ 03 Spouse</li> <li>▪ 04 Caregiver</li> <li>▪ 99 Other</li> </ul>	N
	<b>AIR07</b>	<b>Last Name of Person Dropping Off or Picking Up Rx</b> Last name of person picking up the prescription.	S
	<b>AIR08</b>	<b>First Name of Person Dropping Off or Picking Up Rx</b> First name of person picking up the prescription.	S
	<b>AIR09</b>	<b>Last Name or Initials of Pharmacist</b> Last name or initials of pharmacist dispensing the medication.	N
	<b>AIR10</b>	<b>First Name of Pharmacist</b> First name of pharmacist dispensing the medication.	N
	<b>AIR11</b>	<b>Dropping Off/Picking Up Identifier Qualifier</b> Additional qualifier for the ID contained in AIR05 <ul style="list-style-type: none"> <li>▪ 01 Person Dropping Off</li> <li>▪ 02 Person Picking Up</li> <li>▪ 98 Unknown/Not Applicable</li> </ul> <b>Note:</b> Both 01 and 02 cannot be required by a prescription drug monitoring program.	S
<b>TP: Pharmacy Trailer</b>			
Required segment; used to identify the end of data for a given pharmacy and provide the count of the total number of detail segments reported for the pharmacy, including the PHA and TP segment.			
	<b>TP01</b>	<b>Detail Segment Count</b> Number of detail segments included for the pharmacy including the pharmacy header (PHA) and the pharmacy trailer (TP) segments.	R

Segment	Field ID	Field Name	Field Usage
<b>TT: Transaction Trailer</b>			
Required segment; used to indicate the end of the transaction and provide the count of the total number of segments included in the transaction.			
	<b>TT01</b>	<b>Transaction Control Number</b> Identifying control number that must be unique. Assigned by the originator of the transaction. Must match the number in TH02.	R
	<b>TT02</b>	<b>Segment Count</b> Total number of segments included in the transaction including the header and trailer segments.	R

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## Appendix B: Zero Report Specifications

The information on the following pages contains the definitions for the specific contents required by the American Society for Automation in Pharmacy (ASAP) to comply with zero dispense reporting for the WA PMP.

The zero report specification is a complete transaction that includes the information that would normally be sent with a batch file filled out as it would be for reporting the dispensing of controlled substances. However, for the detail segments, while all the segments and data elements that are required by the WA PMP are sent, only the Patient First Name, Last Name, and Date Filled fields are populated. The values populating these fields are:

- First Name = Zero
- Last Name = Report
- Date Filled = Date that the report is sent

All other fields in the detail segments would be left blank.

The following elements are used in each upload file:

- **Segment Identifier** – indicates the beginning of a new segment, for example, *PHA*.
- **Data Delimiter** – character used to separate segments and the data elements within a segment, for example, an asterisk (\*).

Each completed field should be followed by an asterisk, and each blank field should contain a single asterisk.

If the last field in the segment is blank, it should contain an asterisk and a tilde (~).

- **Segment Terminator** – character used to mark the end of a segment, for example, the tilde (~).

**Note:** Field TH09 in the Transaction Header segment contains a built-in segment terminator. Since TH09 also signifies the end of the segment, it should contain two tildes (~~).

For more information, contact the American Society for Automation in Pharmacy for the full *Implementation Guide for the ASAP Standard for Prescription Monitoring Programs Zero Reports*.

Segment	Field ID	Field Name	Field Usage
<b>TH: Transaction Header</b>			
Used to indicate the start of a transaction. It also assigns the data element separator, segment terminator, and control number.			
	TH01	<b>Version/Release Number</b>	R
	TH02	<b>Transaction Control Number</b> Sender assigned code uniquely identifying a transaction.	R
	TH03	<b>Transaction Type</b> Identifies the purpose of initiating the transaction. 01 Send/Request Transaction	R
	TH04	<b>Response ID</b>	N
	TH05	<b>Creation Date</b> Date the transaction was created. Format: CCYYMMDD.	R
	TH06	<b>Creation Time</b> Time the transaction was created. Format: HHMMSS or HHMM.	R
	TH07	<b>File Type</b> P = Production	R
	TH08	<b>Routing Number</b>	N
	TH09	<b>Segment Terminator Character</b> TH09 also signifies the end of this segment; therefore, it should contain two tildes (~~).	R
<b>IS: Information Source</b>			
Used to convey the name and identification numbers of the entity supplying the information.			
	IS01	<b>Unique Information Source ID</b> Reference number or identification number.	R
	IS02	<b>Information Source Entity Name</b> Entity name of the Information Source.	R
	IS03	<b>Message</b> Enter the date range in the following format: #yyyymmdd#- #yyyymmdd#~.	R
<b>PHA: Pharmacy Header</b>			
Used to identify the pharmacy.			
	PHA01	<b>National Provider Identifier (NPI)</b> Identifier assigned to the pharmacy by CMS.	N
	PHA02	<b>NCPDP/NABP Provider ID</b> Identifier assigned to pharmacy by the National Council for Prescription Drug Programs.	N
	PHA03	<b>DEA Number</b> Identifier assigned to the pharmacy by the Drug Enforcement Administration.	R

Segment	Field ID	Field Name	Field Usage
<b>PAT: Patient Information</b>			
Used to report the patient's name and basic information as contained in the pharmacy record.			
	PAT01	ID Qualifier of Patient Identifier	N
	PAT02	ID Qualifier	N
	PAT03	ID of Patient	N
	PAT04	ID Qualifier of Additional Patient Identifier	N
	PAT05	Additional Patient ID Qualifier	N
	PAT06	Additional ID	N
	PAT07	Last Name Required value = Report	R
	PAT08	First Name Required value = Zero	R
	PAT09	Middle Name	N
	PAT10	Name Prefix	N
	PAT11	Name Suffix	N
	PAT12	Address Information – 1	N
	PAT13	Address Information – 2	N
	PAT14	City Address	N
	PAT15	State Address	N
	PAT16	ZIP Code Address	N
	PAT17	Phone Number	N
	PAT18	Date of Birth	N
	PAT19	Gender Code	N
<b>DSP: Dispensing Record</b>			
Used to identify the basic components of a dispensing of a given prescription order including the date and quantity.			
	DSP01	Reporting Status	N
	DSP02	Prescription Number	N
	DSP03	Date Written	N
	DSP04	Refills Authorized	N
	DSP05	Date Filled Date prescription was filled. Format: CCYYMMDD	R
	DSP06	Refill Number	N
	DSP09	Quantity Dispensed	N
	DSP10	Days Supply	N
<b>PRE: Prescriber Information</b>			
Used to identify the prescriber of the prescription.			
	PRE01	National Provider Identifier (NPI)	N

Segment	Field ID	Field Name	Field Usage
	PRE02	DEA Number	N
<b>TP: Pharmacy Trailer</b>			
Used to identify the end of data for a given pharmacy and provide the count of the total number of detail segments reported for the pharmacy, including the PHA and TP segment.			
	TP01	<b>Detail Segment Count</b> Number of detail segments included for the pharmacy including the pharmacy header (PHA) including the pharmacy trailer (TP) segments.	R
<b>TT: Transaction Trailer</b>			
Used to indicate the end of the transaction and provide the count of the total number of segments included in the transaction.			
	TT01	<b>Transaction Control Number</b> Identifying control number that must be unique. Assigned by the originator of the transaction. Must match the number in TH02.	R
	TT02	<b>Segment Count</b> Total number of segments included in the transaction including the header and trailer segments.	R