Bamboo Health



Data Submission Guide for Dispensers

Indiana Prescription Monitoring Program

September 2024 Version 4.0



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I Document Overview

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

- Reporting requirements for dispensers in or into the State of Indiana
- 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 Indiana required to report the dispensing of controlled substances.

2 Data Collection and Tracking

2.1 Data Collection Overview

In accordance with Indiana Code IC 25-26-24, the Indiana Board of Pharmacy (Board) has established an electronic prescription monitoring program (PMP) for the purpose of compiling records of all scheduled controlled substances dispensed in or into Indiana.

The Indiana Scheduled Prescription Electronic Collection and Tracking (INSPECT) program collects and monitors controlled substance prescription data. All pharmacies licensed to do business in Indiana must report all controlled substance prescription data to INSPECT within twenty-four (24) hours (or next business day) from the date on which a drug is dispensed to a patient or patient's representative, or an Indiana resident (if dispensed by a non-residential pharmacy). Under certain conditions, as defined by Indiana law, that prescription information is then made available upon request to licensed healthcare practitioners and sworn law enforcement officials in the form of a patient Rx History report.

An INSPECT patient Rx History Report provides users with a summary of the gabapentin and Schedule II, III, IV, and V controlled substances a patient has been dispensed. It also lists the practitioners who have prescribed to the patient and the pharmacies that have dispensed to them. Registered INSPECT users may request Rx History Reports 24/7 from any computer with internet access. For information on how to register, please see the FAQs or visit www.inspect.in.gov.

2.2 Data Collection Requirements

All dispensers of controlled substances must meet the reporting requirements set forth by state law in a secure methodology and format. Information about controlled substance dispensing activities must be reported on regular intervals to the Indiana PMP through the authorized data collection vendor, Bamboo Health, Inc.

2.3 Reporting Requirements

Effective October 11, 2017, the Indiana PMP began requiring pharmacies and dispensers to report controlled substance dispensations to the Indiana PMP via PMP Clearinghouse. Dispensations must be reported at least within twenty-four (24) hours (or the next business day) from the date on which a drug is dispensed to an Indiana resident.

The laws and regulations for reporting to the Indiana PMP are continuously subjected to amendments; it is the responsibility of dispensers to be aware of such updates as they are enacted and promulgated.

All dispensers of Schedule II–V controlled substance prescriptions, prescription ephedrine, prescription pseudoephedrine, and gabapentin are required to collect and report their dispensing information. Such reporting without individual authorization by the patient is allowed under HIPAA, 45CFR § 164.512, paragraphs (a) and (d). The Indiana Professional Licensing Agency is a health oversight agency and Bamboo Health, Inc., acts as an agent of Indiana Professional Licensing Agency in the collection of this information.

Certain elements are required by law to be reported. For additional details on these elements and others of ASAP 4.2A, please see <u>Appendix A: ASAP 4.2A Specifications</u>.

2.4 Subsequent Reporting

Submissions of controlled substance data must occur within twenty-four (24) hours (or next business day) of the dispensation of that controlled substance. Submissions must occur daily if the facility stocks and dispenses controlled substances. Controlled substance, as used in IC 25-26-24, has the meaning set forth in IC 35-48-1-9. The term includes gabapentin.

Effective January 1, 2016, all errant records must be corrected and resubmitted within twenty- four (24) hours. All controlled substances dispensed, including zero reports, must be reported within twenty-four (24) hours (or next business day).

Note: Hospital pharmacies with zero reporting must report every 30 days.

3 Data Submission

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

3.1 Timeline and Requirements

- Pharmacies and dispensing practitioners can establish submission accounts and begin submitting data upon receipt of this guide. See <u>Creating Your Account</u> for more information.
- As of October 11, 2017, dispensers are required to transmit their data using PMP Clearinghouse in accordance with the guidelines outlined under <u>Reporting</u> Requirements.
- If a dispenser does not dispense any controlled substances for the preceding reporting period, it must file a zero report for that reporting period, or it will be considered noncompliant. See <u>Zero Reports</u> for additional details.

3.2 Upload Specifications

Files should be in the ASAP 4.2A format, which was released in October 2016, 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 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.

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

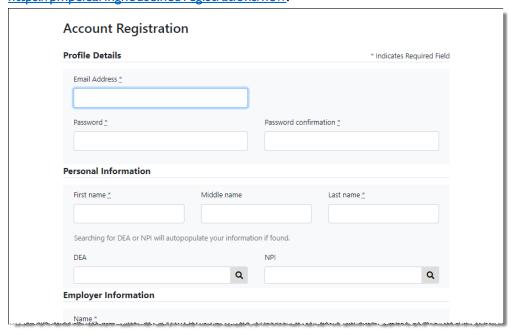
Prior to submitting data, you must create an account. If you are currently registered with the Bamboo Health PMP Clearinghouse system, you do not need to register for a new account—you will be able to add Indiana to your existing account for data submissions. If you have an existing PMP Clearinghouse 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 Indiana. 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 <u>Managing Your Upload Account</u>.

Perform the following steps to create an account:

 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**.

| Profile Details | * Indicates Required Field |
|-------------------|----------------------------|
| Email Address ** | |
| | |
| Password <u>*</u> | Password confirmation :: |
| | |
| | |

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.

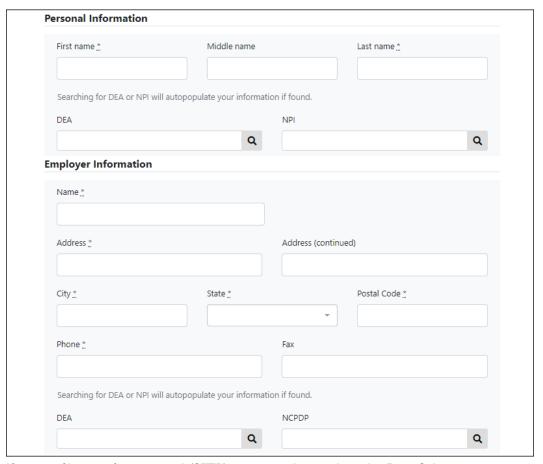
b. Enter a password for your account in the **Password** field, then re-enter it in the **Password Confirmation** field. The password requirements are provided below.

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 an 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,

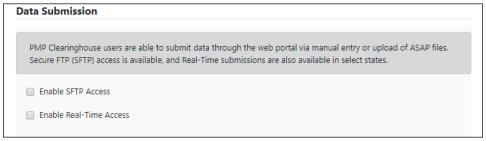
then clicking the search icon ($^{\mathbf{Q}}$). If the number you entered is found, your information will automatically be populated.



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

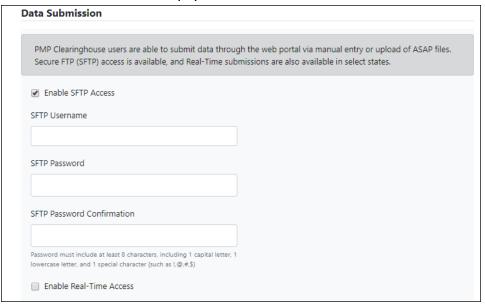
Notes:

- 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 <u>Adding SFTP Access to an Upload Account</u> 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 "555-555-555" 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 reenter it in the **SFTP Password Confirmation** field. The password requirements are provided below.

Passwords must contain:

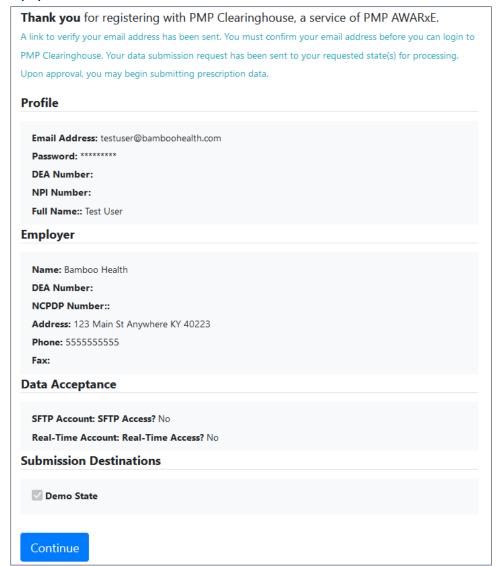
- At least eight (8) characters
- One (1) uppercase letter
- One (1) lowercase letter
- One (1) number
- One (1) special character, such as !, @, #, \$, etc.

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 <u>submissions.healthcarecoordination.net/</u>.
- Additional details on SFTP configuration can be found in <u>Appendix C: SFTP</u> <u>Configuration</u>.
- 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.

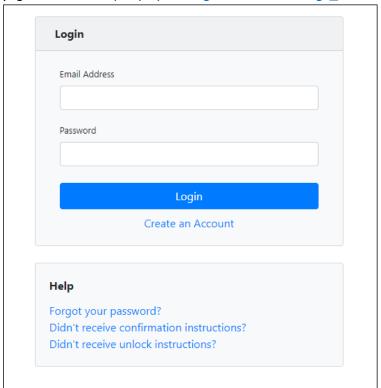


7. Click Continue.

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

4.2 Logging In to PMP Clearinghouse

I. 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 stepby-step instructions for your chosen data delivery method:

| Delivery Method | Page |
|--------------------|------|
| Secure FTP | П |
| Web Portal Upload | П |
| Manual Entry (UCF) | 13 |
| Zero Reports | 16 |

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., IN, DC, GA, GU, IN, PR, etc.). Data files not submitted to a PMP subfolder will be required to have a manual PMP assignment made on the <u>File Listings</u> page. Please refer to <u>PMP Subfolders</u> for additional details on this process.

If you do not have a PMP Clearinghouse account, perform the steps in <u>Creating Your Account</u>.

Or

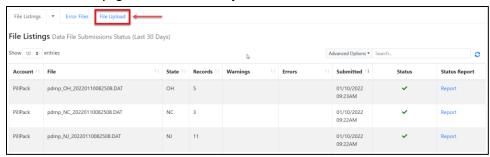
- 2. If you have a PMP Clearinghouse account but have not enabled SFTP access, perform the steps in Adding SFTP Access to an Upload Account.
- 3. Prepare the data file(s) for submission, using the ASAP specifications described in Appendix A: ASAP 4.2A Specifications.
- 4. SFTP the file to <u>submissions.healthcarecoordination.net/</u>.
- 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 symbol 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.

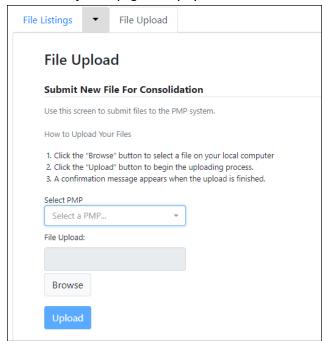
5.2 Web Portal Upload

- 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.

- 3. Log in to PMP Clearinghouse.
- 4. From the home page, click the File Upload tab.

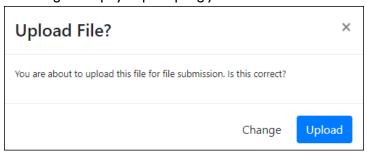


The File Upload page is displayed.



- 5. Select the PMP to which you are submitting the file from the drop-down list in the **Select 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 Listings page.

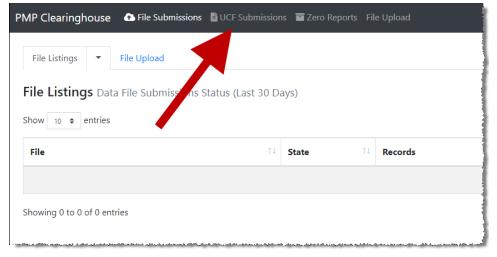
Note: When uploading a file, the file name must be unique. If the file name is not unique, a message is displayed indicating that the file name has already been taken.

5.3 Manual Entry (UCF)

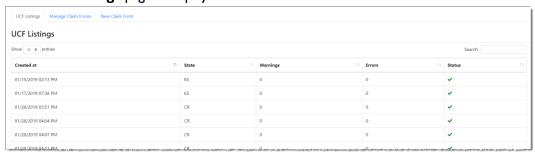
You can manually enter your prescription information into the PMP Clearinghouse system using the Universal Claim Form (UCF) within the PMP Clearinghouse web portal. This form allows you to enter patient, prescriber, dispenser, and prescription information.

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

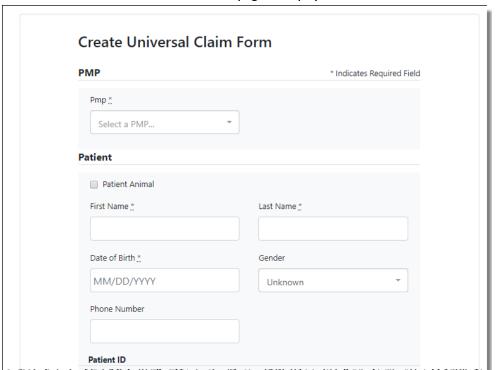
- 1. If you do not have an account, perform the steps in Creating Your Account.
- 2. Log in to PMP Clearinghouse.
- 3. Click UCF Submissions.



The **UCF** Listings page is displayed.



- 4. Click the **New Claim Form** tab, located at the top of the page.
- 5. Select the PMP to which you are submitting data from the drop-down list in the Select PMP field.

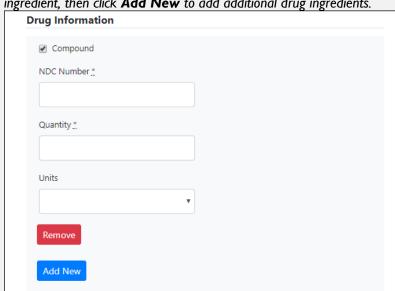


The Create Universal Claim Form page is displayed.

6. Complete the required fields.

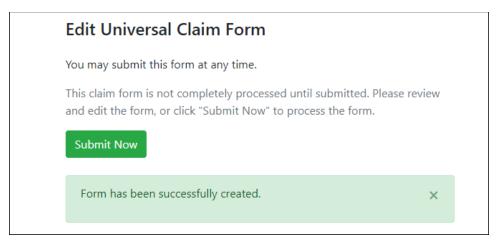
Notes:

- 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.



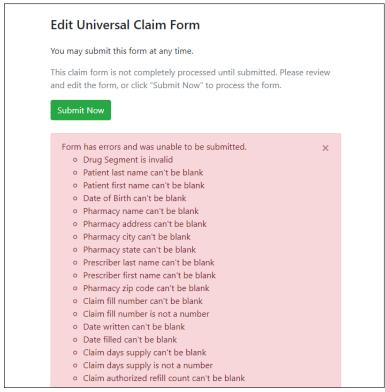
8. Click **Submit Now** to continue with the data submission process.

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



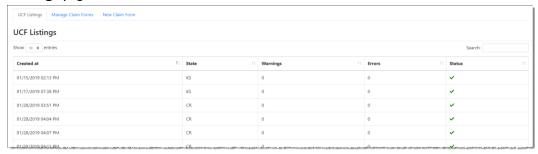
9. Click OK.

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 for the preceding reporting period, you must report this information to the Indiana 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:

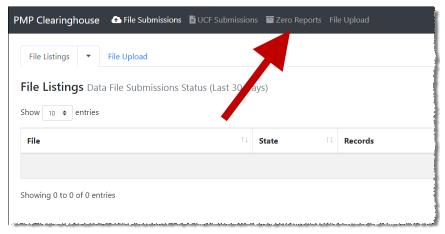
- Submit a single-click zero report
- Create a new zero report

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**.



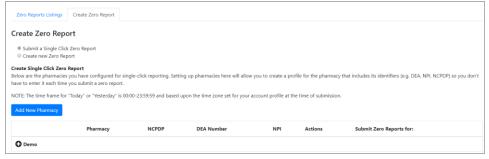
The Zero Report Listings page is displayed.



4. Click the Create Zero Report tab.

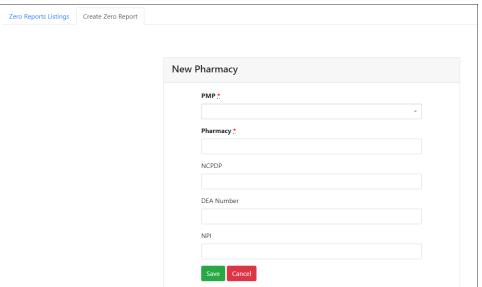
The Create Zero Report page is displayed.

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 <u>step 10</u> 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.

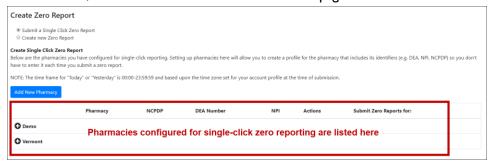


- 6. Select the PMP for which you are submitting a zero report from the drop-down list in the **PMP** field.
- 7. Enter the pharmacy's name in the **Pharmacy** field.
- 8. Populate the **NCPDP**, **DEA Number**, and/or **NPI** fields as required by the PMP you selected in step 6. If any of these fields are required, a red asterisk (*) will be displayed next to that field once you have selected a PMP.

Note: Reporting under the DEA Number is preferred, when applicable.

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: This page allows you to submit a zero report for the current date (**Today**) or the previous day (**Yesterday**).



- 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.

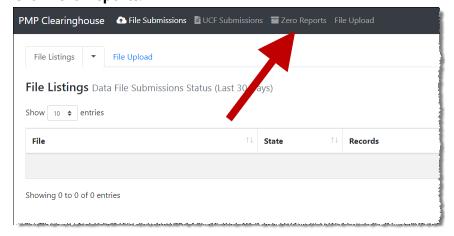


Note: You may edit or delete a pharmacy from this page.

- 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.



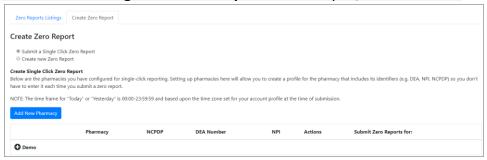
The **Zero Report Listings** page is displayed.



4. Click the Create Zero Report tab.

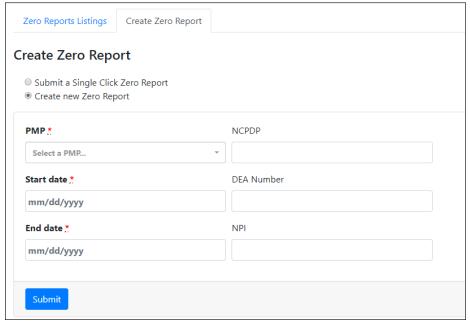
The Create Zero Report page is displayed.

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

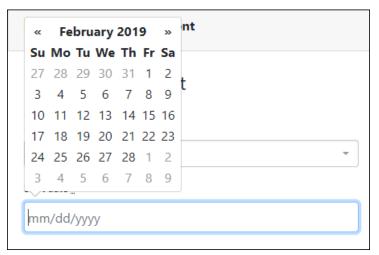


5. Click the button to select **Create new Zero Report**.

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 **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, if required by your PMP.

Note: If any of these fields are required by your state's 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.

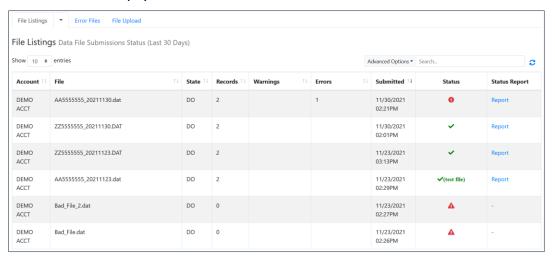
6 Data Compliance

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. The File Listings page is displayed upon logging in to Clearinghouse; you may also click **File Submissions** from the menu at any time to access this page.

You may sort the File Listings page by account name, file name, PMP, number of records, warning count, error count, and date submitted. You may also click the account name to display the account details.

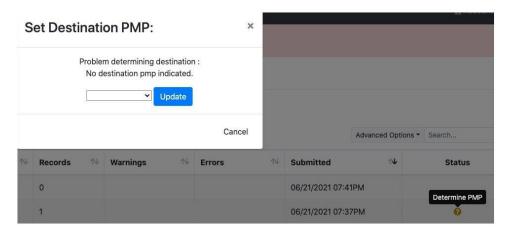


- The **Status** column, located at the end of each row, displays the file status via color-coded icon. Hovering over the icon will display the status message.
- The Status Report column, located next to the Status column, contains a link to
 the status report for that file. Please refer to <u>File Status Report</u> 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.



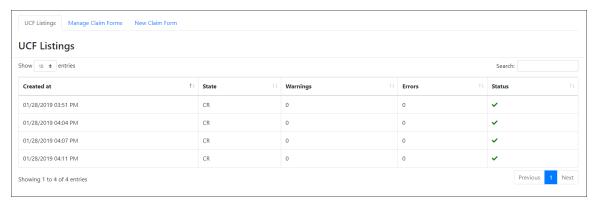
If you submitted a zero report via file upload or SFTP that is malformed or missing information, the file will be displayed, and an exclamation mark icon inside a red triangle will be displayed in the status column. Hovering over the icon will display the "Invalid Zero Report" error. Clicking on the 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.

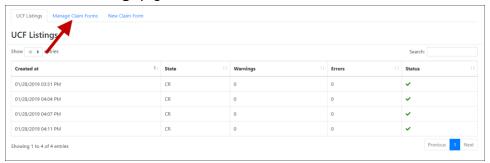
You may sort the **UCF Listings** page date created, PMP, warning count, error count, and status.



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 (I) year to make updates to these records in Clearinghouse.

1. To view pending or incomplete submissions, click the **Manage Claim Forms** tab on the **UCF Listings** page.



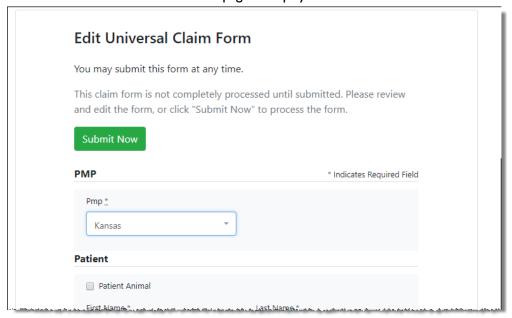
The **Pending Claim Forms** page is displayed.



2. Click **Edit** next to the form you wish to update.

Note: If it has been longer than I 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.



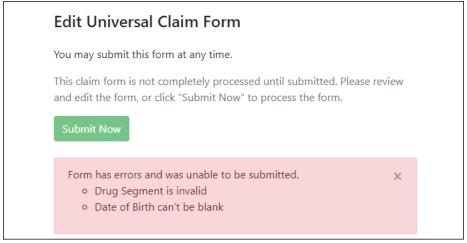
3. Make the necessary corrections or changes, and then click **Submit Now**, located at the top of the page.

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



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 with Errors

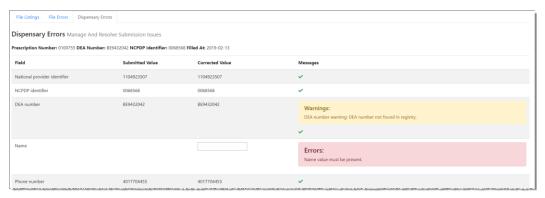
The **Error Correction** page displays more information about the records within a selected data file that need correcting, including **Prescription Number**, **Segment Type**, **Warning Count**, and **Error Count**. To access this page, click the "**Pending Dispensation Error**" message in the **Status**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



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

- I. 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 previouslysubmitted record have been revised
- **02 Void** indicates that the original record should be removed

To revise a record:

- 1. Create a record with the value 01 in the **DSP01** field.
- 2. Populate the following fields with the same information originally submitted in the erroneous record:
 - Dispensary identifier (e.g., DEA number)
 - Prescription number (DSP02)
 - Date filled (DSP05)
 - Refill number (DSP06)
 - Quantity (DSP09)
 - Partial Fill (DSP13)

Note: If you need to revise any of the fields listed above, you must delete the original record and submit a new one with the correct information. Otherwise, a duplicate record will be created.

- 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.

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: Indiana 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 serves 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 | II (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) |
| Туре | 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: Indiana ASAP file: fake-test3.txt - Status Report | | | | | | | | |
|---|--|--|------------------------------------|--------|---------------------------|------------------------------|------------------|------------------------------------|
| BODY: DEA | NCPDP | NPI | Prescription | Filled | Segment | Field | Туре | Message |
| | | | 123486379596-0 357199504833-345 | | Dispensation Dispensation | refill_number days_supply | WARNING ERROR | message example message example |
| * Transactio | ion: 4.2A n Control n Control abmission: ord Count: Records: # Count: ## | Number: 234 Type: send January 30, 2 ### ### Euunt: ### | | | | | | |

* Records Imported with Warning Count: ###

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: Indiana

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

* Submission Date: 2022-03-07 * ASAP Creation Date: 2022-03-07

8 Managing Your Upload Account

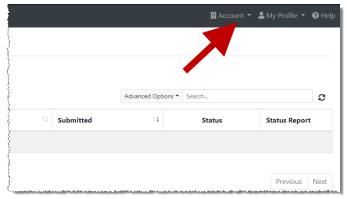
The **Account** menu option allows you to manage the information associated with your organization's upload account, including adding users, PMPs, and SFTP access to your account as well as editing your organization's account information.

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 <u>Managing Your User Profile</u>.

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.

- I. Log in to PMP Clearinghouse.
- 2. Click Account.

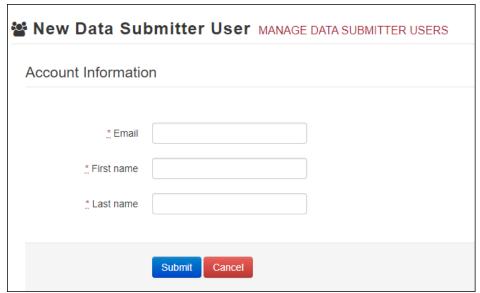


3. Select **Users** from the **Account** drop-down menu. The **Account Users** page is displayed.



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: All fields are required.

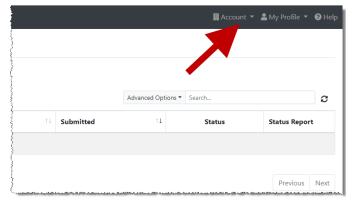
6. Click Submit.

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.

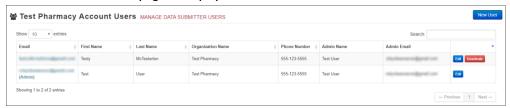
8.1.1 Changing Another User's Password

- 5. Log in to PMP Clearinghouse.
- 6. Click Account.



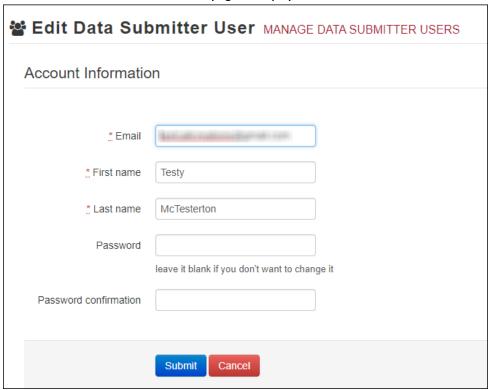
7. Select **Users** from the **Account** drop-down menu.

The **Account Users** page is displayed.



8. Click the **Edit** button, located to the right of the user's information.

The Edit Data Submitter User page is displayed.



 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:

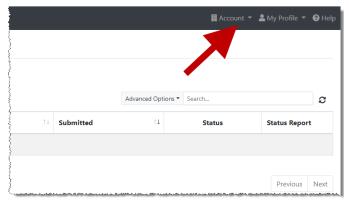
- At least eight (8) characters
- One (1) uppercase letter
- One (1) lowercase letter
- One (1) number
 - One (1) special character, such as !, @, #, \$, etc.
- 10. Click **Submit**.

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.

- I. 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.

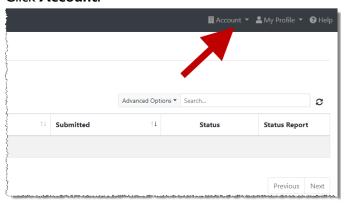
Notes:

- 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.

- I. 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.

| SFTP Accoun | t CREATE A NEW SFTP ACCOUNT |
|-----------------------|-------------------------------|
| Name | Hearness of the CETD account |
| Password | Username of the SFTP account. |
| Password confirmation | |
| | |
| | Create Cancel |

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:

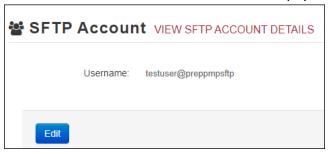
- At least eight (8) characters
- One (1) uppercase letter
- One (1) lowercase letter
- One (1) number
- One (1) special character, such as !, @, #, \$, etc.

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 <u>submissions.healthcarecoordination.net/</u>.
- Additional details on SFTP configuration can be found in <u>Appendix C: SFTP</u> Configuration.
- 7. Click Create.

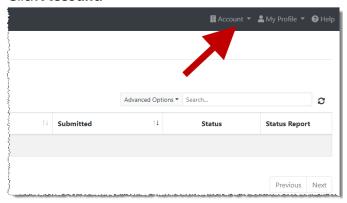
The account is created, and the username is displayed.



8.4 Editing Your Upload Account

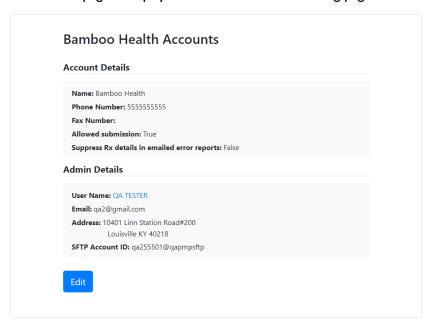
Note: This function only allows you to edit your organization's upload account. If you need to edit your individual profile information, please refer to <u>Editing Your Profile</u>.

- I. Log in to PMP Clearinghouse.
- 2. Click Account.



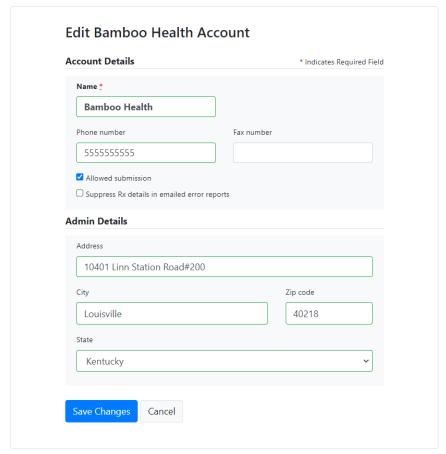
3. Select Account Details.

The Account page is displayed as shown on the following page.



4. Click Edit.

The Edit Account page is displayed.



5. Update the information as necessary, then click **Save Changes**. The account information is updated.

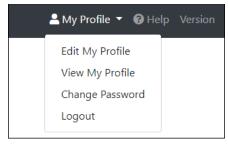
9 Managing Your User Profile

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 <u>Managing Your Upload Account</u>.

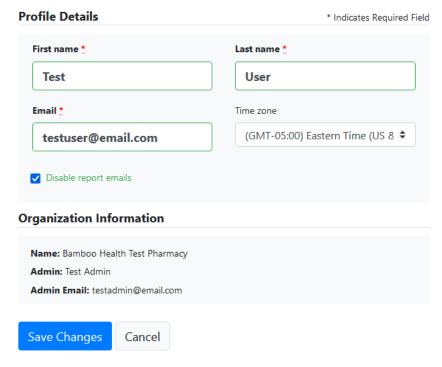
9.1 Editing Your Profile

- I. Log in to PMP Clearinghouse.
- 2. Click My Profile.



3. Select Edit My Profile.

Edit Profile



4. Update your information as necessary, then click **Save Changes**.

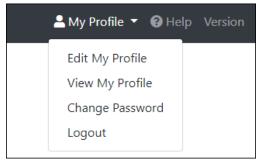
Note: This function only allows you to edit your individual profile information. If you need to edit the Organization Information, please refer to <u>Editing Your Upload Account</u>.

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

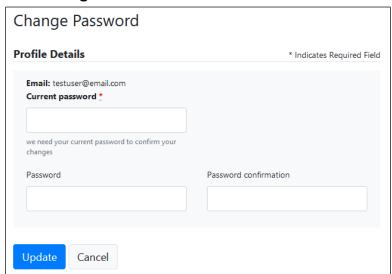
9.2 Changing Your Password

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 <u>Resetting Your Password</u> for more information.

- I. 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:

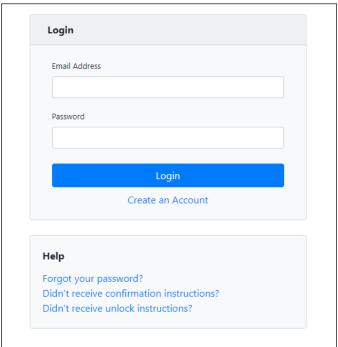
- At least eight (8) characters
- One (1) uppercase letter
- One (1) lowercase letter
- One (1) number
- One (1) special character, such as !, @, #, \$, etc.
- 6. Click Update.

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

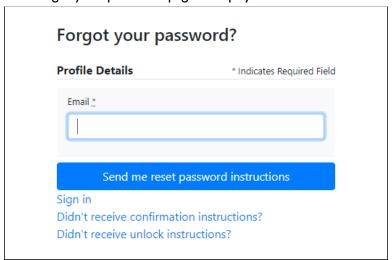
9.3 Resetting Your Password

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

I. 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.

| Change your password | | | | | |
|--|--------------------|--|--|--|--|
| .*. New password .*. Confirm your new password | | | | | |
| | Change my password | | | | |

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.

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 at 1-844-446-4767;

OR

- Create a support request at the following URL: https://pmpclearinghouse.zendesk.com/hc/en-us/
- Technical assistance is available 24 hours per day, 7 days per week, 365 days per year.

10.2 Administrative Assistance

If you need additional help with INSPECT policy, please contact INSPECT at:

(317) 234-5808;

OR

inspect@pla.in.gov

Assistance is available on weekdays from 8:00 a.m. to 4:30 p.m.

II 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 |
|---------|------------|---|---|
| 1.0 | 07/24/2017 | N/A | N/A; initial publication |
| 1.1 | 08/16/2017 | Technical Assistance | Updated availability |
| 1.2 | 10/09/2017 | Administrative Assistance | Updated contact information |
| 2.0 | 02/11/2020 | Global | Updated to current document template |
| | | | Updated screenshots to reflect updated user interface (note that this is only a cosmetic change; no functionality changes are included) |
| | | 5.4/Zero Reports | Separated into two sections (Submit a Single-Click Zero Report and Create a New Zero Report) to reflect the addition of the single-click zero report submission functionality |
| | | 5.4.1/Submit a Single- Click Zero Report | Added new section with instructions for submitting a single-click zero report |
| | | 6.2/UCF Listings | Added clarification on correcting UCF errors |
| 3.0 | 03/09/2022 | Global | Updated guide to reflect Bamboo Health branding |
| 4.0 | 02/02/2024 | Global | Updated guide to reflect the move from ASAP 4.1 to ASAP 4.2A reporting requirements |
| | | Global | Updated SFTP host name information |
| | | 6.2/UCF Listings | Updated time to edit/delete UCF submissions |
| | | 6.3.3/Error Correction via File Submission | Added new section |

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) format to comply with the Idaho PMP requirements. The definitions contain a mix of fields required by ASAP and additional requirements established by the Idaho PMP.

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
 - N = Not required
 - 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 | Element Name | Requirement |
|--------------|-------------|--|----------------|
| | ID | | |
| TH: Transa | ction Heade | er (required) | |
| | | of a transaction. It also assigns the data element separator, segment to | erminator, and |
| control numb | oer. | | I |
| | TH01 | Version/Release Number | R |
| | | Code uniquely identifying the transaction. | |
| | | Format = x.xx | |
| | TH02 | Transaction Control Number | R |
| | | Sender assigned code uniquely identifying a transaction. | |
| | TH03 | Transaction Type | R |
| | | 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) | |
| | TH04 | Response ID | S |
| | | Contains the Transaction Control Number of a transaction that | |
| | | initiated the transaction. Required in response transaction only. | |
| | TH05 | Creation Date | R |
| | | Date the transaction was created. | |
| | | Format: CCYYMMDD. | |
| | TH06 | Creation Time | R |
| | | Time the transaction was created. | |
| | | Format: HHMMSS or HHMM. | |
| | TH07 | File Type | R |
| | | P = Production | |
| | | • T = Test | |
| | TH08 | Routing Number | S |
| | | 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. | |
| | TH09 | Segment Terminator Character | R |
| | | This terminates the TH segment and sets the actual value of the | |
| | | data segment terminator for the entire transaction. | |
| | ion Source | ` • • | |
| Jsed to conv | ey the name | and identification numbers of the entity supplying the information. | T |
| | IS01 | Unique Information Source ID | R |
| | | Reference number or identification number. | |
| | | (Example: phone number) | |
| | IS02 | Information Source Entity Name | R |
| | | Entity name of the Information Source. | |
| | IS03 | Message | S |
| | | Free-form text message. | |

| Segment | Element | Element Name | Requirement |
|--------------------------------|-----------------|--|-------------|
| | ID | | |
| PHA: Pharr | macy Heade | r (required) | |
| Used to iden | itify the pharm | nacy. | |
| Note: It is r PHA03. | equired that i | nformation be provided in at least one of the following fields: PHA01, | PHA02, or |
| | PHA01 | National Provider Identifier (NPI) | S |
| | | Identifier assigned to the pharmacy by CMS. | |
| | PHA02 | NCPDP Provider ID | S |
| | | Identifier assigned to pharmacy by the National Council for Prescription Drug Programs. | |
| | PHA03 | DEA Number | R |
| | | Identifier assigned to the pharmacy by the Drug Enforcement Administration. | |
| | PHA04 | Pharmacy Name | S |
| | | Free-form name of the pharmacy or dispensing practitioner. | |
| | PHA05 | Address Information - I | S |
| | | Free-form text for address information. | |
| | PHA06 | Address Information – 2 | S |
| | | Free-form text for address information, if needed. | |
| | PHA07 | City Address | S |
| | | Free-form text for city name. | |
| | PHA08 | State Address | S |
| | | U.S. Postal Service state code. | |
| | PHA09 | ZIP Code Address | S |
| | | U.S. Postal Service ZIP Code. | |
| | PHA10 | Phone Number | S |
| | | Complete phone number including area code. Do not include hyphens. | |
| | PHAII | Contact Name | S |
| | | Free-form name. | |
| | PHA12 | Chain Site ID | S |
| | | 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. | |
| | PHA13 | Pharmacy's Permit Number/License Number | R |
| | | Helps identify the sending pharmacy. | |
| PAT: Patie | nt Informati | on (required) | |
| Used to repo | ort the patient | t's name and basic information as contained in the pharmacy record. | |
| | PAT01 | ID Qualifier of Patient Identifier | S |
| | | Code identifying the jurisdiction that issues the ID in PAT03. | |

| Segment | Element | Element Name | Requirement |
|---------|-------------|--|-------------|
| | ID | | Togam ement |
| | PAT02 | ID Qualifier | S |
| | | 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 | |
| | | 05 Passport ID | |
| | | 06 Driver's License ID | |
| | | 07 Social Security Number | |
| | | 08 Tribal ID | |
| | | 99 Other (agreed upon ID) | |
| | PAT03 | ID of Patient | S |
| | | Identification number for the patient as indicated in PAT02. | |
| | | An example would be the driver's license number. | |
| | PAT04 | ID Qualifier of Additional Patient Identifier | S |
| | | Code identifying the jurisdiction that issues the ID in PAT06. | |
| | | Used if the PMP requires such identification. | |
| | PAT05 | Additional Patient ID Qualifier | S |
| | | 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 | |
| | | 07 Social Security Number | |
| | | 08 Tribal ID | |
| | | 99 Other (agreed upon ID) | |
| | PAT06 | Additional ID | S |
| | | 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. | _ |
| | PAT07 | Last Name | R |
| | | Patient's last name. | |
| | D.A. T.O.O. | Note: Owner's last name for animal prescriptions. | |
| | PAT08 | First Name | R |
| | | Patient's first name. | |
| | DATOS | Note: Owner's first name for animal prescriptions. | |
| | PAT09 | Middle Name | S |
| | | Patient's middle name or initial if available. | |
| | PAT10 | Name Prefix | S |
| | | Patient's name prefix such as Mr. or Dr., if available. | |

| Segment | Element ID | Element Name | Requirement |
|---------|------------|---|-------------|
| | PATII | Name Suffix | S |
| | | Patient's name suffix such as Jr. or the III, if available. | |
| | PAT12 | Address Information – I | R |
| | | Free-form text for street address information. | |
| | PAT13 | Address Information – 2 | S |
| | | Free-form text for additional address information. | |
| | PAT14 | City Address | R |
| | | Free-form text for city name. | |
| | PAT15 | State Address | R |
| | | U.S. Postal Service state code or other regional jurisdiction code. | |
| | PAT16 | ZIP Code Address | R |
| | | Postal code. | |
| | | Populate with zeros if patient address is outside the U.S. | |
| | PAT17 | Phone Number | S |
| | | Complete phone number including area code. Do not include hyphens. | |
| | PAT18 | Date of Birth | R |
| | | Date patient was born. | |
| | | Note: Owner's DOB for animal prescriptions. | |
| | | Format: CCYYMMDD | |
| | PAT19 | Gender Code | R |
| | | Code indicating the sex of the patient. | |
| | | F Female | |
| | | M Male | |
| | | U Unknown | |
| | PAT20 | Species Code | R |
| | | Used if required by the PMP to differentiate a prescription for an | |
| | | individual from one prescribed for an animal. | |
| | | • 01 Human | |
| | | 02 Veterinary Patient | |

| Segment | Element | Element Name | Requirement |
|--------------|-----------------|--|-------------|
| | ID | | |
| | PAT21 | Patient Location Code | S |
| | | 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 | |
| | | Il Hospice | |
| | | 98 Unknown | |
| | | • 99 Other | |
| | PAT22 | Country of Non-U.S. Resident | S |
| | | Used when the patient's address is a foreign country and PAT12 | |
| | | through PATI6 are left blank. | |
| | PAT23 | Name of Animal | R |
| | | Required by the PMP for prescriptions written by a veterinarian. | |
| DSP: Dispe | ensing Recor | rd (required) | |
| Used to iden | ntify the basic | components of a dispensing of a given prescription order including the | e date and |
| quantity. | | | |
| | DSP01 | | |
| | | Reporting Status | R |
| | | DSP01 requires one of the following codes, and an empty or blank | R |
| | | DSP01 requires one of the following codes, and an empty or blank field no longer indicates a new prescription transaction: | R |
| | | DSP01 requires one of the following codes, and an empty or blank | R |
| | | 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 | R |
| | | 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 | R |
| | DSP02 | 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 | 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 | |
| | DSP02 | 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). Prescription Number | |
| | | 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). Prescription Number Serial number assigned to the prescription by the pharmacy. Date Written | R |
| | | 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). Prescription Number Serial number assigned to the prescription by the pharmacy. | R |
| | | 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). Prescription Number Serial number assigned to the prescription by the pharmacy. Date Written Date the prescription was written (authorized). | R |

| Segment | Element | Element Name | Requirement |
|---------|---------|--|-------------|
| | ID | | |
| | DSP05 | Date Filled | R |
| | | Date prescription was filled. | |
| | | Format: CCYYMMDD | |
| | DSP06 | Refill Number | R |
| | | Number of the fill of the prescription. | |
| | | 0 indicates New Rx; 01-99 indicates any additional fills after the original fill. | |
| | DSP07 | Product ID Qualifier | R |
| | | 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) | |
| | DSP08 | Product ID | R |
| | | Full II-digit NDC number as indicated in DSP07, including leading zeros in the appropriate segment to create a 5-4-2 format, without punctuation. If "06 Compound" is indicated in DSP07, use 99999 as the first five characters and another 6 digits as appropriate; the CDI segment then becomes required. | |
| | DSP09 | Quantity Dispensed | R |
| | | Number of metric units dispensed in metric decimal format. | |
| | | Example: 2.5 | |
| | | Note: For compounds, show the first quantity in CDI04. | |
| | DSP10 | Days' Supply | R |
| | | Estimated number of days the medication will last. | |
| | DSPII | Drug Dosage Units Code | R |
| | | Identifies the unit of measure for the quantity dispensed in DSP09. | |
| | | • 01 Each | |
| | | • 02 Milliliters (ml) | |
| | | 03 Grams (gm) | |
| | DSP12 | Transmission Form of Rx Origin Code | S |
| | | Code indicating how the pharmacy received the prescription. | |
| | | • 01 Written Prescription | |
| | | 02 Telephone Prescription 03 Telephone Prescription | |
| | | 03 Telephone Emergency Prescription | |
| | | 04 Fax Prescription 05 Florestic Prescription | |
| | | 05 Electronic Prescription | |
| | | • 99 Other | |

| Segment | Element | Element Name | Requirement |
|---------|---------|--|-------------|
| | ID | | |
| | DSP13 | Partial Fill Indicator Used when the quantity in DSP09 is less than the metric quantity per dispensing authorized by the prescriber. This dispensing activity is often referred to as split filling. o 00 Each olimits I 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 |
| | 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). Ol Private Pay Ol Medicaid Ol Medicare Ol Commercial Insurance Ol Military Installations and VA Ol Workers' Compensation Ol Indian Nations 99 Other | R |
| | 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 | S |
| | DSP18 | RxNorm Code Qualifier RxNorm Code that is populated in the DRU-010-09 field in the SCRIPT transaction. 01 Semantic Clinical Drug (SCD) 02 Semantic Branded Drug (SBD) 03 Generic Package (GPCK) 04 Branded Package (BPCK) | o o |
| | D3F17 | Used for electronic prescriptions to capture the prescribed drug product identification. | 3 |
| | DSP20 | Electronic Prescription Reference Number This field should be populated with the Initiator Reference Number from field UIB-030-01 in the SCRIPT transaction. | S |

| Segment | Element | Element Name | Requirement |
|--------------|-----------------|---|-------------|
| | ID | | |
| | DSP21 | Electronic Prescription Order Number | S |
| | | This field should be populated with the Initiator Control Reference from field UIH-030-01 in the SCRIPT standard. | |
| | DSP22 | Quantity Dispensed | S |
| | | This field adds clarity to the value reported in DSP13, Partial Fill Indicator. | |
| | DSP23 | Rx SIG | S |
| | | This field captures the actual directions printed on the prescription vial label. If the directions exceed 200 characters, truncation would be allowed. | |
| | DSP24 | Treatment Type | S |
| | | This field indicates that the prescription was for opioid dependency treatment when Code 02 is used. | |
| | | 01 = Not used for opioid dependency treatment | |
| | | 02 = Used for opioid dependency treatment | |
| | DSP25 | Diagnosis Code | S |
| | | This field is used to report the ICD-10 code. If required by a PDMP, this field would be populated only when the ICD-10 code is included with the prescription. | |
| PRE: Presci | riber Inform | ation (required) | |
| Used to iden | tify the presci | riber of the prescription. | |
| | PRE01 | National Provider Identifier (NPI) | S |
| | | Identifier assigned to the prescriber by CMS. | |
| | PRE02 | DEA Number | R |
| | | Identifying number assigned to a prescriber or an institution by the Drug Enforcement Administration (DEA). | |
| | PRE03 | DEA Number Suffix | S |
| | | Identifying number assigned to a prescriber by an institution when the institution's number is used as the DEA number. | |
| | PRE04 | Prescriber State License Number | S |
| | | Identification assigned to the prescriber by the State Licensing Board. | |
| | PRE05 | Last Name | R |
| | | Prescriber's last name. | |
| | PRE06 | First Name | R |
| | | Prescriber's first name. | |
| | PRE07 | Middle Name Prescriber's middle name or initial. | S |
| | PRE08 | Phone Number | S |
| | | Complete phone number including area code. Do not include hyphens. | |

| Segment | Element ID | Element Name | Requirement |
|---------|------------|---|-------------|
| | PRE09 | This field is in addition to Treatment Type in the DSP segment. This gives PDMPs the option to require the XDEA Number (NADEAN) in the PRE segment. | 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.

| CDI01 | Compound Drug Ingredient Sequence Number First reportable ingredient is 1; each additional reportable ingredient is incremented by 1. | N |
|-------|--|--|
| CDI02 | Product ID Qualifier Code to identify the type of product ID contained in CDI03. • 01 NDC | N |
| CD103 | Product ID Full 11-digit NDC number as indicated in CDI02, including leading zeros in the appropriate segment to create a 5-4-2 format, without punctuation. | R |
| CDI04 | Compound Ingredient Quantity Metric decimal quantity of the ingredient identified in CDI03. Example: 2.5 | R |
| CD105 | Compound Drug Dosage Units Code Identifies the unit of measure for the quantity dispensed in CDI04. OI Each (used to report as package) O2 Milliliters (ml) (for liters, adjust to the decimal milliliter equivalent) O3 Grams (gm) (for milligrams, adjust to the decimal gram equivalent) | Required for compound prescription |

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 | S |
|-------|--|---|
| | U.S.P.S. state code of state that issued serialized prescription blank. This is required if AIR02 is used. | |
| AIR02 | State Issued Rx Serial Number | S |
| | Number assigned to state issued serialized prescription blank. | |
| AIR03 | Issuing Jurisdiction | S |
| | Code identifying the jurisdiction that issues the ID in AIR04. Used if required by the PMP and AIR04 is equal to 02 or 06. | |

| Segment | Element | Element Name | Requirement |
|---------|----------------|---|-------------|
| | ID | | · · |
| | 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. Ol Military ID Ole State Issued ID Ole Permanent Resident Card (Green Card) Ole Passport ID | S |
| | | 06 Driver's License ID 07 Social Security Number 08 Tribal ID | |
| | AIR05 | ID of Person Dropping Off or Picking Up Rx ID number of patient or person picking up or dropping off the prescription. Note: Required for Indiana retail pharmacies under IC 25-26-24-17(B) | S |
| | AIR06 | Relationship of Person Dropping Off or Picking Up Rx Code indicating the relationship of the person. 1 Patient 2 Parent/Legal Guardian 3 Spouse 4 Caregiver 99 Other | S |
| | 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 |
| | AIRII | 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 | R |
| | tify the end o | | r of detail |
| JF | TP0I | Detail Segment Count Number of detail segments included for the pharmacy including the pharmacy header (PHA) and the pharmacy trailer (TP) segments. | R |

| Segment | Element ID | Element Name | Requirement |
|--|--------------|--|-------------|
| TT: Transac | tion Trailer | (required) | |
| Used to indicate the end of the transaction and provide the count of the total number of segments included in the transaction. | | | |
| | ТТОІ | 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 IN 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.

The Requirement column uses the following values:

- R = Required by ASAP
- N = Not Required by ASAP

| • | 140t Require | , | | | |
|------------------------------------|-----------------------------------|--|-------------|--|--|
| Segment | Element ID | Element Name | Requirement | | |
| TH: Transa | TH: Transaction Header (required) | | | | |
| | TH01 | Version/Release Number: 4.2A | R | | |
| | TH02 | 123456 | R | | |
| | TH05 | 20220101 | R | | |
| | TH06 | 223000 | R | | |
| | TH07 | P | R | | |
| | TH08 | Routing Number | N | | |
| | TH09 | | R | | |
| IS: Informa | tion Source (red | quired) | • | | |
| | IS01 | 770555555 | R | | |
| | IS02 | PHARMACY NAME | R | | |
| | IS03 | Date Range of Report #CCYYMMDD#-#CCYYMMDD# | R | | |
| PHA: Phar | macy Header (re | equired) | | | |
| | PHA02 | NABP Number | N | | |
| PAT: Patie | nt Information (| required) | | | |
| | PAT07 | REPORT | R | | |
| | PAT08 | ZERO | R | | |
| DSP: Dispe | DSP: Dispensing Record (required) | | | | |
| | DSP05 | 20220101 | R | | |
| PRE: Presc | riber Informatio | n (required; can be null as follows: PRE******\) | | | |
| CDI: Comp | oound Drug Ingr | edient Detail | | | |
| AIR: Addit | ional Informatio | n Reporting | | | |
| TP: Pharm | acy Trailer (req | uired) | | | |
| | 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*77055555555*PHARMACY NAME*#20220101#-#20220107#\
PHA*** ZZ1234567\
PAT******REPORT*ZERO*********
DSP****20220108******\
PRE*\
CDI*\
AIR*\
TP*7\
TT*123456*10\
```

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 <u>Creating Your Account</u>. 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: 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, <u>log in to PMP Clearinghouse</u>, 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

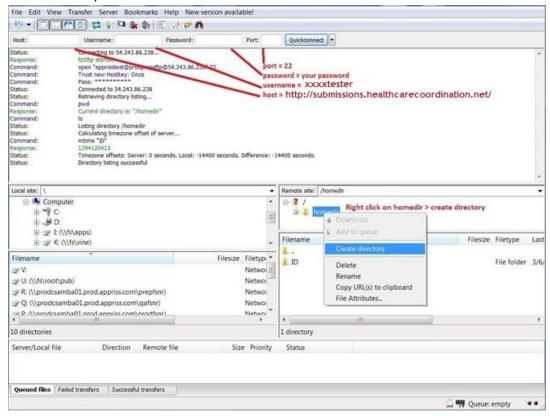
PMP Clearinghouse is the data repository for numerous PMPs. As such, data submitted via SFTP must be placed in the appropriate folder for the PMP for which you are submitting data so that it can be properly imported to that PMP. The creation of subfolders must be done outside of the PMP Clearinghouse 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.

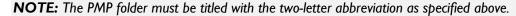
There are two methods by which to create PMP subfolders for SFTP submissions:

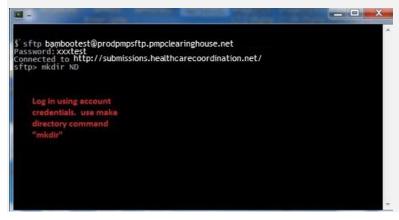
- 1. **Via SSH client** (e.g., WinSCP, FileZilla, etc.)
 - a. Log in to your SFTP account.
 - b. Create the required directories under /homedir.



2. 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 IN**).



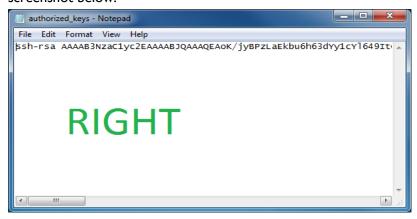


Public (SSH/RSA) Key Authentication

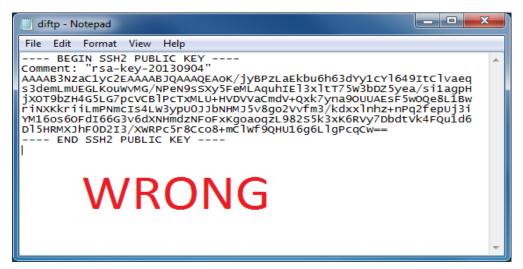
PMP Clearinghouse supports SSH key authentication. The generation of the key is outside the scope of this document; however, general guidelines about the key, along with how to import/load it, are provided below.

Note: PGP Encryption is not supported.

- Supported Key Types:
 - SSH-2 RSA 2048 bit length
- Unsupported Key Types:
 - SSH-I 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.