APPRISS® HEALTH

PMP Awarxe™

Data Submission Guide for Dispensers

North Carolina Controlled Substance Reporting System

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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 North Carolina who use Appriss Health's PMP Clearinghouse repository to report their dispensations. It includes such topics as:

- Reporting requirements for dispensers in the State of North Carolina
- 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 the State of North Carolina required to report the dispensing of controlled substances.

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2 Data Collection and Tracking

2.1 Data Collection Overview

General Statute 90-113.70 requires that the North Carolina Department of Health and Human Services (NC DHHS) establish and maintain a reporting system of prescriptions for all Schedule II through V controlled substances. This statute requires that all dispensers of licit controlled substances submit information in accordance with the transmission methods and frequency promulgated by the Commission for Mental Health, Developmental Disabilities and Substance Abuse Services.

The purpose of this legislation is to improve the State's ability to identify controlled substance misusers and refer them for treatment, and to identify and stop diversion of prescription drugs in an efficient and cost effective manner that will not impede the appropriate medical utilization of licit controlled substances.

As per North Carolina General Statute, 90-113.73. Dispensers are required to report to the NC Controlled Substance Reporting System (CSRS) no later than the close of the next business day after the prescription is delivered; however, dispensers are encouraged to report the information no later than 24 hours after the prescription was delivered.

The data shall be reported using one of the electronic formats described in this document. A written report on the Universal Claim Form (UCF) may be accepted, as long as the dispenser has approval from the NC DHHS. A UCF is provided in Appendix D. All data must be collected in the ASAP 4.2 format defined in Appendix A: ASAP 4.2 Specifications.

Effective January 1, 2019, a person licensed to practice veterinary medicine may submit prescription information by paper form or other means, provided all information required of electronically submitted data is submitted.

2.2 Reporting Requirements

All dispensers of controlled substances, as defined by this Act, are required to collect and report the following information to the data repository:

- Dispenser's DEA number
- Name of the patient for whom the controlled substance was dispensed and the patient's:
  - Full address, including city, state, and ZIP code
  - Telephone number (use the customer ID area in the ASAP standards)
  - Date of birth
- Date the prescription was written
- Date the prescription was filled
- Prescription number
- Indication of whether the prescription was new or refill

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- Metric quantity dispensed
- Estimated days' supply, if provided
- NDC number of the drug dispensed
- Prescriber's DEA number
- National Provider Identifier (NPI) number, for any prescriber that has an NPI number
- Method of payment

Each dispenser must submit the required data to the data repository no later than the close of the next business day after the prescription is delivered; however, dispensers are encouraged to report the information no later than 24 hours after the prescription was delivered.

In the event the dispenser is unable to report the information within the time frame required by this section because the system is not operational or there is some other temporary electrical or technological failure, this inability shall be documented in the dispenser's records. Once the electrical or technological failure has been resolved, the dispenser shall promptly report the information.

The Data Submission chapter provides all the instructions necessary to submit the required information.

***Note**: If you are a chain pharmacy, your data will likely be submitted from your home office. Please verify this with your home office. If you are an independent pharmacy or other entity, please forward the reporting requirements to your software vendor. They will need to create the data file, and they may be able to submit the data on your behalf. If not, follow the instructions provided in the Data Submission chapter to submit the data.*

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.

2.2.2 Zero Reports

If a dispenser usually dispenses controlled substances in North Carolina but has no dispenses to report for the preceding reporting period, the pharmacy must report this information to the NC CSRS by filing a zero report as described in the Reporting Zero Dispensing topic in this guide.

2.2.3 Reporting Noncompliance

The laws and regulations for reporting to the NC CSRS are continuously subjected to amendments, and it is the dispenser's responsibility to be aware of such updates as they are enacted and promulgated.

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As per North Carolina General Statute 90-113.73., any pharmacy that employs dispensers found to have failed to report information in the manner required within a reasonable period of time after being informed that the required information is missing or incomplete may be assessed civil penalties.

2.2.4 Excluded from Reporting

"Dispenser" means a person who delivers a Schedule II through V controlled substance to an ultimate user in North Carolina, but does **not** include any of the following:

- A licensed hospital or long-term care pharmacy that dispenses such substances for inpatient administration
- A wholesale distributor of a Schedule II through V controlled substance
- A physician dispensing a controlled substance medication for no more than a 48-hour supply
- A dispenser is not required to report Schedule V non-narcotic, non-anorectic Schedule V controlled substances provided directly to the ultimate user for the purpose of assessing a therapeutic response when prescribed according to indications approved by the US FDA.

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3 Accessing Clearinghouse

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

3.1 Creating Your Account

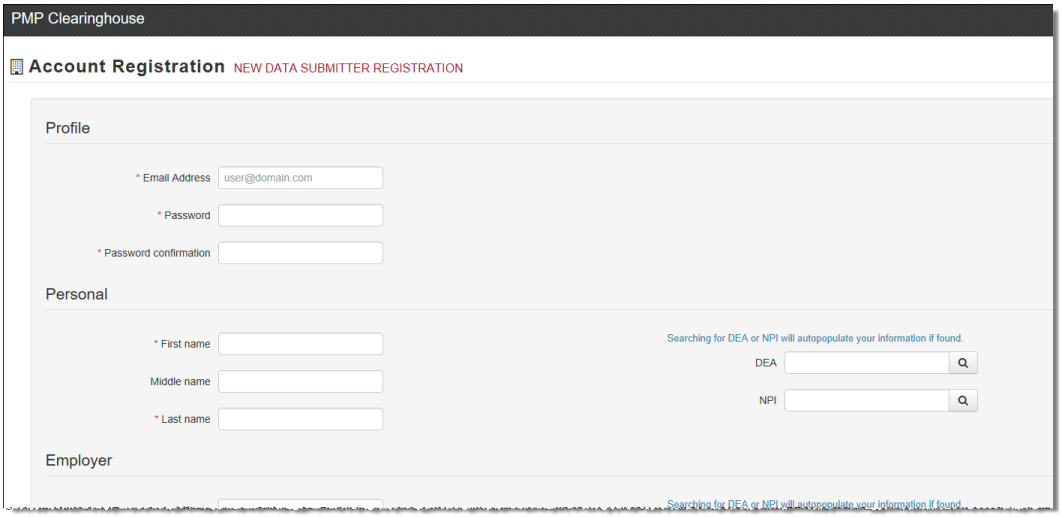
Prior to submitting data, you must create an account. **If you are currently registered with the Appriss PMP Clearinghouse system, you *do not* need to register for a new account—you will be able to add North Carolina to your existing account for data submissions.** If you have an existing PMP Clearinghouse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



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2. Complete your Profile information.
   a. Enter your current, valid email address in the **Email Address** field.

      Note: *The email address you provide here will act as your user name 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:

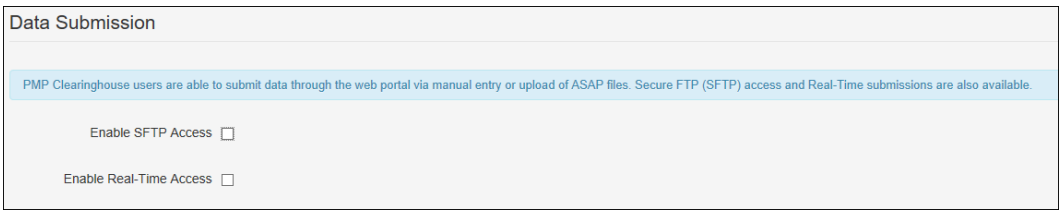
      - *At least eight (8) characters*
      - *One (1) uppercase letter*
      - *One (1) lowercase letter*
      - *One (1) number*
      - *One (1) special character, such as !, @, #, $, etc.*

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.

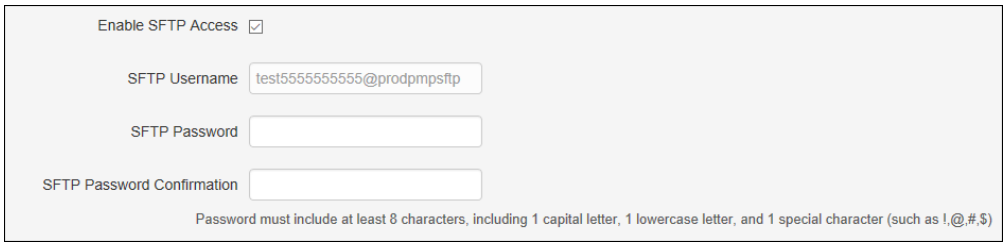
   Notes:

   - *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.



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b. Your **SFTP Username** is automatically generated using the first five characters of your employer's name + your employer's phone number + @prodpmpsftp. 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@prodpmpsftp*.

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 sftp://sftp.pmpclearinghouse.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 state(s) for which you will be submitting data.
6. Click **Submit**.

   The request is submitted to the PMP administrator for each of the states you selected for data submission, and the Registration Information Overview page is displayed.

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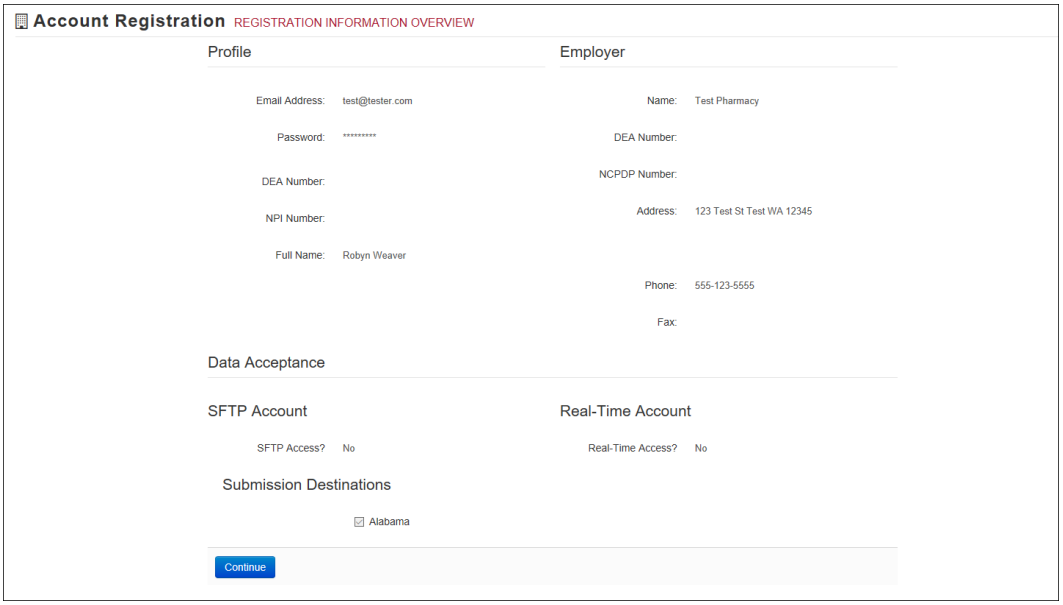
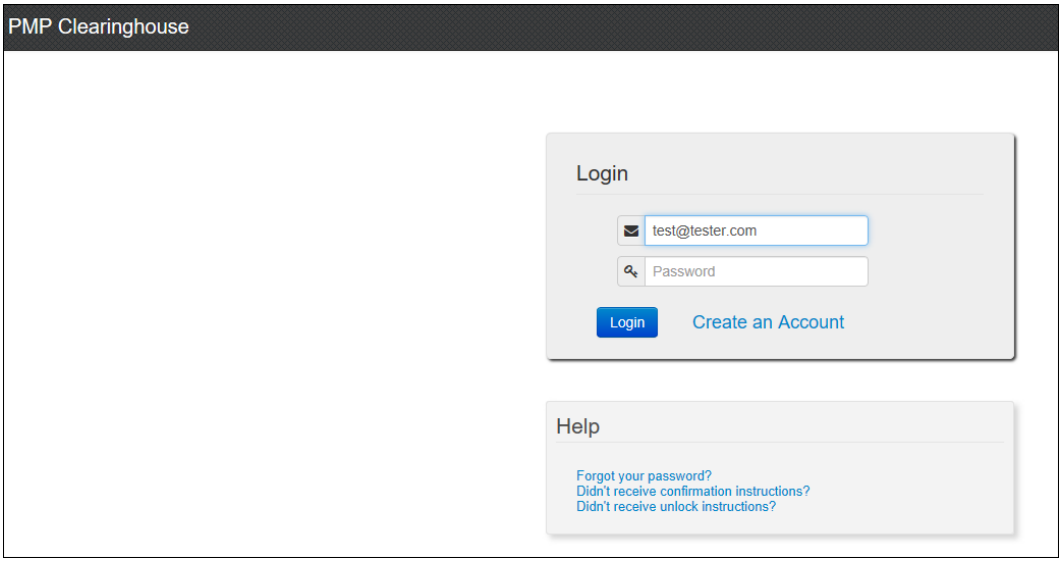


7. Click **Continue**.

   The PMP Clearinghouse Login page is displayed; however, you will not be able to log in until your account has been approved. Once the state PMP administrator has approved your request, 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.



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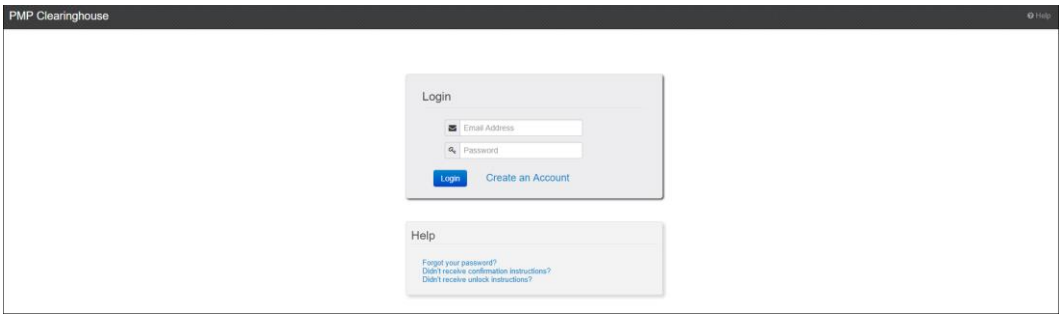
3.2 Logging In to PMP Clearinghouse

1. Open an internet browser window and navigate to the PMP Clearinghouse Login page located at https://pmpclearinghouse.net/users/sign_in.

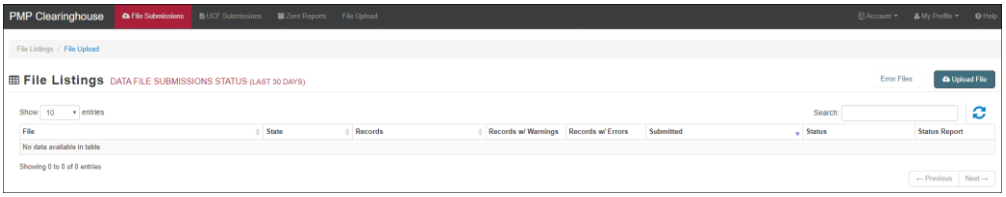


2. Enter the email address you used to create your account in the **Email Address** field.
3. Enter your password in the **Password** field.

   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.



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4 Data Submission

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

4.1 Timeline and Requirements

- Pharmacies and software vendors can begin creating their PMP Clearinghouse accounts on or after August 22, 2018. See Creating Your Account for more information.
- You can begin submitting data to PMP Clearinghouse as soon as your account has been created.
- Beginning September 19, 2018, dispensers are required to transmit their data using PMP Clearinghouse in accordance with the guidelines outlined under Reporting Requirements.

Note: If you have any questions about the reporting timeline, please contact the NC CSRS administrator using the information provided in Administrative Assistance.

4.2 Upload Specifications

Files should be in the ASAP 4.2 format as defined in Appendix A: ASAP 4.2 Specifications. Files for upload should be named in a unique fashion, with a prefix constructed from the date (YYYYMMDD) and a suffix of ".dat". An example file name would be "20180919.dat". All of your upload files will be kept separate from the files of others.

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

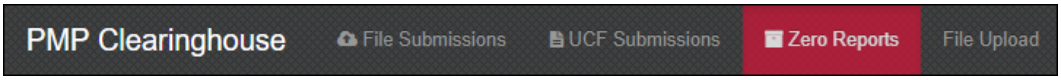
Prescription information must be reported no later than the close of the next business day after the prescription is delivered; however, dispensers are encouraged to report the information no later than 24 hours after the prescription was delivered.

4.3 Zero Reports

If you have no dispensations to report for the preceding reporting period, you must report this information to the NC CSRS.

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.

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**.



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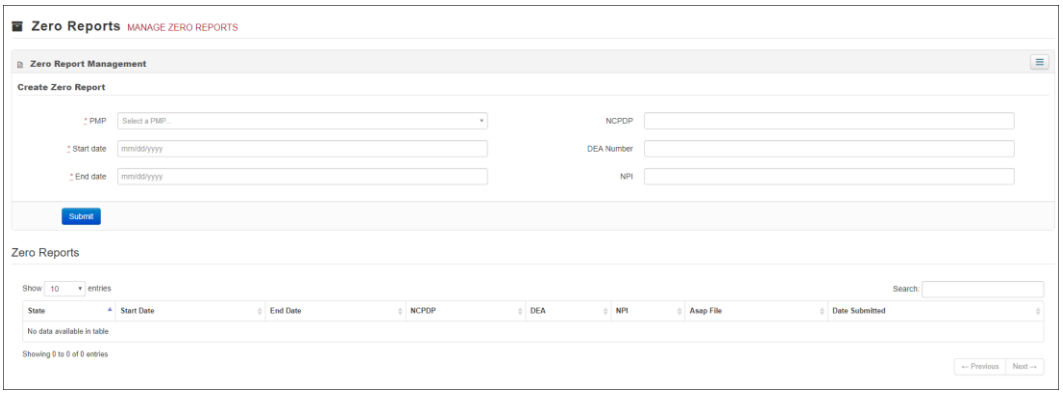
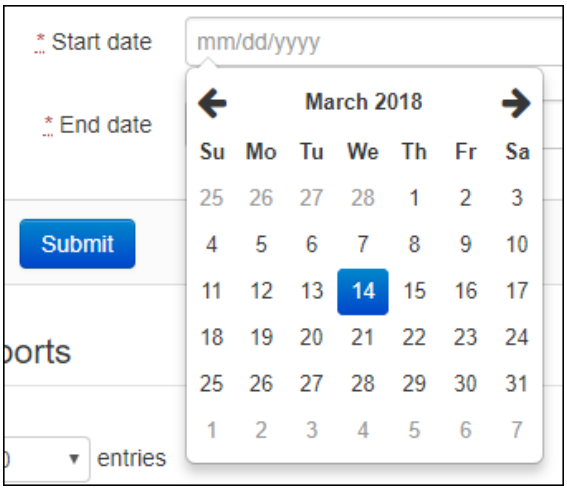
The Zero Reports page is displayed.



4. Select the PMP for which you are submitting a zero report from the drop-down list in the **PMP** field.
5. 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.



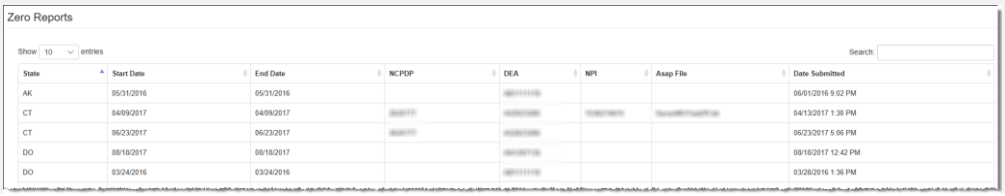
6. Enter your NCPDP, DEA, and/or NPI numbers as required by your state's PMP.

   Note: *If any of these fields are required by your state's PMP, they will be marked with an asterisk (*).*

7. Click **Submit**.

   Your zero report is submitted to PMP Clearinghouse.

   Note: *All previously submitted zero reports, including those submitted via SFTP, are displayed at the bottom of the page.*



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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	12
Web Portal Upload	13
Manual Entry (UCF)	14

5.1 Secure FTP

If you are submitting data to PMP Clearinghouse using SFTP, you must configure individual sub-folders for the state PMP systems to which you are submitting data. These sub-folders must be created in the *homedir/directory* folder, which is where you are directed once authenticated, and **should be named using the state abbreviation (e.g., NC, AL, AK, KS, GA, etc.).** Data files not submitted to a state sub-folder will be required to have a manual state PMP assignment made on the File Listings page. Please refer to State 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 4.2 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 "20180919.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: 20180919a.dat, 20180919b.dat, and 20180919c.dat.*
4. SFTP the file to sftp://sftp.pmpclearinghouse.net.
5. When prompted, enter the username and password you created when setting up the SFTP account.
6. Place the file in the appropriate state-abbreviated directory.

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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 state sub-folder, a "**Determine PMP**" error is displayed on the File Status page, and you will be prompted to select a destination PMP (state) to which the data should be sent.*

5.2 Web Portal Upload

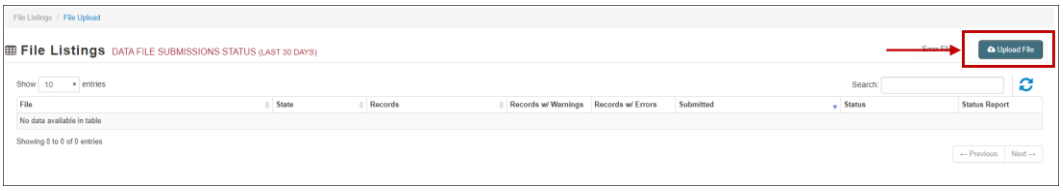
1. If you do not have an account, perform the steps in Creating Your Account.
2. Prepare the data file(s) for submission, using the ASAP specifications described in Appendix A: ASAP 4.2 Specifications.

   Notes:

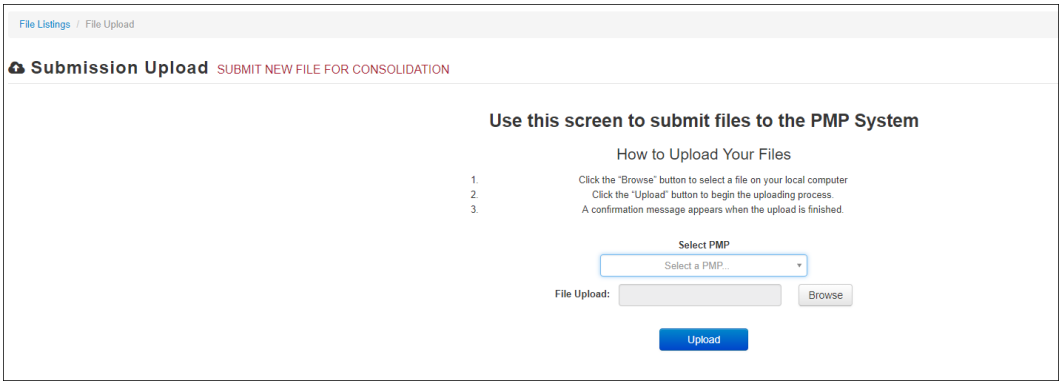
   - *Files for upload should be named in a unique fashion, with a prefix constructed from the date of submission to PMP Clearinghouse (YYYYMMDD) and a suffix of ".dat". An example file name would be "20180919.dat".*
   - *All of your upload files will be kept separate from the files of others.*
   - *Reports 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: 20180919a.dat, 20180919b.dat, and 20180919c.dat.*
3. Log in to PMP Clearinghouse.
4. Click **File Upload** from the menu bar.

Or

5. Click **Upload File** from the File Listings page.



The Submission Upload page is displayed.



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6. Select the state PMP to which you are submitting the file from the drop-down list in the **Select PMP** field.
7. Click the **Browse** button, located next to the **File Upload** field, and select the file you created in step 2.
8. Click **Upload**.

   A message is displayed prompting you to confirm the submission.

9. 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)

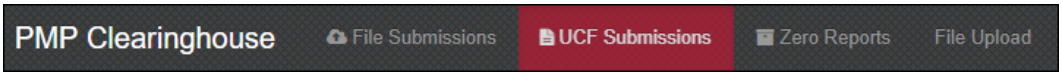
If you do not have an automated record-keeping system capable of producing an electronic report using the ASAP 4.2 format, prescription information may be submitted on the Universal Claim Form (UCF).

5.3.1 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 Reporting Requirements 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**.



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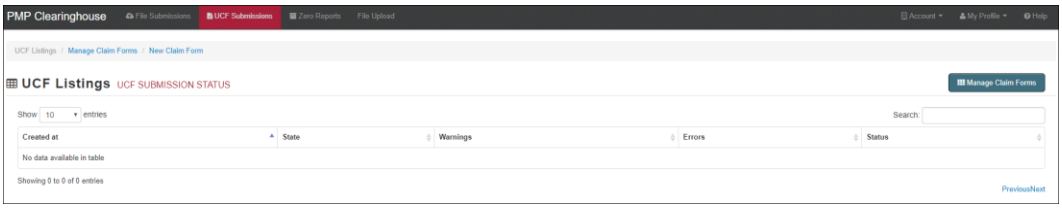
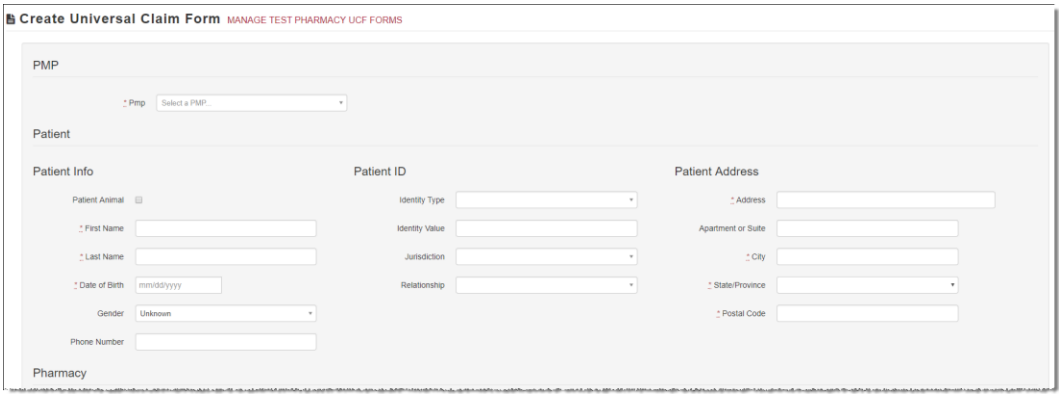
The UCF Listings page is displayed.



4. Click **New Claim Form**, located at the top of the page.

   The Create Universal Claim Form page is displayed.



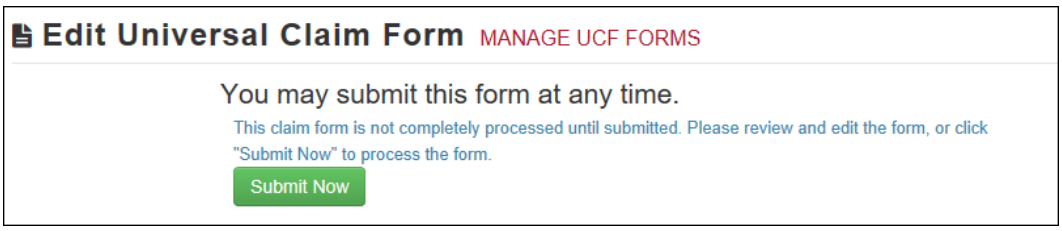
5. Select the state PMP to which you are submitting data from the drop-down list in the **Select PMP** field.
6. Complete the required fields.

   Notes:

   - *A red 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.

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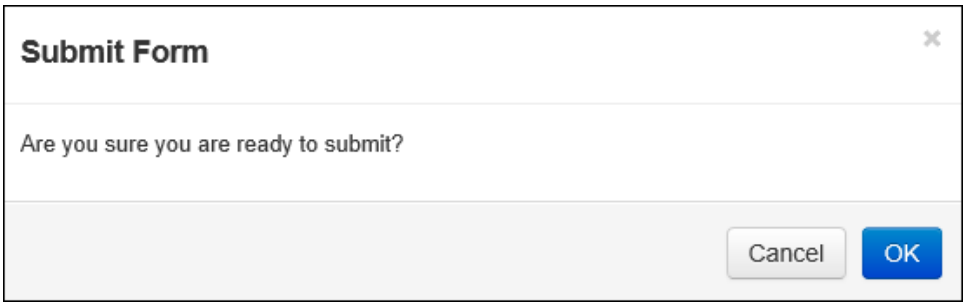
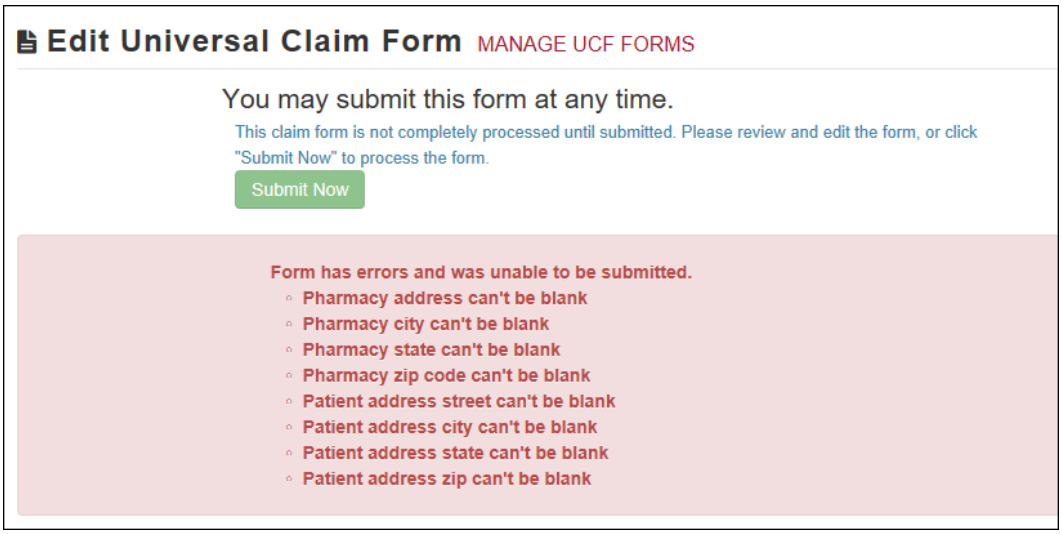
A message is displayed prompting you to confirm the data submission.



9. Click **OK**.

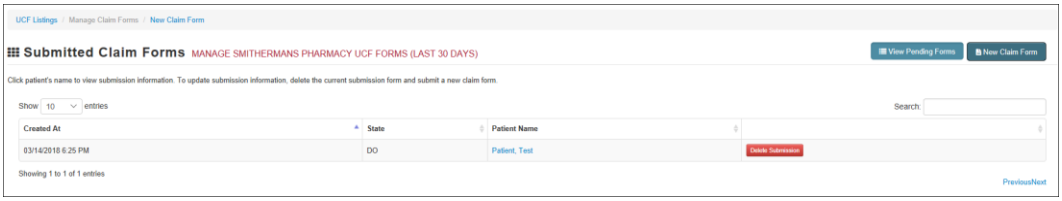
   Your data will be validated upon submission. If there are any errors on the UCF form, they are displayed at the top of the page.



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 Submitted Claim Forms page.



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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.

- The **Status** column, located at the end of each row, displays the file status.
- 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 status of "**Pending Dispensation Error**." You can click the error message 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 a status of "**ASAP Errors**." 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 state-specific sub-folder, the file will be displayed, and you will be prompted to select a destination PMP to which the data file will be transferred.

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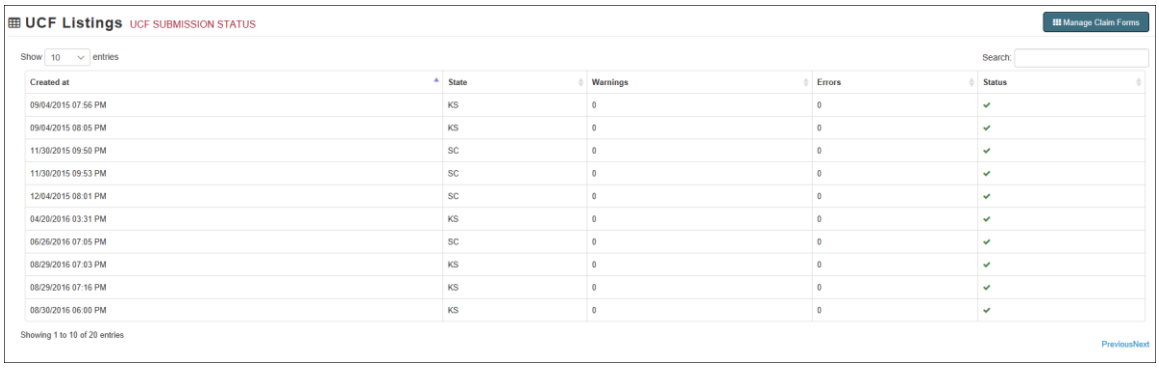
6.2 UCF Listings

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.



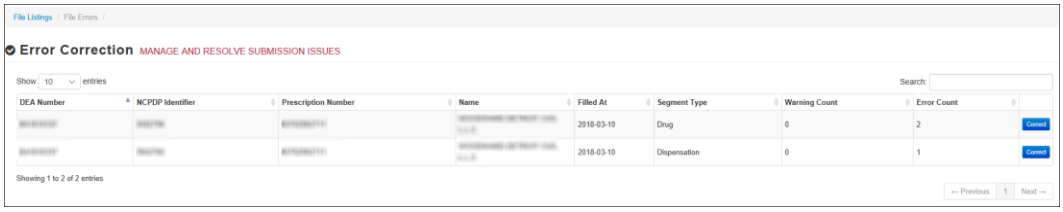
The **Status** column, located at the end of each row, displays the UCF's status.

If a UCF contains errors, it will have a status of "**Pending Dispensation Error**." You can click the error message 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.

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 Error**" 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

The Drug Errors 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

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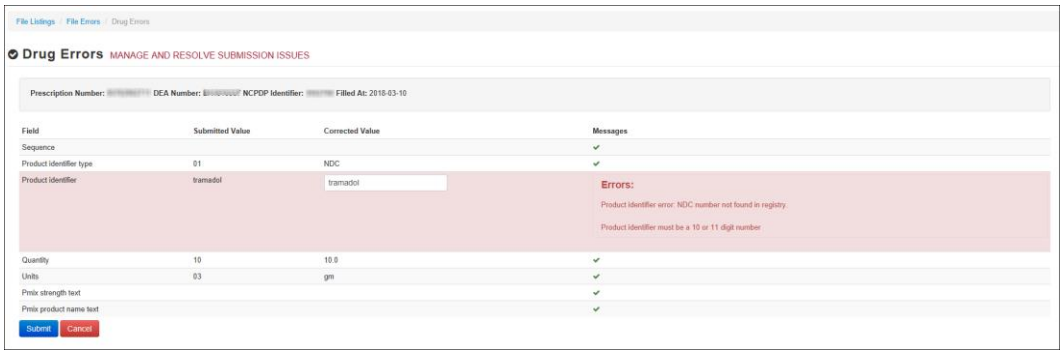
record listed on the Error Correction page (see View Records for more information).



- 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 4.2 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
- **02 Void** – indicates that the original record should be removed

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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* is provided below.

```
SUBJ: North Carolina 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: 4.2
* Transaction Control Number: unparseable
* Transaction Control Type: unparseable
* Date of Submission: September 19, 2018

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* serves as notification that a data file is currently being parsed by the state 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.

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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.

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```
SUBJ: North Carolina ASAP file: fake-test3.txt - Status Report

BODY:
DEA        NCPDP    NPI         Prescription               Filled    Segment           Field            Type     Message
-------------------------------------------------------------------------------------------------------------------------------
BE1234567  1347347  9034618394  123486379596-0             20130808  Dispensation      refill_number    WARNING  message example
DE9841394  3491849  4851947597  357199504833-345           20130808  Dispensation      days_supply      ERROR    message example


Summary:
* File Name: fake-test3.txt
* ASAP Version: 4.2
* Transaction Control Number: 23489504823
* Transaction Control Type: send
* Date of Submission: September 19, 2018
* 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 state 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_20130301KSMCPS.DAT

BODY:
Summary:
* File Name: zero_reports_20130301KSMCPS.DAT
* PMP Name: North Carolina
* Date Range: 2013-03-06 - 2013-03-06
* Submission Date: 2013-08-23
* ASAP Creation Date: 2013-03-06
```

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8 Managing Your Upload Account

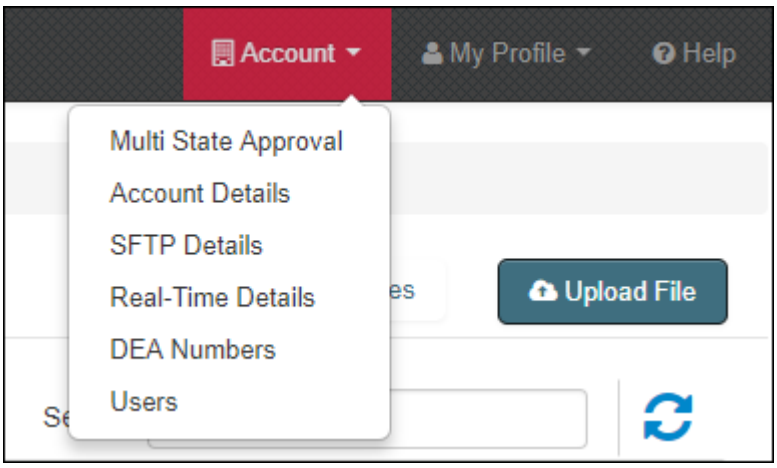
The **Account** menu option allows you to manage the information associated with your organization's upload account, including adding users, states, and SFTP access to your account as well as editing your organization's account information.

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

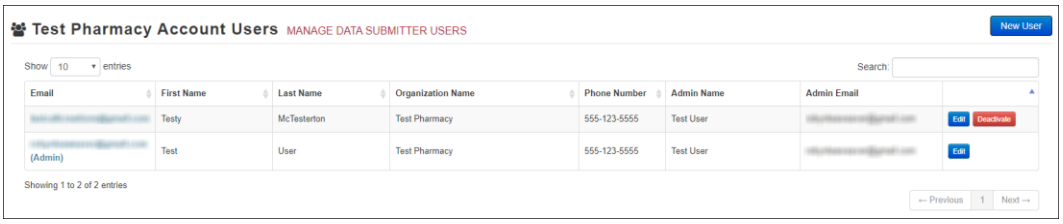
PMP Clearinghouse allows data submitters to add new users to the system who have the same rights and access to submitting data and viewing file status. This practice allows you to create an account to be used for a backup individual.

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.

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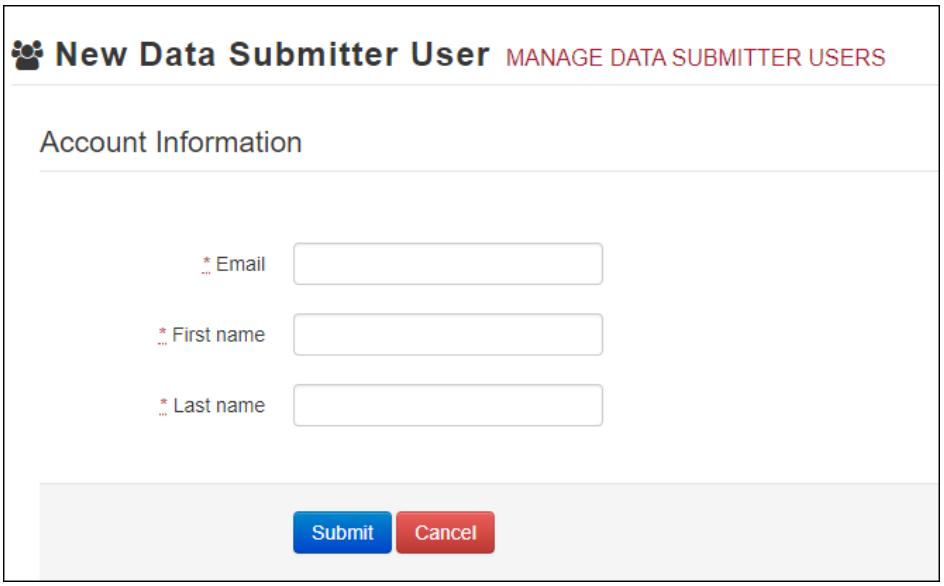
The New Data Submitter User page is displayed.

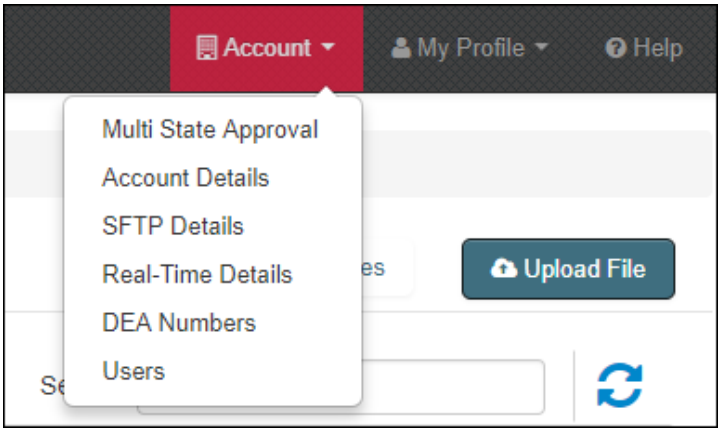


5. Enter the new data submitter's email address, first name, and last name in the appropriate fields. *Note that all fields are required.*
6. Click **Submit**.

   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**.



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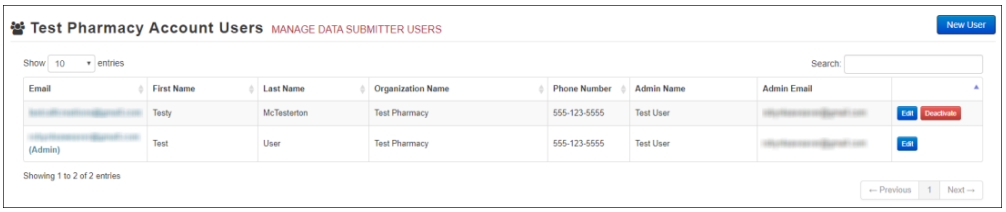
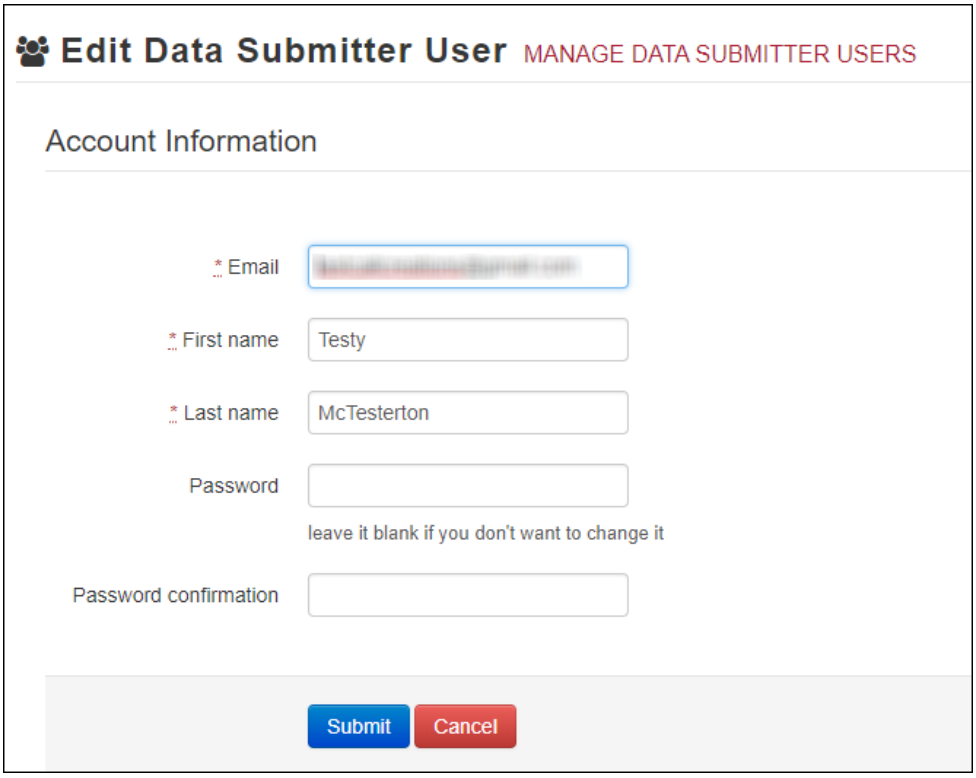
3. Select **Users** from the **Account** drop-down menu.

   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.

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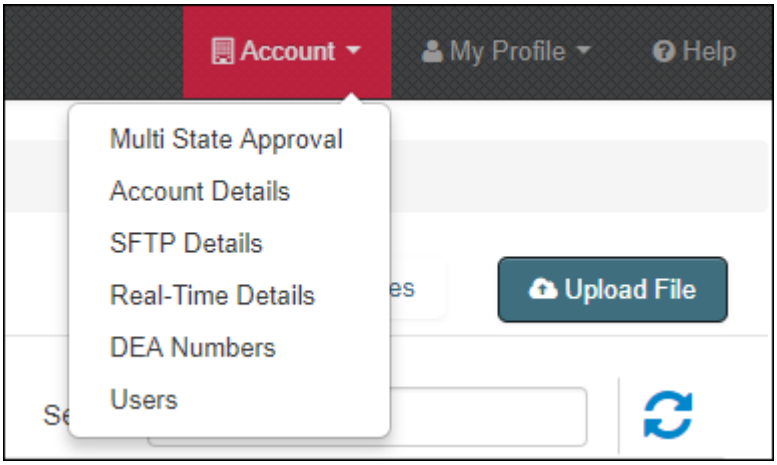
8.2 Adding States to Your Upload Account

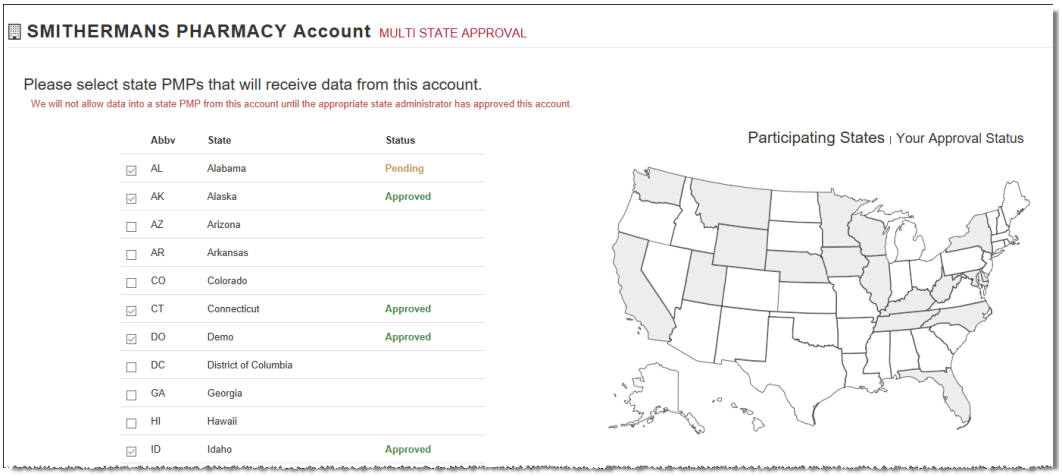
If your organization needs to submit data files to an additional state that uses PMP AWARxE, you can submit the request through PMP Clearinghouse.

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 states currently using the PMP AWARxE system as well as your data sharing status with each state.



4. To request to submit data to another state, click to select the checkbox next to that state.

   PMP Clearinghouse automatically saves your changes, and your request is submitted to the state's PMP administrator for review and approval. Once the request has been approved, the status for that state will change from "Pending" to "Approved," and you may begin submitting data to that state's PMP.

   Notes:

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

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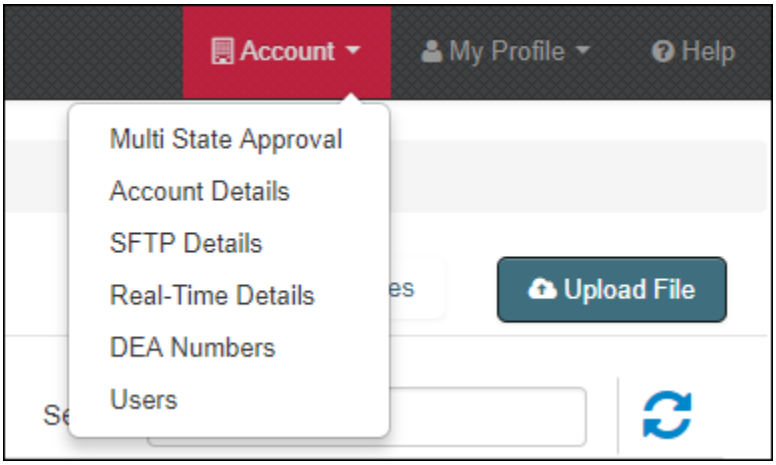
- *To cancel data submission to a state's PMP, uncheck the box for that state. Note that if you need to submit data to that state again in the future, you will have to go through the approval process again.*

8.3 Adding SFTP Access to an Upload Account

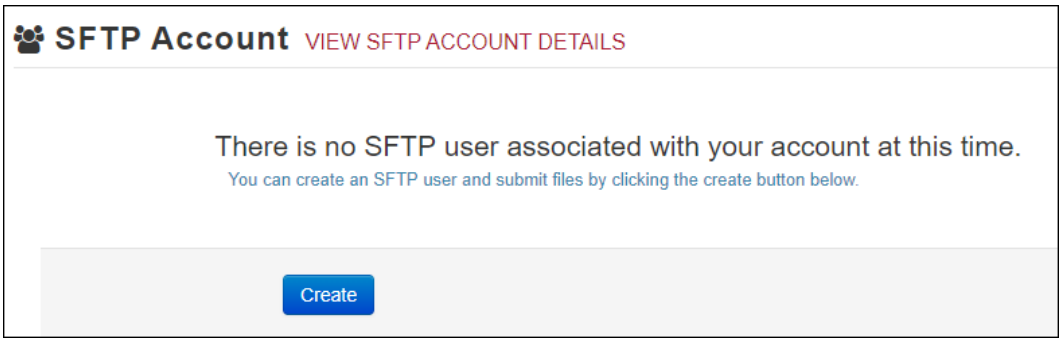
If a registered upload account did not request an SFTP account during the account creation process, you can request one at any time using the **Account** menu option.

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

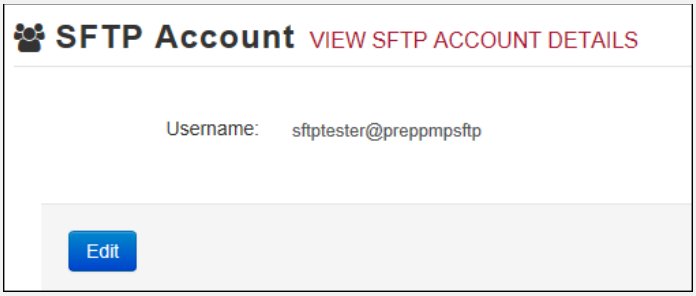


3. Select **SFTP Details**.

   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****.*

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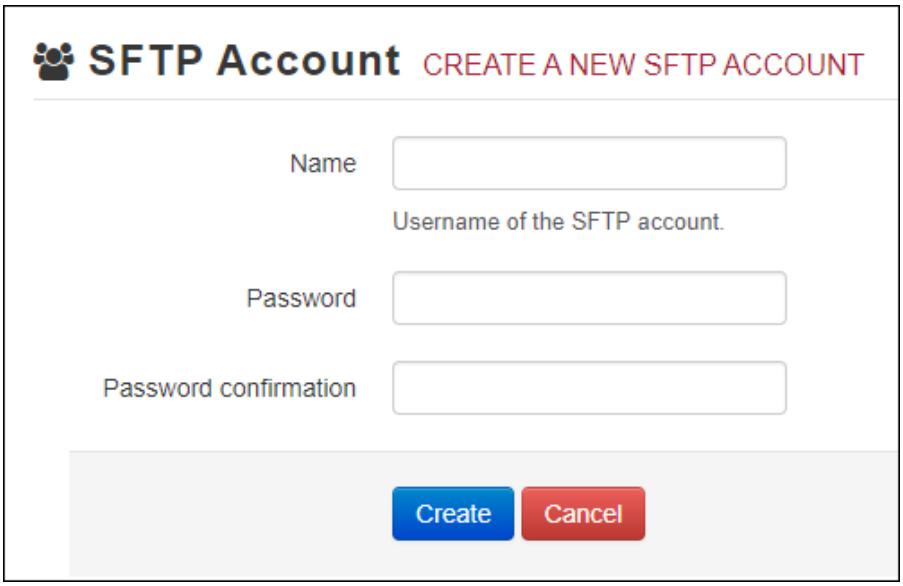
4. Click **Create**.

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

7. Click **Create**.

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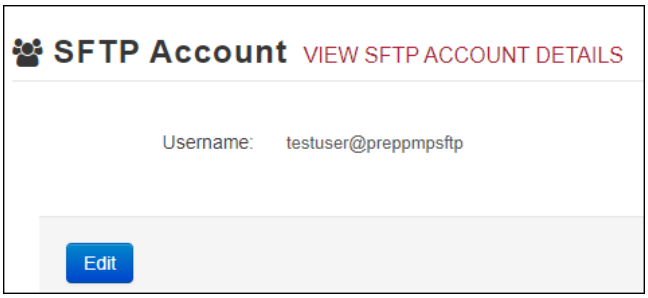
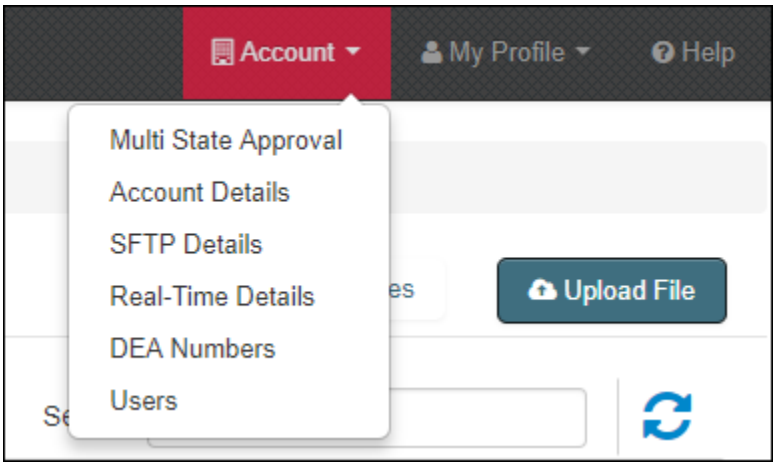
The account is created and the username is displayed.



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 page is displayed.

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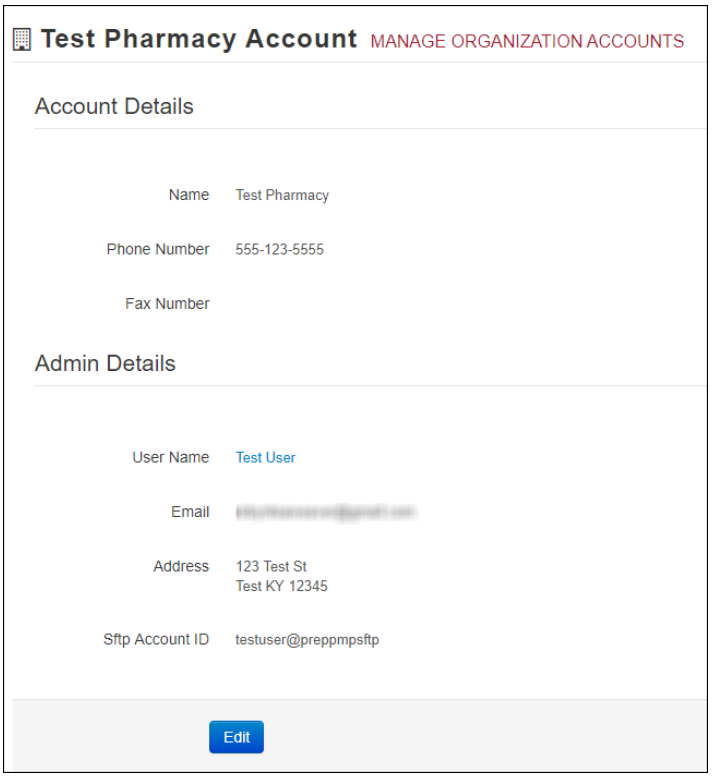
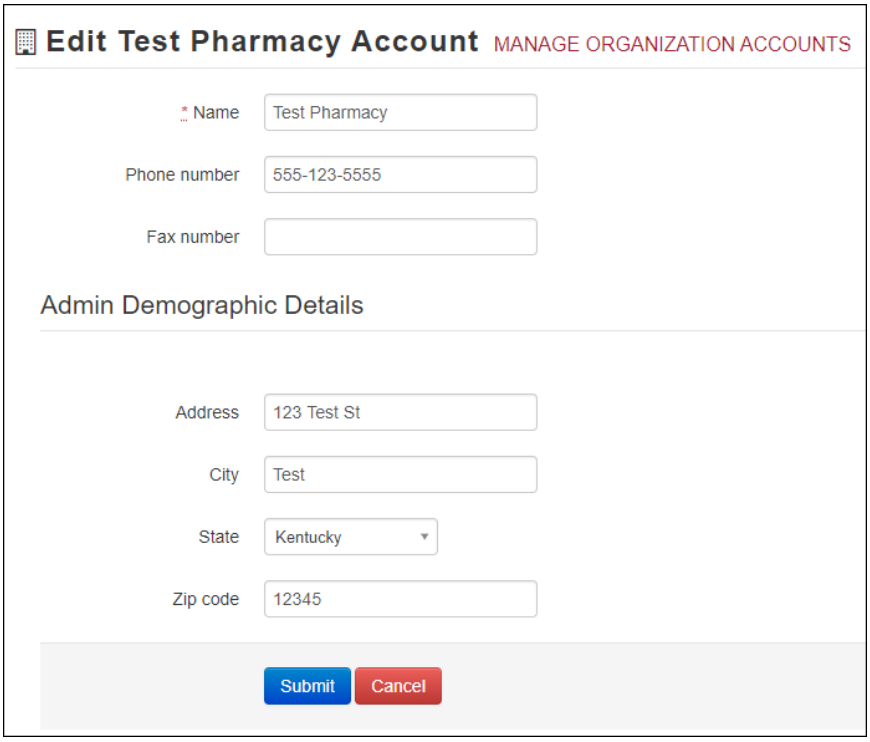


4. Click **Edit**.

   The Edit Account page is displayed.



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

   The account information is updated.

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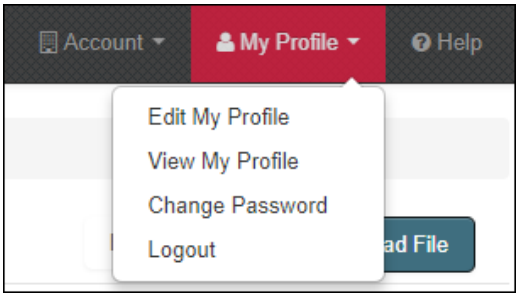
9 Managing Your User Profile

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

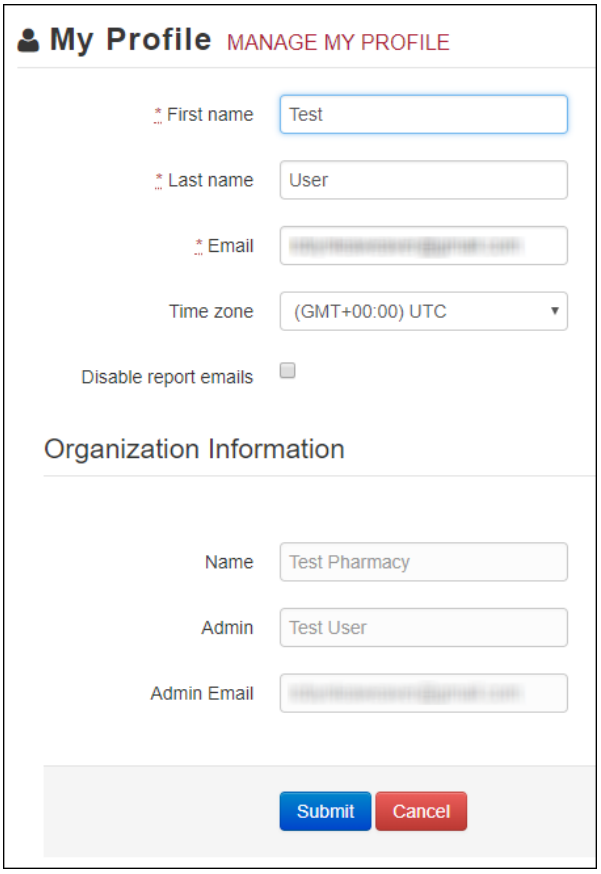
Note: *This chapter contains information for managing your individual user profile. For information about managing your organization's upload account, including how to add users, please refer to Managing Your Upload Account.*

9.1 Editing Your Profile

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



3. Select **Edit My Profile**.



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

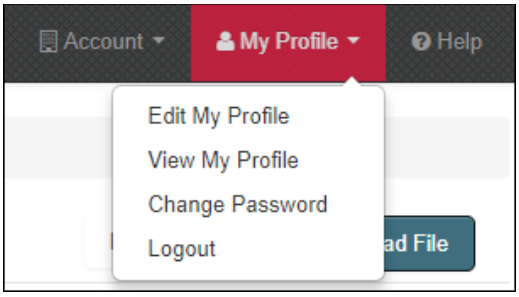
   Note: *This function only allows you to edit your individual profile information. If you need to edit the Organization Information, please refer to Editing Your Upload Account.*

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

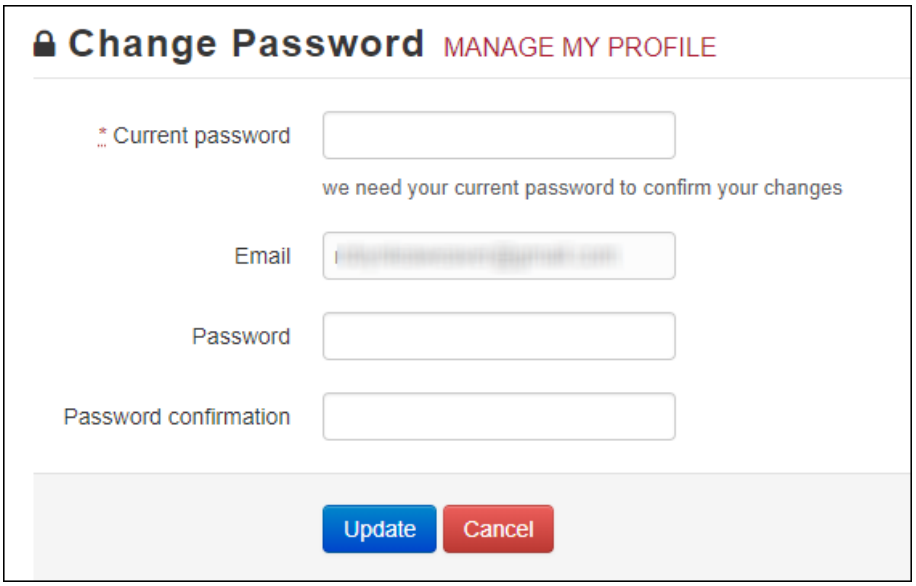
9.2 Changing Your Password

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 the 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*

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

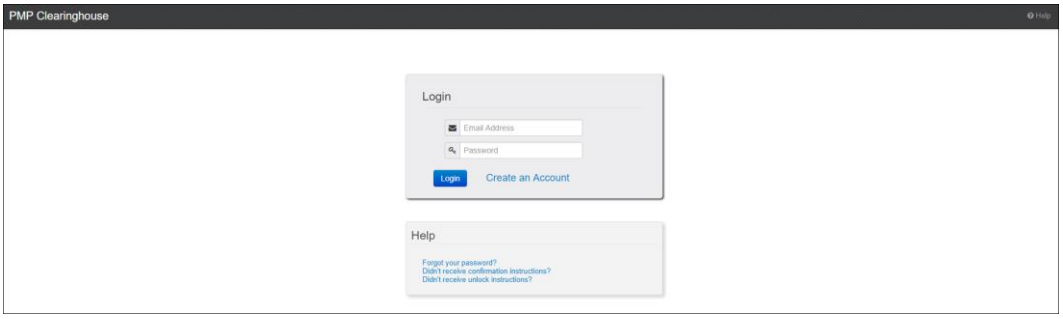
6. Click **Update**.

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

9.3 Resetting Your Password

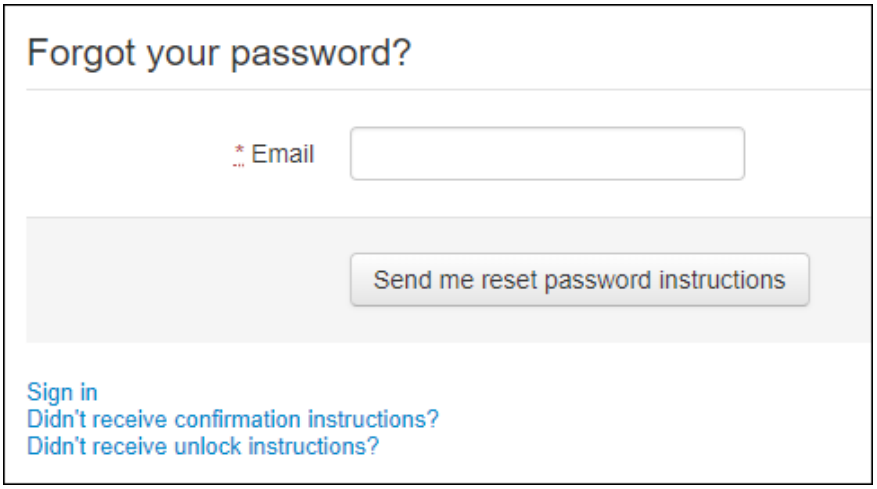
If you have forgotten your password or your password has expired, perform the following steps to reset it.

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.

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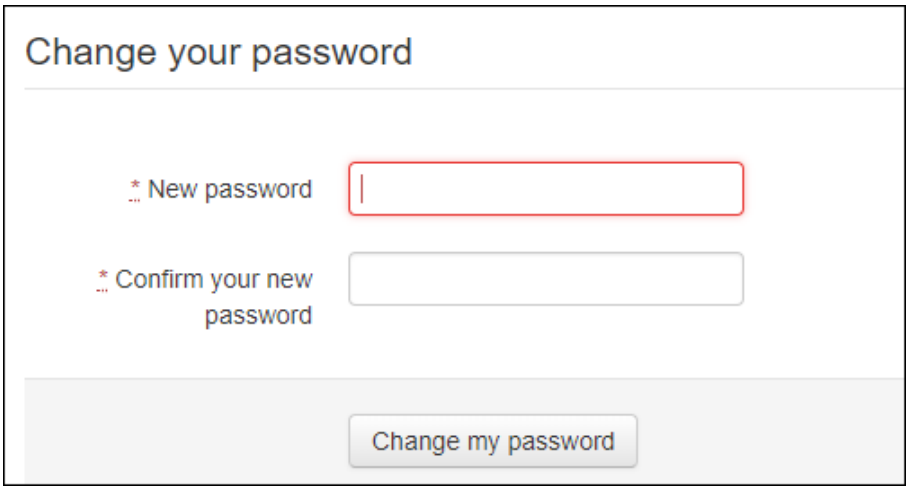
The Change your password page is displayed.



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 Appriss Health at 855-962-4767.

  OR
- Create a support request at the following URL: https://apprisspmpclearinghouse.zendesk.com/hc/en-us/requests/new.

Technical assistance is available 24 hours per day, 7 days per week.

10.2 Administrative Assistance

If you have non-technical questions regarding the NC CSRS, please contact:

North Carolina Controlled Substances Reporting System
Division of Mental Health, Developmental Disabilities, and Substance Abuse Services
3008 Mail Service Center
Raleigh, North Carolina 27699-3008

Phone: 919-733-1765

E-mail: nccsrs@dhhs.nc.gov

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11 Document Information

11.1 Disclaimer

Appriss 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 v1	06/19/2018	N/A	N/A; initial DRAFT publication
DRAFT v2	07/17/2018	Global	Appriss response to State revisions
DRAFT v3	07/26/2018	Global	Appriss response to State revisions

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Appendix A: ASAP 4.2 Specifications

The information on the following pages contains the definitions for the specific contents required of uploaded records in the American Society for Automation in Pharmacy (ASAP) format to comply with the NC CSRS 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 NC CSRS
  - N = Not required but accepted if submitted
  - S = Situational (not required; however, supply if available)
  - P = Preferred, please submit

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

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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)	S
	TH04	**Response ID** Contains the Transaction Control Number of a transaction that initiated the transaction. Required in response transaction only.	S
	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 state PMP the transaction should be routed to.	S
	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
	IS02	**Information Source Entity Name** Entity name of the Information Source.	R
	IS03	**Message** Free-form text message.	S

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Segment	Element ID	Element Name	Requirement
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.	S
	PHA03	**DEA Number** Identifier assigned to the pharmacy by the Drug Enforcement Administration.	R
	PHA04	**Pharmacy Name** Free-form name of the pharmacy or dispensing practitioner's name.	S
	PHA05	**Address Information – 1** Free-form text for address information.	S
	PHA06	**Address Information – 2** Free-form text for address information.	S
	PHA07	**City Address** Free-form text for city name.	S
	PHA08	**State Address** U.S. Postal Service state code.	S
	PHA09	**ZIP Code Address** U.S. Postal Service ZIP Code.	S
	PHA10	**Phone Number** Complete phone number including area code.	S
	PHA11	**Contact Name** Free-form name.	S
	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.	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

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Segment	Element ID	Element Name	Requirement
	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.	S
	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)	S
	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 Social Security number is also required.	S
	PAT07	**Last Name** Patient's last name.	R
	PAT08	**First Name** Patient's first name.	R
	PAT09	**Middle Name** Patient's middle name or initial if available.	S
	PAT10	**Name Prefix** Patient's name prefix such as Mr. or Dr.	S
	PAT11	**Name Suffix** Patient's name suffix such as *Jr*. or *the III*.	S

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Segment	Element ID	Element Name	Requirement
	PAT12	**Address Information – 1** Free-form text for street address information.	R
	PAT13	**Address Information – 2** Free-form text for additional address information.	S
	PAT14	**City Address** Free-form text for city name.	R
	PAT15	**State Address** U.S. Postal Service state code **Note:** Field has been sized to handle international patients not residing in the U.S.	R
	PAT16	**ZIP Code Address** U.S. Postal Service ZIP code. Populate with zeros if patient address is outside the U.S.	R
	PAT17	**Phone Number** Complete phone number including area code.	R
	PAT18	**Date of Birth** Date patient was born. Format: CCYYMMDD	R
	PAT19	**Gender Code** Code indicating the sex of the patient. • F Female • M Male • U Unknown	S
	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

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Segment	Element ID	Element Name	Requirement
	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	S
	PAT22	**Country of Non-U.S. Resident** Used when the patient's address is a foreign country and PAT12 through PAT16 are left blank.	S
	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 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	R
	DSP04	**Refills Authorized** The number of refills authorized by the prescriber.	R

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Segment	Element ID	Element Name	Requirement
	DSP05	**Date Filled** Date prescription was filled. Format: CCYYMMDD	R
	DSP06	**Refill Number** Number of the fill of the prescription. 0 indicates New Rx; 01-99 is the refill number.	R
	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)	R
	DSP08	**Product ID** Full product identification as indicated in DSP07, including leading zeros without punctuation.	R
	DSP09	**Quantity Dispensed** Number of metric units dispensed in metric decimal format. Example: 2.5 **Note:** For compounds show the first quantity in CDI04.	R
	DSP10	**Days Supply** Estimated number of days the medication will last.	R
	DSP11	**Drug Dosage Units Code** Identifies the unit of measure for the quantity dispensed in DSP09. • 01 Each • 02 Milliliters (ml) • 03 Grams (gm)	R
	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	S
	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.	S

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Segment	Element ID	Element Name	Requirement
	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.	S
	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	R
	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.	S
	DSP18	**RxNorm Product Qualifier** • 01 Semantic Clinical Drug (SCD) • 02 Semantic Branded Drug (SBD) • 03 Generic Package (GPCK) • 04 Branded Package (BPCK) **Note:** DSP18 and DSP19 are placeholder fields pending RxNorm becoming an industry standard and should not be required until such time.	S
	DSP19	**RxNorm Code** Used for electronic prescriptions to capture the prescribed drug product identification. **Note:** DSP18 and DSP19 are placeholder fields pending RxNorm becoming an industry standard and should not be required until such time.	S
	DSP20	**Electronic Prescription Reference Number** Used to provide an audit trail for electronic prescriptions. **Note:** DSP20 and DSP21 should be reported as a pair to the prescription drug monitoring program, and each program decides which one, if not both, it decides to capture.	S
	DSP21	**Electronic Prescription Order Number** **Note:** DSP20 and DSP21 should be reported as a pair to the prescription drug monitoring program, and each program decides which one, if not both, it decides to capture.	S

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Segment	Element ID	Element Name	Requirement
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).	R
	PRE03	**DEA Number Suffix** Identifying number assigned to a prescriber by an institution when the institution's number is used as the DEA number.	S
	PRE04	**Prescriber State License Number** Identification assigned to the prescriber by the State Licensing Board.	S
	PRE05	**Last Name** Prescriber's last name.	S
	PRE06	**First Name** Prescriber's first name.	S
	PRE07	**Middle Name** Prescriber's middle name or initial.	S
	PRE08	**Phone Number**	S
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
	CDI02	**Product ID Qualifier** Code to identify the type of product ID contained in CDI03. • 01 NDC • 02 UPC • 03 HRI • 04 UPN • 05 DIN • 06 Compound (this code is not used in this segment)	R
	CDI03	**Product ID** Full product identification as indicated in CDI02, including leading zeros without punctuation.	R

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Segment	Element ID	Element Name	Requirement
	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)	S
AIR: Additional Information Reporting (situational) Used when state-issued serialized Rx pads are used, the state requires information on the person dropping off or picking up the prescription, or for data elements not included in other detail segments. **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 of state that issued serialized prescription blank. This is required if AIR02 is used.	S
	AIR02	**State Issued Rx Serial Number** Number assigned to state issued serialized prescription blank.	S
	AIR03	**Issuing Jurisdiction** Code identifying the jurisdiction that issues the ID in AIR05.	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 • 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	S

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Segment	Element ID	Element Name	Requirement
	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
	AIR09	**Last Name or Initials of Pharmacist** Last name or initials of pharmacist dispensing the medication.	S
	AIR10	**First Name of Pharmacist** First name of pharmacist dispensing the medication.	S
	AIR11	**Dropping Off/Picking Up Identifier Qualifier** Additional qualifier for the ID contained in AIR05 • 01 Person Dropping Off • 02 Person Picking Up • 98 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

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Appendix B: ASAP Zero Report Specifications

The following table contains the required definitions for submitting zero reports via SFTP or manual upload to the NC CSRS. 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 4.2 Specifications.

Segment	Element ID	Element Name	Requirement
TH: Transaction Header (required)			
	TH01	4.2	R
	TH02	123456	R
	TH05	20150101	R
	TH06	223000	R
	TH07	P	R
	TH09	\\	R
IS: Information Source (required)			
	IS01	7705555555	R
	IS02	PHARMACY NAME	R
	IS03	Date Range of Report #YYYYMMDD#-#YYYYMMDD#	R
PHA: Pharmacy Header (required)			
	PHA03	ZZ1234567	R
PAT: Patient Information (required)			
	PAT07	REPORT	R
	PAT08	ZERO	R
DSP: Dispensing Record (required)			
Presc	**DSP05**	20150101	R
PRE: Prescriber Information (required; can be null as follows: PRE*****\)**			
CDI: Compound Drug Ingredient Detail			
AIR: Additional Information Reporting			
TP: Pharmacy Trailer (required)			
	TP01	7	R
TT: Transaction Trailer (required)			
	TT01	123456	R
	TT02	10	R

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Sample Zero Report

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

```
TH*4.2*123456*01**20150108*223000*P**\\
IS*7705555555*PHARMACY NAME*#20150101#-#20150107#\
PHA*** ZZ1234567\
PAT*******REPORT*ZERO************\
DSP*****20150108******\
PRE*\
CDI*\
AIR*\
TP*7\
TT*123456*10\
```

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Appendix C: 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: sftp.pmpclearinghouse.net

Appriss 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 state PMP administrator.**

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State Subfolders

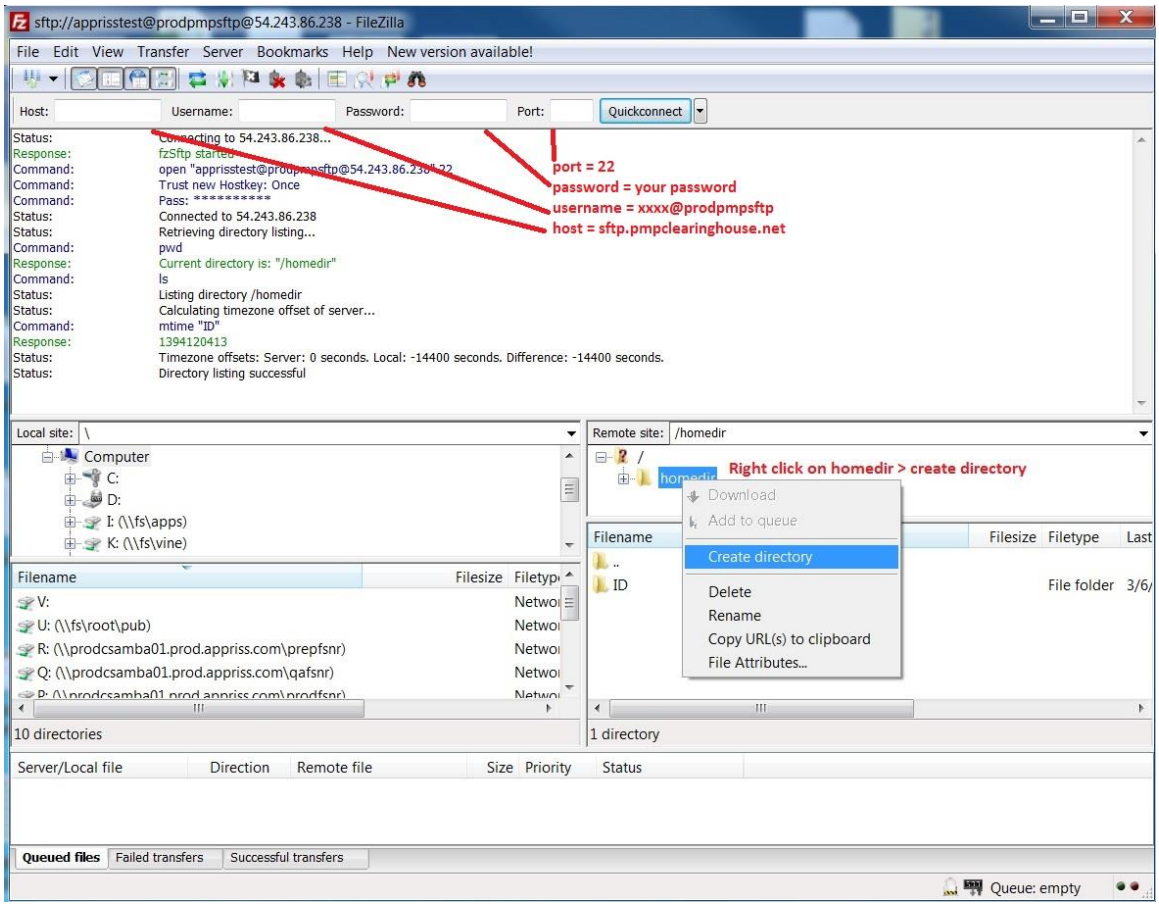
PMP Clearinghouse is the data repository for several states. As such, data submitted via SFTP must be placed in the appropriate folder for the state for which you are submitting data so that it can be properly imported to that state. The creation of subfolders must be done outside of the PMP Clearinghouse 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 state folder when submitting. You may need to contact your software vendor for additional assistance with this process.

***NOTE**: Capitalization of the abbreviated state 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 state subfolders for SFTP submissions:

1. **Via SSH client** (e.g., WinSCP, FileZilla,etc.)
   a. Log in to your SFTP account.
   b. Create the required directories under ***/homedir***.



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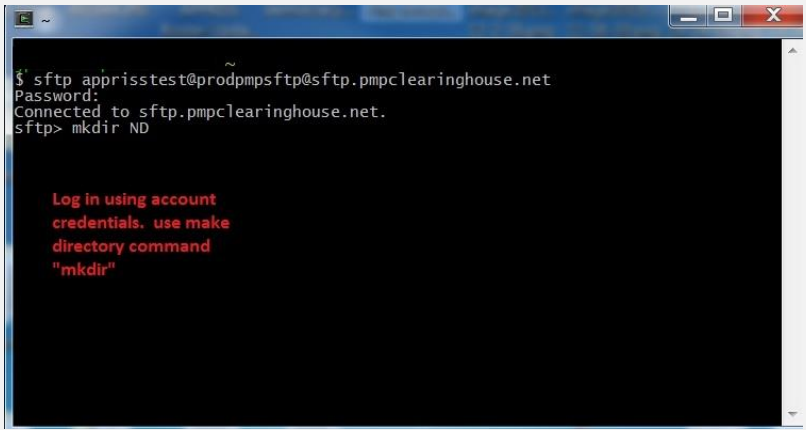
2. **Via command prompt**
   a. Log in to your SFTP account using command prompt.
   b. Type "**mkdir**" followed by a space and then the state abbreviation you are using (e.g., ***mkdir PR***).

   NOTE: *The state folder must be titled with the two-letter abbreviation as specified above.*

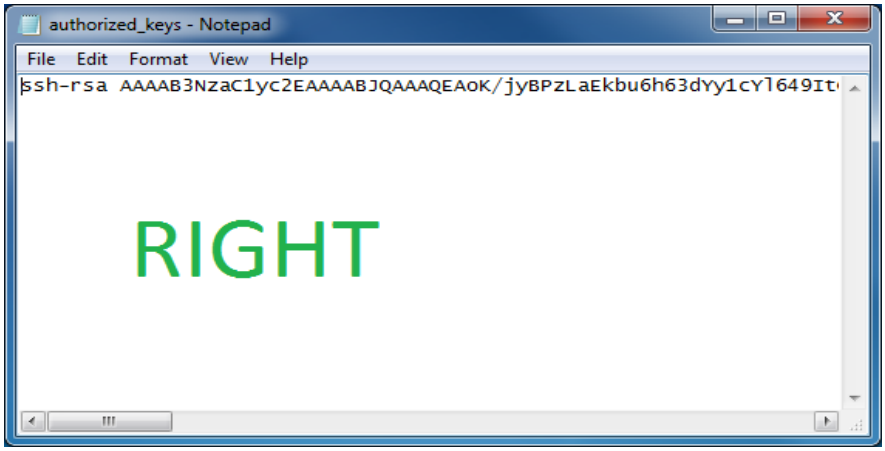


Public (SSH/RSA) Key Authentication

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.



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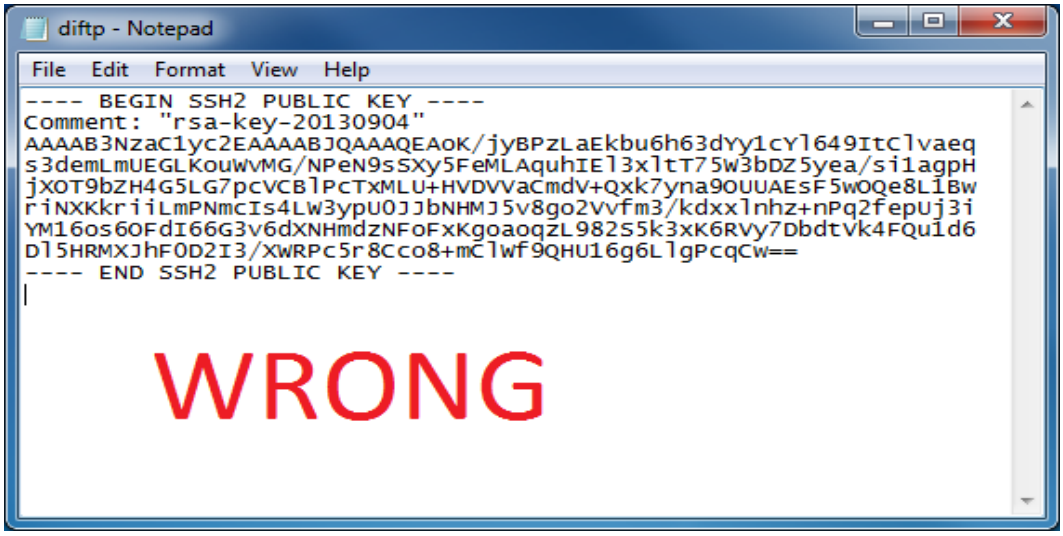
- **Incorrect Public Key Format:** If opened in a text editor, the key SHOULD NOT look like the screenshot below.



- 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 state subfolder. Please refer to State Subfolders for steps on creating subfolders.

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