

# Massachusetts Department of Public Health Drug Control Program

## Prescription Monitoring Program (PMP) Handbook for the Pharmacist and Pharmacy Software Provider

September 24, 2010



### Table of Contents

Prescription Monitoring Program Overview .....	2
2010 Regulatory Amendments .....	2
Data Submission Options Pharmacies May Use Prior to January 1, 2011 .....	2
Requirements for Data Submission .....	3
Implementation Schedule for 2010 Amendments .....	3
Data Entry Clarifications .....	5
Technical Specifications .....	9

## **Prescription Monitoring Program Overview**

In 1992, the Massachusetts Prescription Monitoring Program (PMP) was created by joint regulations of the Massachusetts Department of Public Health (MDPH) Drug Control Program (DCP) and the Massachusetts Board of Registration in Pharmacy (Board). The PMP receives data on those controlled substances, determined by regulation, dispensed pursuant to a prescription by community pharmacies and healthcare facility pharmacies delivered to individuals in Massachusetts. The program uses a computer-based, Electronic Data Transfer (EDT) system to collect prescription data. Atlantic Associates, Inc. (AAI) is the vendor contracted by the PMP to collect data from the pharmacies. The collected data are utilized to determine prescribing and dispensing trends; to provide educational information to health care providers and the public; to provide prescription history reports to prescribers; and to provide case information to regulatory and law enforcement agencies concerning drug distribution and potential diversion.

### **2010 Regulatory Amendments**

The DCP and Board regulations were amended in calendar year 2010 at 105 CMR 700.000, 105 CMR 701.000, 247 CMR 2.00 and 247 CMR 5.04 to enhance the PMP. New reporting requirements for pharmacies will be effective January 1, 2011.

The regulatory amendments expand upon current requirements to include:

- Reporting of prescription records for Schedules II – V
- Collection and reporting of customer ID information for Schedules II – V
- Reporting by out-of-state pharmacies that deliver a prescription to a person in Massachusetts, as an additional category of pharmacies required to report
- Reporting no less frequently than weekly

For additional details, select the “Prescription Monitoring Program” topic at <http://mass.gov/dph/dcp>

### **Data Submission Options Pharmacies May Use Prior to January 1, 2011**

The MA PMP does not require pharmacies to implement the 2010 regulatory amendments prior to January 1, 2011. However, there are some changes to requirements that pharmacies can adopt immediately if they so choose.

The following provisions may be implemented prior to January 1, 2011:

- Customer ID — Acceptance of new forms of customer ID (i.e., Permanent Resident Card and MA Commission for the Blind) ([see Customer ID](#) on [Page 5](#))
- Deliveries — Pharmacies can follow the protocol outlined in this Handbook ([see Deliveries on Page 6](#))

## Requirements for Data Submission

- The PMP reporting requirements apply to every pharmacy registered with the Board or in a health facility registered with MDPH that dispenses a controlled substance pursuant to a prescription in Schedules II through V.
- In addition, effective January 1, 2011, PMP reporting requirements also apply to any pharmacy located in another state, commonwealth, district or territory that sends a Schedule II – V prescription to a person who is located in Massachusetts. Pharmacies that meet the above criteria must also collect and submit data to the MA PMP. This includes, but is not limited to, mail-order pharmacies.
- Effective with all prescriptions dispensed as of January 1, 2011, pharmacies are required to submit data using the American Society for Automation in Pharmacy (ASAP) Version 4.1 format.
- Individual pharmacies and pharmacy corporations are advised to contact their software providers to obtain modifications for and instructions on compliance with data entry and submission of prescription information.
- The data are to be submitted to Atlantic Associates, Inc (AAI). MA PMP recommends acceptance testing by all pharmacies no later than December 31, 2010. Software providers are advised to contact AAI directly, should they need assistance with acceptance testing or to answer questions regarding submission in the new format.

AAI's contact information is:

Atlantic Associates, Inc. (AAI)  
Prescription Collection  
8030 S. Willow Street  
Bldg III, Unit 3  
Manchester, NH 03103  
(800) 539-3370

## Implementation Schedule for 2010 Amendments

Beginning January 1, 2011, for every Schedule II-V prescription dispensed, pharmacies are required to collect and report all the prescription information as mandated in the 2010 amended PMP regulations and as detailed in this Handbook. The first reports are due no later than January 11, 2011.

Data must be submitted at least weekly, but may be submitted more frequently. In any case, prescription records must be submitted no later than 10 calendar days after dispensing.

The following is an example of how a pharmacy would report using the maximum allowable reporting delay. The particular day of the week that the pharmacy elects to report is left for the pharmacy to decide as long as it does not exceed the requirement to report within 10 calendar days of dispensing. Pharmacies are permitted, and are in fact **encouraged**, to report more frequently so that data are as current as possible.

Example of Reporting on a Once a Week Cycle							
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
First dispensing week	1	2	3	4	5	6	7
Second dispensing week	8 Preferred submission for -first week-weekly reporting	9	10	11 Submission due for Rx's filled between day 1 and day 7 inclusive	12	13	14
Third dispensing week	15 Preferred submission for -second week-weekly reporting	16	17	18 Submission due for Rx's filled between day 8 and day 14 inclusive	19	20	21
Fourth dispensing week	22 Preferred submission for -third week-weekly reporting	23	24	25 Submission due for Rx's filled between day 15 and day 21 inclusive	25	27	28
<p>For pharmacies reporting <i>weekly</i>, the days with double lined borders represent the permitted timeframe for submitting data for the specified dispensing period. For example, although the MA PMP prefers pharmacies to submit data for the "First dispensing week" on Sunday (day 8) the data can be submitted anytime between day 8 and day 11.</p>							

## Data Entry Clarifications

This section is designed to address those fields that may require extra guidance for proper data entry.

Please note:

The names used for data fields in this section may differ from the labels assigned by software providers programming pharmacy systems.

The comprehensive list of specific data elements that pharmacies are required to collect and submit to the PMP is listed in the [Technical Specifications](#) section on [Page 9](#) of this Handbook.

Pharmacies and pharmacy corporations are advised to consult their software providers regarding the alphanumeric code values, dropdown list choices, and terminology to use for data entry screens.

### Customer ID

The customer is the person delivering the written prescription to the pharmacy or the person receiving the filled prescription. The customer and patient may not be the same person. For example, the customer may be a parent picking up a prescription for a child, a relative dropping off a prescription for a housebound family member, or the customer may be a pet owner.

The pharmacy is required to obtain and submit to the PMP the information from the customer's government issued ID. Obtaining means to inspect and verify (e.g., checking that the photo matches the customer picking up the prescription and that the ID is valid and not out of date. Obtaining and reporting the customer ID is mandatory except in the limited circumstances described below in the box labeled [Exceptions to the Customer ID Requirement](#) on [Page 6](#).

Pharmacies may decide, based on workflow or other issues, whether the customer ID data are obtained and entered when the person delivers the written prescription to the pharmacy or when the person receives the filled prescription. It is an operational policy for the pharmacy to determine.

**\*\*Note:** It is critical that the identification (ID) field only contain an entry that is obtained directly and contemporaneously from the individual during the pick up or drop off of a schedule II-V prescription.\*\*

Currently acceptable forms of valid (i.e., non-expired) customer ID are:

- Driver's License
- MA Registry of Motor Vehicles Identification
- Military ID Card
- Passport
- Permanent Resident Card (commonly referred to as a "green card"); issued by U.S. Citizen and Immigration Services (formerly Immigration and Naturalization Services)
- MA Commission for the Blind Identification Card

The customer ID field must contain only the alphanumeric characters of the ID number that has been issued by the governmental agency. Do **not** add punctuation marks (e.g., dashes, question marks) or additional information (e.g., MA, SOC SEC, NO CHECKS, MOTHER, LIC#, NH LIC, or any text other than the ID number itself).

For Massachusetts Registry of Motor Vehicles license numbers that begin with the letter "S", please be careful to enter the "S" correctly. Transcription errors have caused the "S" to be mistakenly entered as a "3," "5," or an "8".

For Permanent Resident Card ID numbers, enter the Alien number. Include the leading letter “A” as part of the number if it is printed as part of or preprinted in front of the Alien number. Permanent Resident Cards are typically composed of nine characters. However, some have been issued with eight characters and some with ten characters. Enter the exact number as it appears on the card.

### **Exceptions to the Customer ID Requirement**

The exceptions to the collecting and reporting requirements for customer ID information are:

1. On a case-by-case basis a pharmacist is permitted to dispense a controlled substance in Schedules II through V without obtaining positive ID provided that:
  - a. The pharmacy has reason to believe that the failure to dispense the controlled substance at this time would result in a serious hardship for the ultimate user or agent of the ultimate user, and
  - b. The pharmacy documents the reason; and
  - c. The ultimate user or agent of the ultimate user prints his or her name and address on the reverse side of the prescription and signs his or her name thereto.

When utilizing such a waiver, “*cust signed rx*” will be entered in the customer ID field rather than leaving the field blank.

2. MDPH is waiving the customer ID requirement for refills on Schedule III – V prescriptions. When utilizing this waiver, the customer ID fields should be left blank (see **DSP06 – Refill Number** on page 3 for details).
3. MDPH is requiring the customer ID for the first partial fill of a prescription, but is waiving the customer ID requirement for a subsequent partial fill of the same prescription.
4. MDPH is waiving the customer ID requirement for deliveries under the circumstance described below. The term “*delivery*” should be entered in the customer ID field.

### **Deliveries**

When a pharmacy delivers in person or through a common carrier to a personal residence or to a facility where the patient is located, MDPH is waiving the requirement for the pharmacy to collect and report a customer ID. The pharmacy will use its internal procedures for tracking deliveries.

When submitting data utilizing the “deliveries exception,” pharmacies should populate the relevant ASAP fields as follows:

- PAT21 [Patient Location Code] – The pharmacist should use his/her professional judgment to determine which of the available ASAP location codes applies. Be as accurate as possible in selecting the code. Do not leave the field blank.
- AIR03 [Issuing Jurisdiction of the Customer ID] – Leave blank.
- AIR04 [ID Qualifier] – Leave blank.
- AIR05 [Customer ID] - Enter “*delivery*”
- AIR06 [Relationship of the customer to the patient] – Leave blank.

However, if an individual comes into the pharmacy to drop off a prescription for subsequent delivery, the pharmacy is required to collect and report the customer ID information to PMP.

### **AIR03 – Jurisdiction Issuing Customer ID**

The AIR03 field is used to identify the jurisdiction issuing the customer ID. For example, “MA” will be entered into this field to indicate a Massachusetts issued ID, or “US” will be entered to indicate a federally issued ID. Pharmacy software providers will distribute the full list of the approved ASAP jurisdiction codes for states, Canadian provinces, and other jurisdictions. When the specific jurisdiction is not on the list (for example, most foreign countries are not listed) use the code “99” for *Other*.

### **AIR04 – ID Qualifier of Person Dropping Off or Picking Up Prescription**

The AIR04 field identifies what type of identification the individual dropping off or picking up the prescription presents to the pharmacy. ASAP 4.1 (latest printing) has added code “04,” to represent the U.S. Permanent Resident Card. Use code “99” for the MA Commission for the Blind ID, since ASAP 4.1 does not provide a more specific code.

### **AIR06 – Customer’s Relationship to Patient.**

The PMP does not require the pharmacist to choose from all of the available ASAP relationship codes. Just enter “01” if the customer is the patient, or enter “99” if the customer is not the patient.

### **DSP06 – Refill Number**

[Partial fills are entered in DSP13; where a value of “01” is a partial fill.]

An original prescription is a prescription that upon dispensing is issued/assigned a new prescription number by the dispensing pharmacy. Prescriptions that constitute continuation of drug therapy and that are issued/assigned a new prescription number are original prescriptions. The code for an original prescription is “0,” zero.

Refills of prescriptions are those prescriptions dispensed in accordance with the refill indication on a prescription having a previously issued/assigned prescription number. The codes indicating the refill number correspond to that dispensing, e.g. ‘01’ for first refill, ‘02’ for second refill, etc. PRN is not an acceptable code to indicate a refill.

### **DSP16 – Method of Payment**

Use only the code “01” for *private pay* or the code “99” for *other*. If any amount of the prescription payment is covered by a third party, use the code for *other* (even if the patient makes a copayment). If the entire amount of the prescription price is paid by the customer or patient, use the code for *private pay*. If for some other pharmacy claims purpose a pharmacy needs to enter another more specific payment type code, PMP will not reject that code as long as it is one of the ASAP standard DSP16 codes.

### **DSP18 – RxNorm and DSP19 – Electronic Prescription (e-prescription) Reference Number**

Both of these fields are included in this specification to accommodate e-prescribing of Schedule II – V drug products. If a pharmacy receives data on either of these fields, they are required to be reported to the PMP.

### **PAT22 – Country of Non-U.S. Resident**

If the patient does not have a US address enter the country name in PAT22. If the patient has a U.S. address, leave this field blank. If your pharmacy software is set up for you to enter non-U.S. country information in a different address field that is submitted to the PMP (for example in the zip code field), it is permissible to continue using that field instead.

## **Properly Reporting Metric Quantities**

Accurate reporting of metric quantities is essential for providers who review patient records and PMP staff who perform data analyses.

Consistent and accurate units of measure must be used to report the metric quantity for the specific dosage form for each prescription. Every pharmacy needs to use the appropriate and the same unit of measure for each drug product and its dosage form. Solid oral dosage forms tend to be properly reported since the unit of measure is “each” and reported as the number of solid units dispensed. However, some pharmacies have submitted metric quantities that are outside of the expected ranges (e.g., 10,000 ml). Most of these metric quantities were calculated using improper units of measure, especially for non-solid dosage forms.

### **General Guidelines for reporting metric quantities in the “Quantity Dispensed” field**

To aid in accurate and consistent reporting of metric quantities, the following guidance has been developed using information from the commercial databases most frequently used in pharmacy data entry:

- Use “each” when referring to the following dosage forms: capsule, diaphragm, disc, patch, plaster, suppository, suture, tablet, troche, and wafer.
- Use “mL” when referring to the following dosage forms: aerosol liquids (note: some formulations are powders, use “gm”), elixirs, emulsions, extracts, mouthwash, oils, shampoos, liquid soaps, solutions, sprays, suspensions, syrups, tinctures.

Example: A pharmacist dispensed 1 package of 10 morphine sulfate syringes, each syringe containing 2 mL of 10 mg/mL morphine. The total volume dispensed is 20 mL and the metric quantity reported will be “20”.

- Use “gm” when referring to the following dosage forms: aerosol powders (note: some formulations are liquids, use “mL”), creams, crystals, gels, jellies, granules, ointments, powders.

## **Reporting Compounded Prescriptions**

In the DSP08 field where the National Drug Code [NDC] number is normally entered for the prescription, the pharmacy will either enter (a) the number “9” eleven times i.e., “99999999999” or (b) an in-house assigned eleven character compound code, provided the first five characters are *nines*. Also, enter code “06” in DSP08.

The specific NDC number, the metric quantity and the unit of measure (gm, mL, or each) of each reportable ingredient must also be submitted to the PMP. Pharmacies and pharmacy corporations are advised to consult with their software providers for guidance on how to enter this data.



## Technical Specifications

### **Methods of submission**

#### Data Transmission via secure file transfer protocol (sFTP)

SFTP is the preferred submission method.

For more information regarding an sFTP submission, please contact Atlantic Associates at (800) 539-3370 or (888) 492-7341, for instructions, user names and passwords.

The file name should be the pharmacy DEA number followed by a date and military time stamp and followed by .TXT in one of the following patterns:

- “AA99999999\_yyyymmdd\_hhmm.TXT” or “AA99999999\_yyyymmdd\_hhmmss.TXT”

For example, a file sent on August 19, 2009 at 1:01pm would appear similar to

- “AP1234567\_20090819\_1301.TXT” or “AP1234567\_20090819\_130103.TXT”

The time and date stamp is included to avert unintended overwrite of files when submitting more than one file for a particular pharmacy.

Alternative naming conventions are permitted including globally unique identifiers (GUID's) provided AAI agrees to the naming.

### **Other Methods of Data Submission**

If for any reason a pharmacy cannot submit by sFTP they, or their software provider, should contact AAI to discuss an alternative. Any method of transmission must conform to MDPH's requirements for security, encryption, and delivery verification.

### **Reporting Zero Activity**

When a pharmacy does not dispense any Schedule II–V drug products during a given week, the pharmacy must submit a report to AAI utilizing the ASAP Zero Report Standard.

Pharmacies that never (or rarely) dispense Schedules II–V prescriptions may contact AAI to discuss annual notification in lieu of submitting recurring Zero Activity reports.

### **Rejection**

Data records or elements will be rejected if they do not meet the requirements specified in this document and the layouts and requirements of the approved ASAP standards. AAI will notify the submitter of the reason the data were not accepted and will utilize the *Implementation Guide ASAP Standard for Prescription Monitoring Programs Error Reports* to do so. The error report standard provides for flagging individual prescriptions as either Rejections or as Warnings. A rejected prescription must be resubmitted by the pharmacy with the correct information if the prescription was in fact dispensed.

### **Warning**

A warning indicates that AAI has a question as to whether there was an error in a submission to the PMP. A warning does not automatically result in rejection of the data by AAI; however, the pharmacy should respond appropriately with a resubmission when there is a data error involved.

## **Accounting for Submissions**

AAI will send an e-mail confirmation for each submission. Pharmacies that are not already signed up for receiving email confirmations should send an e-mail to [data@aainh.com](mailto:data@aainh.com) and put "MA Email Notifications" in the subject line. Include the e-mail address, pharmacy name, NCPDP number, DEA number, contact name, and telephone number in the message. Please rely on the postcard or e-mail confirmation as verification that the data were received.

## **Assistance and Support**

Individual pharmacies are advised to contact their software vendors to obtain modification for and instructions on compliance with electronic submissions of prescription information. AAI is available to provide assistance and information to individual pharmacies, chain pharmacies, software providers and other entities required to submit data.

Support from AAI is available regarding requirements and technical data that are needed to meet the PMP regulations. Questions concerning interpretations of technical and compliance matters may be referred to AAI ([see contact information](#) on [page 3](#)). AAI will consult with the Drug Control Program and/or the Board of Registration in Pharmacy regarding interpretation of regulations and other matters as necessary. The authority for final decisions, including interpretation of regulations, rests with DCP and the Board.

## **MA PMP ASAP 4.1 List of Required Data Elements**

To improve data integrity and to reduce the possibility of data rejection, software providers are encouraged to incorporate validations based upon ASAP documented data element descriptions and based upon the descriptions in the notes columns in the following pages. For example, it is helpful to validate that:

- Alphanumeric characters are numerals for data elements that have only numeric codes or formats as possibilities (e.g., the Relationship to Patient data element code possibilities are only composed of numerals, and an NCPDP number or an NDC number has only numerals);
- Data entry does not exceed MA PMP maximum permissible data element widths;
- When a finite list of codes is specified for a particular data element (also taking into account that MA PMP accepts fewer codes than ASAP for some data elements), that only one of those codes is inserted.

### Definitions of terms appearing in the Notes column:

"If available" means that the PMP is not requiring the software vendors to modify their systems to include a specific data element, but that should be sent if the field exists in their software.

"When available" means that data element is required but data may legitimately not exist for the data element in a particular record, such as when a person has no middle name.

"If applicable" means data should be populated in specific circumstances, As examples, a DEA suffix is only relevant when the prescriber is an intern or resident, and a CDI segment should only be sent for compounded prescriptions.

## **Required ASAP 4.1 Data Elements**

For details and examples please consult the *Implementation Guide ASAP Standard For Prescription Monitoring Programs, Version 4 Release 1*. This document is available from American Society for Automation in Pharmacy ([www.asapnet.org](http://www.asapnet.org) or phone (610) 825-7783)

This is a character-delimited format. All A/N data elements must be left justified, right blank filled. All N data elements are right justified left zero filled.

The MA PMP leaves it to the discretion of the pharmacy as to whether or not to include the AIR segment if data elements within that segment are all empty (e.g., refill or partial fill exception). MA PMP will accept either method.

Data may be sent in any data element listed below, including those that are “Not used for MA PMP”. However, do not use any additional data elements.

The ACK - Acknowledgement/Response segment is not supported at this time.

The third byte in the TH segment is used by example to indicate the data element separator. To avoid data corruption, be careful to **not** use a character that could possibly be typed in by a data entry person.

<b>ASAP 4.1</b>			
<i>REF</i>	<i>DATA ELEMENT NAME</i>	<i>REQUIRED FIELDS INDICATOR</i>	<i>NOTES</i>
<b>HEADER SEGMENTS</b>			
<b>Transaction Set Header</b>			
TH01	(ASAP) Version/Release Number	Required by MA PMP	4.1
TH02	Transaction Set Control Number	Required by MA PMP	File name assigned by the sender
TH03	Transaction Type	Required by MA PMP	
TH04	Response ID		Used in response transaction only
TH05	Creation Date	Required by MA PMP	
TH06	Creation Time	Required by MA PMP	
TH07	File Type	Required by MA PMP	
TH08	Routing Number		Not used for MA PMP
TH09	Segment Terminator Character	Required by MA PMP	Carriage Return (no line feed) is preferred. Backslash (\) is not preferred because that character sometimes gets data entered into address fields
<b>Information Source</b>			
IS01	Unique Information Source ID	Required by MA PMP	Telephone number (including area code) of the file sender (e.g., individual pharmacy OR pharmacy chain headquarters if sending for group of pharmacies). This should be the number of a person/office to whom questions about this file should be referred.
IS02	Information Source Entity Name	Required by MA PMP	Name of the pharmacy or the entity submitting this file on behalf of the pharmacy
IS03	Message	Required by MA PMP	If available and if applicable
<b>Pharmacy Header</b>			
PHA01	National Provider Identifier (NPI)	Required by MA PMP	When available

**ASAP 4.1**

<i>REF</i>	<i>DATA ELEMENT NAME</i>	<i>REQUIRED FIELDS INDICATOR</i>	<i>NOTES</i>
PHA02	NCPDP/NABP Provider ID	Required by MA PMP	Seven-digit NCPDP Number
PHA03	(Pharmacy) DEA Number	Required by MA PMP	
PHA04	Pharmacy Name	Required by MA PMP	
PHA05	Address Information 1		Not used for MA PMP
PHA06	Address Information 2		Not used for MA PMP
PHA07	City Address		Not used for MA PMP
PHA08	(Pharmacy) State Address	Required by MA PMP	USPS 2 letter code
PHA09	(Pharmacy) Zip Code Address		Not used for MA PMP
PHA10	(Pharmacy) Phone Number	Required by MA PMP	Include area code
PHA11	Contact Name		Not used for MA PMP
PHA12	Chain Site ID		Not used for MA PMP
<b><i>DETAIL SEGMENTS</i></b>			
<b>Patient Information</b>			
PAT01	ID Qualifier of Issuing Jurisdiction		Not used for MA PMP
PAT02	ID Qualifier		Not used for MA PMP
PAT03	ID of Patient		Not used for MA PMP
PAT04	Additional ID Qualifier of Issuing Jurisdiction		Not used for MA PMP
PAT05	Additional Patient ID Qualifier		Not used for MA PMP
PAT06	Additional Patient ID		Not used for MA PMP
PAT07	Last Name	Required by MA PMP	
PAT08	First Name	Required by MA PMP	
PAT09	Middle Name	Required by MA PMP	When available
PAT10	Name Prefix	Required by MA PMP	When available
PAT11	Name Suffix	Required by MA PMP	When available (e.g., Jr.)
PAT12	Address Information 1	Required by MA PMP	
PAT13	Address Information 2	Required by MA PMP	When available
PAT14	City Address	Required by MA PMP	
PAT15	State Address	Required by MA PMP	
PAT16	Zip Code Address	Required by MA PMP	
PAT17	Phone Number		Not used for MA PMP
PAT18	Date of Birth	Required by MA PMP	
PAT19	Gender Code	Required by MA PMP	
PAT20	Species Code	Required by MA PMP	If available
PAT21	Patient Location Code	Required by MA PMP	
PAT22	Country of Non-U.S. Resident	Required by MA PMP	Only to be used when the address where the patient lives is outside of the U.S. This is a freeform text field. ASAP does not provide codes for this field.
PAT23	Name of Animal		Not used for MA PMP

**ASAP 4.1**

<i>REF</i>	<i>DATA ELEMENT NAME</i>	<i>REQUIRED FIELDS INDICATOR</i>	<i>NOTES</i>
<b>Dispensing Record</b>			
DSP01	Reporting Status		Unlike ASAP 4.0, this field must never be blank.
DSP02	Prescription Number	Required by MA PMP	
DSP03	Date Written	Required by MA PMP	
DSP04	Refills Authorized	Required by MA PMP	
DSP05	Date Filled	Required by MA PMP	
DSP06	Refill Number	Required by MA PMP	
DSP07	Product ID Qualifier	Required by MA PMP	Code "01" = NDC, "06" = Compounded RX
DSP08	Product ID	Required by MA PMP	Eleven-digit NDC number For compounds: Use eleven nines. In-house assigned eleven character compound codes are permitted, provided the first five characters are nines. Also, use the CDI segment to report all compound ingredients.
DSP09	Quantity Dispensed	Required by MA PMP	Decimals NOT implied For compounds use the first quantity in CDI04
DSP10	Days Supply	Required by MA PMP	No decimals
DSP11	Drug Dosage Units Code	Required by MA PMP	
DSP12	Transmission Form of Rx Origin Code	Required by MA PMP	
DSP13	Partial Fill Indicator	Required by MA PMP	
DSP14	Pharmacist National Provider Identifier (NPI)		Not used for MA PMP
DSP15	Pharmacist State License Number		Not used for MA PMP
DSP16	Classification Code for Payment Type	Required by MA PMP	To indicate how the RX was paid for. Code "01" = Private Pay, "99" = Other If any fraction of the RX payment is from a third party - even if the patient pays a copayment - use code "99".
DSP17	Date Sold		Not used for MA PMP
DSP18	RxNorm Code	Required by MA PMP	For electronic prescriptions When Available
DSP19	Electronic Prescription Reference Number	Required by MA PMP	For electronic prescriptions Field UIB-030-01 of the NCPDP SCRIPT Standard When Available
<b>Prescriber Information</b>			
PRE01	National Provider Identifier (NPI)	Required by MA PMP	When available

**ASAP 4.1**

<i>REF</i>	<i>DATA ELEMENT NAME</i>	<i>REQUIRED FIELDS INDICATOR</i>	<i>NOTES</i>
PRE02	Prescriber DEA Number	Required by MA PMP	Nine characters (two alpha characters followed by seven digits)
PRE03	DEA Number Suffix	Required by MA PMP	If applicable
PRE04	Prescriber State License Number		Not used for MA PMP
PRE05	(Prescriber) Last Name		Not used for MA PMP
PRE 06	(Prescriber) First Name		Not used for MA PMP
PRE07	(Prescriber) Middle Name		Not used for MA PMP
<b>Compound Drug Ingredient Detail</b>			When applicable
CDI01	Compounded Drug ingredient Sequence Number	Required by MA PMP	
CDI02	Product ID Qualifier	Required by MA PMP	Must be NDC Number: Code "01"
CDI03	Compound Ingredient Product ID	Required by MA PMP	Eleven-digit NDC number
CDI04	Compound Ingredient Quantity	Required by MA PMP	Decimals NOT implied
CDI05	Compound Drug Dosage Units Code	Required by MA PMP	
<b>Additional Information Reporting</b>			
AIR01	State issuing Rx Serial Number		Not used for MA PMP
AIR02	State issued Rx serial number		Not used for MA PMP
AIR03	Issuing Jurisdiction (of AIR05 ID)	Required by MA PMP	Please note that the code for Other in the List of Jurisdictions is now "99".
AIR04	ID Qualifier of Person Dropping Off or Picking Up Rx	Required by MA PMP	
AIR05	ID of Person Dropping Off or Picking Up Rx (Customer ID)	Required by MA PMP	The pharmacy has the option of using the ID <i>either</i> of the person dropping off or picking up the RX
AIR06	Relationship of Person Dropping Off or Picking Up Rx	Required by MA PMP	Use only the codes "01" for the patient, or "99" for any other person
AIR07	Last Name of Person Dropping Off or Picking up Rx		Not used for MA PMP
AIR08	First Name of Person Dropping Off or Picking up Rx		Not used for MA PMP
AIR09	Last Name or Initials of Pharmacist		Not used for MA PMP
AIR10	First Name of Pharmacist		Not used for MA PMP

**ASAP 4.1**

<i>REF</i>	<i>DATA ELEMENT NAME</i>	<i>REQUIRED FIELDS INDICATOR</i>	<i>NOTES</i>
<b>SUMMARY SEGMENTS</b>			
<b>Pharmacy Trailer</b>			
TP01 Detail Segment Count	Detail Segment Count	Required by MA PMP	Number of Detail Segments for the pharmacy
<b>Transaction Set Trailer</b>			
TT01 Transaction Control Number	Transaction Set Control Number	Required by MA PMP	
TT02 Segment Count	Segment Count	Required by MA PMP	