



APPRISS[®]
HEALTH



Data Submission Guide for Dispensers

Iowa Prescription Monitoring Program

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1 Document Overview

This document serves as a training guide and support manual for dispensers of Schedule II through Schedule IV controlled substances in Iowa 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 Iowa
- 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 Iowa required to report the dispensing of controlled substances.

2 Data Collection and Tracking

2.1 Data Collection Overview

In accordance with Iowa Code Chapter 124, the Iowa Board of Pharmacy (Board) has established an electronic prescription drug-monitoring program for the purpose of compiling records of Schedule II, III, and IV Controlled Substances dispensed by Iowa pharmacies and prescribers.

The Iowa Prescription Monitoring Program (IA PMP) is designed to provide information regarding the prescribing of controlled substances in order to provide a resource for Iowa healthcare practitioners in determining appropriate prescribing and treatment for individual patients without fear of contributing to a patient's abuse or dependence on addictive drugs or diversion of those drugs to illicit use. The program will provide authorized prescribers and pharmacists with information needed to make informed decisions regarding a patient's need for these dangerous substances, enhancing patient care and chronic or acute pain remedies.

2.2 Data Collection Requirements

Pharmacies and prescribers will report the required dispensing information to Appriss, Inc. (Appriss), a private contractor, who will collect all data and manage the technical aspects of the program on behalf of the Board.

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 IA PMP through the authorized data collection vendor, Appriss.

2.3 Reporting Requirements

Effective April 4, 2018, the IA PMP began requiring pharmacies and dispensers to report controlled substance dispensations to the IA PMP via PMP Clearinghouse. Effective May 16, 2018, all reportable controlled substance prescription data must be reported no later than the next business day following the date dispensed.

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

Such reporting without individual authorization by the patient is allowed under HIPAA, 45CFR § 164.512, paragraphs (a) and (d). The Iowa Board of Pharmacy is a health oversight agency and Appriss will be acting as an agent of the Iowa Board of Pharmacy in the collection of this information.

As of June 26, 2019, butalbital is classified as a Schedule 3 drug and must be submitted through the PMP system.

2.4 Exemptions

The PMP reporting requirements do not apply to “the direct administration of a controlled dangerous substance to the body of an ultimate user...”

In this manual, “dispenser” means a pharmacy or prescriber, regardless of location, who delivers to an ultimate user a controlled substance in Schedule 2, 3, or 4. “Dispenser” does not include a licensed veterinarian.

Exemptions:

- Any controlled drug administered directly to a patient
- Any controlled drug dispensed by a facility that is registered by the United States Drug Enforcement Administration (DEA) as a narcotic treatment program and that is subject to the record keeping provisions of 21 CFR 1304.24
- Any controlled drug administered to an inpatient in a hospital or long-term care facility (exemption does not apply to a patient in an assisted living facility or group home)
- Any controlled drug dispensed to an inpatient in a hospice facility (exemption does not apply to a home hospice patient or to a hospice patient in an assisted living facility or group home)

If you believe your pharmacy is exempt from reporting, you must contact the Board at:

Phone: (515) 281-5944

E-mail jennifer.tiffany@iowa.gov

Fax (515) 281-4609

2.5 Noncompliance

In accordance with Iowa Administrative Code 657-37.23, Discipline, "Any licensee who fails to comply with the provisions of the law or these rules is subject to disciplinary action by the board and may be subject to criminal prosecution."

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 Iowa 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 or prescribers can be uploaded in the same file. For example, chain pharmacies or associated prescribers may send one file containing controlled substance dispensing information for all their pharmacies licensed in the State of Iowa or multiple prescribers registered to provide controlled substances to patients located in Iowa.
- 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>.

Account Registration

Profile Details * Indicates Required Field

Email Address *

Password *

Password confirmation *

Personal Information

First name * Middle name Last name *

Searching for DEA or NPI will autopopulate your information if found.

DEA NPI

Employer Information

Name *

2. Complete your Profile Details.

The screenshot shows a web form titled "Profile Details" with a legend indicating that an asterisk (*) denotes a required field. The form contains three input fields: "Email Address *", "Password *", and "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 username when logging into the PMP Clearinghouse system.

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

Passwords must contain:

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

3. Complete your Personal and Employer information, noting the following:
- Required fields are marked with 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 (🔍). If the number you entered is found, your information will automatically be populated.

Personal Information

First name *	Middle name	Last name **
<input type="text"/>	<input type="text"/>	<input type="text"/>

Searching for DEA or NPI will autopopulate your information if found.

DEA	NPI
<input type="text"/> <input type="submit" value="Q"/>	<input type="text"/> <input type="submit" value="Q"/>

Employer Information

Name *		
<input type="text"/>		
Address *	Address (continued)	
<input type="text"/>	<input type="text"/>	
City *	State **	Postal Code **
<input type="text"/>	<input type="text"/>	<input type="text"/>
Phone *	Fax	
<input type="text"/>	<input type="text"/>	

Searching for DEA or NPI will autopopulate your information if found.

DEA	NCPDP
<input type="text"/> <input type="submit" value="Q"/>	<input type="text"/> <input type="submit" value="Q"/>

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.

Data Submission

PMP Clearinghouse users are able to submit data through the web portal via manual entry or upload of ASAP files. Secure FTP (SFTP) access is available, and Real-Time submissions are also available in select states.

Enable SFTP Access

Enable Real-Time Access

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

The SFTP access fields are displayed.

Data Submission

PMP Clearinghouse users are able to submit data through the web portal via manual entry or upload of ASAP files. Secure FTP (SFTP) access is available, and Real-Time submissions are also available in select states.

Enable SFTP Access

SFTP Username

SFTP Password

SFTP Password Confirmation

Password must include at least 8 characters, including 1 capital letter, 1 lowercase letter, and 1 special character (such as !, @, #, \$)

Enable Real-Time Access

- b. Your **SFTP Username** is automatically generated using the first five characters of your employer's name + your employer's phone number + @prodpmssftp. 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@prodpmssftp*.
- 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](ftp://sftp.pmpclearinghouse.net).*
- *Additional details on SFTP configuration can be found in [Appendix D: 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.

Account Registration

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

Profile

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

Employer

Name: Appriss
DEA Number:
NCPDP Number:
Address: 9901 Linn Station Rd Louisville KY 40223
Phone: 555-555-5555
Fax:

Data Acceptance

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

Submission Destinations

Alabama

Continue

7. Click **Continue**.

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

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.

Login

Email Address

Password

Login

[Create an Account](#)

Help

[Forgot your password?](#)

[Didn't receive confirmation instructions?](#)

[Didn't receive unlock instructions?](#)

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.

Signed in successfully.

File Listings File Upload

File Listings Data File Submissions Status (Last 30 Days)

Show 10 entries

Account	File	State	Records	Warnings	Errors	Submitted	Status	Status Report
SMITHERMANS PHARMACY	scott_20161026_41_4.dat	IA	1791	25		02/02/2019 10:01PM	✓	Report
SMITHERMANS PHARMACY	scott_20161121_41_1.dat	IA	737			02/02/2019 09:27PM	✓	Report
SMITHERMANS PHARMACY	test_data_for_residents_2	DO	9	18		01/29/2019 05:35PM	✓	Report
SMITHERMANS PHARMACY	test_data_for_residents	-	0			01/29/2019 05:31PM	! ASAP errors	-
SMITHERMANS PHARMACY	PMPCLEAR_3422_Error_DSR25_CORRECT.dat	DO				01/29/2019 07:41PM	Physical Dispensing Error	Report

4 Data Submission

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

4.1 Timeline and Requirements

- Pharmacies, prescribers, and software vendors can establish submission accounts upon receipt of this guide. See [Creating Your Account](#) for more information.
- You can begin submitting data to PMP Clearinghouse as soon as your account has been created.
- As of May 15, 2019, dispensers are required to transmit their data using PMP Clearinghouse in accordance with the guidelines outlined under [Reporting Requirements](#).
- If a pharmacy 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 [Zero Reports](#) for additional details.

4.2 Upload Specifications

Files should be in the ASAP 4.1 format as defined in [Appendix A: ASAP 4.1 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 “20110415.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.

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	11
Web Portal Upload	11
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 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., IA, KS, ME, OR, 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.

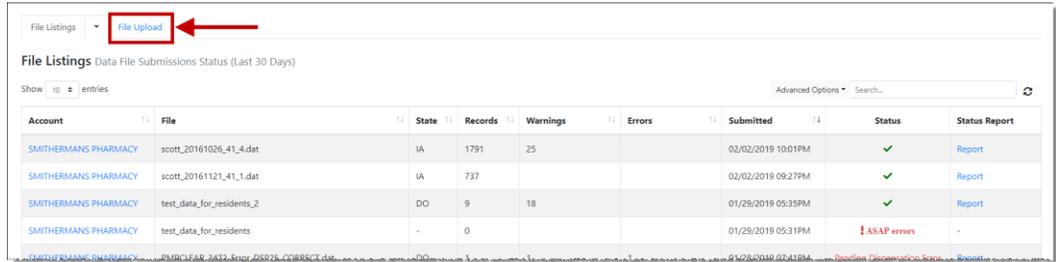
1. If you do not have a PMP Clearinghouse account, perform the steps in [Creating Your Account](#).
Or
2. If you have a PMP Clearinghouse account but have not enabled SFTP access, perform the steps in [Adding SFTP Access to an Upload Account](#).
3. Prepare the data file(s) for submission, using the ASAP specifications described in [Appendix A: ASAP 4.1 Specifications](#).
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.
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.

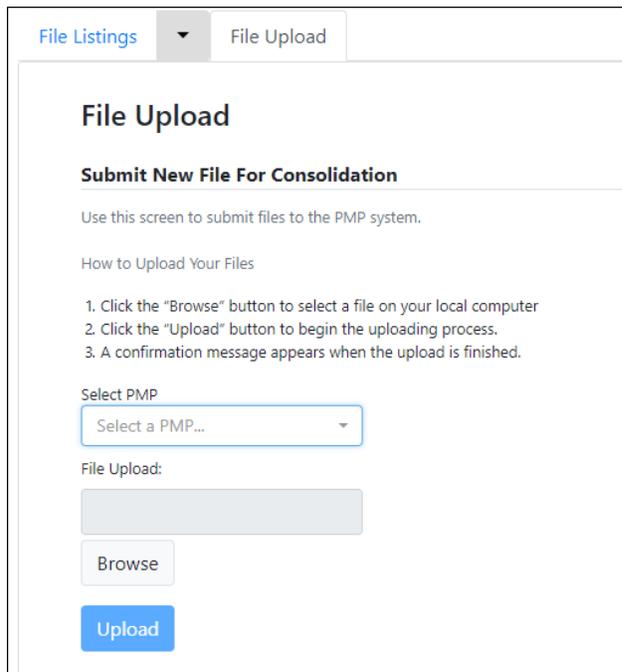
5.2 Web Portal Upload

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 4.1 Specifications](#).

3. [Log in to PMP Clearinghouse.](#)
4. From the home page, click the **File Upload** tab.

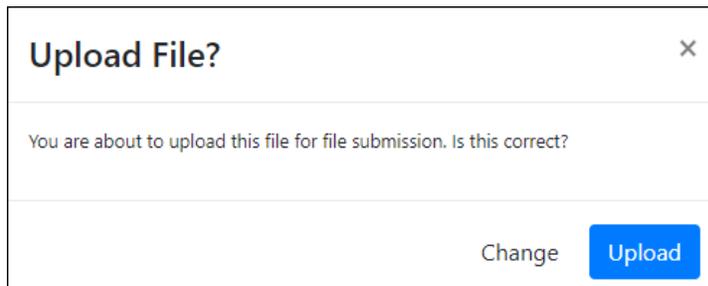


The File Upload page is displayed.



5. Select the state 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.

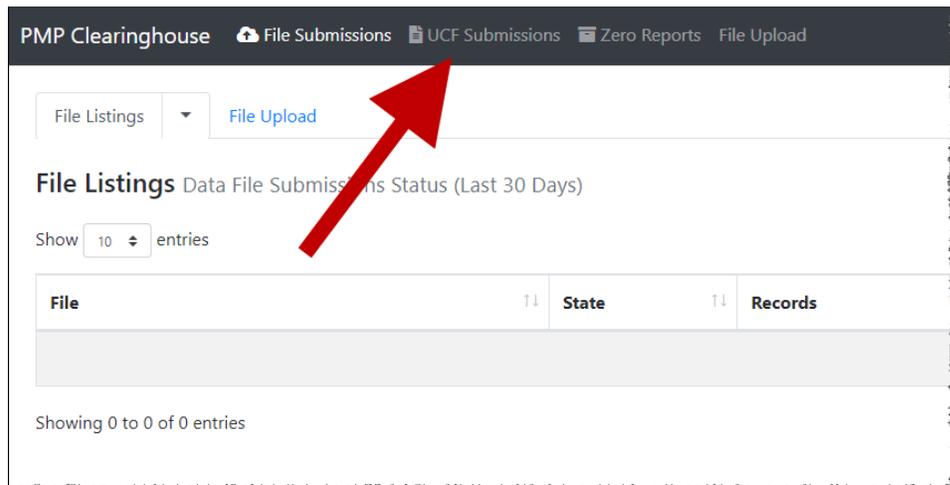
Note: When uploading a file, the file name must be unique. If the file name is not unique, a message is displayed indicating that the file name has already been taken.

5.3 Manual Entry (UCF)

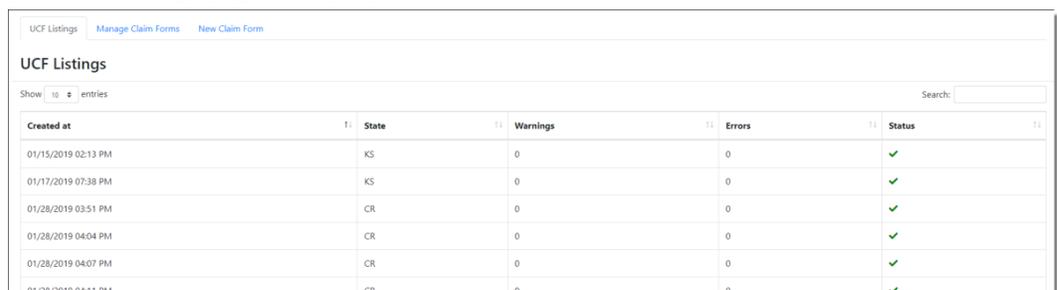
You can manually enter your prescription information into the PMP Clearinghouse system using the Universal Claim Form (UCF) within the PMP Clearinghouse web portal. This form allows you to enter patient, prescriber, dispenser, and prescription information.

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.



Created at	State	Warnings	Errors	Status
01/15/2019 02:13 PM	KS	0	0	Success
01/17/2019 07:38 PM	KS	0	0	Success
01/28/2019 03:51 PM	CR	0	0	Success
01/28/2019 04:04 PM	CR	0	0	Success
01/28/2019 04:07 PM	CR	0	0	Success
01/28/2019 04:11 PM	CR	0	0	Success

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

The Create Universal Claim Form page is displayed.

Create Universal Claim Form

PMP * Indicates Required Field

Pmp *

Select a PMP...

Patient

Patient Animal

First Name *

Last Name *

Date of Birth *

MM/DD/YYYY

Gender

Unknown

Phone Number

Patient ID

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:

- 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.

Drug Information

Compound

NDC Number *

Quantity *

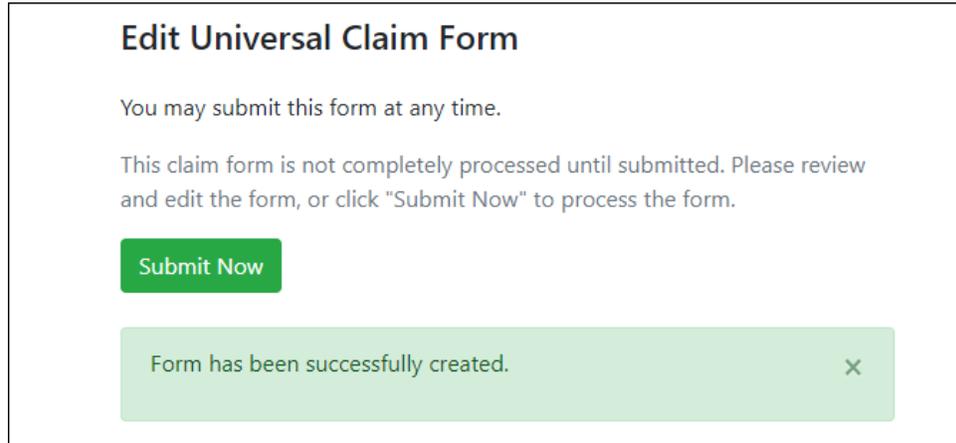
Units

Remove

Add New

7. Once you have completed all required fields, click **Save**.

The **Submit Now** button is displayed at the top of the page.



Edit Universal Claim Form

You may submit this form at any time.

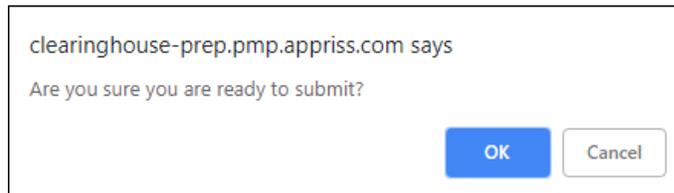
This claim form is not completely processed until submitted. Please review and edit the form, or click "Submit Now" to process the form.

Submit Now

Form has been successfully created. ✕

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

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



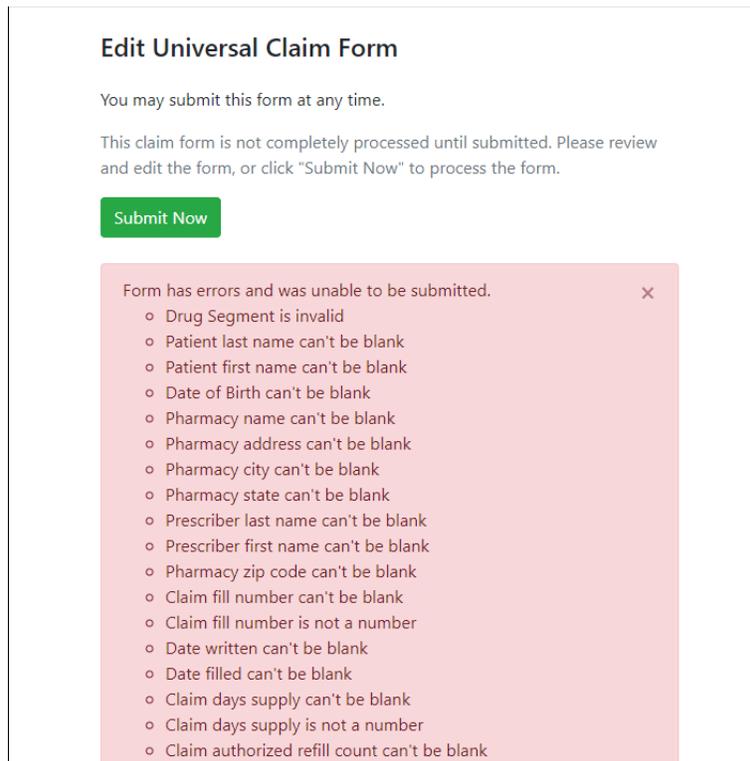
clearinghouse-prep.pmp.appriss.com says

Are you sure you are ready to submit?

OK Cancel

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.



Edit Universal Claim Form

You may submit this form at any time.

This claim form is not completely processed until submitted. Please review and edit the form, or click "Submit Now" to process the form.

Submit Now

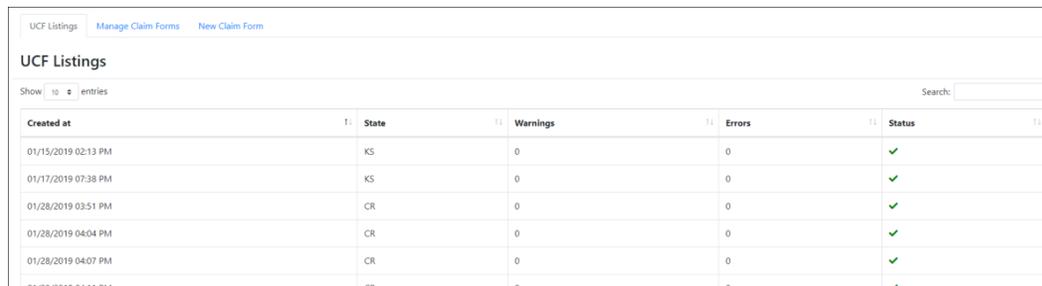
Form has errors and was unable to be submitted. ✕

- Drug Segment is invalid
- Patient last name can't be blank
- Patient first name can't be blank
- Date of Birth can't be blank
- Pharmacy name can't be blank
- Pharmacy address can't be blank
- Pharmacy city can't be blank
- Pharmacy state can't be blank
- Prescriber last name can't be blank
- Prescriber first name can't be blank
- Pharmacy zip code can't be blank
- Claim fill number can't be blank
- Claim fill number is not a number
- Date written can't be blank
- Date filled can't be blank
- Claim days supply can't be blank
- Claim days supply is not a number
- Claim authorized refill count can't be blank

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** tab.



Created at	State	Warnings	Errors	Status
01/15/2019 02:13 PM	KS	0	0	✓
01/17/2019 07:38 PM	KS	0	0	✓
01/28/2019 03:51 PM	CR	0	0	✓
01/28/2019 04:04 PM	CR	0	0	✓
01/28/2019 04:07 PM	CR	0	0	✓
01/28/2019 04:11 PM	CR	0	0	✓

5.4 Zero Reports

If you have no dispensations to report for a pharmacy for the preceding reporting period, you must report this information to the IA 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 C: ASAP Zero Report Specifications](#).

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

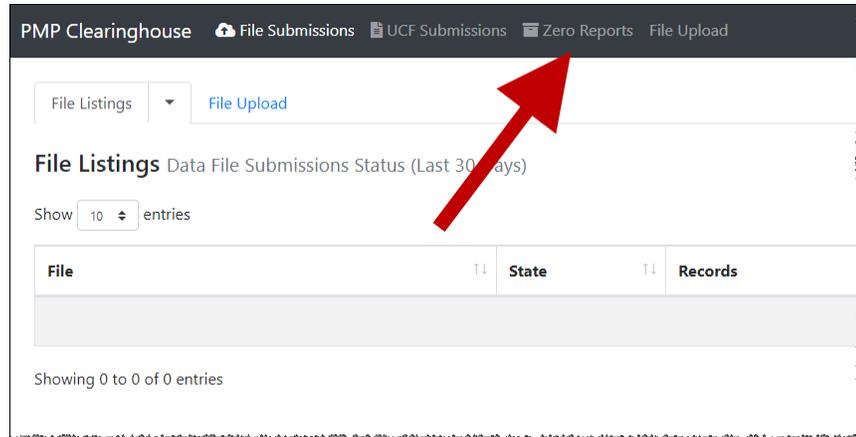
- [Submit a single-click zero report](#)
- [Create a new zero report](#)

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**.

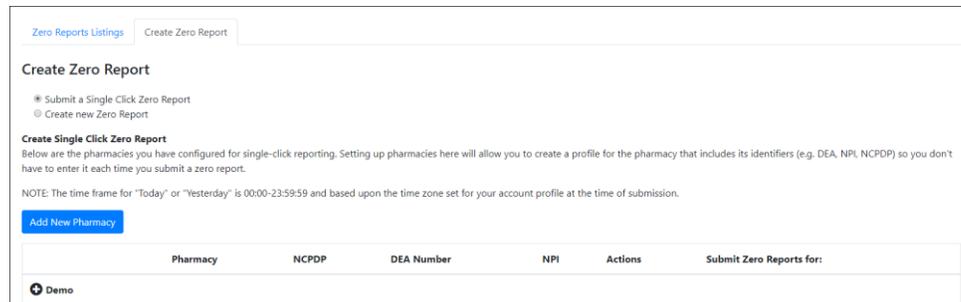


The Zero Report Listings page is displayed.



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

The Create Zero Report page is displayed. *Note that **Submit a Single Click Zero Report** is selected by default.*



- Any pharmacies you have already configured for single-click zero reporting are displayed at the bottom of the page. Continue to [step 10](#) to submit a zero report for those pharmacies.
- If you have not configured your pharmacy for single-click zero reporting, continue to [step 5](#).

5. Click **Add New Pharmacy**.

The New Pharmacy page is displayed.

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

The pharmacy is saved and will be listed under the drop-down for the selected PMP, which is located at the bottom of the page.

Pharmacy	NCPDP	DEA Number	NPI	Actions	Submit Zero Reports for:
Pharmacies configured for single-click zero reporting are listed here					
+	Demo				
+	Vermont				

10. Click the plus sign (“+”) next to the PMP for which you wish to submit a zero report.

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

Pharmacy	NCPDP	DEA Number	NPI	Actions	Submit Zero Reports for:
+	Demo				
	Appriss Pharmacy	MM4122735		Edit Delete	Today 01/16/2020 Yesterday 01/15/2020
	Test	BK0121258		Edit Delete	Today 01/16/2020 Yesterday 01/15/2020
	Test Pharmacy	FC8591934		Edit Delete	Today 01/16/2020 Yesterday 01/15/2020

11. Click **Today** to submit a zero report for the current date;
- Or
12. Click **Yesterday** to submit a zero report for the previous date.

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

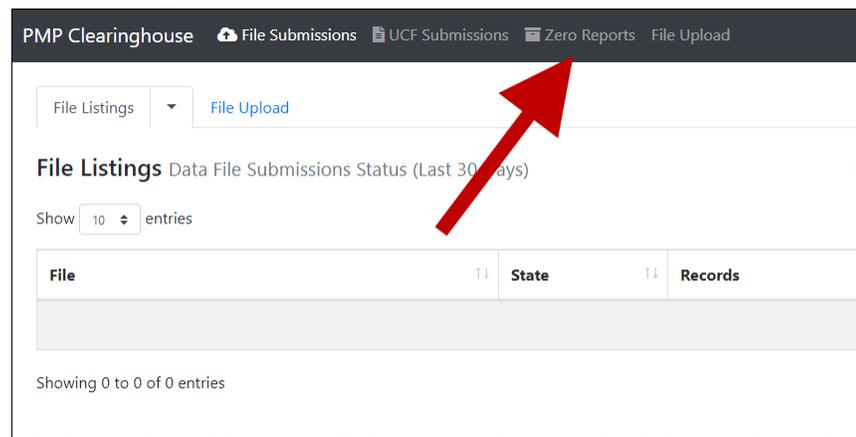
Pharmacy	NCPDP	DEA Number	NPI	Actions	Submit Zero Reports for:
Demo					
Appriss Pharmacy		MM4122735		Edit Delete	Today 01/16/2020 Yesterday 01/15/2020
Test		BK0121258		Edit Delete	Today 01/16/2020 Yesterday 01/15/2020
Test Pharmacy		FC8591934		Edit Submitted	Yesterday 01/15/2020

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**.

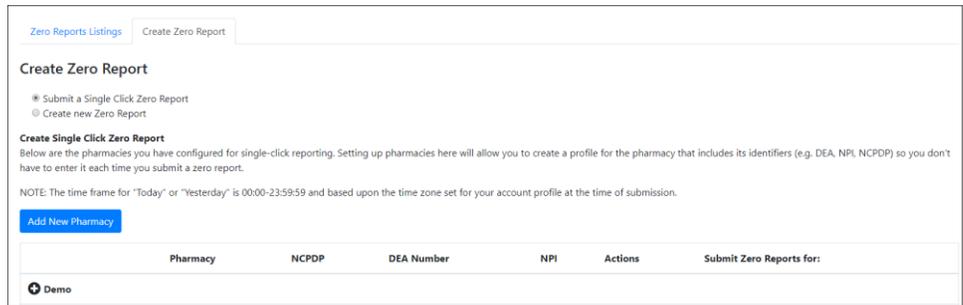


The Zero Report Listings page is displayed.

Account	State	Start Date	End Date	NCPDP	DEA	NPI	ASAP File	Date Submitted
AL	AL	01/16/2020	01/16/2020					01/16/2020 5:13 PM
AL	AL	01/16/2020	01/16/2020					01/16/2020 5:04 PM

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

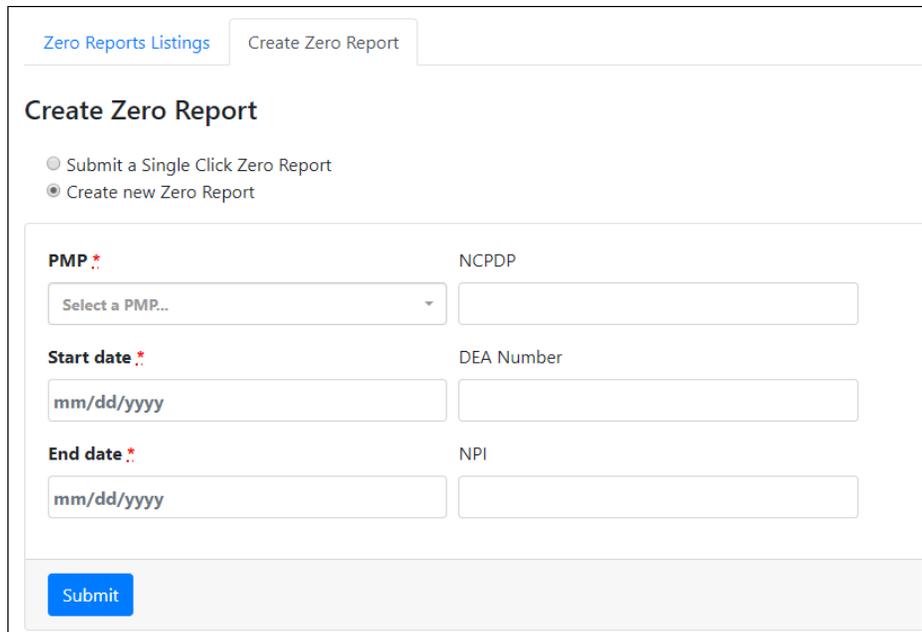
The Create Zero Report page is displayed. *Note that **Submit a Single Click Zero Report** is selected by default.*



The screenshot shows the 'Create Zero Report' page. At the top, there are two tabs: 'Zero Reports Listings' and 'Create Zero Report'. Below the tabs, the page title is 'Create Zero Report'. There are two radio buttons: 'Submit a Single Click Zero Report' (which is selected) and 'Create new Zero Report'. Below this, there is a section titled 'Create Single Click Zero Report' with a note: 'Below are the pharmacies you have configured for single-click reporting. Setting up pharmacies here will allow you to create a profile for the pharmacy that includes its identifiers (e.g. DEA, NPI, NCPDP) so you don't have to enter it each time you submit a zero report.' A note below that states: 'NOTE: The time frame for "Today" or "Yesterday" is 00:00-23:59:59 and based upon the time zone set for your account profile at the time of submission.' There is a blue button labeled 'Add New Pharmacy'. Below this is a table with columns: Pharmacy, NCPDP, DEA Number, NPI, Actions, and Submit Zero Reports for. A 'Demo' link is visible at the bottom left.

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

The Create Zero Report page is displayed.



The screenshot shows the 'Create Zero Report' page with the 'Create new Zero Report' radio button selected. The form fields are visible: 'PMP *' with a dropdown menu showing 'Select a PMP...', 'NCPDP' with an input field, 'Start date *' with an input field showing 'mm/dd/yyyy', 'DEA Number' with an input field, 'End date *' with an input field showing 'mm/dd/yyyy', and 'NPI' with an input field. A blue 'Submit' button is at the bottom.

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.

The image shows a date selection interface. At the top, it says '<< February 2019 >>'. Below that is a calendar grid with days of the week (Su, Mo, Tu, We, Th, Fr, Sa) and dates (27, 28, 29, 30, 31, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 1, 2, 3, 4, 5, 6, 7, 8, 9). To the right of the calendar is a dropdown menu. Below the calendar is a text input field with a blue border containing the placeholder text 'mm/dd/yyyy'.

8. Enter your NCPDP, DEA, and/or NPI numbers, if required by your state's 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, state, number of records, warning count, error count, and date submitted. You may also click the account name to display the account details.

Account	File	State	Records	Warnings	Errors	Submitted	Status	Status Report
SMITHERMANS PHARMACY	TestUpload.txt	DO	0			02/13/2019 04:43PM	ASAP errors	-
SMITHERMANS PHARMACY	scott_20161026_41_4.dat	IA	1791	25		02/02/2019 10:01PM	✓	Report
SMITHERMANS PHARMACY	scott_20161121_41_1.dat	IA	737			02/02/2019 09:27PM	✓	Report
SMITHERMANS PHARMACY	test_data_for_residents_2	DO	9	18		01/29/2019 05:35PM	✓	Report
SMITHERMANS PHARMACY	test_data_for_residents	-	0			01/29/2019 05:31PM	ASAP errors	-

- 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.

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, state, warning count, error count, and status.

Created at	State	Warnings	Errors	Status
01/15/2019 02:13 PM	KS	0	0	✓
01/17/2019 07:38 PM	KS	0	0	✓
01/28/2019 03:51 PM	CR	0	0	✓
01/28/2019 04:04 PM	CR	0	0	✓
01/28/2019 04:07 PM	CR	0	0	✓
01/28/2019 04:11 PM	CR	0	0	✓

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 30 days 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.

Created at	State	Warnings	Errors	Status
01/15/2019 02:13 PM	KS	0	0	✓
01/17/2019 07:38 PM	KS	0	0	✓
01/28/2019 03:51 PM	CR	0	0	✓
01/28/2019 04:04 PM	CR	0	0	✓
01/28/2019 04:07 PM	CR	0	0	✓
01/28/2019 04:11 PM	CR	0	0	✓

The Pending Claim Forms page is displayed.

Created At	Created By	Last Updated By	State	
01/15/2019 2:33 PM	rjohn@appriss.com	rjohn@appriss.com	KS	Edit Delete
01/18/2019 4:54 PM	rjohn@appriss.com	rjohn@appriss.com	KS	Edit Delete
01/24/2019 5:13 PM	dhempy@appriss.com	dhempy@appriss.com		Edit Delete
01/24/2019 7:30 PM	rjohn@appriss.com	rjohn@appriss.com	NJ	Edit Delete

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

Note: If it has been longer than 30 days, 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.

Edit Universal Claim Form

You may submit this form at any time.

This claim form is not completely processed until submitted. Please review and edit the form, or click "Submit Now" to process the form.

Submit Now

PMP * Indicates Required Field

Pmp **

Kansas

Patient

Patient Animal

First Name* Last Name*

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.

clearinghouse-prep.pmp.appriss.com says

Are you sure you are ready to submit?

OK Cancel

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.

Edit Universal Claim Form

You may submit this form at any time.

This claim form is not completely processed until submitted. Please review and edit the form, or click "Submit Now" to process the form.

Submit Now

Form has errors and was unable to be submitted. X

- o Drug Segment is invalid
- o Date of Birth can't be blank

Note: If there are no errors, you are returned to the UCF Listings page and your report is listed there.

- 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 Page

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 [File Listings](#) page.

DEA Number	NCPDP Identifier	Prescription Number	Name	Filled At	Segment Type	Warning Count	Error Count
BM4601616		ERROR_DSP25_CORRECT	MEDICINE SHOPPE	2019-01-27	Patient	0	1

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.

Field	Submitted Value	Corrected Value	Messages
National provider identifier	1104923507	1104923507	✓
NCPDP identifier	0068568	0068568	✓
DEA number	BE9432042	BE9432042	Warnings: DEA number warning: DEA number not found in registry.
Name	<input type="text"/>		Errors: Name value must be present.
Phone number	4017704455	4017704455	✓

- 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 4.1 standard requires a pharmacy or dispensing prescriber 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

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: Iowa 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: 4.1
* Transaction Control Number: unparseable
* Transaction Control Type: unparseable
* Date of Submission: January 30, 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.

The columns are set to the following lengths:

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

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

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

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

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

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

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

SUBJ: Iowa 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: 4.1
- * Transaction Control Number: 23489504823
- * Transaction Control Type: send
- * Date of Submission: January 30, 2018
- * Total Record Count: ###
- * Duplicate Records: ###
- * In Process Count: ###
- * Records with Error Count: ###
- * Imported Records Count: ###
- * 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 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: Iowa  
* Date Range: 2013-03-06 - 2013-03-06  
* Submission Date: 2013-08-23  
* ASAP Creation Date: 2013-03-06
```

8 Managing Your Upload Account

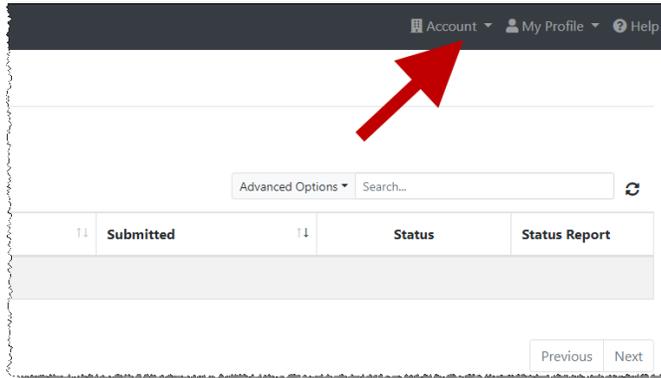
The **Account** menu option allows you to manage the information associated with your organization’s upload account, including adding users, states, and SFTP access to your account as well as editing your organization’s account information.

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](#).

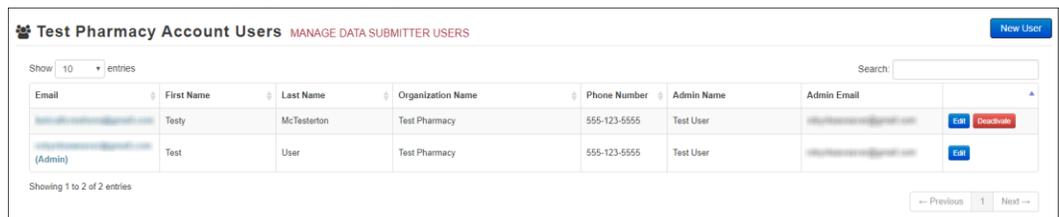
8.1 Adding Users to Your Upload Account

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**.

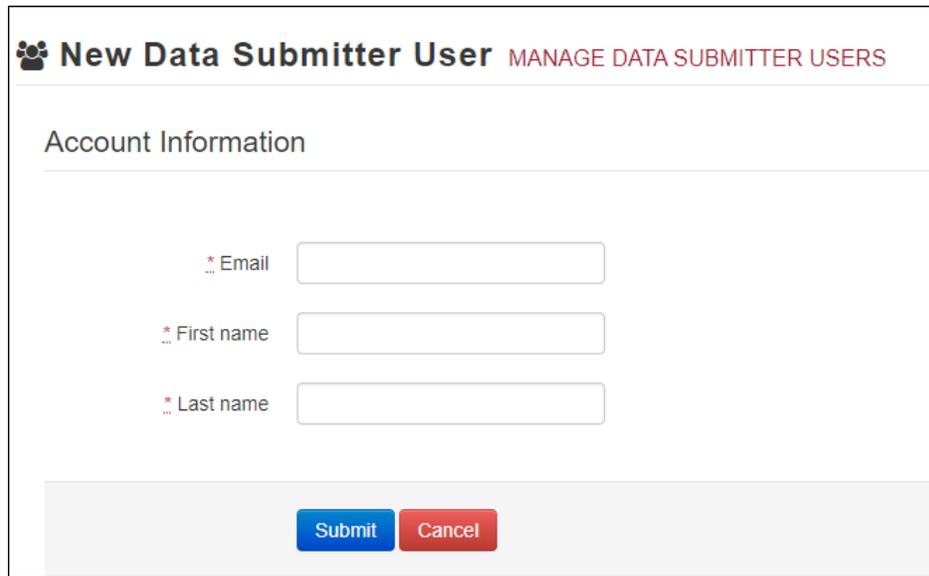


3. Select **Users** from the **Account** drop-down menu.
The Account Users page is displayed.



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

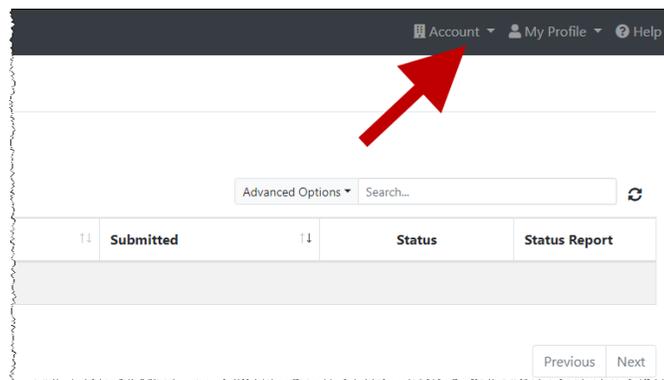
The New Data Submitter User page is displayed.



5. Enter the new data submitter's email address, first name, and last name in the appropriate fields. *Note that all fields are required.*
6. Click **Submit**.
The user is added to the list of data submitters for your organization, and you are returned to the Account Users page.
7. Please inform the new user of the account creation.
 - a. The user will receive an email with a link for them to confirm their account.
 - b. Once the account has been confirmed, the user will need to navigate to the PMP Clearinghouse Login page and click **Forgot your password?** to create a password for their account and log in.
 - c. Upon logging in, the user will be able to view all files submitted for your organization's upload account.

8.1.1 Changing Another User's Password

1. [Log in to PMP Clearinghouse](#).
2. Click **Account**.



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

The Account Users page is displayed.

Email	First Name	Last Name	Organization Name	Phone Number	Admin Name	Admin Email	
test@iowaipm.com	Testy	McTesterton	Test Pharmacy	555-123-5555	Test User	test@iowaipm.com	Edit Delete
(Admin)	Test	User	Test Pharmacy	555-123-5555	Test User	test@iowaipm.com	Edit

4. Click the **Edit** button, located to the right of the user's information.
The Edit Data Submitter User page is displayed.

Edit Data Submitter User MANAGE DATA SUBMITTER USERS

Account Information

* Email

* First name

* Last name

Password

leave it blank if you don't want to change it

Password confirmation

[Submit](#) [Cancel](#)

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

Passwords must contain:

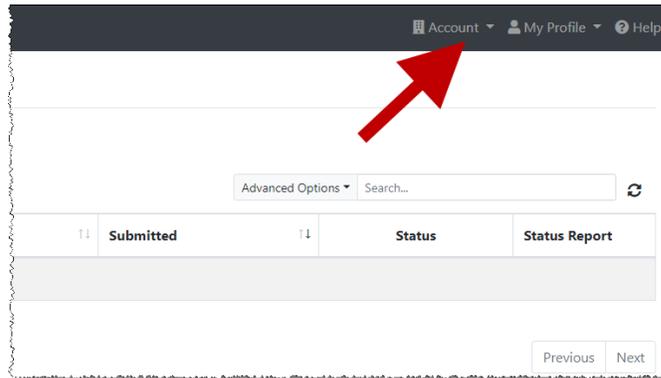
- At least eight (8) characters
- One (1) uppercase letter
- One (1) lowercase letter
- One (1) number
- One (1) special character, such as !, @, #, \$, etc.

6. Click **Submit**.
The password is changed.

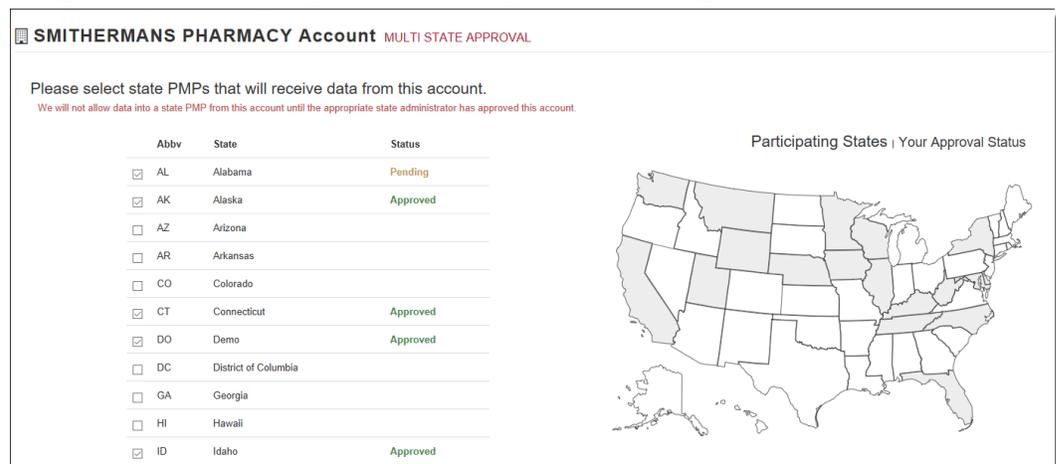
8.2 Adding States to Your Upload Account

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.

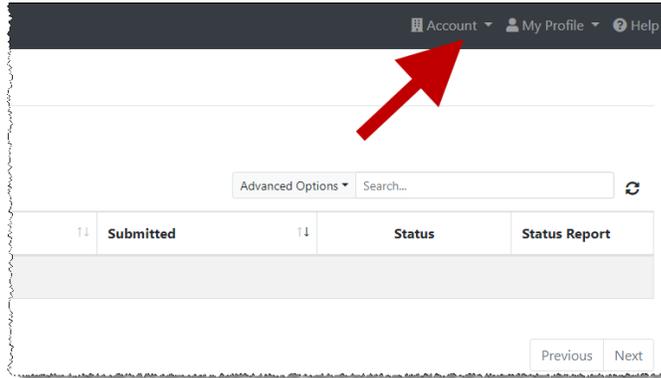
Notes:

- 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.
- 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.

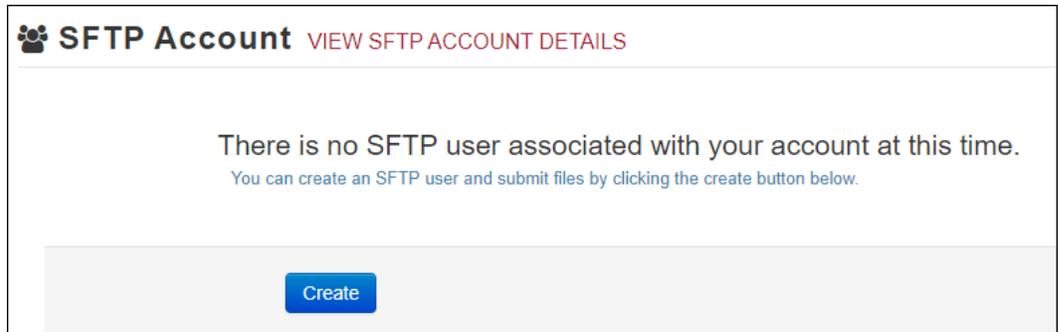
8.3 Adding SFTP Access to an Upload Account

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.

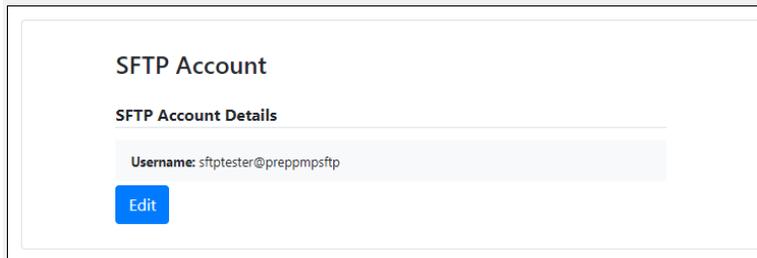
1. [Log in to PMP Clearinghouse](#).
2. Click **Account**.



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**.

4. Click **Create**.

The Create a New SFTP Account page is displayed.

The screenshot shows a web form titled "SFTP Account" with the subtitle "CREATE A NEW SFTP ACCOUNT". The form contains three input fields: "Name" (with a sub-label "Username of the SFTP account."), "Password", and "Password confirmation". At the bottom of the form are two buttons: a blue "Create" button and a red "Cancel" button.

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.

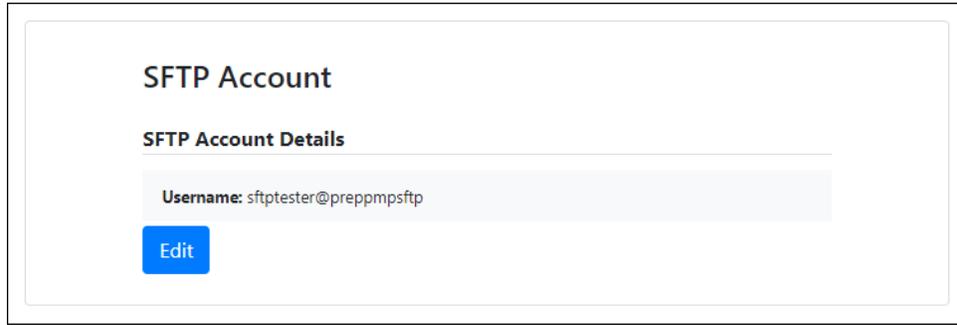
Once the account has been successfully created, this password will be input into the pharmacy software so that submissions can be automated.

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](ftp://sftp.pmpclearinghouse.net).
- Additional details on SFTP configuration can be found in [Appendix D: SFTP Configuration](#).

7. Click **Create**.

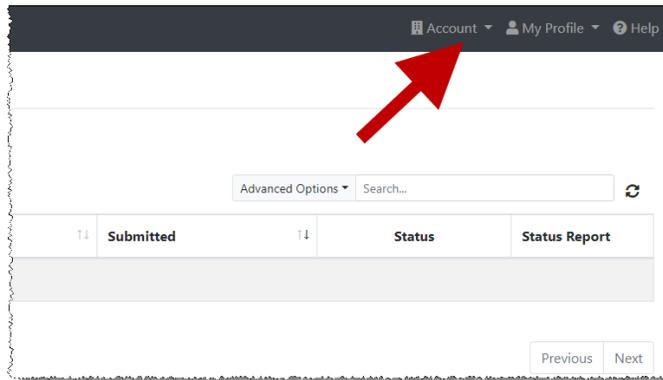
The account is created and the username is displayed.



8.4 Editing Your Upload Account

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

1. [Log in to PMP Clearinghouse](#).
2. Click **Account**.



3. Select **Account Details**.

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

SMITHERMANS PHARMACY Accounts

Account Details

Name: SMITHERMANS PHARMACY
Phone Number: 2056652575
Fax Number: 2056650940

Admin Details

User Name: Test User
Email: testuser@appriss.com
Address: 703 MAIN ST
MONTEVALLO KY 35115
Sftp Account ID: sftp tester@preppm sftp

[Edit](#) [View All Accounts](#)

4. Click **Edit**.
The Edit Account page is displayed.

Edit SMITHERMANS PHARMACY Account

Account Details * Indicates Required Field

Name *

Phone number Fax number

Admin Details

Address

City Zip code State

[Save Changes](#) [Cancel](#)

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

9 Managing Your User Profile

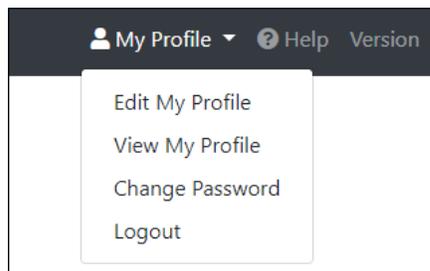
This chapter describes how to manage your individual user profile, including how to edit your profile and manage your password.

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

9.1 Editing Your Profile

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

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



3. Select **Edit My Profile**.

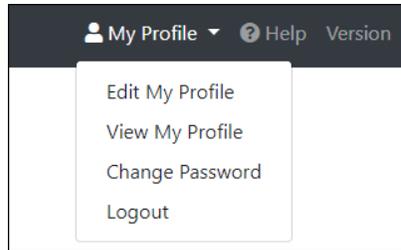
A screenshot of a web form titled 'Edit Profile'. The form is divided into two main sections: 'Profile Details' and 'Organization Information'.
Profile Details section includes:
- 'First name *': A text input field containing 'ldap'.
- 'Last name *': A text input field containing 'generated'.
- 'Email *': A text input field containing 'rweaver@appriss.com'.
- 'Time zone': A dropdown menu currently showing '(GMT+00:00) UTC'.
- A checkbox labeled 'Disable report emails' which is currently unchecked.
Organization Information section includes:
- 'Name: SMITHERMANS PHARMACY'
- 'Admin: Test User'
- 'Admin Email: testuser@appriss.com'
At the bottom of the form are two buttons: 'Save Changes' (highlighted in blue) and 'Cancel'.

4. Update your information as necessary, then click **Submit**.
Your changes are saved, and your updated profile is displayed.

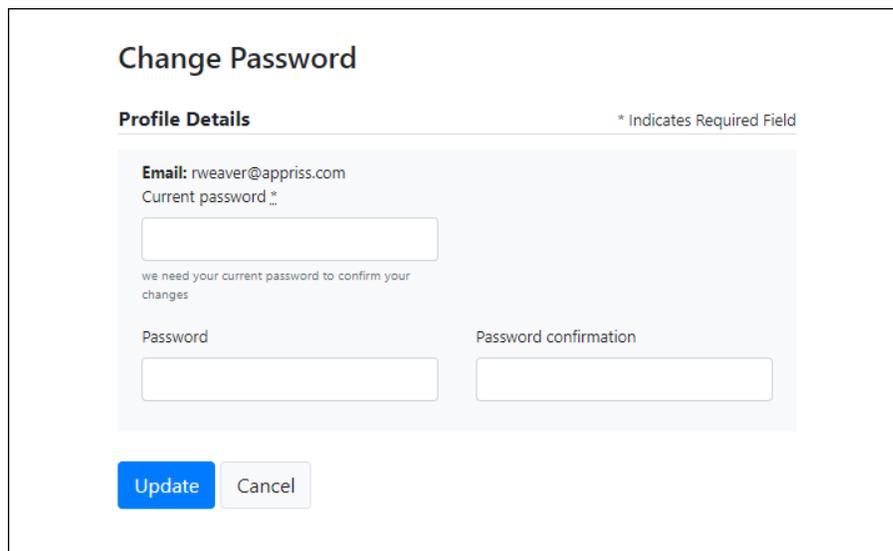
9.2 Changing Your Password

Note: Clearinghouse passwords expire every 90 days. You can use this function to proactively change your password before it expires. If your password has already expired, or you have forgotten your password, navigate to 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**.

A screenshot of the "Change Password" form. The form is titled "Change Password" and includes a "Profile Details" section. The "Email" field is pre-filled with "rweaver@appriss.com". Below the email field is a "Current password" field with an asterisk indicating it is required. A note below this field states: "we need your current password to confirm your changes". There are two input fields for "Password" and "Password confirmation". At the bottom of the form are two buttons: "Update" (in blue) and "Cancel".

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

Passwords must contain:

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

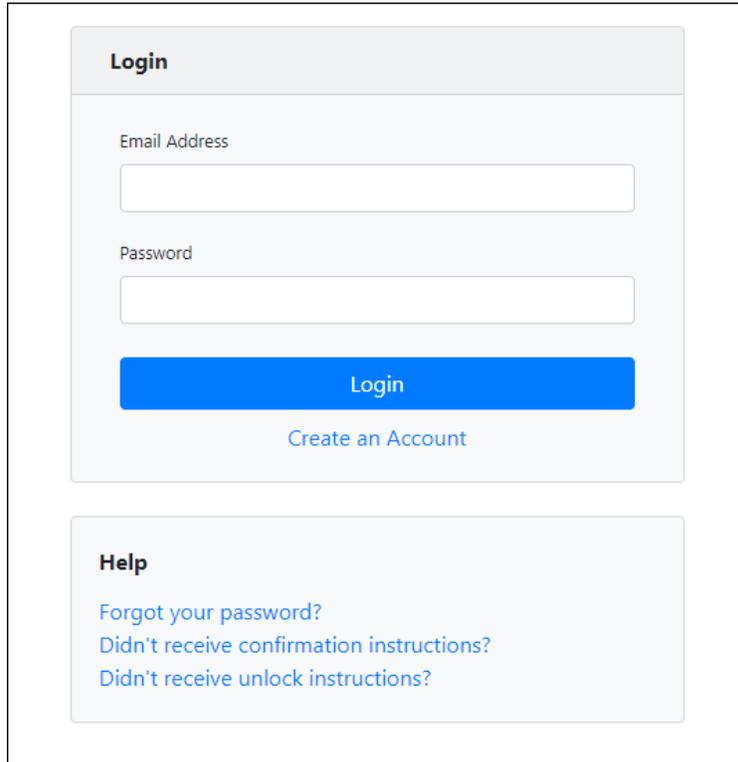
6. Click **Update**.

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

9.3 Resetting Your Password

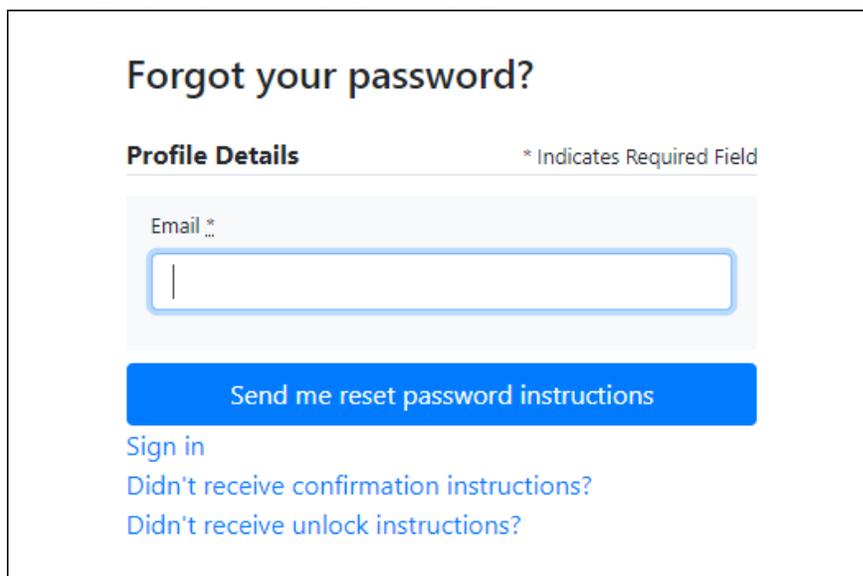
If you have forgotten your password or your password has expired, perform the following steps to reset it.

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



The screenshot shows the login interface. At the top is a grey header with the word "Login". Below it are two input fields: "Email Address" and "Password". A blue "Login" button is positioned below the password field, with a "Create an Account" link underneath it. A "Help" section is located below the login form, containing three links: "Forgot your password?", "Didn't receive confirmation instructions?", and "Didn't receive unlock instructions?".

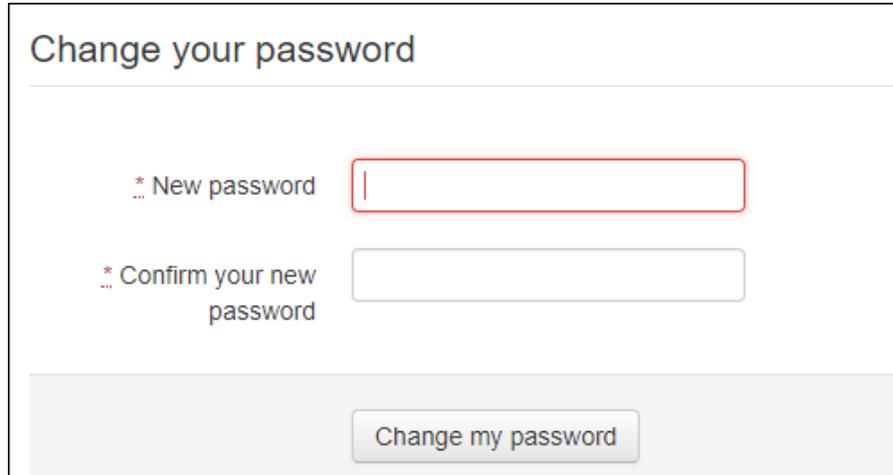
2. Click the **Forgot your password?** link, located in the Help section of the page. The Forgot your password page is displayed.



The screenshot shows the "Forgot your password?" page. The title "Forgot your password?" is at the top. Below it is a section titled "Profile Details" with a note "* Indicates Required Field". There is an "Email *" input field. A blue button labeled "Send me reset password instructions" is below the input field. At the bottom, there are three links: "Sign in", "Didn't receive confirmation instructions?", and "Didn't receive unlock instructions?".

3. Enter the email address associated with your user account, then click **Send me reset password instructions**.
4. Once you receive the reset password email, click the **Change my password** link within the email.

The Change your password page is displayed.



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

Passwords must contain:

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

6. Click **Change my password**.

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

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 844-442-4767;
- **OR**
- Create a support request at the following URL:
<https://apprissmpclearinghouse.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 IA PMP, please contact the state administrator at:

Phone: (515) 281-5944

Email: mitchell.barnett@iowa.gov

Fax: (515) 281-4609

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
1.0	02/16/2018	N/A	<ul style="list-style-type: none"> Initial draft
2.0	02/26/2018	Assistance and Support	<ul style="list-style-type: none"> Updated state contact information Adjusted technical assistance availability on page 24
		Appendix A	<ul style="list-style-type: none"> Added PAT02 and PAT03 as “Preferred, but not Required” Added “Requirement” language to support CDI fields
		Global	Adjusted font size from 12pt to 11pt where applicable
3.0	04/05/2018	Reporting Requirements	Added additional reporting requirements
		Appendix A	Added PAT01, with supporting description, making it “Preferred but not Required” to report
		Appendix B	Added new appendix to support Appendix A: ASAP 4.1 Specifications
4.0	05/09/2019	Global	Updated to new document template
		Appendix A	Added DSP12 as a required field
4.1	07/23/2019	2.3/Reporting Requirements	Added verbiage specifying that butalbital has been classified as a Schedule 3 drug and should be reported to the PMP
4.2	11/26/2019	10.2/Administrative Assistance	Updated administrative contact email
4.3	02/05/2020	Global	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

Version	Date	Chapter/Section	Change Made
		5.4.1/Submit a Single-Click Zero Report	Added new section with instructions for submitting a single-click zero report

Appendix A: ASAP 4.1 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 IA PMP requirements.

The following elements are used in each upload file:

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

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

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

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

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

- **Requirement**

- Yes = Required by the IA PMP
- Preferred but not required = Not required but please submit if available

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

Segment	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	Yes
	TH02	Transaction Control Number Sender assigned code uniquely identifying a transaction.	Yes
	TH05	Creation Date Date the transaction was created. Format: CCYYMMDD.	Yes
	TH06	Creation Time Time the transaction was created. Format: HHMMSS or HHMM.	Yes
	TH07	File Type <ul style="list-style-type: none"> • P = Production • T = Test 	Yes
	TH09	Segment Terminator Character This terminates the TH segment and sets the actual value of the data segment terminator for the entire transaction.	Yes
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)	Yes
	IS02	Information Source Entity Name Entity name of the Information Source.	Yes
PHA: Pharmacy Header (required)			
Used to identify the pharmacy or dispensing prescriber.			
Note: It is required that information be provided in at least one of the following fields: PHA01, PHA02, or PHA03.			
	PHA03	DEA Number Identifier assigned to the pharmacy or dispensing prescriber by the Drug Enforcement Administration.	Yes
PAT: Patient Information (required)			
Used to report the patient's name and basic information as contained in the pharmacy or dispensing prescriber record.			
	PAT01	ID Jurisdiction Code identifying the jurisdiction that issues the ID in PAT03. See Appendix B: List of Jurisdictions .	Preferred but not required
	PAT02	ID Qualifier	Preferred but not required
	PAT03	ID of Patient	Preferred but not required

Segment	Element ID	Element Name	Requirement
	PAT07	Last Name Patient's last name.	Yes
	PAT08	First Name Patient's first name.	Yes
	PAT12	Address Information – 1 Free-form text for street address information.	Yes
	PAT14	City Address Free-form text for city name.	Yes
	PAT15	State Address U.S. Postal Service state code Note: Field has been sized to handle international patients not residing in the U.S.	Yes
	PAT16	ZIP Code Address U.S. Postal Service ZIP code. Populate with zeros if patient address is outside the U.S.	Yes
	PAT17	Phone Number Complete phone number including area code. Do not include hyphens. For situations in which the patient does not have a phone number, submit ten 9s.	Yes
	PAT18	Date of Birth Date patient was born. Format: CCYYMMDD	Yes
	PAT19	Gender Code Code indicating the sex of the patient. <ul style="list-style-type: none"> • F Female • M Male • U Unknown 	Yes
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: <ul style="list-style-type: none"> • 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). 	Yes

Segment	Element ID	Element Name	Requirement
	DSP02	Prescription Number Serial number assigned to the prescription by the pharmacy or unique record number assigned to the dispensing by the dispensing prescriber.	Yes
	DSP03	Date Written Date the prescription was written (authorized). Format: CCYMMDD	Yes
	DSP04	Refills Authorized The number of refills authorized by the prescriber.	Yes
	DSP05	Date Filled Date prescription was filled. Format: CCYMMDD	Yes
	DSP06	Refill Number Number of the fill of the prescription. 0 indicates New Rx; 01-99 is the refill number.	Yes
	DSP07	Product ID Qualifier Used to identify the type of product ID contained in DSP08. <ul style="list-style-type: none"> • 01 NDC • 06 Compound (indicates a compound; if used, the CDI segment becomes a required segment) 	Yes
	DSP08	Product ID Full product identification as indicated in DSP07, including leading zeros without punctuation.	Yes
	DSP09	Quantity Dispensed Number of metric units dispensed in metric decimal format. Example: 2.5 Note: For compounds show the first quantity in CDI04.	Yes
	DSP10	Days Supply Estimated number of days the medication will last.	Yes
	DSP11	Drug Dosage Units Code Identifies the unit of measure for the quantity dispensed in DSP09. <ul style="list-style-type: none"> • 01 Each • 02 Milliliters (ml) • 03 Grams (gm) 	Yes
	DSP12	Transmission Form of Rx Origin Code Code indicating how the pharmacy received the prescription. <ul style="list-style-type: none"> • 01 Written Prescription • 02 Telephone Prescription • 03 Telephone Emergency Prescription • 04 Fax Prescription • 05 Electronic Prescription • 99 Other 	Yes

Segment	Element ID	Element Name	Requirement
	DSP16	Classification Code for Payment Type Code identifying the type of payment (i.e., how it was paid for). <ul style="list-style-type: none"> • 01 Private Pay • 02 Medicaid • 03 Medicare • 04 Commercial Insurance • 05 Military Installations and VA • 06 Workers' Compensation • 07 Indian Nations • 99 Other 	Yes
PRE: Prescriber Information (required) Used to identify the prescriber of the prescription.			
	PRE02	DEA Number Identifying number assigned to a prescriber or an institution by the Drug Enforcement Administration (DEA).	Yes
	PRE05	Last Name Prescriber's last name.	Yes
	PRE06	First Name Prescriber's first name.	Yes
CDI: Compound Drug Ingredient Detail (if DSP07 is "compound") 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 9999999999.			
	CDI01	Compound Drug Ingredient Sequence Number First reportable ingredient is 1; each additional reportable ingredient is incremented by 1.	Yes (if DSP07 is "compound")
	CDI02	Product ID Qualifier Code to identify the type of product ID contained in CDI03. <ul style="list-style-type: none"> • 01 NDC 	Yes (if DSP07 is "compound")
	CDI03	Product ID Full product identification as indicated in CDI02, including leading zeros without punctuation.	Yes (if DSP07 is "compound")
	CDI04	Compound Ingredient Quantity Metric decimal quantity of the ingredient identified in CDI03. Example: 2.5	Yes (if DSP07 is "compound")

Segment	Element ID	Element Name	Requirement
	CDI05	<p>Compound Drug Dosage Units Code Identifies the unit of measure for the quantity dispensed in CDI04.</p> <ul style="list-style-type: none"> 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) 	<p>Yes (if DSP07 is “compound”)</p>
<p>AIR: Additional Information Reporting (situational) To report other information if required by the state.</p>			
<p>TP: Pharmacy Trailer (required) Used to identify the end of data for a given pharmacy or dispensing prescriber and provide the count of the total number of detail segments reported for the pharmacy or dispensing prescriber, including the PHA and TP segment.</p>			
	TP01	<p>Detail Segment Count Number of detail segments included for the pharmacy or dispensing prescriber including the pharmacy or prescriber header (PHA) and the pharmacy or prescriber trailer (TP) segments.</p>	<p>R</p>
<p>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.</p>			
	TT01	<p>Transaction Control Number Identifying control number that must be unique. Assigned by the originator of the transaction. Must match the number in TH02.</p>	<p>Yes</p>
	TT02	<p>Segment Count Total number of segments included in the transaction including the header and trailer segments.</p>	<p>Yes</p>

Appendix B: List of Jurisdictions

Note: ASAP grants permission to PMPs to include this list of jurisdictions in their reporting specifications and for pharmacy and prescriber software providers to distribute this list to their pharmacy and prescriber clients.

Code	Jurisdiction
AB	Province of Alberta
BC	British Columbia
MB	Province of Manitoba
NB	New Brunswick
NF	Newfoundland
NL	Newfoundland and Labrador
NS	Nova Scotia
NT	Northwest Territories
ON	Province of Ontario
PE	Prince Edward Island
QC	Province of Quebec
SK	Province of Saskatchewan
YT	Yukon Territories
CN	Canada
MX	Mexico
US	United States
AK	Alaska
AL	Alabama
AR	Arkansas
AZ	Arizona
CA	California
CO	Colorado
CT	Connecticut
DC	District of Columbia
DE	Delaware
FL	Florida
GA	Georgia
HI	Hawaii
IA	Iowa
ID	Idaho
IL	Illinois
IN	Indiana

Code	Jurisdiction
ME	Maine
MI	Michigan
MN	Minnesota
MO	Missouri
MS	Mississippi
MT	Montana
NC	North Carolina
ND	North Dakota
NE	Nebraska
NH	New Hampshire
NJ	New Jersey
NM	New Mexico
NV	Nevada
NY	New York
OH	Ohio
OK	Oklahoma
OR	Oregon
PA	Pennsylvania
RI	Rhode Island
SC	South Carolina
SD	South Dakota
TN	Tennessee
TX	Texas
UT	Utah
VA	Virginia
VT	Vermont
WA	Washington
WI	Wisconsin
WV	West Virginia
WY	Wyoming
AS	American Samoa
FM	Micronesia

Code	Jurisdiction
KS	Kansas
KY	Kentucky
LA	Louisiana
MA	Massachusetts
MD	Maryland

Code	Jurisdiction
GU	Guam
MP	Marianas Islands
PR	Puerto Rico
PW	Palau
UM	Minor Islands
VI	Virgin Islands
99	Other

Appendix C: ASAP Zero Report Specifications

The following table contains the required definitions for submitting zero reports via SFTP or manual upload to the IA 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 4.1 Specifications](#).

Segment	Element ID	Element Name	Requirement
TH: Transaction Header (required)			
	TH01	Version/Release Number 4.1	Yes
	TH02	Transaction Control Number See TT01; GUID is recommended	Yes
	TH05	Created Date CCYYMMDD	Yes
	TH06	Created Time HHMMSS or HHMM	Yes
	TH07	File Type P = Production; T = Test	Yes
	TH09	Segment Terminator Character Examples: ~ or or ::	Yes
IS: Information Source (required)			
	IS01	Unique Information Source User Login ID: Pharmacy DEA or FTP Username DCIA-XXXX	Yes
	IS02	Information Source Entity Name PHARMACY NAME	Yes
	IS03	Message: Free Form Date Range of Zero Report: #CCYYMMDD#-#CCYYMMDD#	Yes
PHA: Pharmacy Header (required)			
	PHA03	DEA Number Pharmacy DEA Number	Yes
PAT: Patient Information (required)			
	PAT07	Last Name REPORT	Yes
	PAT08	First Name ZERO	Yes
DSP: Dispensing Record (required)			
	DSP05	Date Filled Date Submitted: CCYYMMDD	Yes

PRE: Prescriber Information (required; can be null as follows: PRE*****\)			
CDI: Compound Drug Ingredient Detail			
AIR: Additional Information Reporting			
TP: Pharmacy Trailer (required)			
	TP01	Detail Segment Count 7	Yes
TT: Transaction Trailer (required)			
	TT01	Transaction Control Number Must match TH02 123456	Yes
	TT02	Segment Count Total # of segments, including header and trailer segments	Yes

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\
    
```

Appendix D: 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.**

State Subfolders

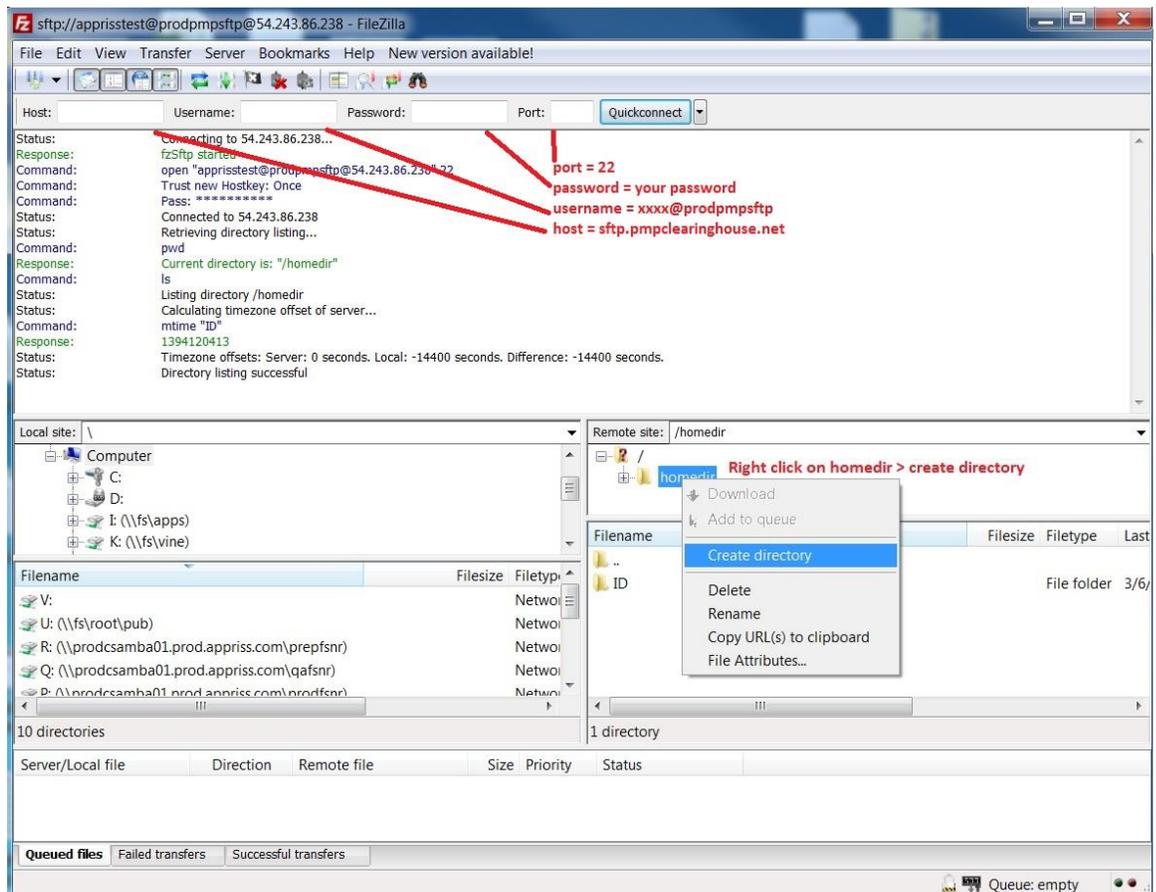
PMP Clearinghouse is the data repository for several states. As such, data submitted via SFTP must be placed in the appropriate folder for the state for which you are submitting data so that it can be properly imported to that state. The creation of subfolders must be done outside of the PMP Clearinghouse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

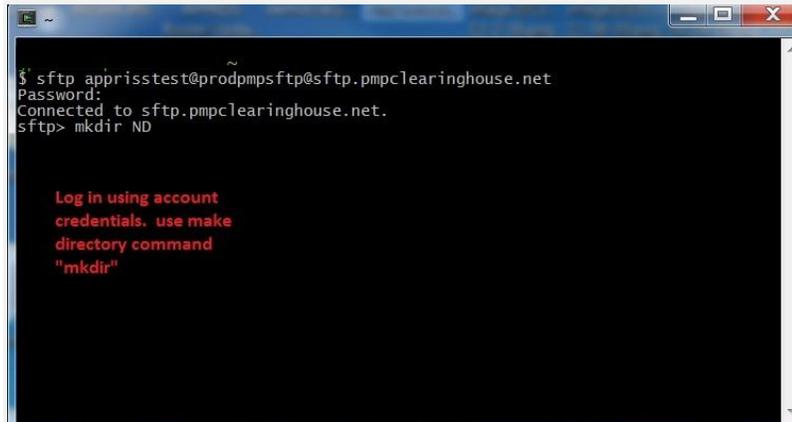
1. **Via SSH client** (e.g., WinSCP, FileZilla, etc.)
 - a. Log in to your SFTP account.
 - b. Create the required directories under **/homedir**.



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.

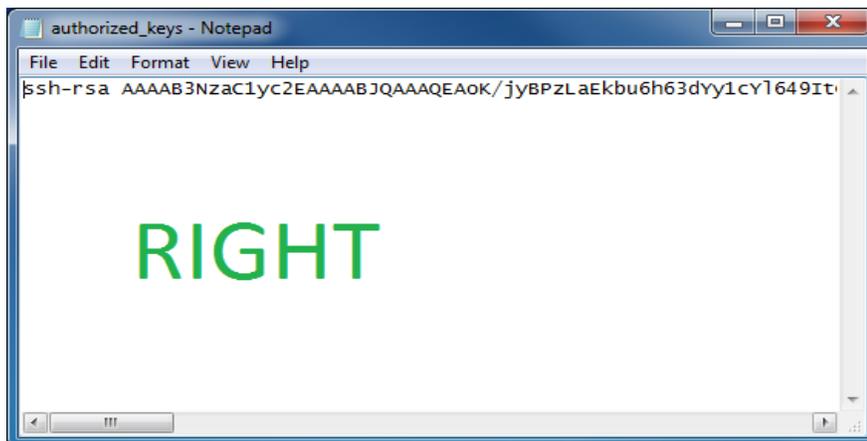


Public (SSH/RSA) Key Authentication

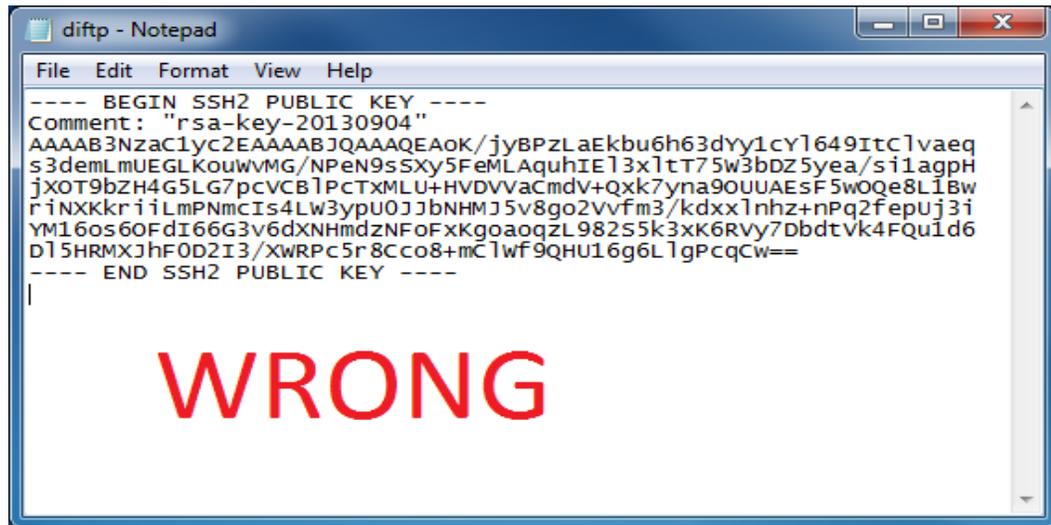
PMP Clearinghouse supports SSH key authentication. The generation of the key is outside the scope of this document; however, general guidelines about the key, along with how to import/load it, are provided below.

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.



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



```
----- BEGIN SSH2 PUBLIC KEY -----  
Comment: "rsa-key-20130904"  
AAAAB3NzaC1yc2EAAAABJQAAAQEAoK/jyBPzLaEkbu6h63dYy1cYl649ItClvaeq  
s3demLmUEGLKouwvMG/NPeN9sSxy5FeMLAqulIEl3x1tT75w3bDZ5yea/si1agpH  
jXOT9bZH4G5LG7pcVCB1PCTxMLU+HVDVvaCmdv+Qxk7yna9OUUAESF5woqe8L1Bw  
r iNXKkr i iLmPNmCIs4LW3ypU0JjBNHMJ5v8go2vVfm3/kdxxlnhz+nPq2fepUj3i  
YM16os60FdI66G3v6dXNHmdZNFoFxFkgoaoqzL982S5k3xK6Rvy7DbdtVv4FQu1d6  
D15HRMXJhF0D2I3/xWRPc5r8Cco8+mClwf9QHU16g6L1gPcqCw==  
----- END SSH2 PUBLIC KEY -----
```

WRONG

- 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.

Appendix E: Universal Claim Form

The IA PMP Universal Claim Form is provided on the following page.

Iowa Prescription Monitoring Universal Claim Form

FAX: 1.866.282.7076
Appriss Health
Attn: Greg Hatcher
9901 Linn Station Rd, Ste 200
Louisville, KY 40223

Patient Information							
Last Name		First Name		Date Of Birth		Gender	
Street Address		City		State	Zip	Phone Number	
Dispenser Information							
Dispenser Name				DEA			
Prescription Information							
(Prescription 1) Rx #	Date Filled	Date Written	Reporting Status	Qty Dispensed	Days Supply	Refills Authorized	Refill Number
			<input type="checkbox"/> New Record <input type="checkbox"/> Revise <input type="checkbox"/> Void				
NDC	Drug Name (Strength)		Product ID Qualifier	Prescriber Name		DEA	
			<input type="checkbox"/> NDC <input type="checkbox"/> Compound				
Drug Dosage Units Code <input type="checkbox"/> Each <input type="checkbox"/> Milliliters (ml) <input type="checkbox"/> Grams (gm)			Transmission Form of Rx Origin Code <input type="checkbox"/> Written Rx <input type="checkbox"/> Telephone Rx <input type="checkbox"/> Telephone Emergency Rx				
			<input type="checkbox"/> Fax Rx <input type="checkbox"/> Electronic Rx <input type="checkbox"/> Other				
Classification Code for Payment Type * <input type="checkbox"/> Private Pay <input type="checkbox"/> Medicaid <input type="checkbox"/> Medicare <input type="checkbox"/> Commercial Insurance <input type="checkbox"/> Military Installations/VA <input type="checkbox"/> Workers' Compensation <input type="checkbox"/> Indian Nations							
<input type="checkbox"/> Other *Select "Other" if the payment type is unknown.							
(Prescription 2) Rx #	Date Filled	Date Written	Reporting Status	Qty Dispensed	Days Supply	Refills Authorized	Refill Number
			<input type="checkbox"/> New Record <input type="checkbox"/> Revise <input type="checkbox"/> Void				
NDC	Drug Name (Strength)		Product ID Qualifier	Prescriber Name		DEA	
			<input type="checkbox"/> NDC <input type="checkbox"/> Compound				
Drug Dosage Units Code <input type="checkbox"/> Each <input type="checkbox"/> Milliliters (ml) <input type="checkbox"/> Grams (gm)			Transmission Form of Rx Origin Code <input type="checkbox"/> Written Rx <input type="checkbox"/> Telephone Rx <input type="checkbox"/> Telephone Emergency Rx				
			<input type="checkbox"/> Fax Rx <input type="checkbox"/> Electronic Rx <input type="checkbox"/> Other				
Classification Code for Payment Type * <input type="checkbox"/> Private Pay <input type="checkbox"/> Medicaid <input type="checkbox"/> Medicare <input type="checkbox"/> Commercial Insurance <input type="checkbox"/> Military Installations/VA <input type="checkbox"/> Workers' Compensation <input type="checkbox"/> Indian Nations							
<input type="checkbox"/> Other *Select "Other" if the payment type is unknown.							
(Prescription 3) Rx #	Date Filled	Date Written	Reporting Status	Qty Dispensed	Days Supply	Refills Authorized	Refill Number
			<input type="checkbox"/> New Record <input type="checkbox"/> Revise <input type="checkbox"/> Void				
NDC	Drug Name (Strength)		Product ID Qualifier	Prescriber Name		DEA	
			<input type="checkbox"/> NDC <input type="checkbox"/> Compound				
Drug Dosage Units Code <input type="checkbox"/> Each <input type="checkbox"/> Milliliters (ml) <input type="checkbox"/> Grams (gm)			Transmission Form of Rx Origin Code <input type="checkbox"/> Written Rx <input type="checkbox"/> Telephone Rx <input type="checkbox"/> Telephone Emergency Rx				
			<input type="checkbox"/> Fax Rx <input type="checkbox"/> Electronic Rx <input type="checkbox"/> Other				
Classification Code for Payment Type * <input type="checkbox"/> Private Pay <input type="checkbox"/> Medicaid <input type="checkbox"/> Medicare <input type="checkbox"/> Commercial Insurance <input type="checkbox"/> Military Installations/VA <input type="checkbox"/> Workers' Compensation <input type="checkbox"/> Indian Nations							
<input type="checkbox"/> Other *Select "Other" if the payment type is unknown.							