



PMP AWARxE®

Data Submission Guide for Dispensers

North Dakota Prescription Drug 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 V controlled substances and drugs of concern in or into North Dakota 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 North Dakota
- 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 North Dakota required to report the dispensing of controlled substances.

2 Data Collection and Tracking

2.1 Data Collection Overview

This guide provides information regarding the Prescription Drug Monitoring Program (PDMP) in the state of North Dakota. The PDMP is the North Dakota Board of Pharmacy's solution for monitoring ALL Schedule II, III, IV, and V controlled substances, and drugs of concern, dispensed in the state of North Dakota or for patients residing in North Dakota. This is authorized by North Dakota Century Code chapter 19-03.5 and rules of the North Dakota Board of Pharmacy.

NDCC: Section 61-12-01-02 (1) – Each state-licensed opioid treatment program shall submit information regarding each prescription dispensed for a controlled substance to the state's prescription drug monitoring program by electronic means unless specifically exempted by federal law.

2.2 Reporting Requirements

All dispensers of Schedule II–V controlled substance prescriptions and designated drugs of concern and outpatient (take-home medications) are required to collect and report their dispensing information. "Dispenser" means an individual who delivers a controlled substance to the ultimate user but does not include:

- a. A licensed hospital pharmacy that provides a controlled substance for the purpose of inpatient hospital care; or
- b. A licensed healthcare practitioner or other authorized individual in those instances when the practitioner administers a controlled substance to a patient. For purposes of this section, "administer" means the direct application of a controlled substance to the body of a patient and does not include the prescribing of a controlled substance for administration by the patient or someone other than the healthcare practitioner.

Each dispenser shall submit the required fields to the data repository at least **once every day unless the board waives this requirement** for good cause shown by the dispenser. An extension of the time in which a dispenser must report the information required by this chapter may be granted to a dispenser that is unable to submit prescription information by electronic means if:

- The dispenser suffers a mechanical or electronic failure or cannot report within the required time for other reasons beyond the dispenser's control; or
- The central repository is unable to receive electronic submissions.

If you are a chain pharmacy, your data will likely be submitted from your home office. Please verify this with your home office. If you are an independent

pharmacy or other entity, please forward the reporting requirements to your software vendor. They will need to create the data file, and they may be able to submit the data on your behalf. If not, follow the instructions provided in the [Data Submission](#) chapter to submit the data.

3 Data Submission

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

3.1 Timeline and Requirements

- Pharmacies and software vendors can create their PMP Clearinghouse 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 April 2, 2014, dispensers are required to transmit their data on a daily basis using PMP Clearinghouse in accordance with the guidelines outlined under [Reporting Requirements](#).

3.2 Upload Specifications

Files should be submitted using the ASAP 4.2 format, released in November 2017. The ASAP 4.2 format is defined in [Appendix A: ASAP 4.2 Specifications](#). Files for upload should be named in a unique fashion, with a prefix constructed from the date (YYYYMMDD) and a suffix of ".dat". An example file name would be "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.

Prescription information must be reported daily for the preceding day.

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

Perform the following steps to create an account:

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

The screenshot shows the 'Account Registration' form. It is divided into three main sections: 'Profile Details', 'Personal Information', and 'Employer Information'. The 'Profile Details' section includes fields for 'Email Address *', 'Password *', and 'Password confirmation *'. The 'Personal Information' section includes fields for 'First name *', 'Middle name', and 'Last name *', along with search boxes for 'DEA' and 'NPI'. The 'Employer Information' section is partially visible at the bottom with a 'Name *' field. A red asterisk (*) indicates required fields.

2. Complete your Profile Details.

This close-up screenshot focuses on the 'Profile Details' section. It shows the 'Email Address *' field, the 'Password *' field, and the 'Password confirmation *' field. A red asterisk (*) is visible next to the 'Email Address' label, indicating it is a required field.

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

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

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

Passwords must contain:

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

3. Complete your Personal and Employer information, noting the following:
- Required fields are marked with a red asterisk (*).

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

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="text"/>

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="text"/>

- 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.

<input type="checkbox"/> Enable SFTP Access
<input type="checkbox"/> Enable Real-Time Access

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

The SFTP access fields are displayed.

The screenshot shows a web form titled "Data Submission". At the top, there is a grey informational box stating: "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." Below this, there are three main sections: 1) A checkbox labeled "Enable SFTP Access" which is checked. 2) Three text input fields labeled "SFTP Username", "SFTP Password", and "SFTP Password Confirmation". 3) A checkbox labeled "Enable Real-Time Access" which is unchecked. Below the password fields, there is a small text requirement: "Password must include at least 8 characters, including 1 capital letter, 1 lowercase letter, and 1 special character (such as !, @, #, \$)".

- b. Your **SFTP Username** is automatically generated using the first five characters of your employer's name + your employer's phone number + @prodmpsfpt. 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@prodmpsfpt*.
- 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 C: SFTP Configuration](#).*

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

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

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

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

Profile

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

Employer

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

Data Acceptance

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

Submission Destinations

Demo State

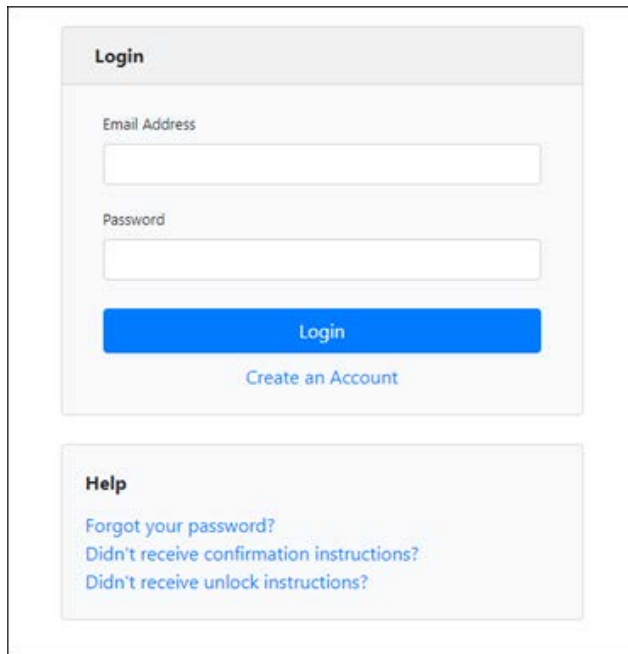
[Continue](#)

7. Click **Continue**.

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

4.2 Logging In to PMP Clearinghouse

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

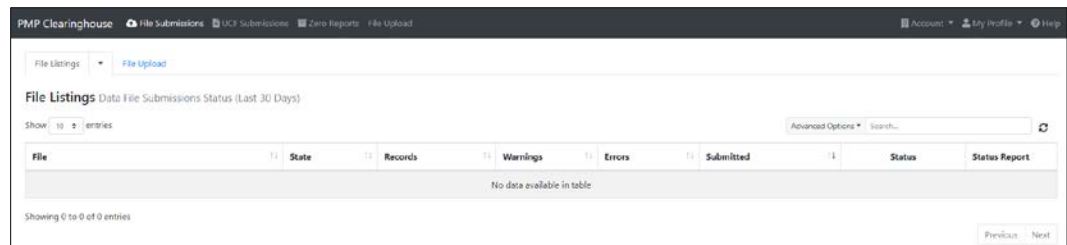


2. Enter the email address you used to create your account in the **Email Address** field.
3. Enter your password in the **Password** field.

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

4. Click **Login**.

The PMP Clearinghouse home page is displayed.



File	State	Records	Warnings	Errors	Submitted	Status	Status Report
No data available in table							

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	12
Manual Entry (UCF)	13
Zero Reports	16

5.1 Secure FTP

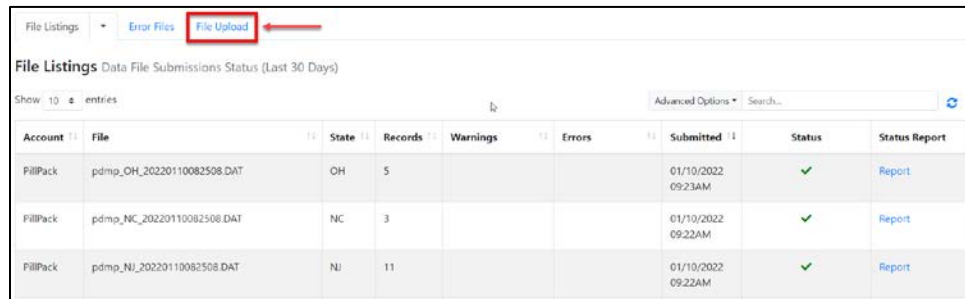
If you are submitting data to PMP Clearinghouse using SFTP, you must configure individual subfolders for the PMP systems to which you are submitting data. These subfolders must be created in the *homedir/directory* folder, which is where you are directed once authenticated, and **should be named using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

1. If you do not have a PMP Clearinghouse account, perform the steps in [Creating Your Account](#).
Or
2. If you have a PMP Clearinghouse account but have not enabled SFTP access, perform the steps in [Adding SFTP Access to an Upload Account](#).
3. Prepare the data file(s) for submission, using the ASAP specifications described in [Appendix A: ASAP 4.2 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 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.

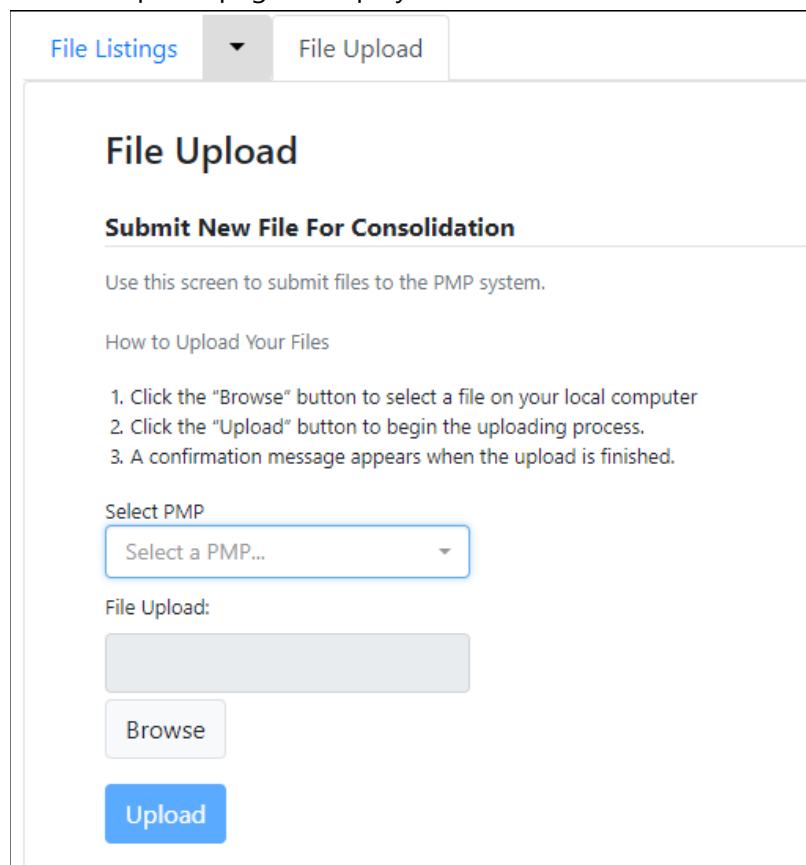
5.2 Web Portal Upload

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



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

The File Upload page is displayed.



File Upload

Submit New File For Consolidation

Use this screen to submit files to the PMP system.

How to Upload Your Files

1. Click the "Browse" button to select a file on your local computer
2. Click the "Upload" button to begin the uploading process.
3. A confirmation message appears when the upload is finished.

Select PMP

Select a PMP...

File Upload:

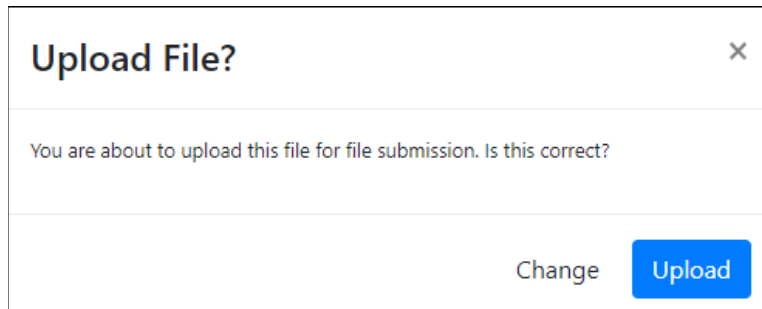
Browse

Upload

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 Submissions page.

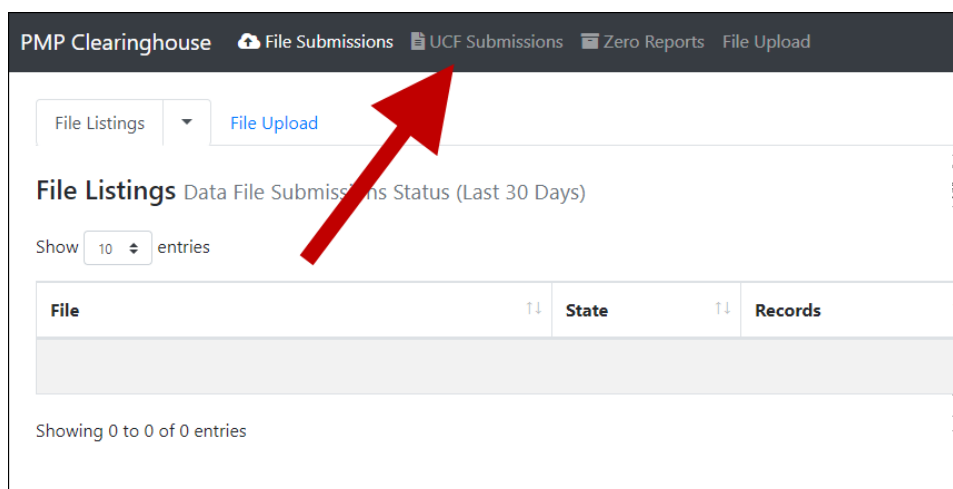
Note: When uploading a file, the file name must be unique. If the file name is not unique, a message is displayed indicating that the file name has already been taken.

5.3 Manual Entry (UCF)

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**.

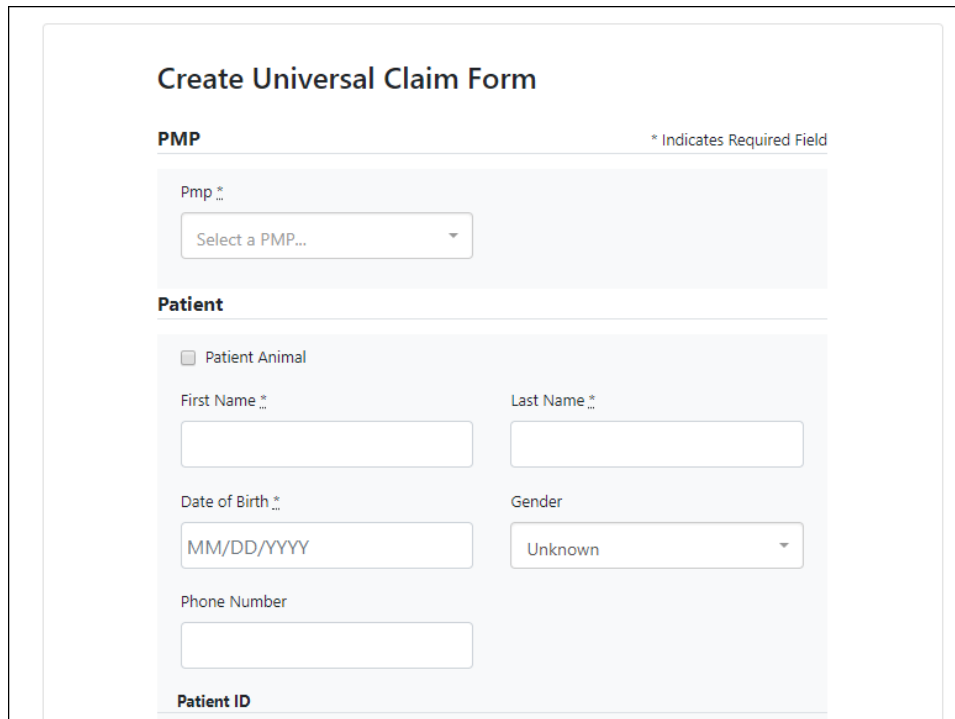


The UCF Listings page is displayed.



Created at	State	Warnings	Errors	Status
01/15/2019 02:13 PM	KS	0	0	✓
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	✓

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



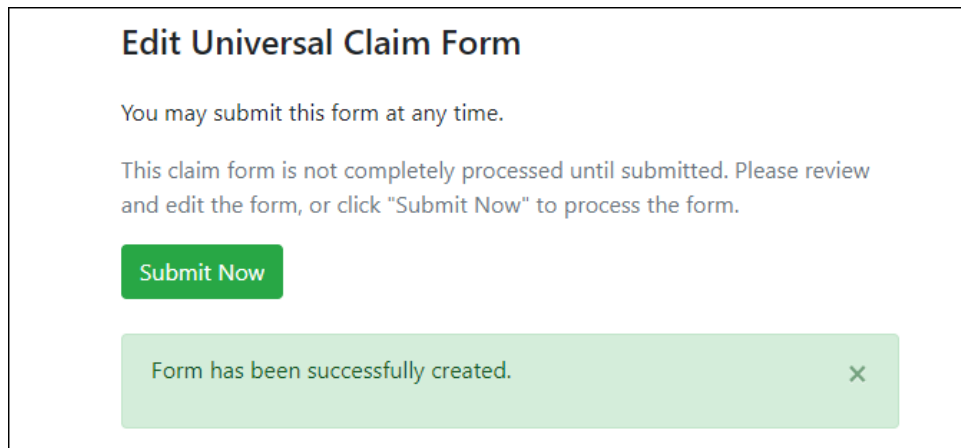
5. Select the PMP to which you are submitting data from the drop-down list in the **Select PMP** field.
6. Complete the required fields.

Notes:

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

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

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



Edit Universal Claim Form

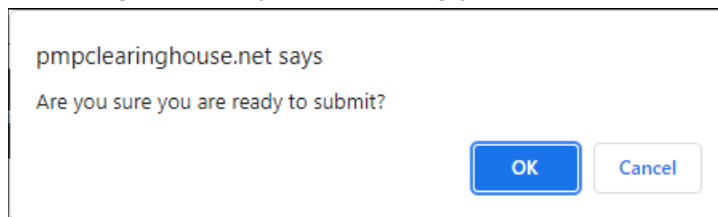
You may submit this form at any time.

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.

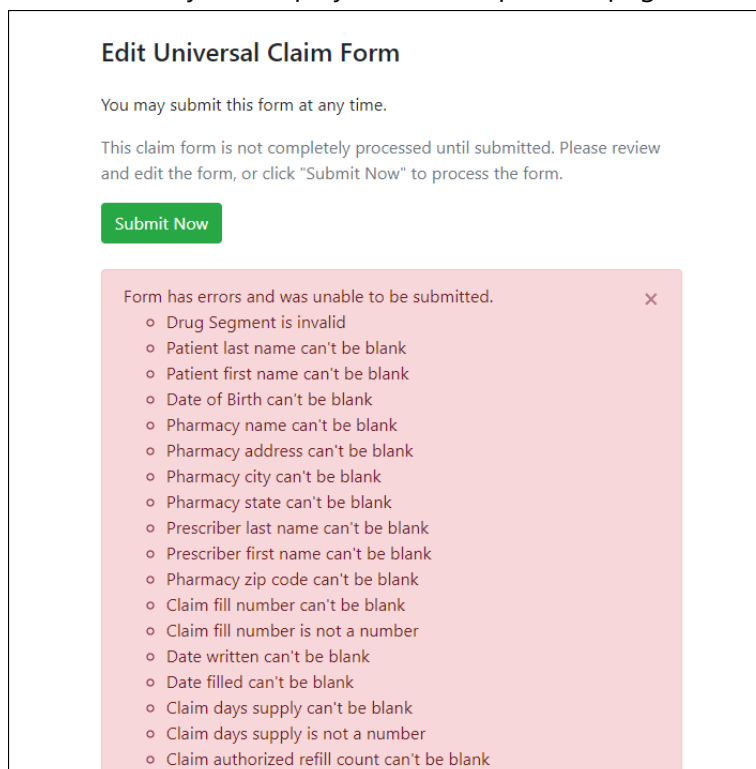


pmpclearinghouse.net says

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

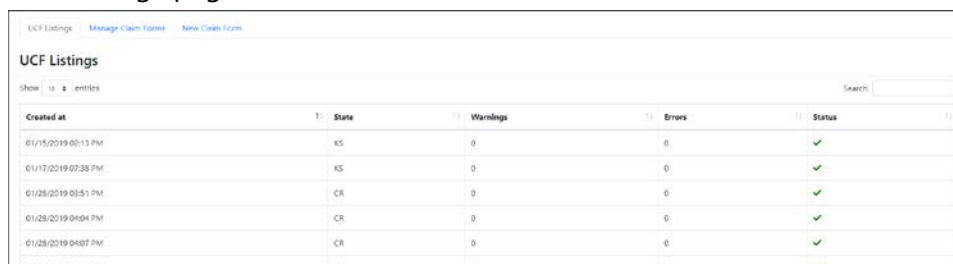
Form has errors and was unable to be submitted. ×

- 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 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 08:51 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 04:13 PM	CR	0	0	✓

5.4 Zero Reports

If you have no dispensations to report for the preceding reporting period, you must report this information to the North Dakota PDMP.

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:

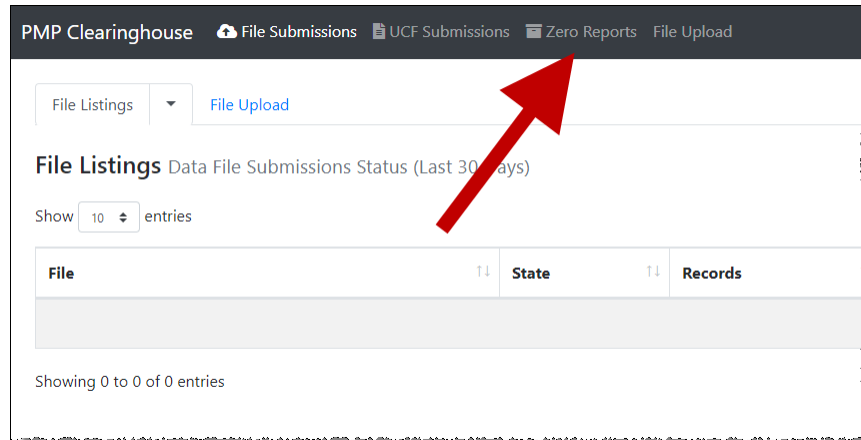
- [Submit a single-click zero report](#)
- [Create a new zero report](#)

5.4.1 Submit a Single-Click Zero Report

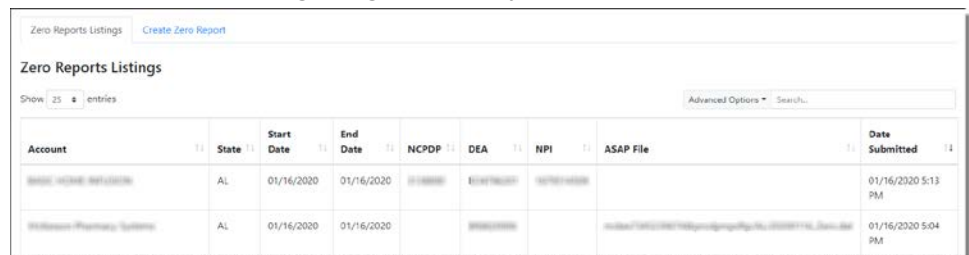
Single-click zero reporting allows you to create a profile for the pharmacy that includes its identifiers (e.g., DEA, NPI, NCPDP), so you do not have to enter it each time you submit a zero report.

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**.

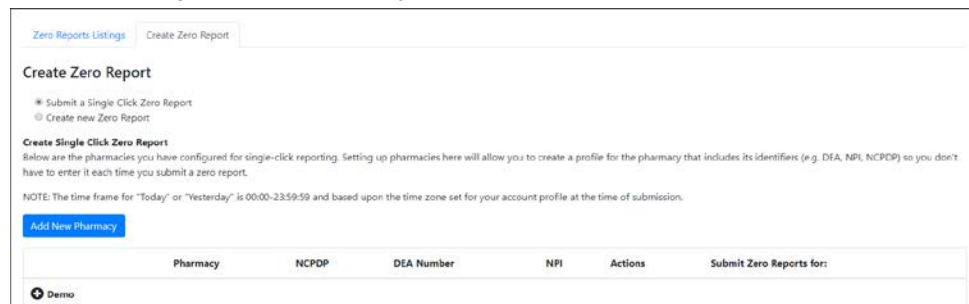


The Zero Report Listings page is displayed.



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

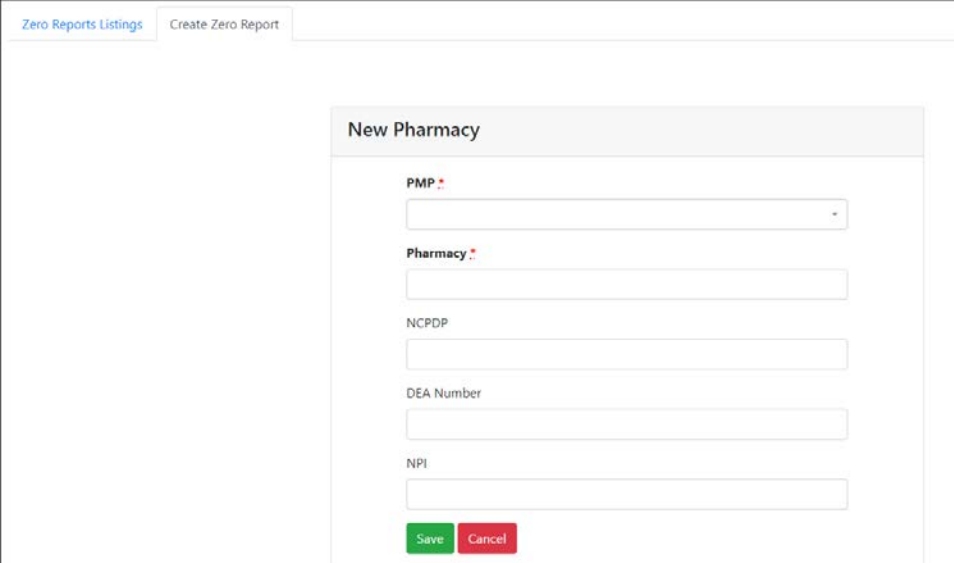
The Create Zero Report page is displayed. *Note that **Submit a Single Click Zero Report** is selected by default.*



- 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](#).

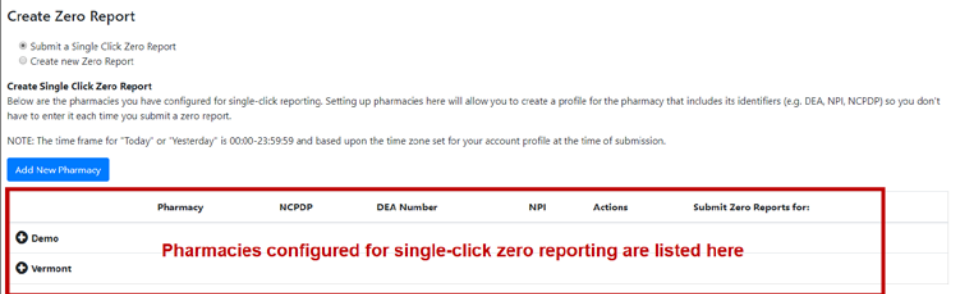
5. Click **Add New Pharmacy**.

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:
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	License Number	NCPDP	DEA Number	NPI	Actions	Submit Zero Reports for:
Demo						
Another Test Pharmacy					Edit Delete	Today 12/22/2021 Yesterday 12/21/2021
Bamboo Health Test Pharmacy					Edit Delete	Today 12/22/2021 Yesterday 12/21/2021

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.

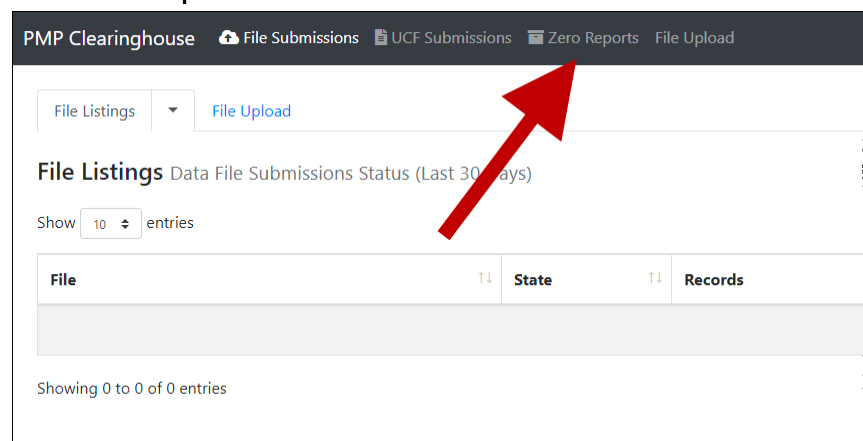
Pharmacy	License Number	NCPDP	DEA Number	NPI	Actions	Submit Zero Reports for:
Demo						
Another Test Pharmacy					Edit Delete	Today 12/22/2021 Yesterday 12/21/2021
Bamboo Health Test Pharmacy					Edit Delete	Submitted Yesterday 12/21/2021

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	01/16/2020	01/16/2020	...	...	...	...	01/16/2020 5:13 PM
...	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.*

Create Zero Report

Submit a Single Click Zero Report
 Create new Zero Report

Create Single Click Zero Report
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.
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.

[Add New Pharmacy](#)

Pharmacy	NCPDP	DEA Number	NPI	Actions	Submit Zero Reports for:
➔ Demo					

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

The Create Zero Report page is displayed.

Create Zero Report

Submit a Single Click Zero Report
 Create new Zero Report

PMP * NCPDP

Select a PMP..

Start date * DEA Number

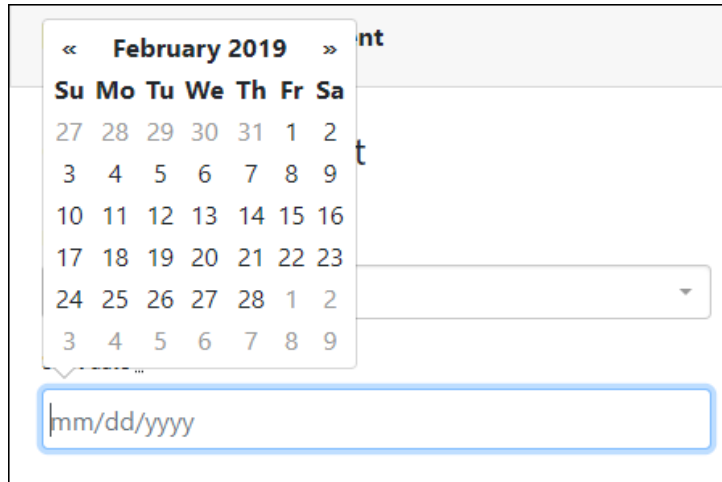
mm/dd/yyyy

End date * NPI

mm/dd/yyyy

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 PMP, they will be marked with a red asterisk (*).*

9. Click **Submit**.

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

6 Data Compliance

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

6.1 File Listings


The File Listings page displays information extracted from the data files submitted to PMP Clearinghouse, including the file name, number of records identified within the data file, number of records that contain warnings, number of records that contain errors, and the date and time of submission. Click **File Submissions** to access this page.

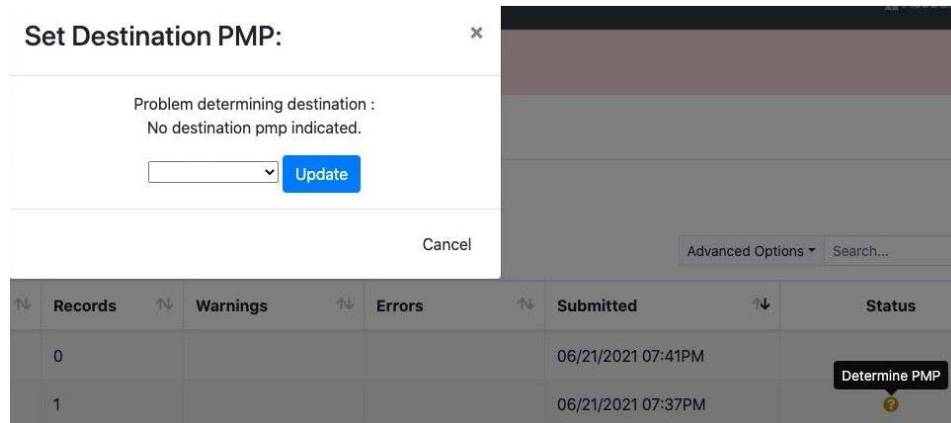
Account	File	State	Records	Warnings	Errors	Submitted	Status	Status Report
SMITHERMANS PHARMACY	pa_test.dat	PA	45	-	-	06/07/2019 02:50PM	Error Threshold Exceeded	45 of 45
SMITHERMANS PHARMACY	6ee803f3-7704-4ee4-8288-058a5d1a4d13p.dat	DO	20			05/31/2019 06:13PM	✓	Report
SMITHERMANS PHARMACY	6ee803f3-7704-4ee4-8288-058a5d1a4d13.dat	DO	20			05/31/2019 05:46PM	✓(test file)	Report

- The **Status** column, located at the end of each row, displays the file status via color-coded icon. Hovering over the icon will display the status message.
- The **Status Report** column, located next to the **Status** column, contains a link to the status report for that file. Please refer to [File Status Report](#) for more information on how to read and interpret this report.

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

Created at	State	Warnings	Errors	Status
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.

Created at	State	Warnings	Errors	Status
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
06/10/2019 5:51 PM	rweaver@appriss.com	rweaver@appriss.com	AK

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 *
Alaska

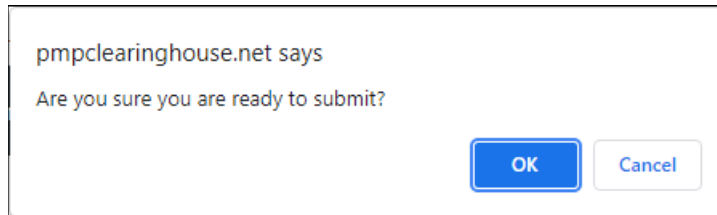
Patient

Patient Animal

First Name * Last Name *

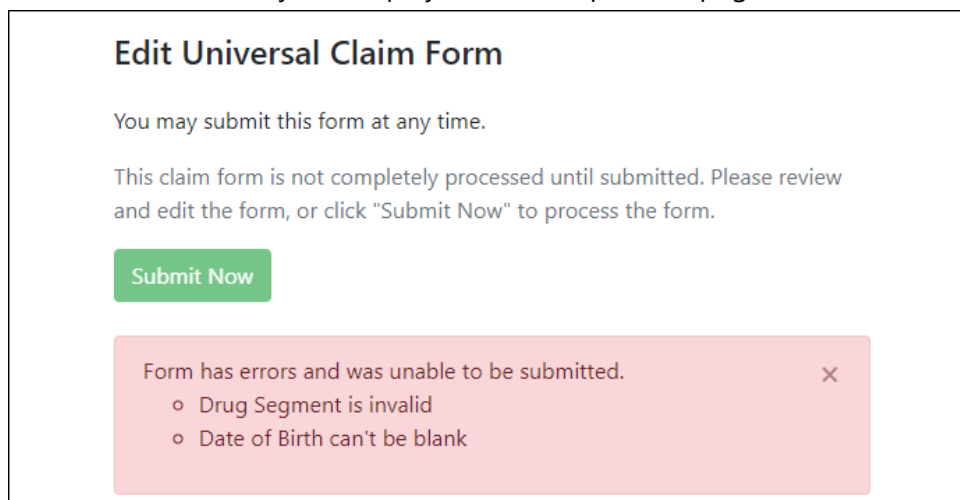
3. Make the necessary corrections or changes, and then click **Submit Now**, located at the top of the page.

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



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 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
BM4507616		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 4.2 standard requires a pharmacy to select an indicator in the **DSP01** (Reporting Status) field. These indicators allow you to submit new records, revise and resubmit records, and void (delete) erroneous records. These actions are indicated by supplying one of the following values in the **DSP01** field:

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

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)

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: North Dakota ASAP file: fake-test3.txt - Parse Failure

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

Summary:
* File Name: fake-test3.txt
* ASAP Version: 4.2
* Transaction Control Number: unparseable
* Transaction Control Type: unparseable
* Date of Submission: April 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	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: North Dakota ASAP file: fake-test3.txt - Status Report

BODY:

DEA	NCPDP	NPI	Prescription	Filled	Segment	Field	Type	Message
BE1234567	1347347	9034618394	123486379596-0	20220808	Dispensation	refill_number	WARNING	message example
DE9841394	3491849	4851947597	357199504833-345	20220808	Dispensation	days_supply	ERROR	message example

Summary:

- * File Name: fake-test3.txt
- * ASAP Version: 4.2
- * Transaction Control Number: 23489504823
- * Transaction Control Type: send
- * Date of Submission: August 09, 2022
- * 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 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: North Dakota
- * Date Range: 2022-03-06 - 2022-03-06
- * Submission Date: 2022-03-07
- * ASAP Creation Date: 2022-03-07

8 Managing Your Upload Account

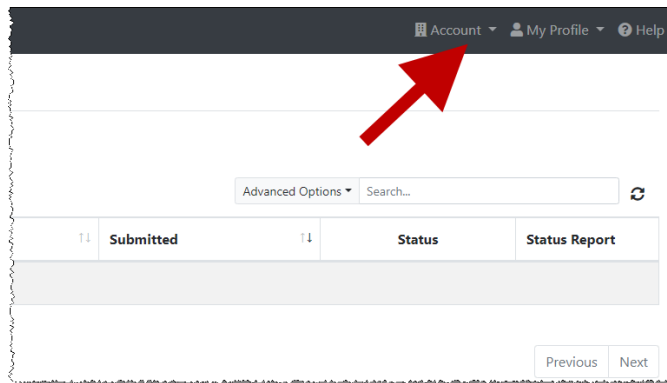
The **Account** menu option allows you to manage the information associated with your organization's upload account, including adding users, PMPs, and SFTP access to your account as well as editing your organization's account information.

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 [Managing Your User Profile](#).

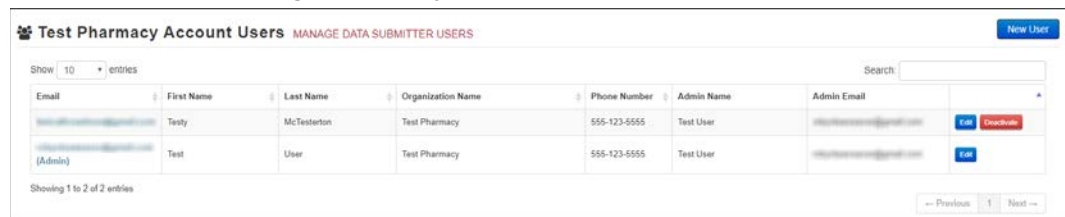
8.1 Adding Users to Your Upload Account

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**.

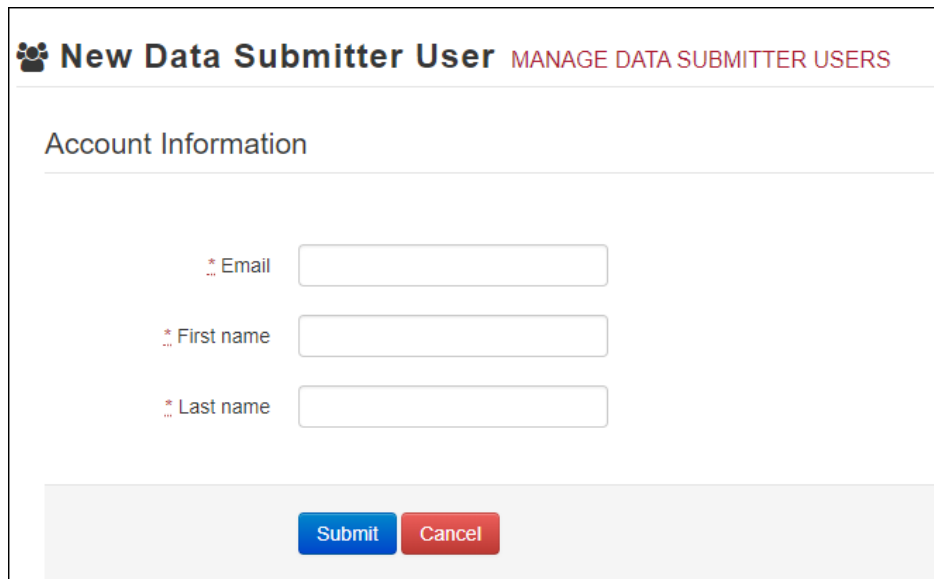


3. Select **Users** from the **Account** drop-down menu.
The Account Users page is displayed.



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

The New Data Submitter User page is displayed.



New Data Submitter User [MANAGE DATA SUBMITTER USERS](#)

Account Information

* Email

* First name

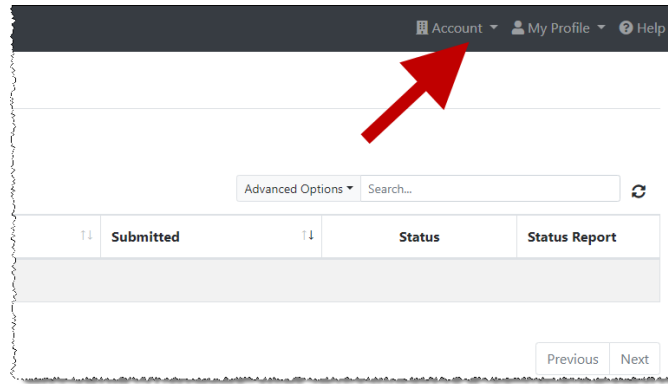
* Last name

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.

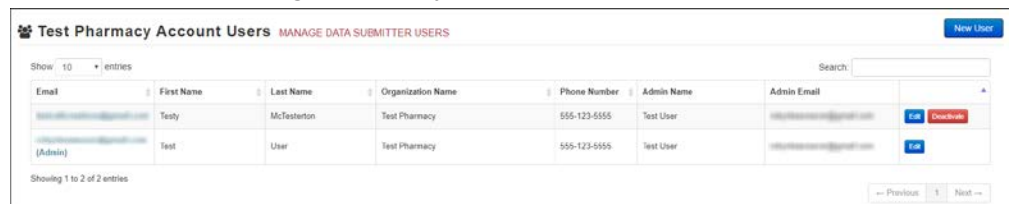
8.1.1 Changing Another User's Password

If a user is unable to update their own password, a data submitter can update a password for any additional users linked to the admin account.

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



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



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

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

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

Passwords must contain:

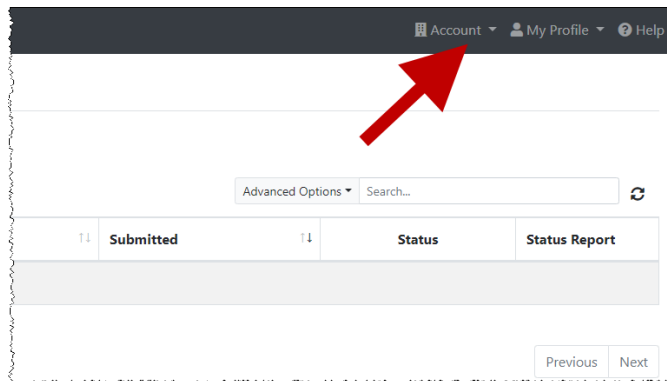
- *At least eight (8) characters*
- *One (1) uppercase letter*
- *One (1) lowercase letter*
- *One (1) number*
- *One (1) special character, such as !, @, #, \$, etc.*

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

8.2 Adding PMPs to Your Upload Account

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

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



3. Select **Multi State Approval** from the **Account** drop-down menu.
The **Multi State Approval** page is displayed. This page displays all PMPs currently using the PMP AWARxE system as well as your data sharing status with each PMP.



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

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

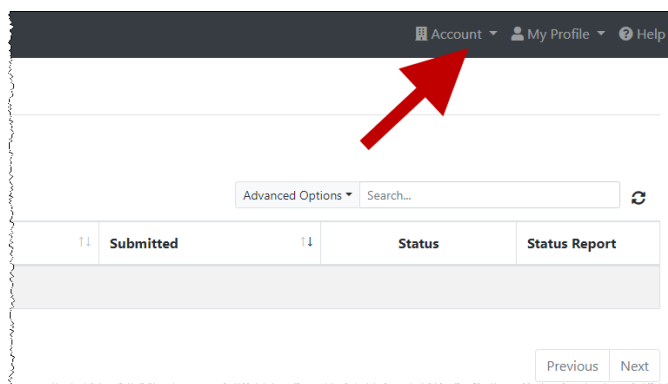
Notes:

- If you are submitting data via SFTP, the file must be located in the proper subfolder to ensure delivery to the desired PMP.
- To cancel data submission to a PMP, uncheck the box for that PMP. Note that if you need to submit data to that PMP again in the future, you will have to go through the approval process again.

8.3 Adding SFTP Access to an Upload Account

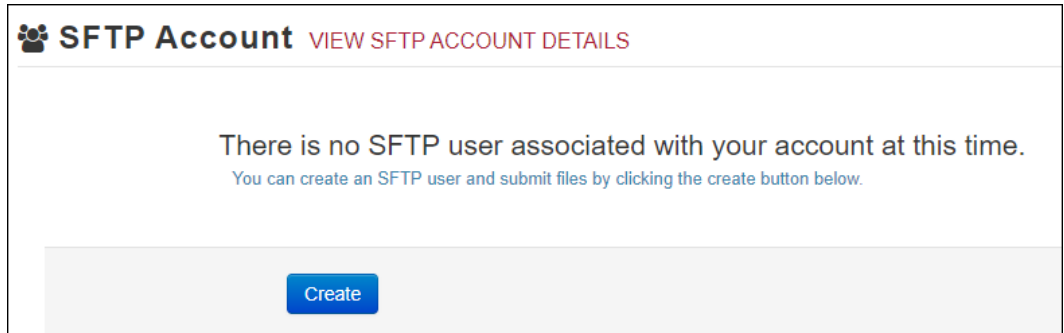
If a registered upload account did not request an SFTP account during the account creation process, you can request one at any time using the **Account** menu option.

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



3. Select **SFTP Details**.

The SFTP Account page is displayed.

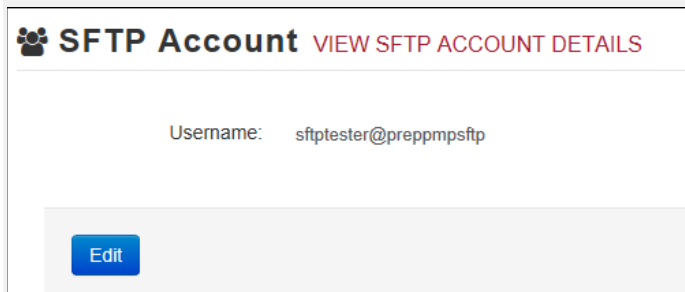


SFTP Account [VIEW SFTP ACCOUNT DETAILS](#)

There is no SFTP user associated with your account at this time.
You can create an SFTP user and submit files by clicking the create button below.

[Create](#)

Note: If an SFTP account already exists for the upload account, the username is displayed on the SFTP Account page.



SFTP Account [VIEW SFTP ACCOUNT DETAILS](#)

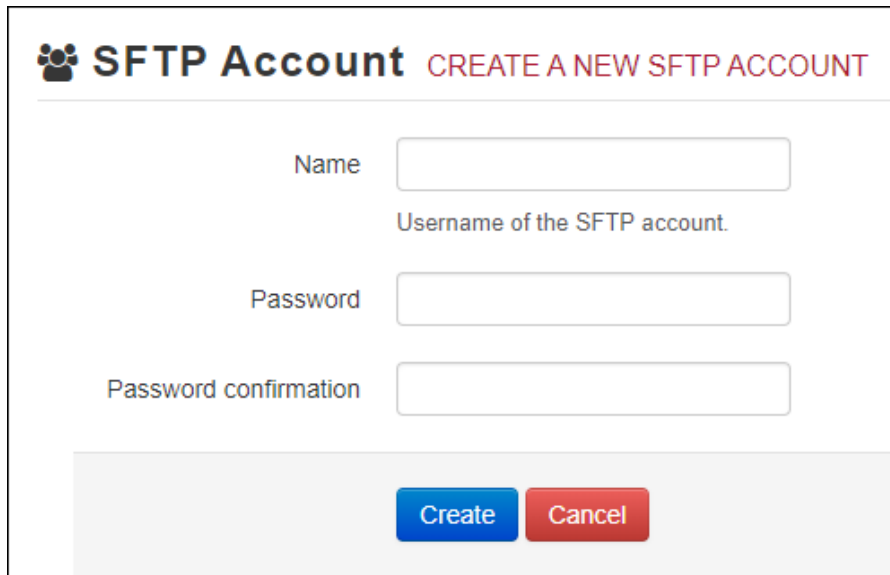
Username: sftp tester@preppmpsfpt

[Edit](#)

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 Account [CREATE A NEW SFTP ACCOUNT](#)

Name
Username of the SFTP account.

Password

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.*

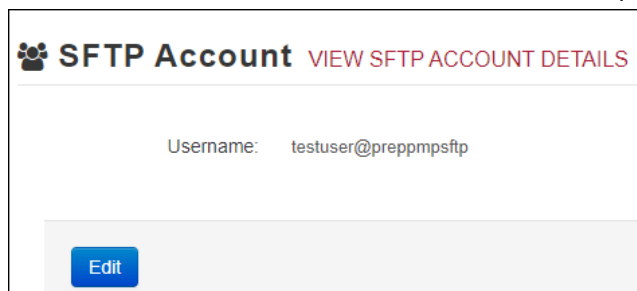
Once the account has been successfully created, this password will be input into the pharmacy software so that submissions can be automated.

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 <sftp://sftp.pmpclearinghouse.net>.*
- *Additional details on SFTP configuration can be found in [Appendix C: SFTP Configuration](#).*

7. Click **Create**.

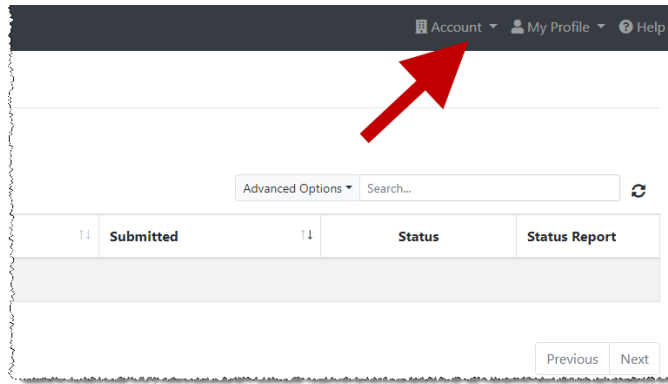
The account is created, and the username is displayed.



8.4 Editing Your Upload Account

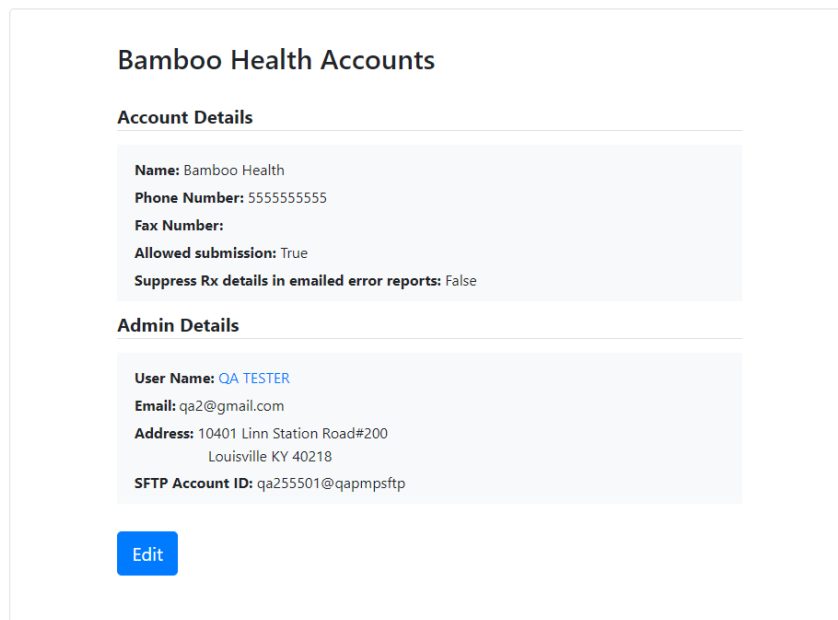
Note: *This function only allows you to edit your organization's upload account. If you need to edit your individual profile information, please refer to [Editing Your Profile](#).*

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



3. Select **Account Details**.

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



4. Click **Edit**.

The Edit Account page is displayed.

Edit Bamboo Health Account

Account Details * Indicates Required Field

Name *
Bamboo Health

Phone number: 5555555555
Fax number: [Empty]

Allowed submission
 Suppress Rx details in emailed error reports

Admin Details

Address: 10401 Linn Station Road#200

City: Louisville
Zip code: 40218

State: Kentucky

Save Changes Cancel

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

9 Managing Your User Profile

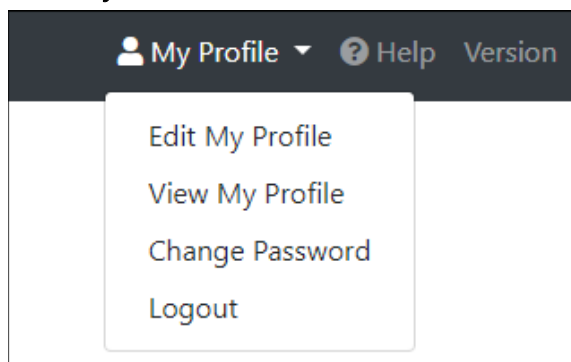
This chapter describes how to manage your individual user profile, including how to edit your profile and manage your password.

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**.

Edit Profile

Profile Details * Indicates Required Field

First name * <input type="text" value="Test"/>	Last name * <input type="text" value="User"/>
Email * <input type="text" value="testuser@email.com"/>	Time zone (GMT-05:00) Eastern Time (US & CA)

Disable report emails

Organization Information

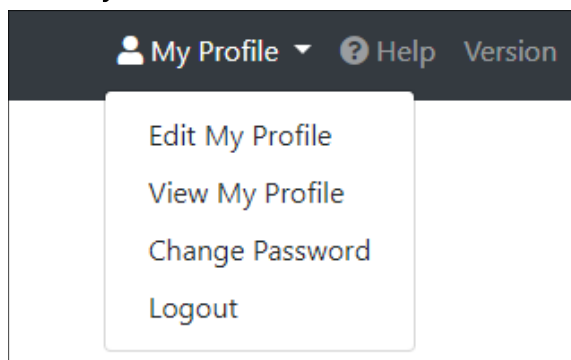
Name: Bamboo Health Test Pharmacy
Admin: Test Admin
Admin Email: testadmin@email.com

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**.

Change Password

Profile Details * Indicates Required Field

Email: testuser@email.com

Current password *

we need your current password to confirm your changes

Password *

Password confirmation *

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

Passwords must contain:

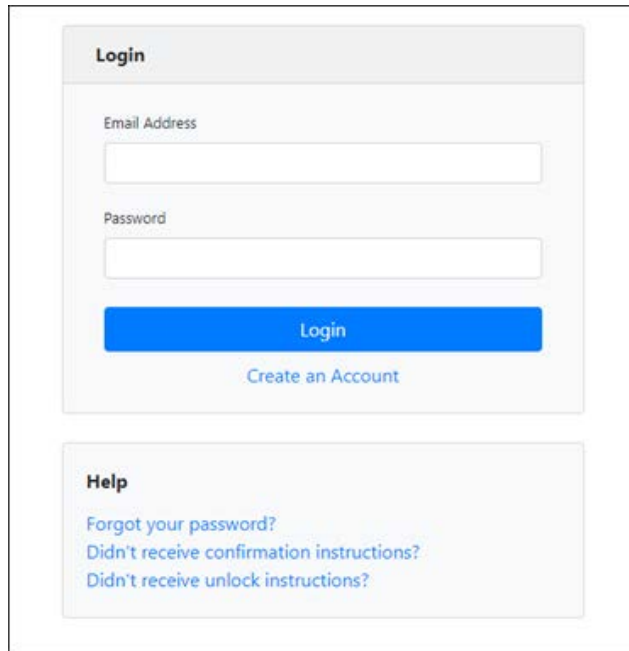
- *At least eight (8) characters*
- *One (1) uppercase letter*
- *One (1) lowercase letter*
- *One (1) number*
- *One (1) special character, such as !, @, #, \$, etc.*

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

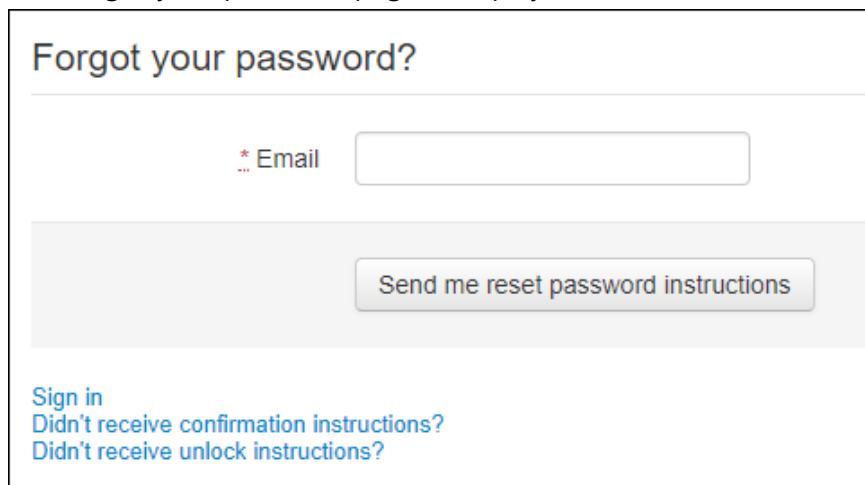
9.3 Resetting Your Password

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

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

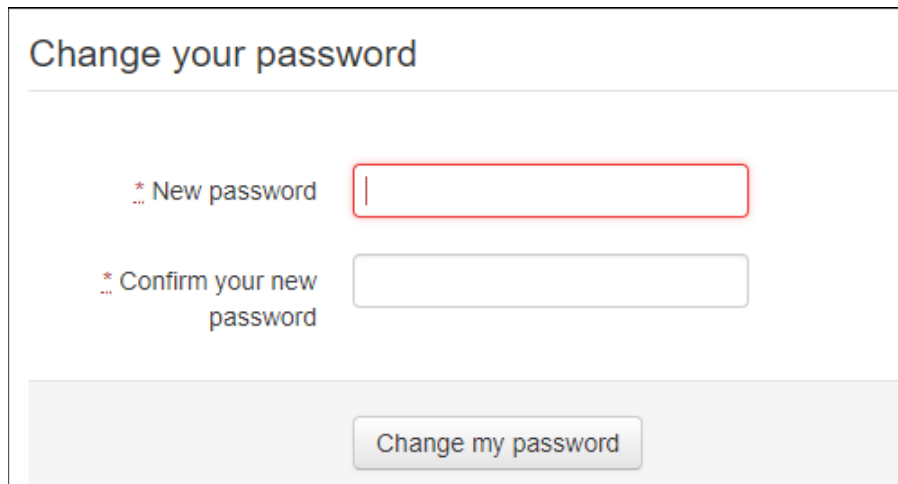


2. Click the **Forgot your password?** link, located in the Help section of the page. The Forgot your password page is displayed.



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

The Change your password page is displayed.



The screenshot shows a web form titled "Change your password". It contains two text input fields. The first field is labeled with a red asterisk and the text "New password". The second field is labeled with a red asterisk and the text "Confirm your new password". Below the fields is a button labeled "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 1-855-563-4767 (1-855-5ND-4PMP);
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 have non-technical questions regarding the North Dakota PDMP, please contact:

North Dakota Prescription Drug Monitoring Program

Phone: 701-877-2410

Fax: 701-877-2405

Email: pdmp@ndboard.pharmacy

11 Document Information

11.1 Disclaimer

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

11.2 Change Log

Version	Date	Chapter/Section	Change Made
1.0	2017	N/A	N/A; initial publication
2.0	01/16/2020	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
		6.3.3/ Error Correction via File Submission	Added clarification on correcting errors by submitting a revision file using 01 (revise) in the DSP01 field
		Appendix A/ASAP 4.2 Specifications	Changed the reporting requirement for PHA01 from "N" to "R"
		Changed the reporting requirement for PRE03 from "R" to "S"	
2.1	03/23/2021	Appendix A/ASAP 4.2 Specifications	Changed the reporting requirement to "R" for the following fields: PHA10, PAT01, PAT02, PAT03, PAT17, PAT20, PRE05, PRE06
			Changed the reporting requirement to "S" for the following fields: PAT09, PAT11, DSP17

Version	Date	Chapter/Section	Change Made
2.2	04/27/2021	2.2/Reporting Requirements	Updated definition of "dispenser"
		10.2/Administrative Assistance	Updated ND PDMP email address
		Appendix A/ASAP 4.2 Specifications	Added definition for "S = Situational"
			Changed TH03, PHA10, PHA11, PAT01, PRE05, PRE06, and PRE08 from "N" to "R"
		Changed PAT11, PAT13, DSP13, and DSP17 from "N" to "S"	
Appendix D/ Reporting Recommendations	Added new appendix		
	10/19/2021	Added Appendix E / Jurisdictions and States	Added reference to PAT01 pg. 47.
			Added list of all allowable states/jurisdictions under Appendix E
3.0	05/10/2022	Global	Updated guide to reflect Bamboo Health branding
3.1	2/9/2023	Appendix D/ Reporting Recommendations	Updated appendix

Appendix A: ASAP 4.2 Specifications

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

The following table lists the Segment, Element ID, Element Name, and Requirement. The Requirement column uses the following codes:

- R = Required by North Dakota
- N = Not required
- S = Situational – **must provide if applicable to the prescription**

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

Segment	Element ID	Element Name	Requirement
TH: Transaction Header (required)			
Used to indicate the start of a transaction. It also assigns the data element separator, segment terminator, and control number.			
	TH01	Version/Release Number Code uniquely identifying the transaction. <i>Note: Format = xx.x</i>	R
	TH02	Transaction Control Number Sender assigned code uniquely identifying a transaction.	R
	TH03	Transaction Type Identifies the purpose of initiating the transaction. <ul style="list-style-type: none"> • 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) 	R
	TH04	Response ID Contains the Transaction Control Number of a transaction that initiated the transaction. Required in response transaction only.	N
	TH05	Creation Date Date the transaction was created. <i>Note: Format = CCYYMMDD.</i>	R

Segment	Element ID	Element Name	Requirement
	TH06	Creation Time Time the transaction was created. <i>Note: Format = HHMMSS or HHMM.</i>	R
	TH07	File Type <ul style="list-style-type: none"> P = Production T = Test 	R
	TH08	Routing Number Reserved for real-time transmissions that go through a network switch to indicate, if necessary, the specific PMP the transaction should be routed to.	N
	TH09	Segment Terminator Character This terminates the TH segment and sets the actual value of the data segment terminator for the entire transaction.	R
IS: Information Source (required) Used to convey the name and identification numbers of the entity supplying the information.			
	IS01	Unique Information Source ID Reference number or identification number. (Example: phone number)	R
	IS02	Information Source Entity Name Entity name of the Information Source.	R
	IS03	Message Free-form text message.	N
PHA: Pharmacy Header (required) Used to identify the pharmacy. Note: It is required that information be provided in at least one of the following fields: PHA02 or PHA03.			
	PHA01	National Provider Identifier (NPI) Identifier assigned to the pharmacy by CMS.	R
	PHA02	NCPDP/NABP Provider ID Identifier assigned to pharmacy by the National Council for Prescription Drug Programs. <i>Note: Required unless PHA03 is populated, then optional.</i>	R
	PHA03	DEA Number Identifier assigned to the pharmacy by the Drug Enforcement Administration. <i>Note: Required unless PHA02 is populated, then optional.</i>	R
	PHA04	Pharmacy Name Free-form name of the pharmacy.	R

Segment	Element ID	Element Name	Requirement
	PHA05	Address Information – 1 Free-form text for address information.	N
	PHA06	Address Information – 2 Free-form text for address information.	N
	PHA07	City Address Free-form text for city name.	N
	PHA08	State Address U.S. Postal Service state code or other regional jurisdiction code. <i>Note: State abbreviations must be provided in a 2-character format (ex. ND)</i>	N
	PHA09	ZIP Code Address U.S. Postal Service ZIP Code.	N
	PHA10	Phone Number Complete phone number including area code. Do not include hyphens.	R
	PHA11	Contact Name Free-form name.	R
	PHA12	Chain Site ID Store number assigned by the chain to the pharmacy location. Used when the PMP needs to identify the specific pharmacy from which information is required.	N
PAT: Patient Information (required)			
Used to report the patient's name and basic information as contained in the pharmacy record.			
	PAT01	ID Qualifier of Patient Identifier Code identifying the jurisdiction that issues the ID in PAT03. Reference Appendix E for additional details on accepted values.	R
	PAT02	ID Qualifier Code to identify the type of ID in PAT03. If PAT02 is used, PAT03 is required. <ul style="list-style-type: none"> • 01 Military ID • 02 State Issued ID • 03 Unique System ID • 04 Permanent Resident Card (Green Card) • 05 Passport ID • 06 Driver's License ID • 99 Other (agreed upon ID) 	R

Segment	Element ID	Element Name	Requirement
	PAT03	ID of Patient Identification number for the patient as indicated in PAT02. An example would be the driver's license number.	R
	PAT04	ID Qualifier of Additional Patient Identifier Code identifying the jurisdiction that issues the ID in PAT06. Used if the PMP requires such identification.	N
	PAT05	Additional Patient ID Qualifier Code to identify the type of ID in PAT06 if the PMP requires a second identifier. If PAT05 is used, PAT06 is required. <ul style="list-style-type: none"> • 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) 	N
	PAT06	Additional ID Identification that might be required by the PMP to further identify the individual. An example might be that in PAT03 driver's license is required and in PAT06 Social Security number is also required.	N
	PAT07	Last Name Patient's last name.	R
	PAT08	First Name Patient's first name.	R
	PAT09	Middle Name Patient's middle name or initial if available.	R (If available)
	PAT10	Name Prefix Patient's name prefix such as Mr. or Dr.	N
	PAT11	Name Suffix Patient's name suffix such as <i>Jr.</i> or <i>the III.</i>	R (If available)
	PAT12	Address Information – 1 Free-form text for street address information.	R
	PAT13	Address Information – 2 Free-form text for additional address information.	R (If available)
	PAT14	City Address Free-form text for city name.	R

Segment	Element ID	Element Name	Requirement
	PAT15	<p>State Address U.S. Postal Service state code or other regional jurisdiction code.</p> <p>Note: Field has been sized to handle international patients not residing in the US. US States should be indicated in a 2-character format (ex. ND)</p>	R
	PAT16	<p>ZIP Code Address U.S. Postal Service ZIP code.</p> <p>Note: Populate with zeros if patient address is outside the U.S.</p>	R
	PAT17	<p>Phone Number Complete phone number including area code. Do not include hyphens.</p> <p>Note: For situations in which the patient does not have a phone number, submit ten 9s (i.e., 9999999999).</p>	R
	PAT18	<p>Date of Birth Date patient was born.</p> <p>Note: Format = CCYYMMDD</p>	R
	PAT19	<p>Gender Code Code indicating the sex of the patient.</p> <ul style="list-style-type: none"> • F Female • M Male • U Unknown 	R
	PAT20	<p>Species Code Used if required by the PMP to differentiate a prescription for an individual from one prescribed for an animal.</p> <ul style="list-style-type: none"> • 01 Human • 02 Veterinary Patient 	R

Segment	Element ID	Element Name	Requirement
	PAT21	Patient Location Code Code indicating where patient is located when receiving pharmacy services. <ul style="list-style-type: none"> • 01 Home • 02 Intermediary Care • 03 Nursing Home • 04 Long-Term/Extended Care • 05 Rest Home • 06 Boarding Home • 07 Skilled-Care Facility • 08 Sub-Acute Care Facility • 09 Acute Care Facility • 10 Outpatient • 11 Hospice • 98 Unknown • 99 Other 	N
	PAT22	Country of Non-U.S. Resident Used when the patient's address is a foreign country.	N
	PAT23	Name of Animal Used if required by the PMP for prescriptions written by a veterinarian and the pharmacist has access to this information at the time of dispensing the prescription.	R (If available)
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). 	R
	DSP02	Prescription Number Serial number assigned to the prescription by the pharmacy.	R
	DSP03	Date Written Date the prescription was written (authorized). <i>Note: Format = CCYYMMDD</i>	R

Segment	Element ID	Element Name	Requirement
	DSP04	Refills Authorized The number of refills authorized by the prescriber.	R
	DSP05	Date Filled Date prescription was filled. <i>Note: Format = CCYYMMDD</i>	R
	DSP06	Refill Number Number of the fill of the prescription. <i>Note: 0 indicates New Rx; Refill Numbers must be within a range of 01-99.</i>	R
	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) 	R
	DSP08	Product ID Full 11-digit NDC number, created by adding a leading zero to the appropriate segment to result in a 5-4-2 formatted NDC number, without punctuation. If 06 Compound is indicated in DSP07, use 99999 as the first five characters and submitter's choice for the remaining 6 digits; CDI then becomes required.	R
	DSP09	Quantity Dispensed Number of metric units dispensed in metric decimal format. Example: 2.5 <i>Note: For compounds show the first quantity in CDI04. Quantity Dispensed must be within a range of 0-999999999999.</i>	R
	DSP10	Days Supply Estimated number of days the medication will last. <i>Note: Days' Supply may not exceed 730 days</i>	R
	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) 	R

Segment	Element ID	Element Name	Requirement
	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 	R
	DSP13	Partial Fill Indicator Used when the quantity in DSP 09 is less than the metric quantity per dispensing authorized by the prescriber. This dispensing activity is often referred to as a split filling. <ul style="list-style-type: none"> • 00 Not a Partial Fill • 01 First Partial Fill <i>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.</i>	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.	N
	DSP15	Pharmacist State License Number This data element can be used to identify the pharmacist dispensing the medication. Assigned to the pharmacist by the Licensing Board.	N
	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 (cash, check, debit, credit) • 02 Medicaid • 03 Medicare • 04 Commercial Insurance • 05 Military Installations and VA • 06 Workers' Compensation • 07 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. <i>Note: Format = YYYYMMDD</i>	S (Supply if captured)

Segment	Element ID	Element Name	Requirement
	DSP18	RxNorm Code Qualifier RxNorm Code that is populated in the DRU-010-09 field in the SCRIPT transaction. <ul style="list-style-type: none"> • 01 Semantic Clinical Drug (SCD) • 02 Semantic Branded Drug (SBD) • 03 Generic Package (GPCK) • 04 Branded Package (BPCK) 	N
	DSP19	RxNorm Code Used for electronic prescriptions to capture the prescribed drug product identification.	N
	DSP20	Electronic Prescription Reference Number Used to provide an audit trail for electronic prescriptions.	N
	DSP21	Electronic Prescription Order Number This field should be populated with the Initiator Control Reference from field UIH-030-01 in the SCRIPT standard. <i>Note: DSP20 and DSP21 should be reported as a pair to the PMP, and the PMP will decide which one, if not both, it decides to capture.</i>	N
PRE: Prescriber Information (required) Used to identify the prescriber of the prescription. Note: It is required that information be provided in at least one of the following fields: PRE01 or PRE02.			
	PRE01	National Provider Identifier (NPI) Identifier assigned to the prescriber by CMS. <i>Note: Required PRE02 is populated, then optional.</i>	R
	PRE02	DEA Number Identifying number assigned to a prescriber or an institution by the Drug Enforcement Administration (DEA). <i>Note: Required PRE02 is populated, then optional.</i>	R
	PRE03	DEA Number Suffix Identifying number assigned to a prescriber by an institution when the institution's number is used as the DEA number.	S
	PRE04	Prescriber State License Number Identification assigned to the prescriber by the Licensing Board.	N
	PRE05	Last Name Prescriber's last name.	R
	PRE06	First Name Prescriber's first name.	R

Segment	Element ID	Element Name	Requirement
	PRE07	Middle Name Prescriber's middle name or initial.	N
	PRE08	Phone Number Complete phone number including area code. Do not include hyphens.	R
CDI: Compound Drug Ingredient Detail (situational)			
Use of this segment is required when medication dispensed is a compound and one of the ingredients is a PMP reporting drug. If more than one ingredient is for a prescription monitoring program reporting drug, then this would be incremented by one for each compound ingredient being reported. If CDI is filled in, the NDC of DSP08 must be 99999999999.			
	CDI01	Compound Drug Ingredient Sequence Number First reportable ingredient is 1; each additional reportable ingredient is incremented by 1.	R
	CDI02	Product ID Qualifier Code to identify the type of product ID contained in CDI03. • 01 NDC	R
	CDI03	Product ID Full 11-digit NDC number, created by adding a leading zero to the appropriate segment to result in a 5-4-2 formatted NDC number, without punctuation.	R
	CDI04	Compound Ingredient Quantity Metric decimal quantity of the ingredient identified in CDI03. Example: 2.5 Note: Compound Ingredient Quantity must be within a range of 0-99999999999.	R
	CDI05	Compound Drug Dosage Units Code Identifies the unit of measure for the quantity dispensed in CDI04. • 01 Each (used to report as package) • 02 Milliliters (ml) (for liters, adjust to the decimal milliliter equivalent) • 03 Grams (gm) (for milligrams, adjust to the decimal gram equivalent)	N
AIR: Additional Information Reporting (situational)			
Used when issued serialized Rx pads are used, the PMP 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.			

Segment	Element ID	Element Name	Requirement
	AIR01	State Issuing Rx Serial Number U.S.P.S. state code or other regional jurisdiction code that issued serialized prescription blank. This is required if AIR02 is used.	N
	AIR02	State Issued Rx Serial Number Number assigned to PMP issued serialized prescription blank.	N
	AIR03	Issuing Jurisdiction Code identifying the jurisdiction that issues the ID in AIR04. Used if required by the PMP and AIR04 is equal to 02 or 06.	N
	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. <ul style="list-style-type: none"> • 01 Military ID • 02 State Issued ID • 03 Unique System ID • 04 Permanent Resident Card (Green Card) • 05 Passport ID • 06 Driver's License ID • 08 Tribal ID • 99 Other (agreed upon ID) 	N
	AIR05	ID of Person Dropping Off or Picking Up Rx ID number of patient or person picking up or dropping off the prescription.	N
	AIR06	Relationship of Person Dropping Off or Picking Up Rx Code indicating the relationship of the person. <ul style="list-style-type: none"> • 01 Patient • 02 Parent/Legal Guardian • 03 Spouse • 04 Caregiver • 99 Other 	N
	AIR07	Last Name of Person Dropping Off or Picking Up Rx Last name of person picking up the prescription.	N
	AIR08	First Name of Person Dropping Off or Picking Up Rx First name of person picking up the prescription.	N
	AIR09	Last Name or Initials of Pharmacist Last name or initials of pharmacist dispensing the medication.	N
	AIR10	First Name of Pharmacist First name of pharmacist dispensing the medication.	N

Segment	Element ID	Element Name	Requirement
	AIR11	Dropping Off/Picking Up Identifier Qualifier Additional qualifier for the ID contained in AIR05 <ul style="list-style-type: none"> • 01 Person Dropping Off • 02 Person Picking Up • 98 Unknown/Not Applicable <i>Note: Both 01 and 02 cannot be required by a prescription drug monitoring program.</i>	N
TP: Pharmacy Trailer (required) Used to identify the end of data for a given pharmacy and provide the count of the total number of detail segments reported for the pharmacy, including the PHA and TP segment.			
	TP01	Detail Segment Count Number of detail segments included for the pharmacy including the pharmacy header (PHA) and the pharmacy trailer (TP) segments.	R
TT: Transaction Trailer (required) Used to indicate the end of the transaction and provide the count of the total number of segments included in the transaction.			
	TT01	Transaction Control Number Identifying control number that must be unique. Assigned by the originator of the transaction. Must match the number in TH02.	R
	TT02	Segment Count Total number of segments included in the transaction including the header and trailer segments.	R

Appendix B: ASAP Zero Report Specifications

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

Segment	Element ID	Element Name	Requirement
TH: Transaction Header (required)			
	TH01	4.2	R
	TH02	123456	R
	TH05	20220101	R
	TH06	223000	R
	TH07	P	R
	TH09	\\	R
IS: Information Source (required)			
	IS01	7705555555	R
	IS02	PHARMACY NAME	R
	IS03	Date Range of Report #YYYYMMDD#-#YYYYMMDD#	R
PHA: Pharmacy Header (required)			
	PHA02	Pharmacy NCPDP/NABP	R
	PHA03	ZZ1234567	R
PAT: Patient Information (required)			
	PAT01		
	PAT07	REPORT	R
	PAT08	ZERO	R
DSP: Dispensing Record (required)			
	DSP05	20220601	R
PRE: Prescriber Information (required; can be null as follows: PRE*****\)			
CDI: Compound Drug Ingredient Detail			
AIR: Additional Information Reporting			
TP: Pharmacy Trailer (required)			
	TP01	7	R

TT: Transaction Trailer (required)			
	TT01	123456	R
	TT02	10	R

Sample Zero Report

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

```
TH*4.2*123456*01**20220108*223000*P**\  
IS*7705555555*PHARMACY NAME*#20220101#-#20220107#\  
PHA*Pharmacy NCPDP/NABP* 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 [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*

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

Port: 22

Note: The port will always be 22.

- **Credentials:** Your SFTP account credentials (username and password) can be found within the PMP Clearinghouse website. To locate your credentials, [log in to PMP Clearinghouse](#), then click **Account > SFTP Details > Edit**.
- Your username cannot be modified; however, you can update your password.

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

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

PMP Subfolders

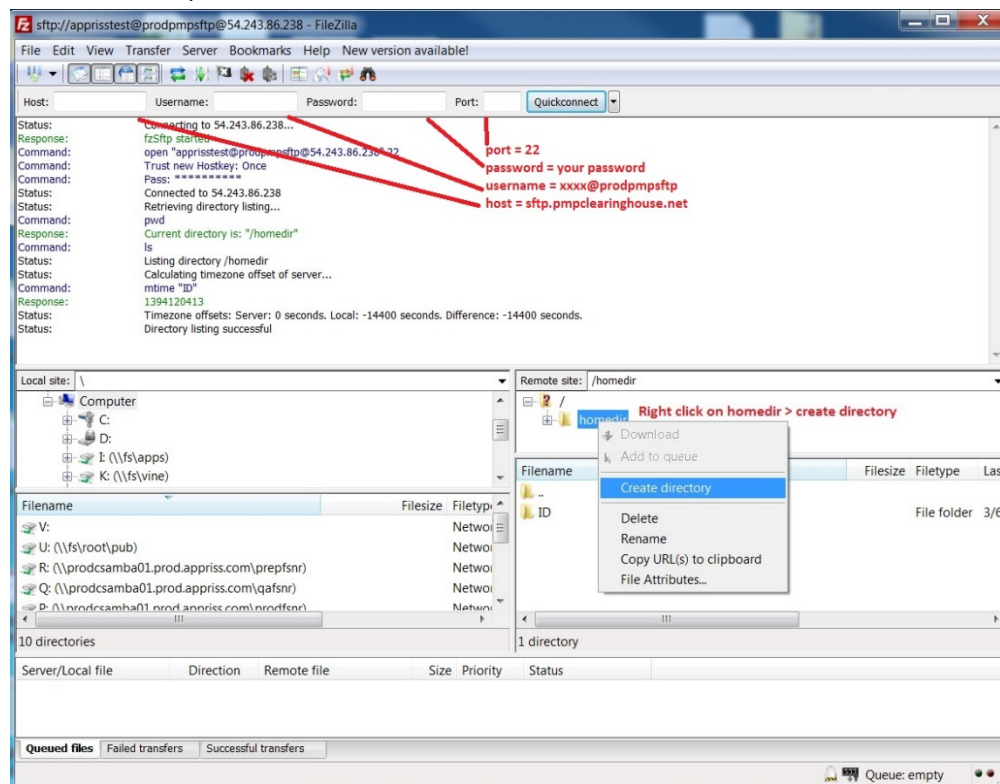
PMP Clearinghouse is the data repository for numerous PMPs. As such, data submitted via SFTP must be placed in the appropriate folder for the PMP for which you are submitting data so that it can be properly imported to that PMP. The creation of subfolders must be done outside of the PMP Clearinghouse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

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

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

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

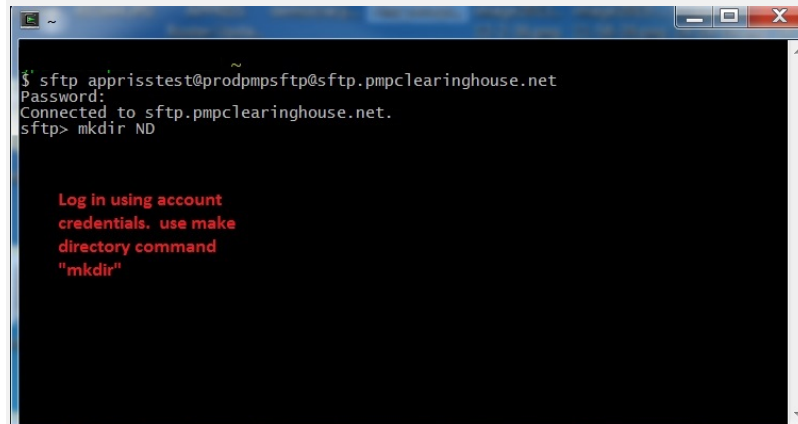
1. **Via SSH client** (e.g., WinSCP, FileZilla, etc.)
 - c. Log in to your SFTP account.
 - d. Create the required directories under */homedir*.



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 ND*).

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



```
$ sftp apprisstest@prodpmfsftp@sftp.pmpclearinghouse.net
Password:
Connected to sftp.pmpclearinghouse.net.
sftp> mkdir ND
```

Log in using account credentials. use make directory command "mkdir"

Public (SSH/RSA) Key Authentication

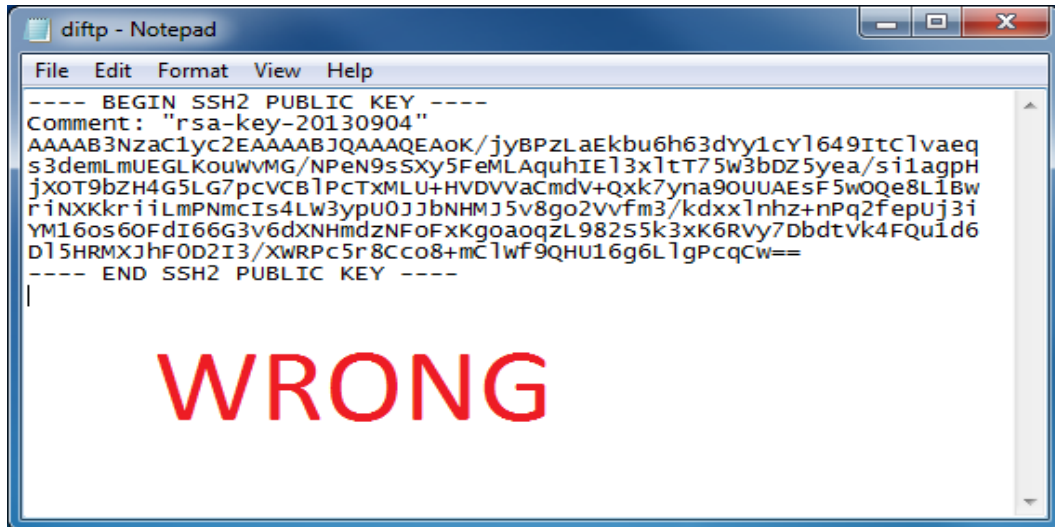
PMP Clearinghouse supports SSH key authentication. The generation of the key is outside the scope of this document; however, general guidelines about the key, along with how to import/load it, are provided below.

Note: *PGP Encryption is not supported.*

- **Supported Key Types:**
 - SSH-2 RSA 2048 bit length
- **Unsupported Key Types:**
 - SSH-1 RSA
 - SSH-2 DSA
- **Correct Public Key Format:** If opened in a text editor, the key should look like the screenshot below.



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



- Once the key has been generated, it should be named "*authorized_keys*".

Notes:

- *There is no file extension.*
- *There is an underscore between the words **authorized** and **keys**.*
- A `.ssh` subfolder needs to be created in the SFTP account's home directory. The "*authorized_keys*" file must be placed in the `.ssh` folder. The creation of this folder follows the same process as creating a PMP subfolder. Please refer to [PMP Subfolders](#) for steps on creating subfolders.

Appendix D: North Dakota Data Entry Reporting Requirements

Dear Pharmacies and Software Vendors:

February 9th, 2023

We are communicating the following reporting recommendations approved by the PDMP Committee at the National Association of State Controlled Substance Authority Conference in October 2018 or by the North Dakota (ND) Board of Pharmacy, Prescription Drug Monitoring Program (PDMP). If changes occur, these recommendations will be resent to all reporting parties and posted on the ND PDMP website with plenty of notice to implement new reporting practices. They ensure data accuracy and common reporting practices across state borders, which will increase the chances of PDMP user's ability to locate a patient in or out-of-state when performing a search. Please pass these recommendations on to any party involved in the data entry and dissemination processes.

ND PDMP Data Entry Reporting Requirements:

1. Prescriptions containing required reporting field **errors must be corrected** in the PDMP as soon as possible or within 24 hours of receiving the error.
2. Pharmacies and their vendors must have an understanding and **process in place** for the following:
 - The Pharmacy must receive information regarding prescriptions which contain **invalid** or **missing** data fields that reject or load with **errors** on a regular reporting day;
 - **Revise** the erroneous record(s) in their computer system;
 - Report **revisions, voids, or new prescriptions** to the state PDMP, as indicated
3. Pharmacies must **not insert comments** or middle names/initials in the patient's first name, last name, or address fields. This superfluous information may be carried over into the patient's profile in the PDMP, impacting the end user's ability to locate the patient record as well as impact interstate sharing and data consolidation.
4. When reporting to PDMPs, the state address field should be populated following the **jurisdictions** listed in Appendix A in ASAP Version 4.2, especially for international patients, unless otherwise defined by the state. For international patients, the zip code address field should be populated with zeros. If the state address is not listed in Appendix A, then 99-Other should be utilized.
5. Report **zip codes** in a 5- or 9-digit format and do not include a dash when reporting to state PDMPs. Following this format will prevent errors in the file. Populate with

- zeros if the patient address is outside the U.S. The state address field has been sized to handle international patients not residing in the U.S.
6. **Verify both the prescriber's DEA number and name** on the prescription when processing controlled substance prescriptions. This ensures correct prescriber information displays on the PDMP report.
 7. When reporting **compounds**, only controlled substance ingredients should be reported to the state PDMP unless further specified by the state. Only the quantity of the controlled substance ingredient utilized in the compound should be reported to the state PDMP.
 8. When reporting the **quantity prescribed/dispensed** and drug dosage unit code, the unit of measure and quantity should be consistent with the formulation of the product. "Milliliters" should be utilized when the product is measured by volume. "Grams" should be utilized when the product is measured by weight. "Each" should be utilized for indivisible packages, solid dosage units, or when weight and volume measurement are not applicable. Dispensers are encouraged to review NCPDP's Billing Unit Standard or examples outlined in ASAP Standards: <https://www.ncdp.org/Standards-Development/Billing-Unit-Requests>.
 9. When providing a **partial fill** of a medication, the partial fill indicator must be utilized when reporting to the state PDMP. This should not be confused with the Refills Authorized or Refill Number fields.
 10. For **veterinary prescriptions**, a separate patient account/profile is created within the pharmacy software containing the animal/pet owner/handler's name in the First Name (PAT08), Last Name (PAT07), and Owner/Handler's Date of Birth (PAT18) fields. Under the Species Code (PAT20), enter/select "Veterinary Patient"; under Name of Animal (PAT23), you can enter the pet's name (e.g., Fido, Fifi, etc.). Remember to use the owner/handler's date of birth, not the animal's, in the Date of Birth (PAT18) field.
 11. Dispensers are encouraged to maintain current contact information, including email address, in the data submitter or uploader's account: <https://pmpclearinghouse.net>.
 12. Dispensers are reminded of the two-digit entry limit when reporting the refill number (DSP04) or number of refills authorized to the PDMP. The two-digit entry limit conforms with both ASAP and NCPDP's format. If there are refills, entering 00 (zero) is incorrect and will show -1 (negative one), -2 (negative two), and so on when refills are submitted for the same prescription.
 13. Unless further required or defined by the state, dispensers are **encouraged to utilize point-of-sale reporting** to state PDMPs. Software permitting, dispensers should report the date in which the prescription was sold or picked up/delivered to the patient. States should, at a minimum, make the "Date Sold" field (DSP17) a "situational" field and display it to end users of the data with a disclaimer that the field may or may not contain data pending the dispenser's ability to report at point of sale.
 14. Controlled substance **transfers of stock**, or sales to other DEA registrants, should not be reported to the PDMP database or assigned a prescription number. Instead,

create an invoice for the sales of stock, adjust your inventory, and fill out the proper DEA forms (222) documenting the transfer.

15. If you send a prescription **across state borders**, it is likely required by law that you report those prescriptions to that state's PDMP. You will have to set up your system to comply with their reporting requirements, which will probably vary slightly from North Dakota's. Any controlled substance reported to another state is likely to show up twice in the system if you also report it to North Dakota. Please only report it to the state you are dispensing that product into to reduce the chances of the patient not receiving substances that they need because it appeared twice on a providers search.

Thank you for your adoption of these recommendations. For further questions, you can locate a list of ASAP Specifications at <https://www.nodakpharmacy.com/pdfs/AWARxEmanual.pdf> on page 23 of the Data Submission Dispenser Guide. You may also refer staff to a copy of this available on the ND PDMP website at <https://www.nodakpharmacy.com/PDMP-index.asp>, labeled "Reporting Requirement Letter."

If you, your staff, or vendors have questions on the reporting recommendations, please send an email with your contact information and question to Kathy Zahn at pdmp@ndboard.pharmacy.

Regards,

Mark Hardy, PharmD, Executive Director

Appendix E: North Dakota Jurisdictions

ASAP grants permission to PDMPs to include the below list of jurisdictions and states in their reporting specifications. Furthermore, ASAP grants permission to pharmacy software providers to distribute this list to their pharmacy clients.

Value	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
KS	Kansas
KY	Kentucky
LA	Louisiana

Value	Jurisdiction
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
GU	Guam
MP	Marianas Islands
PR	Puerto Rico
PW	Palau

Value	Jurisdiction
MA	Massachusetts
MD	Maryland
ME	Maine

Value	Jurisdiction
UM	Minor Islands
VI	Virgin Islands
99	Other