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PDMP Administrators' Town Hall: ASAP Recommendations

October 18, 2022

Microsoft Teams Features



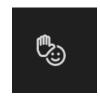
Microphone



Meeting Chat



Camera



Raise Hand

*This webinar is being recorded







This project was supported by Grant No. 2019-PM-BX-K003 awarded by the Bureau of Justice Assistance (BJA). BJA is a component of the U.S. Department of Justice's Office of Justice Programs, which also includes the Bureau of Justice Statistics, the National Institute of Justice, the Office of Juvenile Justice and Delinquency Prevention, the Office for Victims of Crime, and the Office of Sex Offender Sentencing, Monitoring, Apprehending, Registering, and Tracking (SMART). Points of view or opinions in this webinar are those of the presenter(s) and do not necessarily represent the official position or policies of the U.S. Department of Justice.

Recommendations for PDMP ASAP Guide version 4.x

ASAP History

- First implemented 1995
- 2005 ASAP v. 3
- 2007 ASAP v. 4.0
- 2009 ASAP v. 4.1
- 2011 ASAP v. 4.2
- 2016 ASAP v. 4.2A
- 2019 ASAP v. 4.2B

ASAP Version Implementations

- Current ASAP version
- 4.1 8 states
- 4.2 21 states (incl. Puerto Rico)
- 4.2A 16 states (incl. MP)
- 4.2B 9 states (plus Guam)

Available Segments ASAP 4.2B

- TH (Transaction Header) 9 fields
- IS (Information Source) 3 fields
- PHA (Pharmacy Header) 13 fields
- PAT (Patient Information) 23 fields
- DSP (Dispensing Record) 25 fields
- PRE (Prescriber Information) 10 fields
- CDI (Compound Drug Ingredient Detail) 5 fields
- AIR (Additional Information Reporting) 11 fields
- TP (Pharmacy Trailer) 1 field
- TT (Transaction Trailer) 2 fields
- 102 fields

Recurring Major Themes

- Data Quality/Integrity
- Patient Care, Public Health purposes
- Opioid Treatment Programs
- CBD/Medical Marijuana
- Veterinary Dispensing
- Patient Matching
- Suggestions to ASAP version 4.x have been made either by or to Kevin Borcher, who is not responsible for the entire content or all recommendations.

Required v. Optional v. Situational

- Current: What this means is that segments classified as "Required" must be transmitted. If the PDMP does not have a need for these segments then they are ignored by the receiving computer. The same rule applies for data elements within a segment that are classified as "Required." Where data elements within the segments are classified as "Situational," the situation or condition that must be met in order for the data element to be used is defined by the state PDMP. Required data elements cannot be changed in definition to "not used." To do so would compromise the standard. No data element can be redefined nor can codes be added or attributes changed.
- Recommendation:
- Fields are classified as Required, Optional, or Situational.
- A Required field is a field which must be reported to all PDMPs by the dispenser to meet the technical specifications of the ASAP standard.
- An Optional field is available to meet the reporting needs of individual PDMPs. These fields may be designated as Required by individual PDMPs per state statute, regulation, or policy.
- A Situational field is determined by the situation or condition that must be met in order for the data element to be used is contingent on a linked or dependent field being required.

TH – Transaction Header

- TH05 Creation Date (Situational) (Optional) DT 8
 - Date the extract (to represent a data set or file as opposed to a specific transaction) was created or updated. Format: CCYYMMDD.
- TH06 Creation Time (Situational) (Optional) TM 6
 - Time the extract (to represent a data set or file as opposed to a specific transaction) was created or updated. Format: HHMMSS or HHMM. Do not use colons or other non-numeric characters.

IS – Information Source

- Pharmacy Dispensing Software Vendor
- IS04 Pharmacy Dispensing Software Vendor (Optional) AN 60
 - This field is used to identify the vendor of the pharmacy dispensing software

PHA – Pharmacy Header

- PHA02 NCPDP<mark>/NABP</mark> Provider ID (Situational) (Optional) AN 7 Remove "/NABP" as it is no longer used
- PHA05 Address Information 1 (Situational) (Optional) AN 55 Current: Freeform text for address information.

Recommendation: Additional address information. Information should be reported according to United States Postal Service Publication 28-Postal Addressing Standards or the most recently published version of the Project US@ Technical Specification for Patient Addresses

PHA06 Address Information – 2 (Situational) (Optional) AN 55

Current: Freeform text for additional address information.

Recommendation: Information should be reported according to United States Postal Service Publication 28-Postal Addressing Standards or the most recently published version of the Project US@ Technical Specification for Patient Addresses

PHA – Pharmacy Header

- PHA07 City Address (Situational) (Optional) AN 35
 - Current: Freeform text for city name.
 - Recommendation: Information should be reported according to United States Postal
- Service Publication 28-Postal Addressing Standards or the most recently published version of the Project US@ Technical Specification for Patient Addresses
- PHA08 State Address (Situational) (Optional) AN 2
- Two-letter state and possession abbreviation as described in United States Postal Service Publication 28-Postal Addressing Standards or the most recently published version of the Project US@ Technical Specification for Patient Addresses
- PHA09 Zip Code Address (Situational) (Optional) AN 9 10

United States Postal Service Zip Code or ZIP+4 as described in United States Postal Service Publication 28-Postal Addressing Standards or the most recently published version of the Project US@ Technical Specification for Patient Addresses. Do not include white spaces or special characters.

Include hyphens in ZIP+4

PHA – Pharmacy Header

PHA14 Pharmacy/Dispenser Type (Optional) N 2
 This field is used to identify specific types of pharmacies or dispensers

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01 Pharmacy
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- 03 Chain Pharmacy
- 02 Community Pharmacy
- 03 Long-term Care Pharmacy
- 04 Hospital Pharmacy
- **05 Opioid Treatment Program**
- 06 Cannabis dispensary
- 07 Veterinarian/Veterinary patient-only dispenser
- **08 Dispensing Prescriber**
- 99 Other

- PAT01, PAT04 ID Qualifier of Patient ID Qualifier (Situational) (Optional) AN 2
 - If PAT03 is required by the state PDMP, then PAT01 and PAT02 become Situational
- PATO2, PATO5 ID Qualifier (Situational) (Optional) N 2
 - If PAT06 is required by the state PDMP, then PAT04 and PAT05 become Situational

11 - Medicaid Recipient ID Number

PAT07 Last Name (Required) AN 50

Report the patient's complete legal last names ONLY as listed on a government-issued identification

Do NOT report extraneous information or notes in this field

Do NOT enter Prefix or Suffix in Last Name field

Do NOT report special characters (e.g., period, apostrophe, parentheses, asterisk) other than a hyphen

Do NOT enter periods (.)

If for a veterinary patient, enter information of PERSON responsible for the care of the animal or who arranges for the animal's veterinary care

PAT08 First Name (Required)
 AN 50

Report the patient's complete legal first names ONLY as listed on a government-issued identification

Do NOT report extraneous information or notes in this field

Do NOT enter Prefix or Suffix in First Name field

Do NOT report special characters (e.g., period, apostrophe, parentheses, asterisk) other than a hyphen

Do NOT enter periods (.)

If for a veterinary patient, enter information of PERSON responsible for the care of the animal or who arranges for the animal's veterinary care

PAT10 Name Prefix (Situational) (Optional) AN 10

Do NOT report special characters (e.g., period, apostrophe, parentheses, asterisk) other than a hyphen

Do NOT enter periods (.)

PAT11 Name Suffix (Situational) (Optional) AN 10

Do NOT report special characters (e.g., period, apostrophe, parentheses, asterisk) other than a hyphen

Do NOT enter periods (.)

PAT24 Patient Preferred or Alias First Name (Optional) AN 50

May be used for patient's preferred name, previous name, nickname, alias, or name used on insurance if different than legal first name.

PAT25 Patient Last Name Alias (Optional) AN 50

May be used for patient's maiden name, mother's maiden name, any previous last name, or name used on insurance if different than legal last name.

PAT18 Date of Birth (Required)
 DT 8

Current: Date patient was born. Format: CCYYMMDD.

Recommendation: Owner's date of birth as listed on a government-issued identification if for a veterinary patient, or as directed by state regulations

• PAT12 Address Information – 1 (Required) AN 55

Current: Field size has been increased to 55 characters from 35 characters. However, in order to accommodate pharmacy management systems storing 35 characters or less for the patient address, no programming change is necessary if that is the maximum length of the field in the pharmacy management system.

Recommendation: Information should be reported according to United States Postal Service Publication 28-Postal Addressing Standards or the most recently published version of the Project US@ Technical Specification for Patient Addresses

PAT13 Address Information – 2 (Situational) (Optional)

Current: Freeform text for additional address information, if required by the PDMP and is available in the pharmacy system.

Recommendation: Additional address information, if required by the PDMP and is available in the pharmacy system. Information should be reported according to United States Postal Service Publication 28-Postal Addressing Standards or the most recently published version of the Project US@ Technical Specification for Patient Addresses

PAT14 City Address (Required) AN 35

Current: Freeform text for city name.

Recommendation: Information should be reported according to United States Postal Service Publication 28-Postal Addressing Standards or the most recently published version of the Project US@ Technical Specification for Patient Addresses

PAT15 State Address (Situational) (Required) AN 10

Current: U.S. Postal Service state code if required by the PDMP. Note: Field has been sized to handle international patients not residing in the U.S.

- Recommendation: Two-letter state and possession abbreviation as described in United States Postal Service Publication 28-Postal Addressing Standards or the most recently published version of the Project US@ Technical Specification for Patient Addresses
- PAT16 Zip Code Address (Required)
 AN 910

Current: U.S. Postal Service ZIP Code. Exclude hyphen. Populate with zeros if patient address is outside the U.S.

Recommendation: United States Postal Service Zip Code or ZIP+4 as described in United States Postal Service Publication 28-Postal Addressing Standards or the most recently published version of the Project US@ Technical Specification for Patient Addresses. Do not include white spaces or special characters.

Include hyphens in ZIP+4

• PAT19 Gender/Birth Sex (Required) AN 1

Sex assigned at birth OR as represented on government-issued identification

F Female

M Male

U Unknown

- PAT21 Patient Location Code (Situational) (Optional) N 2
 - Code indicating where patient is located when receiving pharmacy services if required by the PDMP. Project US@ Technical Specification for Patient Addresses supports metadata for business, military, and homeless patients

12 Homeless/Transient care

13 Farm

14 Zoo

15 Circus/Traveling show

16 Shelter

PAT22 Country of Non-U.S. Resident (Situational) (Optional) AN 20

Current: Used when the patient's address is a foreign country and PAT12 through PAT16 are left blank. This is a freeform text field. ASAP does not provide a list of countries for this field. PDMPs may permit some of the other address fields to not be used if this field is populated.

Recommendation: The line of an international patient address MUST contain only the COUNTRY name, and MUST be written in full with no abbreviations and SHOULD be in capital letters. Information should be reported according to United States Postal Service Publication 28-Postal Addressing Standards or the most recently published version of the Project US@ Technical Specification for Patient Addresses

- PAT23 Name of Animal (Situational) (Optional) AN 30
 - Used if required by the PDMP for prescriptions written by a veterinarian and the pharmacist has access to this information at the time of preparing the prescription. An unnamed animal could be designated as COW SMITh or any other unique name such as COW1 Smith to identify a specific animal.
- PAT26 Patient Type (Optional) N 2

01 OTP/SUD

02 Medical Cannabis

03 Previous nonfatal overdose

PAT27 Patient Race Category Code (Optional) N 2

Code used to describe general race category reported of the patient

Use current CDC code set

- 01 American Indian or Alaska Native
- 02 Asian
- 03 Black or African American
- 04 Native Hawaiian or Other Pacific Islander
- 05 White
- 06 Other Race
- PAT28 Patient Ethnicity (Optional)
 N 2

Code used to describe the general ethnicity group of the patient

Use current CDC code set

- 01 Hispanic or Latino
- 02 Not Hispanic or Latino

- DSP03 Date Written Issued (Required) DT 8
 - Current: Date the prescription was written (authorized) issued.
- DSP04 Refills Authorized (Required) N 2 4 Increase from 2 to 4 digits. Report as a whole number.
- DSP06 Fill Number (Required) N 2 4
 Increase from 2 to 4 digits. Report as a whole number.
- DSP 29 Refills Remaining (Optional) N 4
 The number of refills remaining on the prescription after the current fill.

DSP08 Product ID (Required) AN 15

Full product identification as indicated in DSP07, including leading zeros without punctuation. If DSP07 = 01, then DSP08 should contain the 11-digit NDC without hyphens.

DSP 12 Transmission Form of Rx Origin Code (Situational) (Optional) N 2

Code indicating how the pharmacy received the prescription, if required by the PDMP

- 01 Written Prescription
- 02 Telephone Prescription
- 03 Telephone Emergency Prescription
- 04 Fax Prescription
- 05 Electronic Prescription
- 06 Transferred/Forwarded Rx
- 07 Order (Administered or dispensed from a prescriber's location)
- 08 Standing Order/protocol
- 99 Other

DSP17 Date Sold (Situational) (Optional)

DT 8

This field is used to determine the date the prescription was dispensed (sold to, picked up by, or otherwise left the pharmacy), not the date it was prepared.

DSP24 Treatment Type (Situational) (Optional) N 2

12 Opioid Treatment Program

13 Marijuana

14 CBD

15 Patient Holding Authorization for Treatment with Cannabis Products

DSP26 Time Issued (Optional) DT 8

The time the prescription record was issued. In HHMMSS format.

DSP27 Time Filled (Optional) DT 8

The time the prescription record was prepared. In HHMMSS format.

DSP28 Time Sold (Optional) DT 8

The time the prescription record was sold to, picked up by, or otherwise left the pharmacy for the patient. In HHMMSS format.

DSP30 Quantity Remaining (Optional) D 11

Number of metric units remaining on the prescription after the current dispense in metric decimal format.

Example: 2.5. Note: For compounds show the first quantity in CDI04. See Appendix B for specific instructions.

- DSP31 Quantity Remaining Drug Dosage Units Code (Optional) N 2 Identifies the unit of measure for the quantity remaining in DSP30, if required by the PDMP. See Appendix B for specific instructions.
 - 01 Each (used to report solid dosage units or indivisible package)
 - 02 Milliliters (ml) (for liters adjust to the decimal milliliter equivalent)
 - 03 Grams (gm) (for milligrams adjust to the decimal gram equivalent)

DSP32 Discount card (Situational)
 N 2

Identifies whether the type of payment occurred using a local or national discount card and if the PDMP requires Payment Type (DSP16). Required if Classification Code for Payment Type (DSP16) is required and contingent on qualifier as 04 (Commercial Insurance).

01 Yes

02 No

DSP33 Classification Code for Additional Payment Type (Optional) N 2

Code identifying the type of payment, i.e. how it was paid for, if required by the PDMP.

- 01 Private Pay (Cash, Charge, Credit Card)
- 02 Medicaid
- 03 Medicare
- 04 Commercial Insurance
- 05 Military Installations and VA
- 06 Workers' Compensation
- **07 Indian Nations**
- 99 Other

DSP34 Discount card for Additional Payment Type (Situational) N 2

Identifies whether the type of payment occurred using a local or national discount card and if the PDMP requires Additional Payment Type (DSP33). Required if Classification Code for Additional Payment Type (DSP33) is required and contingent on qualifier as 04 (Commercial Insurance).

01 Yes

02 No

DSP35 (DEA Schedule/State Designation) (Optional) N 2

State or federal control level or other reporting designation

01 Marijuana and marijuana extracts

02 State or DEA Schedule II

03 State or DEA Schedule III

04 State or DEA Schedule IV

05 State or DEA Schedule V

06 State-designated other controlled substance or Drug of Concern

07 CBD

Leave blank if non-controlled substance

PRE – Prescriber Information

- PRE04 Prescriber License Number (Situational) (Optional) AN 20
 - Identification assigned to the prescriber by the State Licensing Board of a state or jurisdiction.
- PRE09 XDEA Number DATA 2000 Waiver IDX (Situational) (Optional) AN 9
 - Current: This field gives a PDMP the option of requiring the XDEA Number (NADEAN) in the PRE Segment when the prescription is for opioid dependency.
 - Recommendation: The Narcotic Addiction DEA number (NADEAN) or XDEA number assigned to the prescriber through the Drug Addiction Treatment Act (DATA) of 2000.

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PRE – Prescriber Information

PRE11 Prescriber Address Information – 1 (Optional)
 AN 55

Recommendation: Information should be reported according to United States Postal Service Publication 28-Postal Addressing Standards or the most recently published version of the Project US@ Technical Specification for Patient Addresses

PRE12 Prescriber Address Information – 2 (Optional)

Recommendation: Additional address information, if required by the PDMP and is available in the pharmacy system. Information should be reported according to United States Postal Service Publication 28-Postal Addressing Standards or the most recently published version of the Project US@ Technical Specification for Patient Addresses

PRE13 Prescriber City Address (Optional)
 AN 35

Recommendation: Information should be reported according to United States Postal Service Publication 28-Postal Addressing Standards or the most recently published version of the Project US@ Technical Specification for Patient Addresses

- PRE14 Prescriber State Address (Optional)
 AN 2
 - Recommendation: Two-letter state and possession abbreviation as described in United States Postal Service Publication 28-Postal Addressing Standards or the most recently published version of the Project US@ Technical Specification for Patient Addresses
- PRE15 Prescriber Zip Code Address (Optional) AN 10

Recommendation: United States Postal Service Zip Code or ZIP+4 as described in United States Postal Service Publication 28-Postal Addressing Standards or the most recently published version of the Project US@ Technical Specification for Patient Addresses. Do not include white spaces or special characters.

Include hyphens in ZIP+4

CDI – Compound Drug Ingredient Detail

• Current: Required when medication dispensed is a compound and one of the ingredients is a PDMP reporting reportable 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. The first reportable ingredient is reported as "1" — each additional reportable ingredient is incremented by 1. Example: A compound with two reportable ingredients would have a 1 in CDI01 for the first ingredient. The second reportable ingredient would have a 2 in CDI01.

CDI – Compound Drug Ingredient Detail

CDI06 DEA Schedule/State Designation of Each Ingredient (Optional) N 2

State or federal control level or other reporting designation

Required when medication dispensed is a compound and one of the ingredients is a

reportable drug to the state PDMP

01 Marijuana and marijuana extracts

02 State or DEA Schedule II

03 State or DEA Schedule III

04 State or DEA Schedule IV

05 State or DEA Schedule V

06 State-designated other controlled substance or Drug of Concern

07 CBD

Leave blank if non-controlled substance

AIR – Additional Information Reporting

- AIR01 State Jurisdiction issuing the Rx Serial Number (Situational)
 (Optional) AN 2
 - U.S.P.S. state code of State Jurisdiction that issued serialized prescription blank. This is required if AIRO2 is used.
- AIR02 State Jurisdiction Issued Rx Serial Number (Situational)
 (Optional) AN 20
 - Number assigned to State Jurisdiction issued serialized prescription blank.
 Required if State Jurisdiction issues serialized prescription pads for prescribers to use.

AIR – Additional Information Reporting

- AIR11 Dropping Off/Picking Up Identifier Qualifier (Optional) N 2
 - 01 Person Dropping Off
 - 02 Person Picking Up
 - 03 Mailing/Shipping
 - 98 Unknown/Not Applicable

Appendix E – 4.x Summary of Enhancements to Version 4.2B

Defining or clarifying the terms Required, Situational, and Optional and how they should be used.

TH Segment

TH05 Creation Date (Situational) (Optional) This clarifies that the date represents when the created.

TH05 Creation Time (Situational) (Optional) This clarifies that the time represents when the created.

IS Segment

ISO4 Pharmacy Dispensing Software Vendor (Situational) (Optional) This new field identifies the pharmacy dispensing software vendor to assist PDMPs in identifying trends or issues which may be related to a vendor.

Appendix E – 4.x Summary of Enhancements to Version 4.2B

PHA Segment

PHA02 NCPDP/NABP Provider ID (Situational) (Optional). The "/NABP" is being removed from the field name, as this is no longer associated with this provider ID.

PHA05 Address Information – 1 (Situational) (Optional). This provides specifications on how the address should be reported according to USPS Publication 28 and the Project US@ Technical Specification for Patient Addresses.

PHA06 Address Information – 2 (Situational) (Optional). This provides specifications on how the address should be reported according to USPS Publication 28 and the Project US@ Technical Specification for Patient Addresses.

PHA07 City Address (Situational) (Optional). This provides specifications on how the address should be reported according to USPS Publication 28 and the Project US@ Technical Specification for Patient Addresses.

PHA08 State Address (Situational) (Optional). This provides specifications on how the address should be reported according to USPS Publication 28 and the Project US@ Technical Specification for Patient Addresses.

PHA09 Zip Code Address (Situational) (Optional). Change the field length to 10 characters to accommodate the hyphen. This provides specifications on how the address should be reported according to USPS Publication 28 and the Project US@ Technical Specification for Patient Addresses. This now should contain the hyphen in the ZIP+4

PHA14 Pharmacy/Dispenser Type (Optional). This new field provides information to PDMPs on the type of pharmacy or dispenser which is reporting to the PDMP.

PAT Segment

PATO1 ID Qualifier of Patient Identifier (Situational) (Optional). Defines that if PATO3 is required by the state PDMP, then PATO1 becomes Situational.

PATO2 ID Qualifier (Situational) (Optional). Defines that if PATO3 is required by the state PDMP, then PATO2 becomes Situational. This adds a new qualifier of 11 – Medicaid Recipient ID Number

PATO4 ID Qualifier of Additional Patient Identifier (Situational) (Optional). Defines that if PATO6 is required by the state PDMP, then PATO4 becomes Situational.

PATO5 Additional Patient ID Qualifier (Situational) (Optional). Defines that if PATO6 is required by the state PDMP, then PATO5 becomes Situational. This adds a new qualifier of 11 – Medicaid Recipient ID Number

PAT Segment

PATO7 Last Name (Required). This provides clarification of what the field should contain and what should not be within the field.

PATO8 First Name (Required). This provides clarification of what the field should contain and what should not be within the field.

PAT10 Name Prefix (Situational) (Optional) This provides clarification of what the field should contain and what should not be within the field. Specifically, do not include periods in this field.

PAT11 Name Suffix (Situational) (Optional). This provides clarification of what the field should contain and what should not be within the field. Specifically, do not include periods in this field.

PAT Segment

PAT12 Address Information – 1 (Required). This provides specifications on how the address should be reported according to USPS Publication 28 and the Project US@ Technical Specification for Patient Addresses.

PAT13 Address Information – 2 (Situational) (Optional) This provides specifications on how the address should be reported according to USPS Publication 28 and the Project US@ Technical Specification for Patient Addresses.

PAT14 City Address (Required). This provides specifications on how the address should be reported according to USPS Publication 28 and the Project US@ Technical Specification for Patient Addresses.

PAT15 State Address (Situational) (Required). Change field length to 2 characters. This provides specifications on how the address should be reported according to USPS Publication 28 and the Project US@ Technical Specification for Patient Addresses.

PAT16 ZIP Code Address (Required). Change the field length to 10 characters to accommodate the hyphen. This provides specifications on how the address should be reported according to USPS Publication 28 and the Project US@ Technical Specification for Patient Addresses. This now should contain the hyphen in the ZIP+4

PAT Segment

PAT18 Date of Birth (Required). The field description provides clarification of what to enter for the date of birth for a veterinary patient.

PAT19 Birth Sex (Situational) (Optional) .This field name is being updated from Gender to Birth Sex. The field description is aligned with national standards to read, "Sex assigned at birth, or as represented on government-issued identification."

PAT21 Patient Location Code (Situational) (Optional). Five new qualifiers are added for homeless/transient care as well as veterinary patients.

PAT22 Country of Non-U.S. Resident (Situational) (Optional) Clarification of what to enter in this field to be found in USPS Publication 28 and Project US@ Technical Specification for Patient Addresses.

PAT Segment

PAT22 Country of Non-U.S. Resident (Situational) (Optional) Clarification of what to enter in this field to be found in USPS Publication 28 and Project US@ Technical Specification for Patient Addresses.

PAT23 Name of Animal (Situational) (Optional) Removing language "and the pharmacist has access to this information at the time of preparing the prescription" and providing an example of how to enter the animal name.

PAT24 Patient Preferred or Alias First Name (Optional). This is a new field to add a patient preferred or alias first name to aid in patient matching. Pharmacies may enter information in the patient name field based on insurance information which may not be correct or updated. This field provides a secondary means of entering patient name to allow PDMPs to improve patient matching.

PAT25 Patient Last Name Alias (Optional). This is a new field to add a patient preferred or alias first name to aid in patient matching. Pharmacies may enter information in the patient name field based on insurance information which may not be correct or updated. This field provides a secondary means of entering patient name to allow PDMPs to improve patient matching.

PAT Segment

PAT26 Patient Race Category Code (Optional). This is a new field to aid PDMPs for public health and epidemiology purposes. The qualifiers align with current CDC codes.

PAT27 Patient Ethnicity (Optional). This is a new field to aid PDMPs for public health and epidemiology purposes. The qualifiers align with current CDC codes.

PAT28 Patient Type (Optional). This is a new field to aid PDMPs in identifying or tracking patients with specific conditions or uses of dispensations.

DSP Segment

DSP03 Date Written Issued (Required). This updates the field name to broaden the description of multiple methods of how a medication may be prescribed.

DSP04 Refills Authorized (Required). This is increasing the value of the number of fills that may be entered to accommodate non-controlled substance dispense fills

DSP06 Fill Number (Required). This is increasing the value of the number of fills that may be entered to accommodate non-controlled substance dispense fills

DSP08 Product ID (Required). This clarifies to report the NDC as an 11-digit value without hyphens.

DSP12 Transmission Form of Rx Origin Code (Situational) (Optional) This adds new qualifiers for additional methods of prescription transmission

DSP17 Date Sold (Situational) (Optional) This clarifies the description of the field.

DSP24 Treatment Type (Situational) (Optional) This adds qualifiers for the field.

DSP26 Time Issued (Optional). This is a new field to report the time the prescription record was issued

DSP27 Time Filled (Optional). This is a new field to report the time the individual prescription record was prepared.

DSP28 Time Sold (Optional). This is a new field to report the time the prescription was sold.

DSP Segment

DSP 29 Refills Remaining (Optional). This is a new field to report the number of refills remaining after the current dispensation.

DSP 30 Quantity Remaining (Optional). This is a new field to report the remaining quantity on the prescription after the current dispense. Criteria for field entry align with DSP09.

DSP31 Quantity Remaining Drug Dosage Units Code (Optional). This is a new field reported in conjunction with the Quantity Remaining field. Criteria for field entry align with DSP11.

DSP32 Discount card (Situational). This is a new field to identify whether a prescription dispense is paid with a discount card.

DSP33 Classification Code for Additional Payment Type (Optional). This is a new field to report an additional payment type, if used. The criteria for entry align with DSP16

DSP34 Discount care for Additional Payment Type (Situational). This is a new field to identify whether a prescription dispense is paid with a discount card as an additional payment type.

DSP35 DEA Schedule/State Designation (Optional). This is a new field for pharmacy management software vendors and dispensers to report the state or DEA control level of the drug.

PRE Segment

PRE04 Prescriber License Number. Removing the word "state" to indicate the licensing board of a state or jurisdiction

PRE11 Prescriber Address Information – 1 (Optional). This provides specifications on how the address should be reported according to USPS Publication 28 and the Project US@ Technical Specification for Patient Addresses.

PRE12 Prescriber Address Information – 2 (Optional). This provides specifications on how the address should be reported according to USPS Publication 28 and the Project US@ Technical Specification for Patient Addresses.

PRE13 Prescriber City Address (Optional). This provides specifications on how the address should be reported according to USPS Publication 28 and the Project US@ Technical Specification for Patient Addresses.

PRE14 Prescriber State Address (Optional). This provides specifications on how the address should be reported according to USPS Publication 28 and the Project US@ Technical Specification for Patient Addresses.

PRE15 Prescriber ZIP Code Address (Optional). This provides specifications on how the address should be reported according to USPS Publication 28 and the Project US@ Technical Specification for Patient Addresses. This now should contain the hyphen in the ZIP+4

CDI Segment

CDI06 DEA Schedule of Each Ingredient (Optional). This is a new field for pharmacy management software vendors and dispensers to report the state or DEA control level of each ingredient in the CDI segment if reported to the PDMP.

AIR Segment

AIR11 Dropping Off/Picking Up Identifier Qualifier (Optional). This adds a new qualifier to identify if the prescription is mailed or shipped. This also updates the "Unknown/Not "Applicable" qualifier to the value of 99 for consistency within the reporting standards.

AIR01 State Jurisdiction issuing the Rx Serial Number (Situational) (Optional). This is updating the language from "State" to "Jurisdiction"

AIRO2 State Jurisdiction Issued Rx Serial Number (Situational) (Optional). This is updating the language from "State" to "Jurisdiction"

ASAP Version Process

- Modifications to clarify Situational vs. Optional fields
- Appendices will be modified accordingly
- Suggestions/Discussion from PDMP administrators, other stakeholders
- Recommendations formalized to ASAP for version 4.x
- ASAP Midyear Conference
 - September 14-16
- ASAP stakeholder Zoom meeting(s) in November
- BE INVOLVED!
 - Contact Bill Lockwood if interested in participating
- Voting
- Set Effective date

What's Next

Send any questions or recommendations to:

- Kevin Borcher
 - kborcher@cynchealth.org

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