Bamboo Health

PMP AWARxE®

Data Submission Guide for Dispensers

Washington State Prescription Monitoring Program

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Version 3.5

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1   Document Overview

This document serves as a training guide and support manual for dispensers of Schedule II through Schedule V controlled substances in or into the State of Washington who use Bamboo Health's PMP Clearinghouse repository to report their dispensations. It includes such topics as:

- Reporting requirements for dispensers in the State of Washington
- Data file submission guidelines and methods
- Creating a PMP Clearinghouse account
- Creating a data file
- Uploading or reporting data
- Understanding and correcting errors

This guide is intended for use by all dispensers in or into the State of Washington required to report the dispensing of controlled substances.

2   Data Collection and Tracking

2.1   Data Collection 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.

2.2   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.

RCW 70.225.020 states, "a dispenser shall submit data to the department electronically, no 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 requires 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 4.2A Specifications.

2.2.1 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.

2.2.2 Zero Reports

When the dispenser has not dispensed any drugs during a business day that requires reporting, the dispenser shall report that no drugs requiring reporting were dispensed within seven days. Exclusions to this requirement for reporting are described in the Excluded from Reporting section.

2.2.3 Reporting Noncompliance

Per RCW 70.225.020, 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. Zero reporting requirements can be found above in the Zero Reports section of this document. A dispenser that knowingly fails to submit their controlled substance dispensing as required by this legislation may be subject to disciplinary action.

Note: Per RCW 70.225.020(3)(b), beginning January 1, 2021, each dispenser must submit the information as soon as is readily available, but no later than one business day from the date of distributing, and in accordance with transmission methods established by the department.

2.2.4 Veterinarian Data Submission

Veterinarians have separate reporting requirements from pharmacies and other dispensing prescribers, which are outlined in the PMP rules (https://apps.leg.wa.gov/wac/default.aspx?cite=246-470-035) and include frequency of reporting, ability to mail/fax records, and different required data fields.

Note: Pharmacies filling Veterinary scripts are still required to report daily. Reporting requirements specifically for Veterinarians do not apply to pharmacies.

Required data fields for veterinarians are listed in the Data Collection Requirements for Veterinarians section of this document.

Veterinarians are required to report to the Washington PMP the dispensing of Schedule II–V controlled substances and drugs identified by the board of pharmacy under WAC 246-470-020, dispensed for more than

a 14-day supply. Veterinarians may submit reports as often as is convenient but are required to report quarterly at minimum, as specified in the table below:

Reporting Period	Report Due Date
January–March	April 10
April–June	July 10
July–September	October 10
October–December	January 10

Note: *Pharmacies filling Veterinary scripts are still required to report daily. Reporting requirements specifically for Veterinarians do not apply to pharmacies.*

Online reporting via web portal upload and online universal claim form (UCF) submission is available for your convenience. For instructions on submitting your data online, please refer to the Data Delivery Methods section of this document. For information on mailed or Faxed submissions please contact prescriptionmonitoring@doh.wa.gov or 360-236-4869.

2.3   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.

2.4   Data Collection Requirements

The fields described in the following table are required for collection by the State of Washington. Refer to the Data Delivery Methods chapter for instructions for submitting this data.

A National Drug Code (NDC) number is a universal product identifier and is present on many nonprescription and all prescription medication packages. If the NDC number cannot be found on the medication/tablet package, please contact your distributor. NDCs will always be 10-digit numbers and will be formatted in a

5-4-1, 5-3-2 or 4-4-2 format (e.g., 12345-1234-1). However, to establish a standardized format, reported NDCs must be "normalized" to a format of 5-4-2. To normalize an NDC number, add a leading zero to the section that is missing a digit (e.g., 1234-1234-01 would become 01234-1234-01 and 12345, 1234-1 would become 12345-1234-01). The NDC number must be entered without dashes or spaces for it to be accepted. For more information on National Drug Codes, see https://www.fda.gov/drugs/drug-approvals-and-databases/national- drug-code-directory.

Notes:

- *All reporting is done through Clearinghouse. To set up a Clearinghouse account, please refer to the Accessing Clearinghouse section of this manual.*

- *Additional fields are required by ASAP. For the complete list of all required fields, please refer to Appendix A: ASAP 4.2A Specifications.*

- *If any of the below requirements are excluded or submitted inaccurately within the file, you will receive a critical error, and the file will not enter the PMP database. It is important that all dispensers check for error corrections on a weekly basis to ensure that prescriptions are getting into the database. For information on how to perform error corrections, please refer to the Error Correction section within this document.*

- *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 Delivery Methods chapter to submit the data.*

- *If you are reporting veterinarian, please refer to the Data Collection Requirements for Veterinarians section of this document.*

Field Name	Field ID
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**
Refill Number	**DSP06**

Product ID Qualifier ***Note:** NDC is required.	**DSP07**
Product ID	**DSP08**
Quantity Dispensed	**DSP09**
Days Supply	**DSP10**
Classification Code for Payment Type	**DSP16**
Prescriber Information	
DEA Number	**PRE02**
Last Name	**PRE05**
First Name	**PRE06**
Additional Information Reporting	
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)**

2.4.1 Data Collection Requirements for Veterinarians

Veterinarians are required to report the following data elements to the Washington PMP for each Schedule II–V controlled substance and other required drugs dispensed for more than a 14-day supply:

1. Name of the animal for whom the drug is dispensed, including name of the animal or the animal's species (e.g., Feline) and the owner's last name;

2. Animal's date of birth; if date of birth is unknown, enter January 1 and the estimated birth year;

3. Owner's name, including first name, middle initial, last name, and generational suffixes, if any;

4. Owner's address;

5. Drug dispensed;

6. Date the drug was dispensed;

7. Quantity and days' supply dispensed;

8. Prescriber identifier;

9. Dispenser identifier; and

10. When practicable, the identification number from a valid photo identification card of the owner.

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3   Data Submission

This chapter provides information about submitting data to the PMP Clearinghouse repository.

3.1   Timeline and Requirements

- Pharmacies, dispensing veterinarians, and software vendors can begin creating their PMP Clearinghouse accounts upon receipt of this guide. See Creating Your Account for more information.
- The WA PMP began accepting data in the American Society for Automation in Pharmacy (ASAP) 4.2A format on October 1, 2013. Please refer to the Zero Reports and Reporting Noncompliance sections in this document for the timing requirements around reporting.

3.2   Upload Specifications

Files should be in the ASAP 4.2A format, as defined in Appendix A: ASAP 4.2A 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 "20220415.dat". All uploaded files will be stored and processed separately.

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

Prescription information reporting requirements are outlined in the Zero Reports and Reporting Noncompliance sections.

4   Accessing Clearinghouse

This chapter describes how to create your PMP Clearinghouse account and how to log in to the PMP Clearinghouse web portal.

4.1   Creating Your Account

Prior to submitting data, you must create an account. **If you are currently registered with the Bamboo Health PMP Clearinghouse system, you do not need to register for a new account—you will be able to add Washington to your existing account for data submissions.** If you have an existing PMP Clearinghouse account, please refer to Adding PMPs to Your Upload Account to add PMPs to your account.

> ***Notes:***
>
> - *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 their pharmacies licensed in the State of Washington. Therefore, chains with multiple stores need only to set up one account to upload a file.*
>
> - *PMP Clearinghouse allows users to submit data through the web portal via manual entry (UCF) or upload of ASAP files. For users who prefer an encrypted transfer method, sFTP access is also available. You may set up your sFTP account during the account creation process.*
>
> - *If you need to make changes to an existing PMP Clearinghouse account upload account, please refer to Managing Your Upload Account.*

Perform the following steps to create an account:

1. Open an internet browser window and navigate to the PMP Clearinghouse Account Registration page located at https://pmpclearinghouse.net/registrations/new.

2. Complete your **Profile Details**.

   a.   Enter your current, valid email address in the **Email Address** field.

   Note: The email address you provide here will act as your username when logging into the PMP Clearinghouse system.

   b.   Enter a password for your account in the **Password** field, then re-enter it in the **Password Confirmation** field. The password requirements are provided below.

   Passwords must contain:

   - *At least eight (8) characters*
   - *One (1) uppercase letter*
   - *One (1) lowercase letter*
   - *One (1) number*
   - *One (1) special character, such as !, @, #, $, etc.*

3. Complete your Personal and Employer information, noting the following:

   - Required fields are marked with a red asterisk (*****).

- You may be able to auto-populate your Personal and/or Employer information by entering your (or your employer's) **DEA**, **NPI**, and/or **NCPDP** number, then clicking the search icon (🔍). If the number you entered is found, your information will automatically be populated.


4. If secure file transfer protocol (SFTP) is required, complete the Data Submission section of the page.

    Notes:

    - *If SFTP access is not required, you do not need to complete the Data Submission section and you may continue to step 5.*

    - *You may add SFTP access to an existing account. Please refer to Adding SFTP Access to an Upload Account for complete instructions.*

    a. Click to select the **Enable SFTP Access** checkbox.

The SFTP access fields are displayed.

b. Your **SFTP Username** is automatically generated using the first five characters of your employer's name + your employer's phone number. For example, if you entered "Test" as your employer's name and "555-555-5555" as your employer's phone number, your SFTP username would be test5555555555.

c. Enter a password for your SFTP account in the **SFTP Password** field, then re-enter it in the **SFTP Password Confirmation** field. The password requirements are provided below.

Passwords must contain:

- *At least eight (8) characters*
- *One (1) uppercase letter*
- *One (1) lowercase letter*
- *One (1) number*
- *One (1) special character, such as !, @, #, $, etc.*

This password will be input into the pharmacy software so that submissions can be automated.

Notes:

- *This password can be the same as the one previously entered under Profile.*
- *Unlike the Profile password (i.e., your user account password), the SFTP password does not expire.*
- *The URL to connect via SFTP is submissions.healthcarecoordination.net/.*
- *Additional details on SFTP configuration can be found in Appendix C: SFTP Configuration.*

5. In the **Submission Destinations** section of the page, select the PMP(s) for which you will be submitting data.

6. Click **Submit**.

    The request is submitted to the PMP administrator for each of the PMPs you selected for data submission, and the Registration Information Overview page is displayed as shown on the following page.

    Thank you for registering with PMP Clearinghouse, a service of PMP AWARxE.

    A link to verify your email address has been sent. You must confirm your email address before you can login to PMP Clearinghouse. Your data submission request has been sent to your requested state(s) for processing. Upon approval, you may begin submitting prescription data.

    Profile

    Email Address: testuser@bamboohealth.com
    Password: *********
    DEA Number:
    NPI Number:
    Full Name:: Test User

    Employer

    Name: Bamboo Health
    DEA Number:
    NCPDP Number::
    Address: 123 Main St Anywhere KY 40223
    Phone: 5555555555
    Fax:

    Data Acceptance

    SFTP Account: SFTP Access? No
    Real-Time Account: Real-Time Access? No

    Submission Destinations

    ☑ **Demo State**

    Continue

7. Click **Continue**.

    The PMP Clearinghouse Login page is displayed; however, you will not be able to log in until your account has been approved. The State of Washington utilizes the auto-approval feature; therefore, your account will be automatically reviewed and approved. Once your request is approved, you will receive a welcome email instructing you to confirm your account. Follow the instructions in the email to confirm your account and begin submitting data to PMP AWARxE.

> ***Notes:***
>
> - *If you request PMPs other than Washington for data submission, your request may not be automatically approved. Other PMPs may require review by the PMP Administrator.*
>
> - ***If you are having trouble requesting access to Washington, please contact Bamboo Health*** *by phone at 1-877-719-3121. You may also create a support request at the following URL:* [*https://pmpclearinghouse.zendesk.com/hc/en-us/*](https://pmpclearinghouse.zendesk.com/hc/en-us/)

4.2   Logging In to PMP Clearinghouse

1.   Open an internet browser window and navigate to the PMP Clearinghouse Login page located at https://pmpclearinghouse.net/users/sign_in.
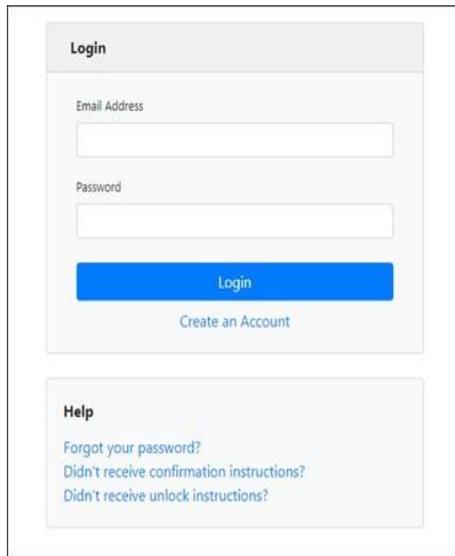
2.   Enter the email address you used to create your account in the **Email Address** field.

3.   Enter your password in the **Password** field.

     Note: *If you have forgotten your password, have completed your registration, but did not receive the account confirmation email, or your account has been locked and you did not receive the email with instructions for unlocking your account, please refer to the links in the Help section of the page. For detailed instructions on resetting your password, refer to* [*Resetting Your Password*](#).

4.   Click **Login**.

     The PMP Clearinghouse home page is displayed.
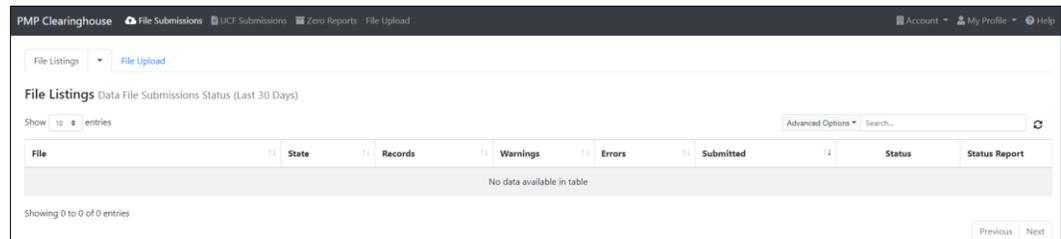
5   Data Delivery Methods

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

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

Delivery Method	Page
Secure FTP	16
Web Portal Upload	17
Manual Entry (UCF)	19
Zero Reports	23

5.1   Secure FTP

If you are submitting data to PMP Clearinghouse using SFTP, you must configure individual subfolders for the PMP systems to which you are submitting data. These subfolders must be created in the homedir/directory folder, which is where you are directed once authenticated, and **should be named using the PMP abbreviation (e.g., AK, DC, GU, KS, PR, WA, etc.).** Data files not submitted to a PMP subfolder will be required to have a manual PMP assignment made on the File Listings page. Please refer to PMP Subfolders for additional details on this process.

1. If you do not have a PMP Clearinghouse account, perform the steps in Creating Your Account.

    Or

2. If you have a PMP Clearinghouse account but have not enabled SFTP access, perform the steps in Adding SFTP Access to an Upload Account.

3. Prepare the data file(s) for submission, using the ASAP specifications described in Appendix A: ASAP 4.2A Specifications.

    Notes:

    - *Files for upload should be named in a unique fashion, with a prefix constructed from the date of submission to PMP Clearinghouse (YYYYMMDD) and a suffix of ".dat". An example file name would be "20220919.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.*

    - *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 names: 20220919a.dat, 20220919b.dat, and 20220919c.dat.*

4. SFTP the file to submissions.healthcarecoordination.net/.

5. When prompted, enter the username and password you created when setting up the SFTP account.

6. Place the file in the appropriate PMP-abbreviated directory.

7. You can view the results of the transfer/upload on the Submissions page in PMP Clearinghouse.

Note: If you place the data file in the root directory and not a PDMP sub-folder, a ymbol with a ❓ *mouse over hint of* **"Determine PMP"** *is displayed on the* **File Status** *page, and you will be prompted to select a destination PMP to which the data should be sent.*

5.2 Web Portal Upload

1. If you do not have an account, perform the steps in Creating Your Account.

2. Prepare the data file(s) for submission, using the ASAP specifications described in Appendix A: ASAP 4.2A Specifications.

   Notes:

   - *Files for upload should be named in a unique fashion, with a prefix constructed from the date of submission to PMP Clearinghouse (YYYYMMDD) and a suffix of ".dat". An example file name would be "20220919.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.*

   - *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: 20220919a.dat, 20220919b.dat, and 20220919c.dat.*

3. Log in to PMP Clearinghouse.

4. From the home page, click the **File Upload** tab.

Account	File	State	Records	Warnings	Errors	Submitted	Status	Status Report
PillPack	pdmp_OH_20220110082508.DAT	OH	5			01/10/2022 09:23AM	✔	Report
PillPack	pdmp_NC_20220110082508.DAT	NC	3			01/10/2022 09:22AM	✔	Report
PillPack	pdmp_NJ_20220110082508.DAT	NJ	11			01/10/2022 09:22AM	✔	Report

The **File Upload** page is displayed as shown on the following page.
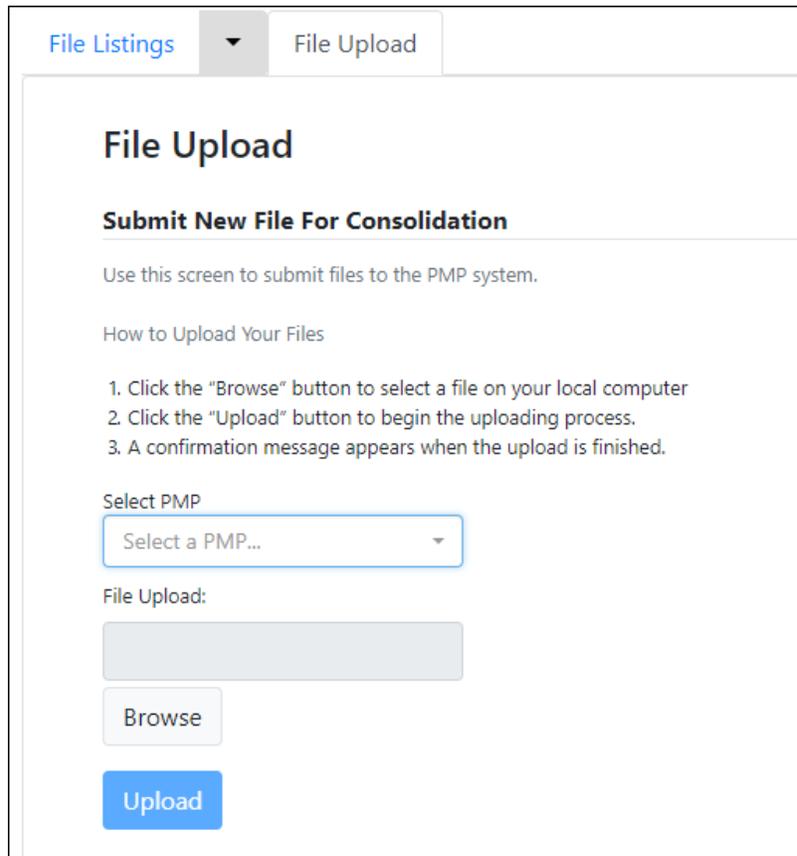
5. Select the PMP to which you are submitting the file from the drop-down list in the **Select a PMP** field.

6. Click the **Browse** button, located next to the **File Upload** field, and select the file you created in step 2.

7. Click **Upload**.

   A message is displayed prompting you to confirm the submission.
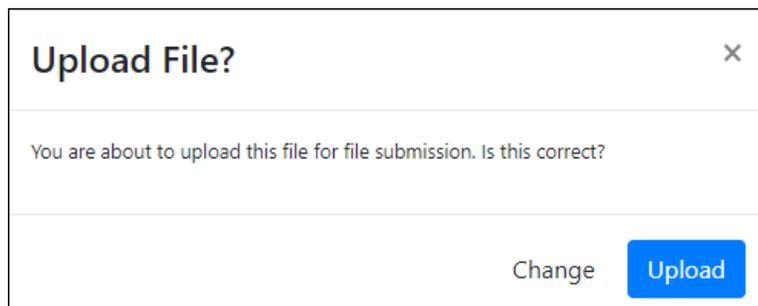
8. Click **Upload** to continue with the file submission.

   Your file is uploaded, and you can view the results of the upload on the **File Submissions** page.

> ***Note:*** *When uploading a file, the file name must be unique. If the file name is not unique, a message is displayed indicating that the file name has already been taken.*

5.3   Manual Entry (UCF)

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.

> ***Notes: If you are entering a compound****, click the* **Compound** *checkbox in the* Drug Information section of the **Create Universal Claim Form** page, complete the required fields for the first drug ingredient, then click **Add New** to add additional drug ingredients.

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.

5.3.1   Notes about NDC Numbers

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

- Reportable 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 10-digit NDC number.
- Because NDC numbers need to be normalized to a standard 5-4-2 format, you must add a 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
54321-1234-1 (missing 0 in third segment)	54321123401

5.3.2   Online UCF Submission

You can manually enter your prescription information into the PMP Clearinghouse system using the Universal Claim Form (UCF) within the PMP Clearinghouse web portal. This form allows you to enter patient, prescriber, dispenser, and prescription information.

Please refer to Appendix A: ASAP 4.2A Specifications for the complete list of reporting requirements.

1. If you do not have an account, perform the steps in Creating Your Account.

2. Log in to PMP Clearinghouse.

3. Click **UCF Submissions**.

The **UCF Listings** page is displayed.

4. Click the **New Claim Form** tab, located at the top of the page.
   The **Create Universal Claim Form** page is displayed.

5. Select the PMP to which you are submitting data from the drop-down list in the **Select a PMP** field.

6. Complete the required fields.

   Notes:

   - *An asterisk (*) indicates a required field.*

   - ***If you are entering a compound**, click the **Compound** checkbox in the Drug Information section of the page, complete the required fields for the first drug ingredient, then click **Add New** to add additional drug ingredients.*

7. Once you have completed all required fields, click **Save**. The **Submit Now** button is displayed at the top of the page.

8. Click **Submit Now** to continue with the data submission process.

A message is displayed prompting you to confirm the data submission.
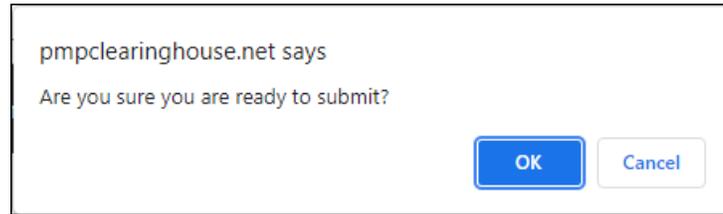
9. Click **OK**.

    Your data will be validated upon submission. If there are any errors on the UCF form, they are displayed at the top of the page.
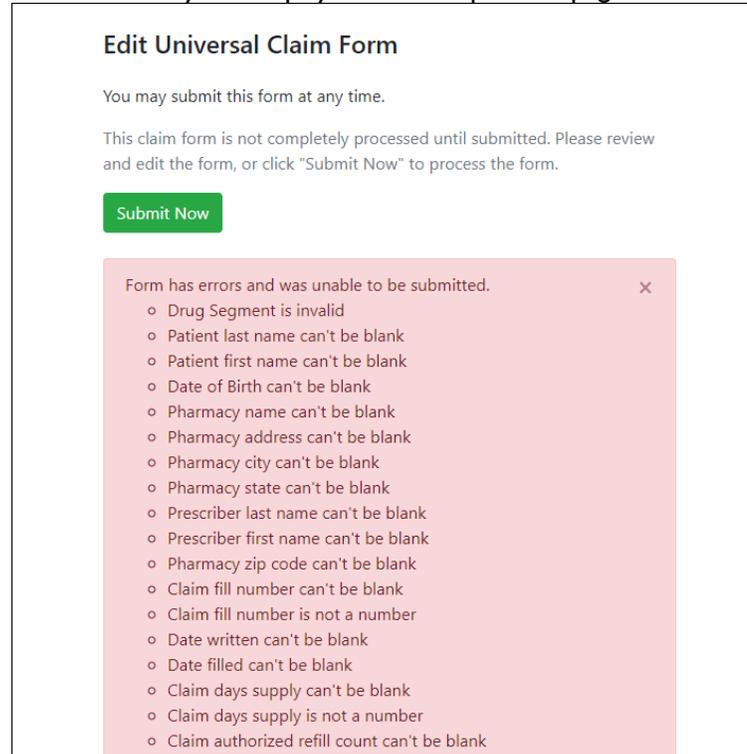
> ***Note:*** *If there are no errors, you are returned to the Submitted Claim Forms page, and your report is listed there.*

10. Correct the indicated errors, then repeat steps 7–9.

    Once your data has been successfully submitted, your report is listed on the **UCF Listings** page.
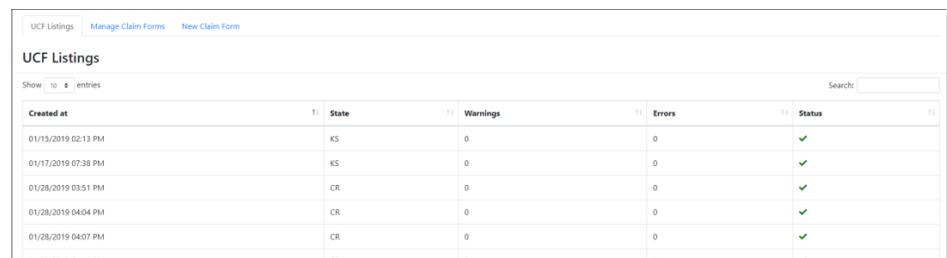
5.4 Zero Reports

If you have no dispensations to report, you must report this information to the WA PMP. You may submit your zero report through the PMP Clearinghouse web portal by following the steps below or via SFTP using the ASAP Standard for Zero Reports. For additional details on submitting via SFTP, please refer to Appendix B: ASAP Zero Report Specifications.

You may submit zero reports through the PMP Clearinghouse web portal using one of the following methods:

- Submit a single-click zero report
- Create a new zero report

5.4.1 Submit a Single-Click Zero Report

Single-click zero reporting allows you to create a profile for the pharmacy that includes its identifiers (e.g., DEA, NPI, NCPDP), so you do not have to enter it each time you submit a zero report.

To create a pharmacy profile and begin submitting single-click zero reports:

1. If you do not have an account, perform the steps in Creating Your Account.
2. Log in to PMP Clearinghouse.
3. Click **Zero Reports**.

The **Zero Report Listings** page is displayed.

4. Click the **Create Zero Report** tab.

    The **Create Zero Report** page is displayed.

    Note: **Submit a Single Click Zero Report** is selected by default.

- Any pharmacies you have already configured for single-click zero reporting are displayed at the bottom of the page. Continue to step 10 to submit a zero report for those pharmacies.

- If you have not configured your pharmacy for single-click zero reporting, continue to step 5.

5. Click **Add New Pharmacy**.

    The **New Pharmacy** page is displayed.

6. Select the PMP for which you are submitting a zero report from the drop-down list in the **PMP** field.

7. Enter the pharmacy's name in the **Pharmacy** field.

8. Populate the **NCPDP**, **DEA Number**, and/or **NPI** fields as required by the PMP you selected in step 6. If any of these fields are required, a red asterisk (*****) will be displayed next to that field once you have selected a PMP.

9. Click **Save**.

   The pharmacy is saved and will be listed under the drop-down for the selected PMP, which is located at the bottom of the page.
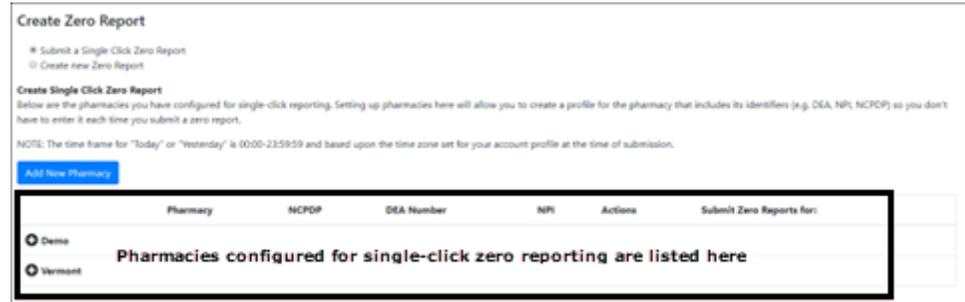
10. Click the plus sign ("+") next to the PMP for which you wish to submit a zero report.

    The list of pharmacies you have configured for single-click zero reporting for that PMP is displayed. Note that this page allows you to submit a zero report for the current date (**Today**) or the previous day (**Yesterday**).

11. Click **Today** to submit a zero report for the current date;

    Or

12. Click **Yesterday** to submit a zero report for the previous date.

    Once the report is submitted, the submission is indicated on the screen, and the zero report is displayed on the **Zero Report Listings** tab.

    Notes:

    - *You may edit or delete a pharmacy from this page.*

    - *To edit a pharmacy, click **Edit** to display the **Edit Pharmacy** page and make any necessary changes. Refer to steps 6-9 for guidance on entering pharmacy information.*

    - *To delete a pharmacy, click **Delete**. You will be prompted to confirm the deletion. Once you confirm the deletion, the pharmacy configuration will be removed.*

5.4.2 Create a New Zero Report

1. If you do not have an account, perform the steps in Creating Your Account.

2. Log in to PMP Clearinghouse.

3. Click **Zero Reports**.

The **Zero Report Listings** page is displayed.

4. Click the **Create Zero Report** tab.

    The **Create Zero Report** page is displayed.

    Note: Submit a Single Click Zero Report is selected by default.

5. Click the button to select **Create new Zero Report**.

The **Create Zero Report** page is displayed.

6. Select the PMP for which you are submitting a zero report from the drop-down list in the **Select a PMP** field.

7. Enter the start date and end date for the zero report in the **Start date** and **End date** fields using the MM/DD/YYYY format. You may also select the dates from the calendar that is displayed when you click in these fields.

8. Enter your NCPDP, DEA, and/or NPI numbers as required by your PMP.

    Note: If any of these fields are required by your PMP, they will be marked with a red asterisk (*).

9. Click **Submit**.

    Your zero report is submitted to PMP Clearinghouse and will be displayed on the **Zero Report Listings** tab.

6 Data Compliance

This chapter describes how to view the status of your submitted data files and how to correct errors.

6.1 File Listings

The **File Listings** page displays information extracted from the data files submitted to PMP Clearinghouse, including the file name, number of records identified within the data file, number of records that contain warnings, number of records that contain errors, and the date and time of submission. Click **File Submissions** to access this page.
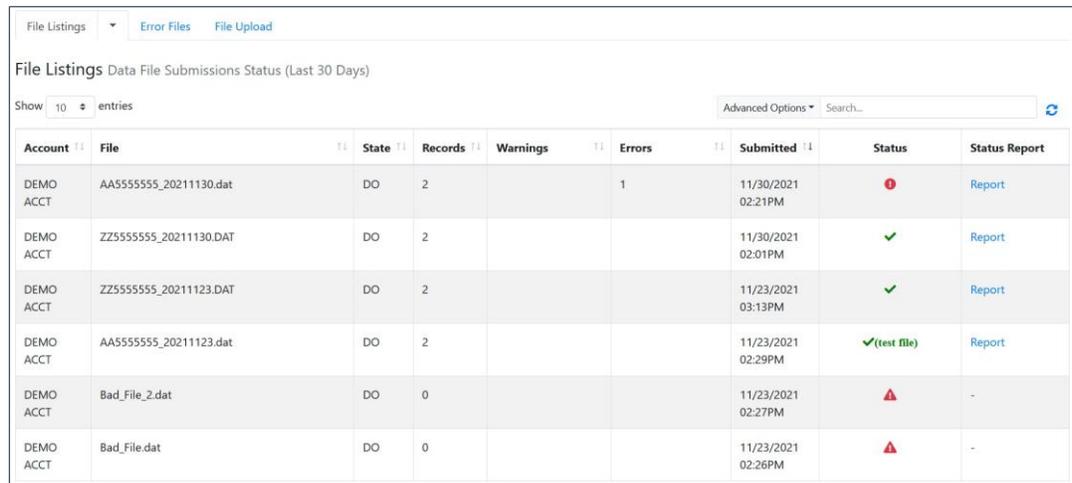
Account	File	State	Records	Warnings	Errors	Submitted	Status	Status Report
DEMO ACCT	AA5555555_20211130.dat	DO	2		1	11/30/2021 02:21PM	❗	Report
DEMO ACCT	ZZ5555555_20211130.DAT	DO	2			11/30/2021 02:01PM	✔	Report
DEMO ACCT	ZZ5555555_20211123.DAT	DO	2			11/23/2021 03:13PM	✔	Report
DEMO ACCT	AA5555555_20211123.dat	DO	2			11/23/2021 02:29PM	✔(test file)	Report
DEMO ACCT	Bad_File_2.dat	DO	0			11/23/2021 02:27PM	⚠	-
DEMO ACCT	Bad_File.dat	DO	0			11/23/2021 02:26PM	⚠	-

- The **Status** column, located at the end of each row, displays the file status via color-coded icon. Hovering over the icon will display the status message.

- The **Status Report** column, located next to the **Status** column, contains a link to the status report for that file. Please refer to File Status Report for more information on how to read and interpret this report.

If a file contains errors, it will have a ❗ symbol with a mouse over hint of "Pending Dispensation Error" within the status column. You can click the error icon in the **Status** column to display the Error Correction page, which allows you to view the records containing errors (see View Records for more information). Please refer to Error Correction for instructions on how to correct errors.

If a file is unable to be parsed into the PMP Clearinghouse application, it will have an ⚠ symbol with a mouse over hint of "ASAP Errors" Clicking the icon will display the detailed error, which indicates what element was missing or malformed. To correct these errors, a new file must be submitted to PMP Clearinghouse. It is not necessary to void a file that failed parsing since it was not successfully submitted to PMP Clearinghouse.

If you submitted a file via SFTP without using a PMP-specific sub-folder, the file will be displayed, and ❓ symbol will be displayed in the status column with a mouse over hint of "Determine PMP." Clicking the icon will prompt you to select a destination PMP to which the data file will be transferred.
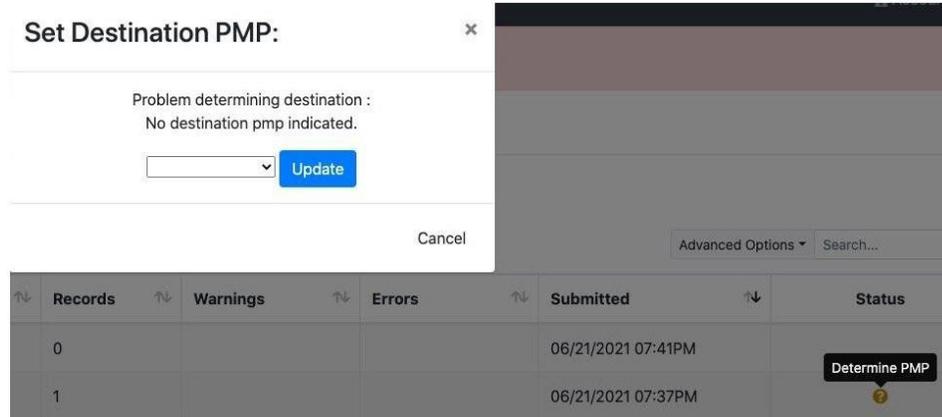
If you submitted a zero report via file upload or SFTP that is malformed or missing information, the file will be displayed, and an exclamation mark icon inside a red triangle will be displayed in the status column. Hovering over the icon will display the "Invalid Zero Report" error. Clicking on the icon will display the detailed error message. To correct these errors, a new zero report must be submitted. Error example:

6.2 UCF Listings

The **UCF Listings** page displays information about the UCFs submitted to PMP Clearinghouse, including the number of warnings and errors. Click **UCF Submissions** to access this page.

The **Status** column, located at the end of each row, displays the UCF's status. Data entered into the UCF is validated upon submission; therefore, successfully submitted UCFs should not contain errors. However, if you have attempted to submit a UCF with errors and did not immediately correct those errors and submit the record, you have up to one (1) year to make updates to these records in Clearinghouse.

1. To view pending or incomplete submissions, click the **Manage Claim Forms** tab.
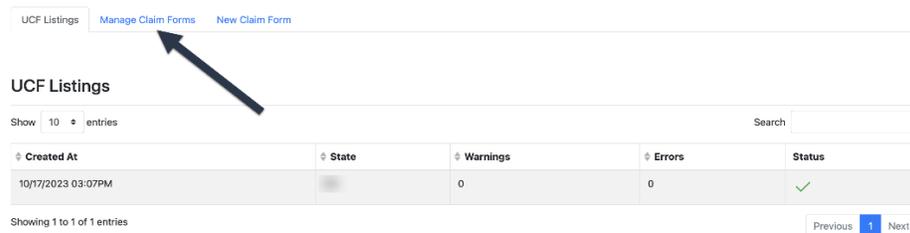
The **Pending Claim Forms** page is displayed.
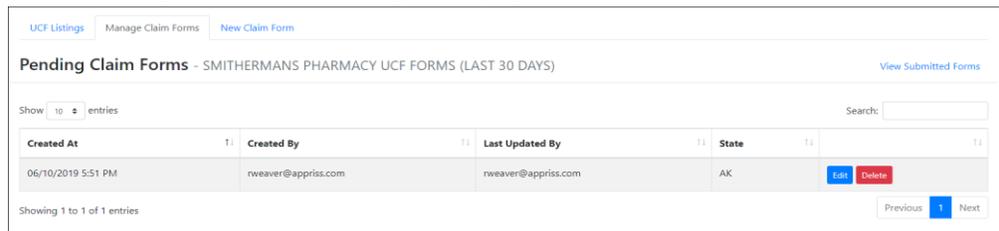
2. Click **Edit** next to the form you wish to update.

    *Note: If it has been longer than 1 year, the **Edit** option will not be available. You must click **Delete** to delete the record and start over.*

    The **Edit Universal Claim Form** page is displayed.
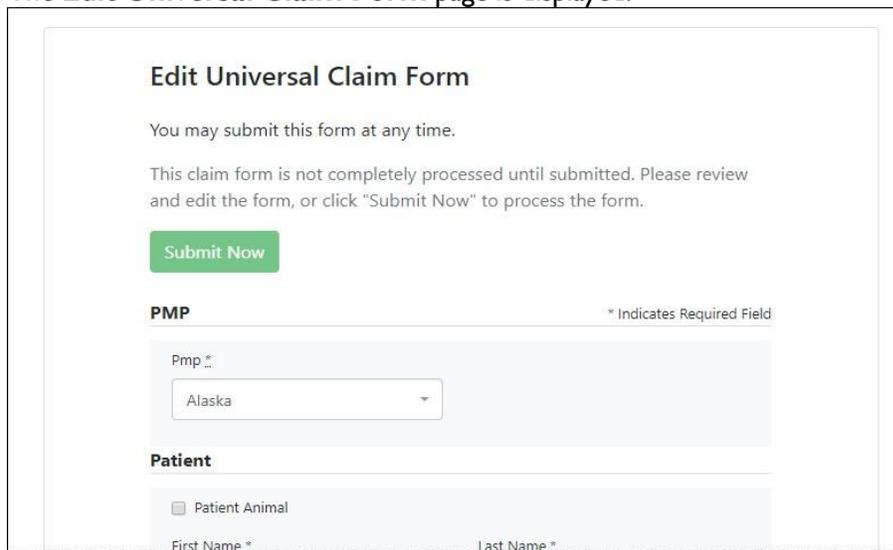
3. Make the necessary corrections or changes, and then click **Submit Now**, located at the top of the page.

    A message is displayed prompting you to confirm the data submission.

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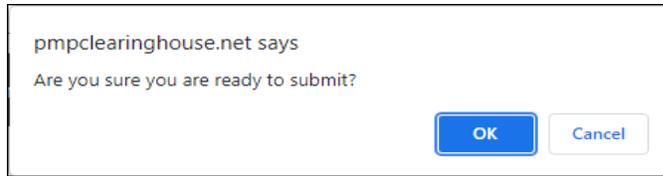
4. Click **OK**.

Your data will be validated upon submission. If there are any remaining errors on the UCF form, they are displayed at the top of the page.
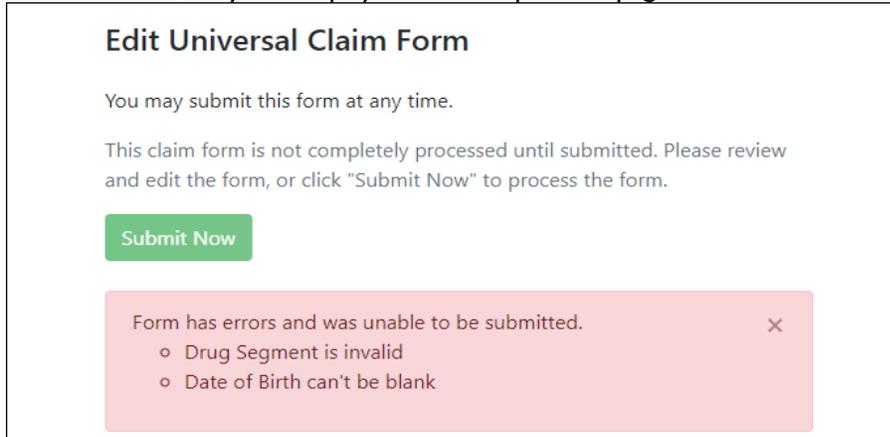
Note: *If there are no errors, you are returned to the* **UCF Listings** *page and your report is listed there.*

5. Correct the indicated errors, then repeat steps **3-4**.

Once your data has been successfully submitted, your report is listed on the **UCF Listings** page.

6.3 Error Correction

6.3.1 View Records

The **Error Correction** page displays more information about the records within a selected data file that need correcting, including **Prescription Number**, **Segment Type**, **Warning Count**, and **Error Count**. To access this page, click the "**Pending Dispensation Errors"** message in the **Status** column of the File Listings page or UCF Listings page.

The **Correct** button, located at the end of each row, allows you to make corrections to the record.

6.3.2 Error Correction via PMP Clearinghouse

Once you click **Correct** on the **Error Correction** page, the **Errors** page is displayed. This page displays detailed information about the records within a selected data file that need correcting, including all the fields contained within the record and the originally submitted value, and allows you to correct those records. To access this page, click the **Correct** button next to the erroneous record listed on the **Error Correction** page (see View Records for more information).

- The **Corrected Value** column allows you to enter a new value to correct the error.

- The **Message** column displays the relevant error message explaining why the value entered in that field did not pass the validation rules.

For files that failed to parse, the error identified is "best effort" and any information we could not parse is listed as "unparseable" in the file. In this case, you must submit a corrected file.

To correct records:

1. Identify the fields that require corrections. Fields containing errors are highlighted in red, as shown in the screenshot above.

2. Enter the corrected value in the **Corrected Value** column.

3. Click **Submit**.

   The error is processed through the validation rules.

   a. If the changes pass the validation rules, the record is valid, and a message is displayed indicating that the errors have been corrected. The File Listings and Error Correction pages are also updated.

   b. If the changes fail the validation rules, a message is displayed indicating that there was a problem correcting the errors, and the **Message** column is updated with any new error message. Repeat steps 2–3 until the errors have been corrected and the file can be successfully submitted.

6.3.3 Error Correction via File Submission

The ASAP 4.2A standard requires a pharmacy to select an indicator in the **DSP01** (Reporting Status) field. These indicators allow you to 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

    To revise a record:

    a. Create a record with the value **"01"** in the **DSP01** field.

    b. Populate the following fields with the same information originally submitted in the record that is being revised:

        — **PHA03** (DEA Number)

        — **DSP02** (Prescription Number)

        — **DSP05** (Date Filled)

    a. 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.

    b. Submit the record.

    Important Note: When submitting revisions for the Prescription Number (DSP02), Pharmacy DEA (PHA03), Date Filled (DSP05), Quantity Filled (DSP09), and/or Refill Number (DSP06) fields, a Void submission (02) on the original record should be processed before re-submitting a New Record (00). Submitting Revise (01) for one of these five fields will process as a new prescription and both submissions will appear. All other field revisions may be processed as 01.

- **02 Void** – indicates that the original record should be removed

    To void a record:

    a. Create a record with the value **"02"** in the **DSP01** field.

    b. Fill in all other data identical to the original record.

    c. Submit the record. This will void the original record.

7   Email Reports

Email status reports are automatically sent to all users associated with a specific data submitter account. These reports are used to identify errors in files that have been submitted and to confirm zero report submissions. This chapter describes the status reports you may receive via email.

7.1 File Failed Report

You will receive the File Failed Report if a submitted file was not able to be parsed and was not processed into PMP Clearinghouse. The report contains a description of the error encountered within the file. In the event of a failed file, a new file should be submitted with the necessary corrections.

Note: *Failed files are not parsed into Clearinghouse and do not require a voided ASAP file to remove it from the system.*

An example **File Failed Report i**s provided below.

SUBJ: Washington ASAP file: fake-test3.txt - Parse Failure

BODY:
Error Message
- -·
Failed to decode the value '04' for the bean id 'transactionControlType'.

Summary:
* File Name: fake-test3.txt
* ASAP Version: 4.2A
* Transaction Control Number: unparseable
* Transaction Control Type: unparseable
* Date of Submission: January 30, 2022

NOTE: This file could not be received into the system because the system could not recognize its content as a valid ASAP format. Action is required to resolve the issues and a subsequent file should be submitted. As such the information provided in this report is "best effort" and any information we could not parse is listed as "unparseable" in the fields above.

7.2 File Status Report

The **File Status Report s**erves as notification that a data file is currently being parsed by the PMP system.

This report identifies specific records in the submitted data file and returns identifying information about the record, including specific errors identified

during the validation process. It uses fixed-width columns and contains a summary section after the error listings. Each column contains a blank two-digit pad at the end of the data.

The columns are set to the following lengths:

Column	Length
DEA	11 (9 + pad)
NCPDP	9 (7 + pad)
NPI	12 (10 + pad)
Prescription	27 (25 + pad)
Filled	10 (8 + pad)
Segment	18 (16 + pad)
Field	18 (16 + pad)
Type	9 (7 + pad)
Message	Arbitrary

The **File Status Report** notifies you of the following scenarios:

- **Total records**: The total number of records contained in the submitted data file.
- **Duplicate records**: The number of records that were identified as already existing within the PMP system. Duplicate records are not imported to prevent improper patient information.
- **Records in process**: The number of records remaining to be processed into the system (usually only displays a number if the file has not finished loading at the time the report is sent out).

   Note: Records remaining to be processed will continue to be processed even after the status report is sent.

- **Records with errors**: The number of records that contain errors. These errors must be corrected for the record to be imported into the system. If a zero (0) is displayed, there are no errors in the data. Please refer to Error Correction for instructions on correcting errors.
- **Records with warnings**: The number of records that contain warnings. These warnings do not need to be corrected for the record to be imported into the system. If a zero (0) is displayed, there are no warnings in the data.
- **Records imported with warnings**: The number of records with warnings that were imported. If a record contains both warnings and errors, the errors must be corrected to be submitted to the system. Please refer to Error Correction for instructions on correcting errors.
- **Records imported without warnings**: The number of records without warnings that were imported.

> **Note:** *The initial File Status Report is sent out two (2) hours after the file has been submitted to the system. Additional reports will be sent out every 24 hours if errors continue to be identified within a submitted data file.*

An example **File Status Report** is provided on the following page.

SUBJ: Washington ASAP file: fake-test3.txt - Status Report

BODY:

DEA	NCPDP	NPI	Prescription	Filled	Segment	Field	Type	Message
BE1234567	1347347	9034618394	123486379596-0	20220129	Dispensation	refill_number	WARNING	message example
DE9841394	3491849	4851947597	357199504833-345	20220129	Dispensation	days_supply	ERROR	message example

Summary:
* File Name: fake-test3.txt
* ASAP Version: 4.2A
* Transaction Control Number: 23489504823
* Transaction Control Type: send
* Date of Submission: January 30, 2022
* Total Record Count: ###
* Duplicate Records: ###
* In Process Count: ###
* Records with Error Count: ###
* Imported Records Count: ###
* Records Imported with Warning Count: ###

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7.3 Zero Report Confirmation

You will receive a **Zero Report Confirmation** after successfully submitting a zero report to PMP Clearinghouse. This report displays the PMP to which the zero report was submitted, date range for the zero report, date the zero report was submitted to PMP Clearinghouse, and date the report was originally created.

An example **Zero Report Confirmation** is provided below.

SUBJ: ASAP Zero Report: zero_reports_20220306KSMCPS.DAT

BODY:

Summary:

* File Name: zero_reports_20220306KSMCPS.DAT

* PMP Name: Washington

* Date Range: 2022-03-06 - 2022-03-06

* Submission Date: 2022-03-07

* ASAP Creation Date: 2022-03-07

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8 Managing Your Upload Account

The **Account** menu option allows you to manage the information associated with your organization's upload account, including adding users, PMPs, and SFTP access to your account as well as editing your organization's account information.

Note: This chapter contains information for managing the upload account with which your user account is associated. For information about editing and managing your individual user account, including how to change your password, please refer to Managing Your User Profile.

8.1 Adding Users to Your Upload Account

PMP Clearinghouse allows data submitters to add new users to the system who have the same rights and access to submitting data and viewing file status. This practice allows you to create an account to be used for a backup individual.

1. Log in to PMP Clearinghouse.

2. Click **Account**.

3. Select **Users** from the **Account** drop-down menu.

The Account Users page is displayed.

4. Click **New User**, located in the top right corner of the page.

The **New Data Submitter User** page is displayed.
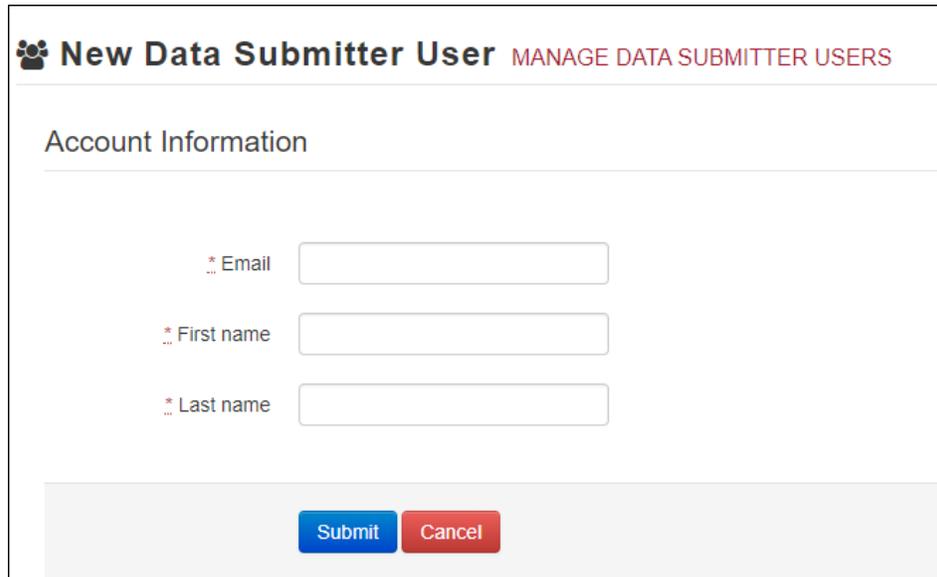
5. Enter the new data submitter's email address, first name, and last name in the appropriate fields. Note that all fields are required.

6. Click **Submit**.

   The user is added to the list of data submitters for your organization, and you are returned to the Account Users page.

7. Please inform the new user of the account creation.

   a. The user will receive an email with a link for them to confirm their account.

   b. Once the account has been confirmed, the user will need to navigate to the PMP Clearinghouse Login page and click **Forgot your password?** to create a password for their account and log in.

   c. Upon logging in, the user will be able to view all files submitted for your organization's upload account.

8.1.1 Changing Another User's Password

1. Log in to PMP Clearinghouse.
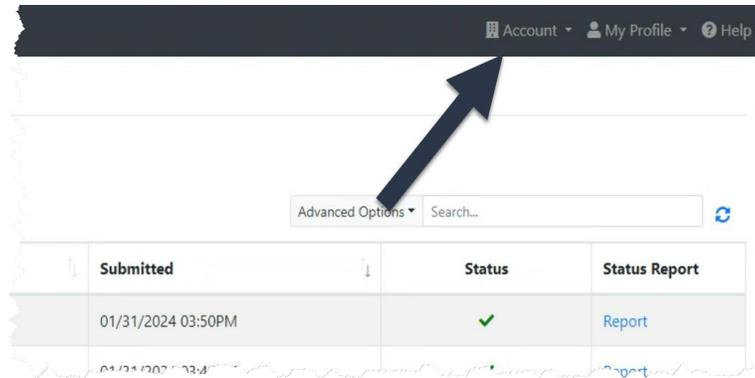
2. Click **Account**.

3. Select **Users** from the **Account** drop-down menu.
    The **Account Users** page is displayed.
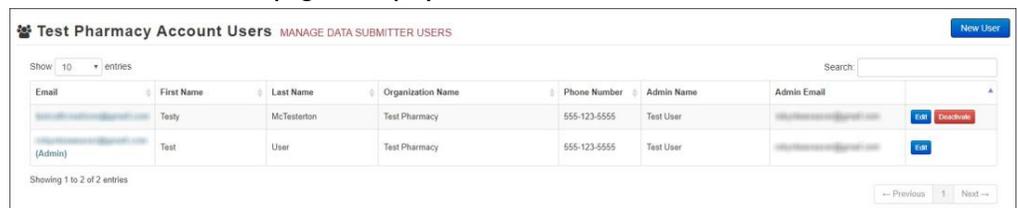
4. Click the **Edit** button, located to the right of the user's information.
    The **Edit Data Submitter User** page is displayed.
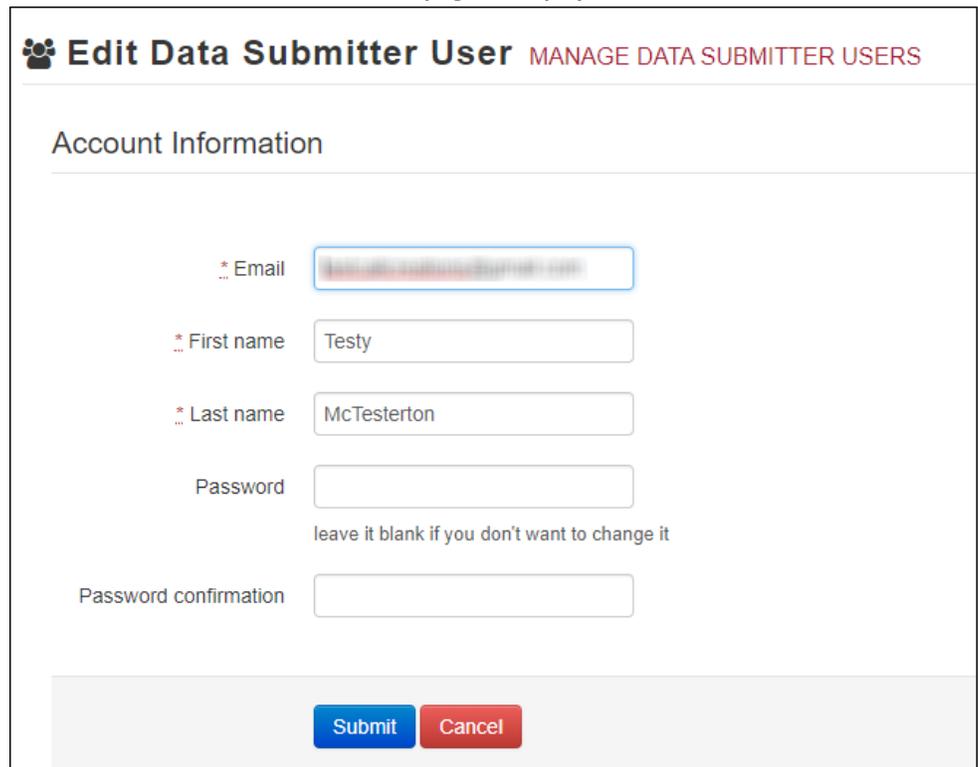
5. Enter a new password for the user in the **Password** field, then re-enter it in the **Password confirmation** field. The password requirements are provided below.

> ***Passwords must contain:***
> - *At least eight (8) characters*
> - *One (1) uppercase letter*
> - *One (1) lowercase letter*
> - *One (1) number*
> - *One (1) special character, such as !, @, #, $, etc.*

6. Click **Submit**.

    The password is changed.

8.2 Adding PMPs to Your Upload Account

If your organization needs to submit data files to an additional PMP that uses PMP AWARxE, you can submit the request through PMP Clearinghouse.

1. Log in to PMP Clearinghouse.
2. Click **Account**.
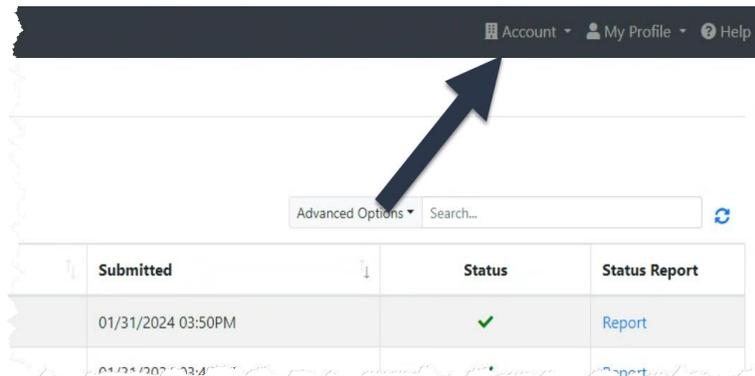
3. Select **Multi State Approval** from the **Account** drop-down menu.

    The **Multi State Approval** page is displayed. This page displays all PMPs currently using the PMP AWARxE system as well as your data sharing status with each PMP.
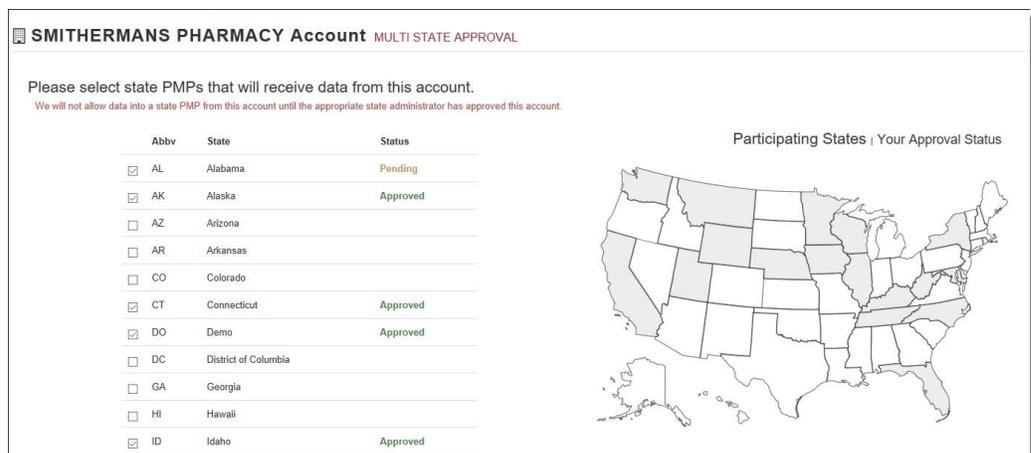
4. To request to submit data to another PMP, click to select the checkbox next to that PMP.
   PMP Clearinghouse automatically saves your changes, and your request is submitted to the PMP administrator for review and approval. Once the request has been approved, the status for that PMP will change from
   "Pending" to "Approved," and you may begin submitting data to that PMP.

   Notes:

   - *If you are submitting data via SFTP, the file must be located in the proper subfolder to ensure delivery to the desired PMP.*

   - *To cancel data submission to a PMP, uncheck the box for that PMP. Note that if you need to submit data to that PMP again in the future, you will have to go through the approval process again.*

8.3 Adding SFTP Access to an Upload Account

If a registered upload account did not request an SFTP account during the account creation process, you can request one at any time using the **Account** menu option.

1. Log in to PMP Clearinghouse.
2. Click **Account**.
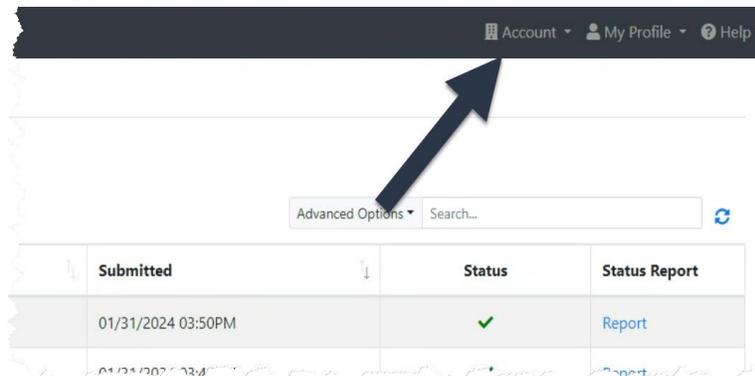
3. Select **SFTP Details**.

   The **SFTP Account** page is displayed.

   Note: If an SFTP account already exists for the upload account, the username is displayed on the **SFTP Account** page.
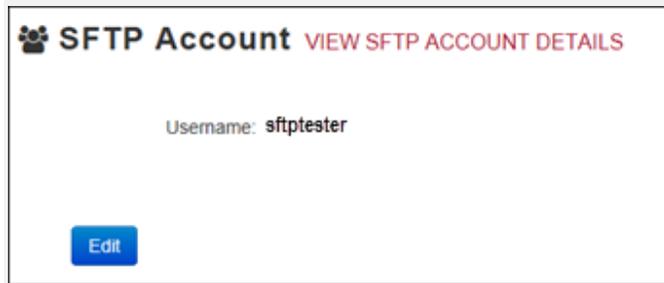
You cannot change the SFTP account username. However, you can update the password by clicking **Edit.**

4. Click **Create**.

   The **Create a New SFTP Account** page is displayed.

5. Enter a username for the account in the **Name** field.

   Notes:

   - *The username must contain a minimum of eight (8) characters.*
   - *Once the SFTP account has been created, you cannot change the username.*

6. Enter a password for the account in the **Password** field, then re-enter it in the **Password confirmation** field. The password requirements are provided below.

   Passwords must contain:
   - *At least eight (8) characters*
   - *One (1) uppercase letter*
   - *One (1) lowercase letter*
   - *One (1) number*
   - *One (1) special character, such as !, @, #, $, etc.*

Once the account has been successfully created, this password will be input into the pharmacy software so that submissions can be automated.

Notes:

- *This password can be the same as the one used when the upload account was created.*

- *Unlike your Profile password (i.e., your user account password), the SFTP password does not expire.*

- *The URL to connect via SFTP is https://submissions.healthcarecoordination.net/.*

- *Additional details on SFTP configuration can be found in Appendix C: SFTP Configuration.*

7. Click **Create**.

The account is created, and the username is displayed.
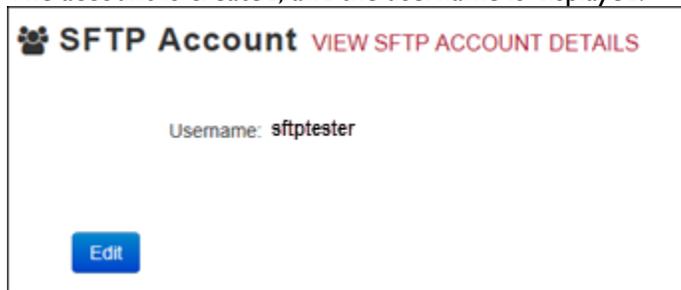
8.4 Editing Your Upload Account

Note: *This function only allows you to edit your organization's upload account. If you need to edit your individual profile information, please refer to Editing Your Profile.*

1. Log in to PMP Clearinghouse.
2. Click **Account**.
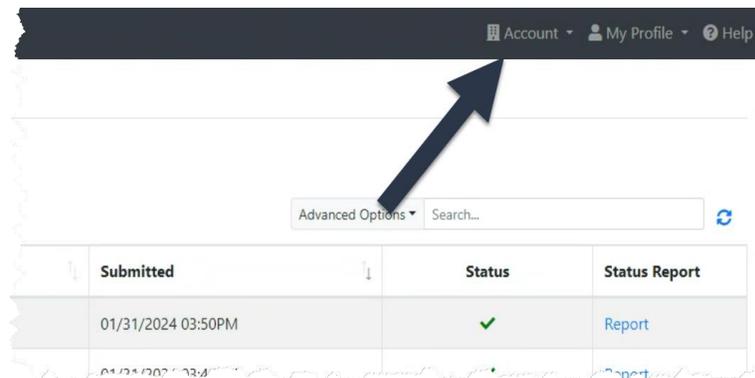
3. Select **Account Details**.

The **Account Details** page is displayed.

4. Click **Edit**.

   The **Edit Account** page is displayed.

5. Update the information as necessary, then click **Submit**.

   The account information is updated.

9   Managing Your User Profile

This chapter describes how to manage your individual user profile, including how to edit your profile and manage your password.

Note: *This chapter contains information for managing your individual user profile. For information about managing your organization's upload account, including how to add users, please refer to* *Managing Your Upload Account.*

9.1   Editing Your Profile

Note: *This function only allows you to edit your individual profile information. If you need to edit the Organization Information, please refer to* *Editing Your Upload Account.*

1. Log in to PMP Clearinghouse.
2. Click **My Profile**.

3. Select **Edit My Profile**.

4. Update your information as necessary, then click **Submit**.

   Your changes are saved, and your updated profile is displayed.

9.2 Changing Your Password

Note: *Clearinghouse passwords expire every 90 days. You can use this function to proactively change your password before it expires. If your password has already expired, or you have forgotten your password, navigate to PMP Clearinghouse Login page and click **Forgot your password?** to reset it. Please refer to [Resetting Your Password](#) for more information.*

1. [Log in to PMP Clearinghouse](#).
2. Click **My Profile**.
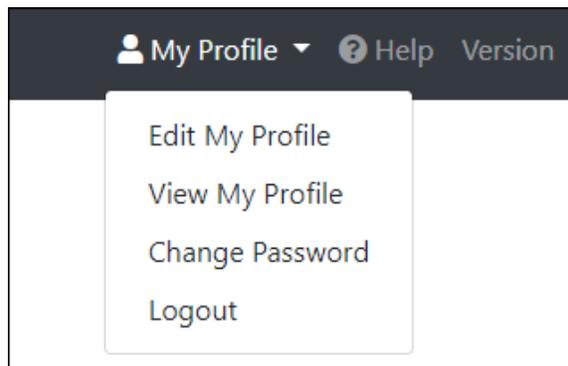
3. Select **Change Password**.

4. Enter your current password in the **Current Password** field.

5. Enter your new password in the **Password** field, then re-enter it in the **Password confirmation** field. The password requirements are provided below.

   Passwords must contain:

   - *At least eight (8) characters*
   - *One (1) uppercase letter*
   - *One (1) lowercase letter*
   - *One (1) number*
   - *One (1) special character, such as !, @, #, $, etc.*

6. Click **Update**.

Your password is updated, and you will use it the next time you log in to PMP Clearinghouse.

9.3 Resetting Your Password

If you have forgotten your password or your password has expired, perform the following steps to reset it.

1. Open an internet browser window and navigate to the PMP Clearinghouse Login page located at https://pmpclearinghouse.net/users/sign_in.
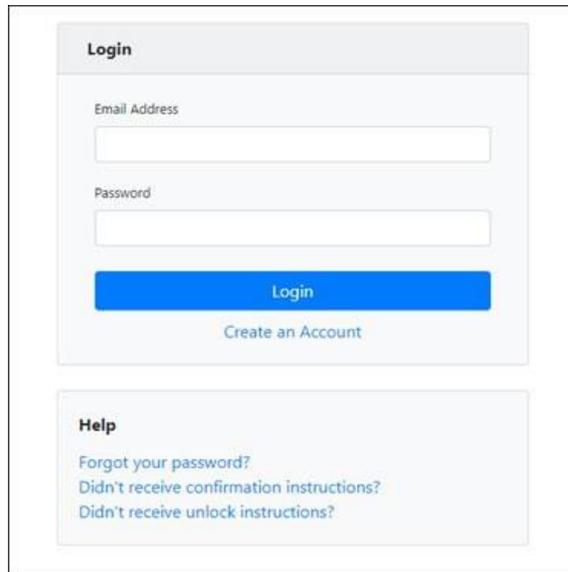
2. Click the **Forgot your password?** link, located in the Help section of the page. The **Forgot your password** page is displayed.
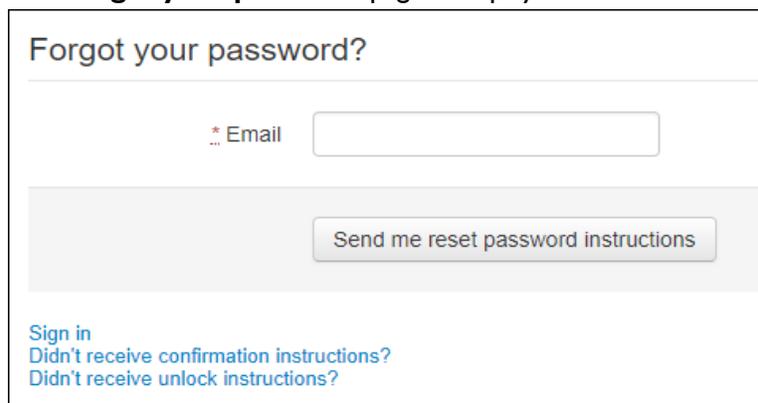
3. Enter the email address associated with your user account, then click **Send me reset password instructions**.

4. Once you receive the reset password email, click the **Change my password** link within the email.

The **Change your password** page is displayed.
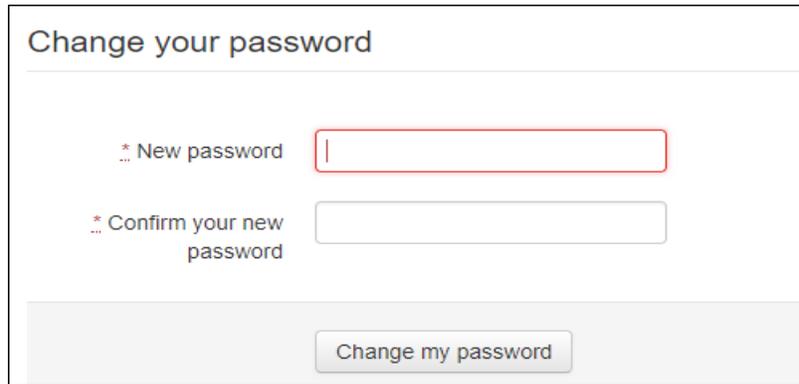
5. Enter your new password in the **New password** field, then re-enter it in the
    Confirm your new password field. The password requirements are provided
    below.

    Passwords must contain:

    -   *At least eight (8) characters*
    -   *One (1) uppercase letter*
    -   *One (1) lowercase letter*
    -   *One (1) number*
   -   *One (1) special character, such as !, @, #, $, etc.*

6. Click **Change my password**.

    Your password is changed, and you can now use it to log in to PMP Clearinghouse.

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10 Assistance and Support

10.1 Technical Assistance

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

- Contact Bamboo Health by phone at 1-877-719-3121;

    OR

- Create a support request at the following URL:
  https://pmpclearinghouse.zendesk.com/hc/en-us/

Technical assistance is available from 8:00 a.m. to 5:00 p.m. Pacific Standard Time.

10.2 Administrative Assistance

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

Carly Bartz-Overman, Drug Systems 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
Web: http://www.doh.wa.gov/pmp

11 Document Information

11.1 Disclaimer

Bamboo Health has made every effort to ensure the accuracy of the information in this document at the time of printing. However, information is subject to change.

11.2 Change Log

Version	Date	Chapter/Section	Change Made
Draft Versions			
DRAFT	10/02/2019	N/A	Initial draft
DRAFT v2	01/23/2020	Global	Updated with changes requested by state
Published Versions			
1.0	03/20/2020	Global	Finalized for publication
		Appendix E	Added appendix with NDCS (No Dispensing of Controlled Substances) application instructions
1.1	4/13/2020	Appendix A	Modified Requirement of PAT06 from "RR" to "S"
2.0	03/26/2022	Global	Updated guide to reflect Bamboo Health branding
		Appendix E/ Submitting a CSRW Application	Updated the application process to reflect the CSRW reporting waiver process
2.1	08/24/2022	Appendix A/ASAP Specifications	Modified Requirements for PAT02 and PAT03 from Required to Situational
3.0	07/26/2023	Appendix C: Compound Drugs	Add Appendix C: Compound Drugs
		5.3/Manual Entry (UCF)	Add note on entering compound drugs into UCF
		Appendix A: ASAP 4.2A Specifications	
3.1	02/01/2024	Global	Made revisions to guide to be in ADA compliance per state's request

		Global	Updated SFTP hostname information and username
		Global	Updated UCF time to edit/delete from 30 days to 1 year
3.2	04/03/2024	Appendix A/ASAP 4.2A Specifications	Update NDC formatting requirements for DSP08 to be consistent with CDI
3.3	09/09/2024	General	Updated guide to reflect new branding guidelines
		Cover page	Added publication number and ADA statement per state's request
3.4	12/12/2024	Appendix A/ASAP 4.2A Specifications	Added note to PAT07 and PAT08 per state's request
		2.2.4/Veterinarian Data Submission	Added note on veterinarian script reporting requirements per state's request
3.5	02/04/2025	6.3.3/Error Correction via File Submission	Added additional guidance on error revisions and corrections
		Appendix A/ASAP 4.2A Specifications	Updated reporting requirements for fields PHA04, PHA05, PHA07, PHA08, and PHA09 to RR per state's request
		Appendix D/Submitting a Compound Drug	Corrected a typo per state's request

Appendix A: ASAP 4.2A 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) 4.2A format to comply with the 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 (~~).

- **Requirement**
  - R = Required by ASAP
  - N = Not used
  - RR = Required by WA PMP
  - S = Situational

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. That guide includes field lengths, acceptable attributes, and examples.

Segment	Element ID	Element Name	Requirement
TH: Transaction Header (required)			
Used to indicate the start of a transaction. It also assigns the data element separator, segment terminator, and control number.			
	TH01	**Version/Release Number** Code uniquely identifying the transaction. Format = xx.x	**R**
	TH02	**Transaction Control Number** Sender assigned code uniquely identifying a transaction.	**R**
	TH03	**Transaction Type** Identifies the purpose of initiating the transaction. • 01 Send/Request Transaction • 02 Acknowledgement (used in Response only) • 03 Error Receiving (used in Response only) • 04 Void (used to void a specific Rx in a real-time transmission or an entire batch that has been transmitted)	**N**
	TH04	**Response ID** Contains the Transaction Control Number of a transaction that initiated the transaction. Required in response transaction only.	**N**
	TH05	**Creation Date** Date the transaction was created. Format: CCYYMMDD.	**R**
	TH06	**Creation Time** Time the transaction was created. Format: HHMMSS or HHMM.	**R**
	TH07	**File Type** • P = Production • T = Test	**R**
	TH08	**Routing Number** Reserved for real-time transmissions that go through a network switch to indicate, if necessary, the specific PMP the transaction should be routed to.	**N**
	TH09	**Segment Terminator Character** This terminates the TH segment and sets the actual value of the data segment terminator for the entire transaction.	**R**
IS: Information Source (required)			
Used to convey the name and identification numbers of the entity supplying the information.			
	IS01	**Unique Information Source ID** Reference number or identification number. (Example: phone number)	**R**

Segment	Element ID	Element Name	Requirement
	IS02	**Information Source Entity Name** Entity name of the Information Source.	R
	IS03	**Message** Free-form text message.	N
PHA: Pharmacy Header (required) Used to identify the pharmacy. **Note:** It is required that information be provided in at least one of the following fields: PHA01, PHA02, or PHA03.			
	PHA01	**National Provider Identifier (NPI)** Identifier assigned to the pharmacy by CMS.	S
	PHA02	**NCPDP/NABP Provider ID** Identifier assigned to pharmacy by the National Council for Prescription Drug Programs.	N
	PHA03	**DEA Number** Identifier assigned to the pharmacy by the Drug Enforcement Administration.	RR
	PHA04	**Pharmacy Name** Free-form name of the pharmacy or dispensing practitioner.	RR
	PHA05	**Address Information – 1** Free-form text for address information.	RR
	PHA06	**Address Information – 2** Free-form text for address information, if needed.	N
	PHA07	**City Address** Free-form text for city name.	RR
	PHA08	**State Address** U.S. Postal Service state code or other regional jurisdiction code.	RR
	PHA09	**ZIP Code Address** U.S. Postal Service ZIP Code.	RR
	PHA10	**Phone Number** Complete phone number including area code. Do not include hyphens.	N
	PHA11	**Contact** **Name** Free- form name.	N
	PHA12	**Chain Site ID** 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

Segment	Element ID	Element Name	Requirement
	PHA13	**Pharmacy's Permit Number/License** **Number** Helps identify the sending pharmacy.	S
PAT: Patient Information (required) Used to report the patient's name and basic information as contained in the pharmacy record.			
	PAT01	**ID Qualifier of Patient Identifier** Code identifying the jurisdiction that issues the ID in PAT03.	S
	PAT02	**ID Qualifier** Code to identify the type of ID in PAT03. If PAT02 is used, PAT03 is required. 01 Military ID 02 State Issued ID 03 Unique System ID 04 Permanent Resident Card (Green Card) 05 Passport ID 06 Driver's License ID 08 Tribal ID 99 Other (agreed upon ID)	S
	PAT03	**ID of Patient** Identification number for the patient as indicated in PAT02. An example would be the driver's license number.	S
	PAT04	**ID Qualifier of Additional Patient Identifier** Code identifying the jurisdiction that issues the ID in PAT06. Used if the PMP requires such identification.	N
	PAT05	**Additional Patient ID Qualifier** Code to identify the type of ID in PAT06 if the PMP requires a second identifier. If PAT05 is used, PAT06 is required. 01 Military ID 02 State Issued ID 03 Unique System ID 04 Permanent Resident Card 05 Passport ID 06 Driver's License ID 08 Tribal ID 99 Other (agreed upon ID)	N
	PAT06	**Additional ID** 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 Unique System ID is also required.	S

Segment	Element ID	Element Name	Requirement
	PAT07	**Last Name** Patient's last name. ***Note:*** *Use the owner's last name if Veterinary patient.*	**RR**
	PAT08	**First Name** Patient's first name. ***Note:*** *Use the owner's first name if Veterinary patient.*	**RR**
	PAT09	**Middle Name** Patient's middle name or initial, if available.	**S**
	PAT10	**Name Prefix** Patient's name prefix such as Mr. or Dr., if available.	**N**
	PAT11	**Name Suffix** Patient's name suffix such as *Jr.* or *the III*, if available.	**S**
	PAT12	**Address Information – 1** Free-form text for street address information.	**RR**
	PAT13	**Address Information – 2** Free-form text for additional address information, if available.	**N**
	PAT14	**City Address** Free-form text for city name.	**RR**
	PAT15	**State Address** U.S. Postal Service state code or other regional jurisdiction code.	**RR**
	PAT16	**ZIP Code Address** U.S. Postal Service ZIP code. Populate with zeros if patient address is outside the U.S.	**RR**
	PAT17	**Phone Number** Complete phone number including area code. Do not include hyphens. For situations in which the patient does not have a phone number, submit ten 9s (i.e., 9999999999).	**N**
	PAT18	**Date of Birth** Date patient was born. Format: CCYYMMDD	**RR**
	PAT19	**Gender Code** Code indicating the sex of the patient. • F Female • M Male • U Unknown	**RR**

Segment	Element ID	Element Name	Requirement
	PAT20	**Species Code** Used if required by the PMP to differentiate a prescription for an individual from one prescribed for an animal. • 01 Human • 02 Veterinary Patient	S
	PAT21	**Patient Location Code** Code indicating where patient is located when receiving pharmacy services. • 01 Home • 02 Intermediary Care • 03 Nursing Home • 04 Long-Term/Extended Care • 05 Rest Home • 06 Boarding Home • 07 Skilled-Care Facility • 08 Sub-Acute Care Facility • 09 Acute Care Facility • 10 Outpatient • 11 Hospice • 98 Unknown • 99 Other	N
	PAT22	**Country of Non-U.S. Resident** Used when the patient's address is a foreign country.	N
	PAT23	**Name of Animal** 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
DSP: Dispensing Record (required) Used to identify the basic components of dispensing of a given prescription order including the date and quantity.			

Segment	Element ID	Element Name	Requirement
	DSP01	**Reporting Status** DSP01 requires one of the following codes, and an empty or blank field no longer indicates a new prescription transaction: • 00 New Record (indicates a new prescription dispensing transaction) • 01 Revise (indicates that one or more data element values in a previously submitted transaction are being revised) • 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). ***Note:*** *For prescriptions voided with code "02", a limited data set is being offered as an option PDMPs can elect to use rather than requiring the entire prescription to be voided. This option is offered in order to streamline the process in the pharmacy when voiding a prescription. See* [Appendix E]().	**R**
	DSP02	**Prescription Number** Serial number assigned to the prescription by the pharmacy.	**R**
	DSP03	**Date Written** Date the prescription was written (authorized). Format: CCYYMMDD	**RR**
	DSP04	**Refills Authorized** The number of refills authorized by the prescriber.	**RR**
	DSP05	**Date Filled** Date prescription was prepared. Format: CCYYMMDD	**RR**
	DSP06	**Refill Number** Number of the fill of the prescription. 0 indicates New Rx; 01-99 indicate the additional fills after the initial fill.	**RR**
	DSP07	**Product ID Qualifier** Used to identify the type of product ID contained in DSP08. • 01 NDC • 06 Compound (indicates a compound drug; if used, the CDI segment becomes a required segment)	**RR**
	DSP08	**Product ID** Full 11-digit NDC number as indicated in DSP07, including leading zeros to create a 5-4-2 format, without punctuation. If code "06" (indicating a compound) is indicated in DSP07, use "99999999999"; CDI then becomes required.	**RR**

Segment	Element ID	Element Name	Requirement
	DSP09	**Quantity Dispensed** Number of metric units dispensed in metric decimal format. Example: 2.5 ***Note:*** *For compounds show the first quantity in CDI04.*	**RR**
	DSP10	**Days' Supply** Estimated number of days the medication will last.	**RR**
	DSP11	**Drug Dosage Units Code** Identifies the unit of measure for the quantity dispensed in DSP09. • 01 Each • 02 Milliliters (ml) • 03 Grams (gm)	**N**
	DSP12	**Transmission Form of Rx Origin Code** Code indicating how the pharmacy received the prescription. • 01 Written Prescription • 02 Telephone Prescription • 03 Telephone Emergency Prescription • 04 Fax Prescription • 05 Electronic Prescription • 06 Transfer/Forwarded • 99 Other	**N**
	DSP13	**Partial Fill Indicator** 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. • 00 Not a Partial Fill • 01 First Partial Fill ***Note:*** *For additional fills per prescription, increment by 1. So, the second partial fill would be reported as 02, up to a maximum of 99.*	**N**
	DSP14	**Pharmacist National Provider Identifier (NPI)** Identifier assigned to the pharmacist by CMS. This number can be used to identify the pharmacist dispensing the medication.	**S**
	DSP15	**Pharmacist State License Number** This data element can be used to identify the pharmacist dispensing the medication. Assigned to the pharmacist by the Licensing Board.	**N**

Segment	Element ID	Element Name	Requirement
	DSP16	**Classification Code for Payment Type** Code identifying the type of payment (i.e., how it was paid for). • 01 Private Pay • 02 Medicaid • 03 Medicare • 04 Commercial Insurance • 05 Military Installations and VA • 06 Workers' Compensation • 07 Indian Nations • 99 Other	RR
	DSP17	**Date Sold** Used to determine the date the prescription left the pharmacy, not the date it was filled, if the dates differ. Format: CCYYMMDD	N
	DSP18	**RxNorm Code Qualifier** RxNorm Code that is populated with the DrugDBCodeQualifier in XML in the SCRIPT transaction. • 01 Semantic Clinical Drug (SCD) • 02 Semantic Branded Drug (SBD) • 03 Generic Package (GPCK) • 04 Branded Package (BPCK)	N
	DSP19	**RxNorm Code** Used for electronic prescriptions to capture the prescribed drug product identification.	N
	DSP20	**Electronic Prescription Reference Number** This field should be populated with the MessageID in XML in the SCRIPT transaction.	N
	DSP21	**Electronic Prescription Order Number** This field should be populated with the PrescriberOrderNumber in XML in the SCRIPT standard.	S
	DSP22	**Quantity Prescribed** This field adds clarity to the value reported in DSP13, Partial Fill Indicator.	S
	DSP23	**Rx SIG** This field captures the actual directions printed on the prescription vial label.	S

Segment	Element ID	Element Name	Requirement
	DSP24	**Treatment Type** While this field can be used to indicate that the prescription was for opioid dependency treatment when code "02" is used, it can also be used to provide other reasons for the opioid prescription through use of the additional codes. • 01 Not used for opioid dependency treatment • 02 Used for opioid dependency treatment • 03 Pain associated with active and aftercare cancer treatment • 04 Palliative care in conjunction with a serious illness • 05 End-of-life and hospice care • 06 A pregnant individual with a pre-existing prescription for opioids • 07 Acute pain for an individual with an existing opioid prescription for chronic pain • 08 Individuals pursuing an active taper of opioid medications • 09 Patient is participating in a pain management contract • 99 Other (trading partner agreed upon reason) ***Note:** Codes 03-99 can only be reported if provided by the prescriber with the prescription. ****Instructions regarding usage of this field:** When a dispenser is presented with an opioid prescription, if both the provider's DEA and XDEA numbers are on the prescription and there is no indication as to which DEA number should be used for the opioid prescription for which they are prescribing, the dispenser must seek clarification with the provider to correctly document whether the prescription is being filled for treating pain or for treating a substance use disorder.	N
	DSP25	**Diagnosis Code** This field is used to report the ICD-10 code or CDT. If required by a PDMP, dispensers may need to contact the prescriber for the appropriate value.	N
PRE: Prescriber Information (required) Used to identify the prescriber of the prescription.			
	PRE01	**National Provider Identifier (NPI)** Identifier assigned to the prescriber by CMS.	S
	PRE02	**DEA Number** Identifying number assigned to a prescriber or an institution by the Drug Enforcement Administration (DEA).	RR
	PRE03	**DEA Number Suffix** Required if an institutional DEA number is supplied in PRE02.	N

Segment	Element ID	Element Name	Requirement
	PRE04	**Prescriber State License Number** Identification assigned to the prescriber by the Licensing Board.	**N**
	PRE05	**Last Name** Prescriber's last name.	**RR**
	PRE06	**First Name** Prescriber's first name.	**RR**
	PRE07	**Middle Name** Prescriber's middle name or initial.	**N**
	PRE08	**Phone Number** Complete phone number including area code. Do not include hyphens.	**S**
	PRE09	**XDEA Number**	**N**
CDI			

CDI: Compound Drug Ingredient Detail (situational)

Use of this segment is 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.

If CDI is filled in, the NDC of DSP08 must be 99999999999.

Segment	Element ID	Element Name	Requirement
	CDI01	**Compound Drug Ingredient Sequence Number** First reportable ingredient is 1; each additional reportable ingredient is incremented by 1.	**R**
	CDI02	**Product ID Qualifier** Code to identify the type of product ID contained in CDI03. • 01 NDC	**R**
	CDI03	**Product ID** Full 11-digit NDC number, created by adding a zero to the front of the appropriate segment to result in a 5-4-2 formatted NDC number, as indicated in CDI02, without punctuation.	**R**
	CDI04	**Compound Ingredient Quantity** Metric decimal quantity of the ingredient identified in CDI03. Example: 2.5	**R**
	CDI05	**Compound Drug Dosage Units Code** Identifies the unit of measure for the quantity dispensed in CDI04. • 01 Each (used to report as package) • 02 Milliliters (ml) (for liters, adjust to the decimal milliliter equivalent) • 03 Grams (gm) (for milligrams, divide by 1000 to get the decimal gram equivalent)	**N**

Segment	Element ID	Element Name	Requirement
AIR: Additional Information Reporting (situational) Used when serialized Rx pads are used, the state or other regional jurisdiction requires information on the person dropping off or picking up the prescription, or for data elements not included in other detail segments. **Note:** If this segment is used, at least one of the data elements (fields) will be required.			
	AIR01	**State Issuing Rx Serial Number** U.S.P.S. state code or other regional jurisdictional code that issued serialized prescription blank. This is required if AIR02 is used.	N
	AIR02	**State Issued Rx Serial Number** Number assigned to issued serialized prescription blank.	N
	AIR03	**Issuing Jurisdiction** Code identifying the jurisdiction that issues the ID in AIR04. Used if AIR04 is equal to 02 or 06.	S
	AIR04	**ID Qualifier of Person Dropping Off or Picking Up Rx** Used to identify the type of ID contained in AIR05 for person dropping off or picking up the prescription. • 01 Military ID • 02 State Issued ID • 03 Unique System ID • 04 Permanent Resident Card (Green Card) • 05 Passport ID • 06 Driver's License ID • 07 Social Security Number • 08 Tribal ID • 99 Other (agreed upon ID)	S
	AIR05	**ID of Person Dropping Off or Picking Up Rx** ID number of patient or person picking up or dropping off the prescription.	S
	AIR06	**Relationship of Person Dropping Off or Picking Up Rx** Code indicating the relationship of the person. • 01 Patient • 02 Parent/Legal Guardian • 03 Spouse • 04 Caregiver • 99 Other	N
	AIR07	**Last Name of Person Dropping Off or Picking Up Rx** Last name of person picking up the prescription.	S
	AIR08	**First Name of Person Dropping Off or Picking Up Rx** First name of person picking up the prescription.	S

Segment	Element ID	Element Name	Requirement
	AIR09	**Last Name or Initials of Pharmacist** Last name or initials of pharmacist dispensing the medication.	N
	AIR10	**First Name of Pharmacist** First name of pharmacist dispensing the medication.	N
	AIR11	**Dropping Off/Picking Up Identifier Qualifier** Additional qualifier for the ID contained in AIR05 • 01 Person Dropping Off • 02 Person Picking Up • 03 Unknown/Not Applicable **Note:** Both 01 and 02 cannot be required by a prescription drug monitoring program.	S
TP: Pharmacy Trailer (required) 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	**Detail Segment Count** Number of detail segments included for the pharmacy including the pharmacy header (PHA) and the pharmacy trailer (TP) segments.	R
TT: Transaction Trailer (required) Used to indicate the end of the transaction and provide the count of the total number of segments included in the transaction.			
	TT01	**Transaction Control Number** Identifying control number that must be unique. Assigned by the originator of the transaction. Must match the number in TH02.	R
	TT02	**Segment Count** Total number of segments included in the transaction including the header and trailer segments.	R

Appendix B: ASAP Zero Report Specifications

The following table contains the required definitions for submitting zero reports via SFTP or manual upload to the WA PMP. It lists the **Segment** and **Element ID** with pre- populated data to be used as an example for constructing a zero report. For more details regarding these Segment or Elements IDs, or for details on reporting actual dispensations, please refer to [Appendix A: ASAP 4.2A Specifications](#).

Segment	Element ID	Element Name	Requirement
TH: Transaction Header (required)			
	TH01	Version/ Release Number: 4.2A	**R**
	TH02	Transaction Control Number Format: 123456	**R**
	TH03	Transaction Type: 01	**R**
	TH05	Creation Date Format: 20220102	**R**
	TH06	Creation Time Format: 223000	**R**
	TH07	File Type: P	**R**
	TH09	\\	**R**
IS: Information Source (required)			
	IS01	Unique Information Source ID Format: 7705555555	**R**
	IS02	PHARMACY NAME	**R**
	IS03	Date Range of Report #YYYYMMDD#-#YYYYMMDD#	**R**
PHA: Pharmacy Header (required)			
	PHA03	DEA NUMBER	**R**
PAT: Patient Information (required)			
	PAT07	REPORT	**R**
	PAT08	ZERO	**R**
DSP: Dispensing Record (required)			
	DSP05	Date Filled Format: 20220101	**R**
PRE: Prescriber Information (required; can be null as follows: PRE******\\)			
CDI: Compound Drug Ingredient Detail			

Segment	Element ID	Element Name	Requirement
AIR: Additional Information Reporting			
TP: Pharmacy Trailer (required)			
	TP01	7	**R**
TT: Transaction Trailer (required)			
	TT01	123456	**R**
	TT02	10	**R**

Sample Zero Report

The following example illustrates a zero report using the above values.

TH*4.2A*123456*01**20220108*223000*P**\\
IS*7705555555*PHARMACY NAME*#20220107#-#20220107#\ PHA***
ZZ1234567\
PAT******REPORT*ZERO***********\
DSP*****20220107*****\
PRE*\
CDI*\
AIR*\
TP*7\
TT*123456*10\

Appendix C: Compound Drugs

What are Compound Drugs and Why Do We Use Them?

Compound drugs are reportable drugs that have combined, mixed, or altered ingredients to create a medication with two or more drugs that meet the tailored needs of an individual patient. Compounding medication allows for treatment of patients who may not be able to be treated with an FDA-approved medication for such reasons as allergies to certain dyes.

This appendix provides information about data delivery methods you can use to submit compound drugs to PMP Clearinghouse. Each individual state or PMP determines how and when users are to submit compound drugs to PMP Clearinghouse.

Submitting a Manual Entry (UCF) for a Compound Drug

You can manually enter your compound drug prescription information into the PMP Clearinghouse system using the Universal Claim Form (UCF) within the PMP Clearinghouse web portal. This form allows you to enter patient, prescriber, dispenser, and prescription information.

Please refer to Reporting Requirements for the complete list of reporting requirements. If you

do not have an account, please refer to Creating Your Account for further details.

1. To submit a Compound Drug via **UCF Submission,** first Log in to PMP Clearinghouse. For additional information on submitting a **UCF Submission**, refer to Manual Entry (UCF).

2. Click the **New Claim Form** tab, located at the top of the page.
   The Create Universal Claim Form page is displayed.

3. Complete the required fields. Be sure to click the **Compound** checkbox in the Drug Information section as shown below and include each ingredient in the Compound Drug by NDC Number, Quantity, and units respectively.

   Note: If a drug/compound is not found in the NDC database, the ingredient drug name will appear in the Prescription table as "Compound Drug Ingredient." A compound drug should consist of at least one "Active" ingredient that is typically FDA-approved and will therefore have an NDC number. The remainder of the ingredients in the compound drug may or may not be FDA-approved and therefore may not have an NDC number.

4. Once you have completed all required fields and clicked the **Compound** checkbox, follow the prompts to save and submit your form. For additional assistance with your submission, to include completing your submission, and errors please refer to Manual Entry (UCF) and Error Correction.

Viewing Records with Errors

If the **Error Correction** page displays, it will provide more information about the records within a selected data file that need correcting, including **Prescription Number**, **Segment Type**, **Warning Count**, and **Error Count**. To access this page, click the "Pending Dispensation Error" message in the **Status** column of the File Listings page. For further information on how to correct an error, please refer to Error Correction.

Appendix D: Submitting a Compound Drug via ASAP 4.2A Specifications

The information in the following table contains the definitions for the specific contents required of uploaded records in the American Society for Automation in Pharmacy (ASAP) format to comply with the WA PMP requirements for compound drugs. For more information, contact the American Society for Automation in Pharmacy for the full Implementation Guide for the ASAP Standard for Prescription-Monitoring Programs.

That guide includes some acceptable field attributes, such as allowed values, some formats, and examples.

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 (~).
- **Requirement**
  - R = Required by Washington
  - N = Not required but accepted if submitted
  - S = Situational

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. That guide includes field lengths, acceptable attributes, and examples.*

Segment	Element ID	Element Name	Requirement
DSP: Dispensing Record (required) Used to identify the basic components of a dispensing of a given prescription order including the date and quantity.			
	DSP01	**Reporting Status** DSP01 requires one of the following codes, and an empty or blank field no longer indicates a new prescription transaction: 00 New Record (indicates a new prescription dispensing transaction) 01 Revise (indicates that one or more data element values in a previously submitted transaction are being revised) 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).	R
	DSP02	**Prescription Number** Serial number assigned to the prescription by the pharmacy.	R
	DSP03	**Date Written** Date the prescription was written (authorized). Format: CCYYMMDD	RR
	DSP04	**Refills Authorized** The number of refills authorized by the prescriber.	RR
	DSP05	**Date Filled** Date prescription was filled. Format: CCYYMMDD	RR
	DSP06	**Refill Number** Number of the fill of the prescription. 0 indicates New Rx; 01-99 is the refill number.	RR
	DSP07	**Product ID Qualifier** Used to identify the type of product ID contained in DSP08. 01 NDC 06 Compound (indicates a compound; if used, the CDI segment becomes a required segment)	RR
	DSP08	**Product ID** Full product identification as indicated in DSP07, including leading zeros without punctuation. If "06 Compound" is indicated in DSP07, use 99999 as the first five characters; CDI then becomes required.	RR

Segment	Element ID	Element Name	Requirement
	DSP09	**Quantity Dispensed** Number of metric units dispensed in metric decimal format. Example: 2.5 **Note:** For compounds show the first quantity in CDI04.	RR
	DSP10	**Days' Supply** Estimated number of days the medication will last.	RR
	DSP11	**Drug Dosage Units Code** Identifies the unit of measure for the quantity dispensed in DSP09. • 01 Each • 02 Milliliters (ml) • 03 Grams (gm)	N
	DSP12	**Transmission Form of Rx Origin Code** Code indicating how the pharmacy received the prescription. • 01 Written Prescription • 02 Telephone Prescription • 03 Telephone Emergency Prescription • 04 Fax Prescription • 05 Electronic Prescription • 99 Other	N
	DSP13	**Partial Fill Indicator** 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. • 00 Not a Partial Fill • 01 First Partial Fill **Note:** For additional fills per prescription, increment by 1. So, the second partial fill would be reported as 02, up to a maximum of 99.	N
	DSP14	**Pharmacist National Provider Identifier (NPI)** Identifier assigned to the pharmacist by CMS. This number can be used to identify the pharmacist dispensing the medication.	S
	DSP15	**Pharmacist State License Number** This data element can be used to identify the pharmacist dispensing the medication. Assigned to the pharmacist by the State Licensing Board.	N

Segment	Element ID	Element Name	Requirement
	DSP16	**Classification Code for Payment Type** Code identifying the type of payment (i.e., how it was paid for). • 01 Private Pay • 02 Medicaid • 03 Medicare • 04 Commercial Insurance • 05 Military Installations and VA • 06 Workers' Compensation • 07 Indian Nations • 99 Other	RR
	DSP17	**Date Sold** 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
	DSP18	**RxNorm Code Qualifier** RxNorm Code that is populated in the DRU-010-09 field in the transaction. • 01 Semantic Clinical Drug (SCD) • 02 Semantic Branded Drug (SBD) • 03 Generic Package (GPCK) • 04 Branded Package (BPCK)	N
	DSP19	**RxNorm Code** Used for electronic prescriptions to capture the prescribed drug product identification.	N
	DSP20	**Electronic Prescription Reference Number** This field should be populated with the Initiator Reference Number from field UIB-030-01 in the transaction.	N
	DSP21	**Electronic Prescription Order Number** This field will be populated with the Initiator Control Reference from field UIH-030-01 in the standard.	S
	DSP22	**Quantity Prescribed** This field adds clarity to the value reported in DSP13, Partial Fill Indicator.	S
	DSP23	**RX SIG** This field captures the actual directions printed on the prescription via label.	S

Segment	Element ID	Element Name	Requirement
	DSP24	**Treatment Type** While this field can be used to indicate that the prescription was for opioid dependency treatment when code "02" is used, it can also be used to provide other reasons for the opioid prescription through use of the additional codes. • 01 Not used for opioid dependency treatment • 02 Used for opioid dependency treatment • 03 Pain associated with active and aftercare cancer treatment • 04 Palliative care in conjunction with a serious illness • 05 End-of-life and hospice care • 06 A pregnant individual with a pre-existing prescription for opioids • 07 Acute pain for an individual with an existing opioid prescription for chronic pain • 08 Individuals pursuing an active taper of opioid medications • 09 Patient is participating in a pain management contract • 99 Other (trading partner agreed upon reason) ***Note:** Codes 03-99 can only be reported if provided by the prescriber with the prescription. ****Instructions regarding usage of this field:** When a dispenser is presented with an opioid prescription, if both the provider's DEA and XDEA numbers are on the prescription and there is no indication as to which DEA number should be used for the opioid prescription for which they are prescribing, the dispenser must seek clarification with the provider to correctly document whether the prescription is being filled for treating pain or for treating a substance use disorder.	N
	DSP25	**Diagnosis Code** This field is used to report the ICD-10 code or CDT. If required by a PDMP, dispensers may need to contact the prescriber for the appropriate value.	N
CDI: Compound Drug Ingredient Detail (situational)			
Use of this segment is 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. If CDI is filled in, the NDC of DSP08 must be 99999999999.			
	CDI01	**Compound Drug Ingredient Sequence Number** First reportable ingredient is 1; each additional reportable ingredient is incremented by 1.	R

Segment	Element ID	Element Name	Requirement
	CDI02	**Product ID Qualifier** Code to identify the type of product ID contained in CDI03. • 01 NDC	R
	CDI03	**Product ID** Full product identification as indicated in CDI02, including leading zeros without punctuation.	R
	CDI04	**Compound Ingredient Quantity** Metric decimal quantity of the ingredient identified in CDI03. Example: 2.5	R
	CDI05	**Compound Drug Dosage Units Code** Identifies the unit of measure for the quantity dispensed in CDI04. • 01 Each (used to report as package) • 02 Milliliters (ml) (for liters, adjust to the decimal milliliter equivalent) • 03 Grams (gm) (for milligrams, adjust to the decimal gram equivalent)	N

Patient Report

Compound drugs are listed in a single line item in the **Patient Report Prescriptions** table with compound ingredients grouped or associated by their Rx Number. The multiple ingredients listing is the only indicator on the **Patient Report** that the drug was part of the compound.

Example of the dispensation record to create prescription pictured above.

DSP|00|5635678|20220212|0|20220212|00|06|99999999999|90|90|01|01|00|||04|||||\

PRE||BB555551|||DOCTOR|GOOD||\

CDI|01|01|38779016305|0.225|03\

CDI|02|01|38779031508|7.41|03\

CDI|03|01|51552050205|3.18|03\

Appendix E: SFTP Configuration

This appendix describes the SFTP configurations required to upload your data to PMP Clearinghouse.

Note: Submitting data via SFTP requires that you have an existing PMP Clearinghouse account with SFTP access.

- *If you need to create a PMP Clearinghouse account, please refer to Creating Your Account. You will be able to set up your SFTP account during the account creation process.*

- *If you have an existing PMP Clearinghouse account but do not have SFTP access, please refer to Adding SFTP Access to an Upload Account.*

SFTP Connection Details

Hostname: http://submissions.healthcarecoordination.net/

Bamboo Health recommends that you use the hostname when configuring the connection rather than the IP address, as the IP address is subject to change.

Port: 22

Note: The port will always be 22.

- **Credentials:** Your SFTP account credentials (username and password) can be found within the PMP Clearinghouse website. To locate your credentials, log in to PMP Clearinghouse, then click **Account** > **SFTP Details** > **Edit**.

- Your username cannot be modified; however, you can update your password.

  Note: Your current SFTP password cannot be seen or recovered. If you have forgotten or lost it, you will need to create a new one. For more information on changing the SFTP password, please refer to Adding SFTP Access to an Upload Account.

- **Once you have established SFTP access, you can test the SFTP connection, but you will not be able to submit data to a PMP until your account has been approved by the PMP administrator.**

PMP Subfolders

PMP Clearinghouse is the data repository for numerous PMPs. As such, data submitted via SFTP must be placed in the appropriate folder for the PMP for which you are submitting data so that it can be properly imported to that PMP. The creation of subfolders must be done outside of the PMP Clearinghouse website using third-party software, such as an SSH client or a command line utility. Files placed in the root/home directory of the SFTP server will not be imported, as this will cause the dispensing entity to appear as noncompliant/delinquent.

Your pharmacy software will need to be configured to place files in the appropriate PMP folder when submitting. You may need to contact your software vendor for additional assistance with this process.

NOTE: Capitalization of the abbreviated PMP folders' names has no bearing on whether or not Clearinghouse processes the files; however, some pharmacy systems, especially
*nix-based systems, will require that the exact case is used when specifying the target folder.

There are two methods by which to create PMP subfolders for SFTP submissions:

1. **Via SSH client** (e.g., WinSCP, FileZilla, etc.)

   a. Log in to your SFTP account.
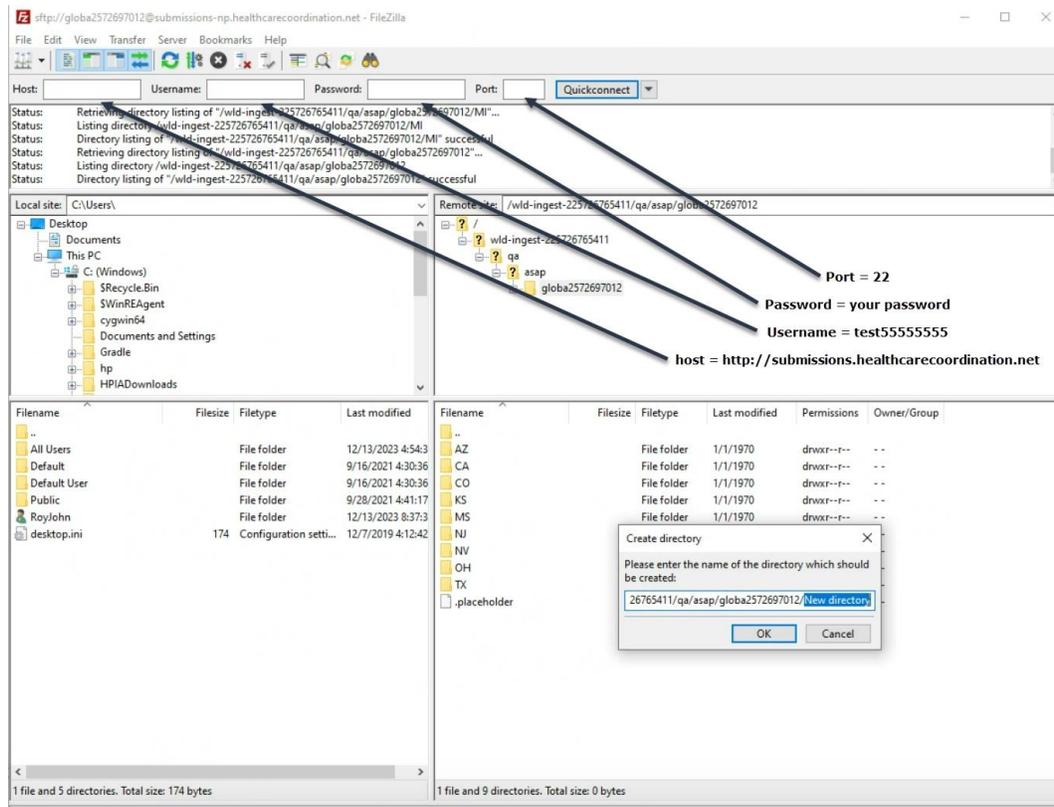
2. Create the required directories under **/homedir**.

3. **Via command prompt**

   a. Log in to your SFTP account using command prompt.

   b. Type "**mkdir**" followed by a space and then the PMP abbreviation you are using (e.g., **mkdir WA**).

   **Note:** The PMP folder must be titled with the two-letter abbreviation as specified above.
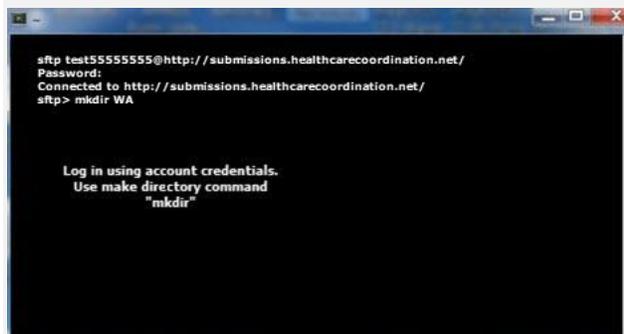
Public (SSH/RSA) Key Authentication

PMP Clearinghouse supports SSH key authentication. The generation of the key is outside the scope of this document; however, general guidelines about the key, along with how to import/load it, are provided below.

Note: PGP Encryption is not supported.

- **Supported Key Types:**
    - SSH-2 RSA 2048 bit length
- **Unsupported Key Types:**
    - SSH-1 RSA
    - SSH-2 DSA
- **Correct Public Key Format:** If opened in a text editor, the key should look like the screenshot below.
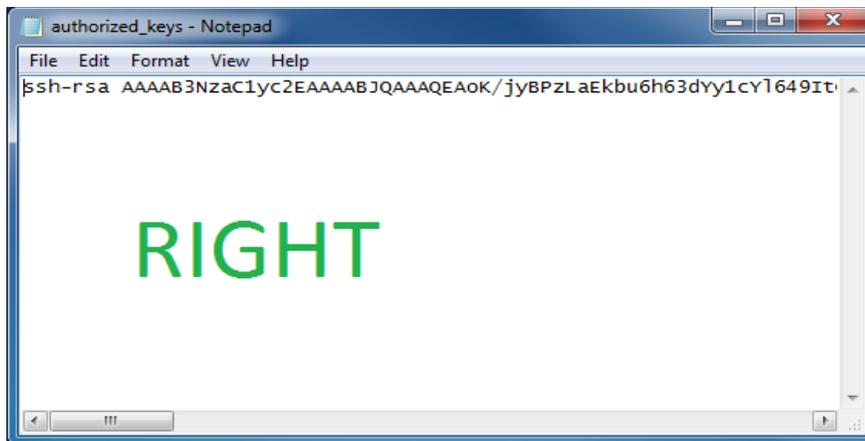
- **Incorrect Public Key Format:** If opened in a text editor, the key SHOULD NOT look like the screenshot below.
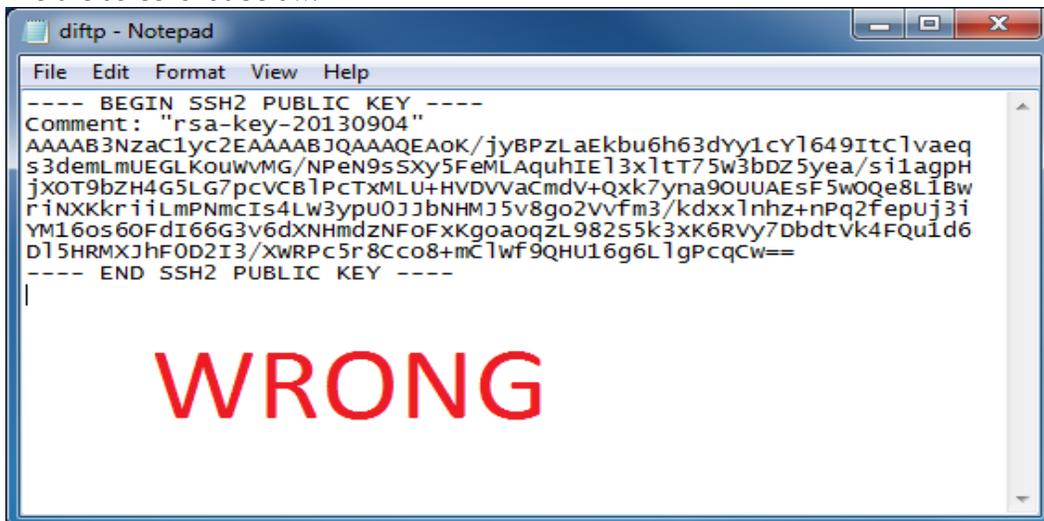
- Once the key has been generated, it should be named "**authorized_keys** ".

  Notes:

  - *There is no file extension.*
  - *There is an underscore between the words* ***authorized*** *and* ***keys***.

- A *.ssh* subfolder needs to be created in the SFTP account's home directory. The "**authorized_keys** " file must be placed in the *.ssh* folder. The creation of this folder follows the same process as creating a PMP subfolder. Please refer to PMP Subfolders for steps on creating subfolders.

Appendix E: Correct Use of Codes in DSP01

Error Correction

The ASAP 4.2A standard requires a dispenser to select a code in the **DSP01** field. Dispensers may submit new records, revise and resubmit records, and void (delete) records. This is communicated by supplying one of the following values in the **DSP01** field:

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

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: These steps are used to submit new records or to submit records that were previously submitted but received a fatal status on the dispenser's error report. **Records with fatal errors are not loaded into the PDMP system**. The errors in these records must be corrected in the dispenser's system and resubmitted 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 record that is being revised:

- **PHA02** (NCPDP/NABP 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 should first be voided and then resubmitted 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.

Transmission Confirmation

For each successful submission, those not resulting in a Fatal Error, you will receive a status report via email. Status reports are described in the Email Reports section of this guide.

For submissions that contain dispensation errors, the status report email will list the errors. Errors can be corrected by submitting revision or void records in a new transmission or by manually updating the error records via the PMP Clearinghouse website. The error correction process is described in full in the Data Compliance section of this guide.

Appendix F: Submitting a CSRW Application

If your pharmacy does not currently deliver any drugs covered by the program (schedule II, III, IV, or V controlled substances or any other drugs added by the Pharmacy Commission) to ultimate users who have a Washington State address, you may apply for an exemption from reporting waiver. If approved, your pharmacy will not be required to submit zero reports to the WA PMP until your next licensing renewal date.

The waiver form is accessed from the [Washington DOH](#) website under the Dispensers and Data Uploaders section, here [WA CSRW Waiver](#).

To submit the Controlled Substance Reporting Waiver application:

1. In the **Pharmacy License Number** field, enter the pharmacy number as it appears on the licensing documentation. It will begin with 2–4 letters followed by a period, two more letters followed by a period, and then eight numbers (e.g., XXXX**.**XX**.**########). Enter letters in uppercase as this field is case sensitive.
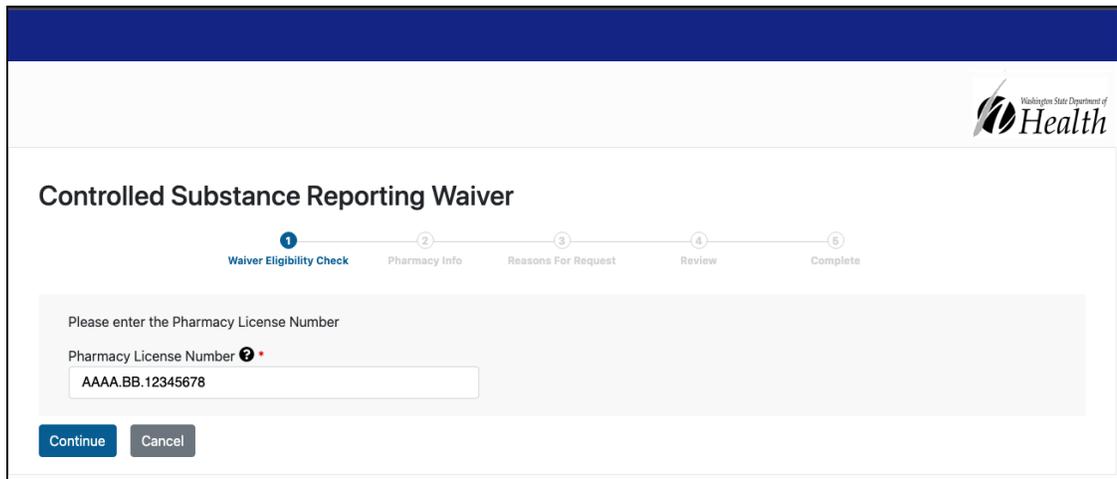
2. Click **Continue**.

    Note: If your pharmacy license is not in the system, such as an out of state pharmacy, or you are not eligible to submit a waiver, a message will be displayed.

    The Pharmacy Information page is displayed as shown on the following page.

3. Complete the required fields. Note that required fields are marked with a red asterisk (*).
4. Click **Continue**.

    The **Reason for Request** page is displayed as shown on the following page.

5. Select the reason you are requesting a waiver.

6. Click **Continue**

   The **Review** page is displayed as shown on the following page.

7. Verify that all the pharmacy details and reasons are correct.

   *Note: If you need to make corrections, click the **Edit** link, located next to the **Pharmacy Information** or **Reason for Request** header.*

8. Read the certification statements and confirm all statements apply to the pharmacy.

9. Click **Submit**.

   A message is displayed indicating the waiver has been successfully submitted. You will receive email updates about the status of your waiver application.

10. From this page, you can:

     a.   Click **Download Waiver Request** to download a copy of the application for your records.

     b.   Click **Back to Login Page** to return to that page.

     c.   Close your browser window if you are finished.