Maryland PDMP RxGov Data Submitter User Guide for ASAP 4.2b

Version 5

Maryland Department of Health
Public Health Services

Office of Population Health Improvement (OPHI)

Prescription Drug Monitoring Program (PDMP)

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Disclaimer

The content represented within this document is current upon the date of publication. Some material may or may not apply to the user's individual circumstances due to differences in user role options enabled, and the user's specific client setup. Refer to the latest release notes for additional updates.

Data Submitter User Guide Contents

About RxGov

RxGov is a software application that records and tracks medication dispenses, including controlled substance (CS) and naloxone prescriptions, for Maryland's Prescription Drug Monitoring Program (PDMP).

RxGov is designed to be a comprehensive system which facilitates communication between multiple user groups to ensure patient confidentiality, data security, and the presentation of accurate information. The RxGov application operates in an online environment that does not require any special hardware or software and allows a user to access their RxGov account anywhere internet access is available.

RxGov Version

At the bottom left of the screen, the current version of RxGov is displayed.

Purpose

The PDMP is authorized by Health General Article, Section 21-2A-02, Annotated Code of Maryland (Chapter 166, 2011). The purpose of the PDMP is to reduce the non-medical use, abuse, and diversion of prescription drugs while preserving legitimate patient access to optimal pharmaceutical-assisted care. Program regulations have been promulgated under Code of Maryland Regulations (COMAR) 10.47.07.

Maryland statute gives the Maryland Department of Health (MDH) authority over the PDMP. The MDH Secretary has assigned oversight responsibilities to the Department's Public Health Services. MDH has partnered with Chesapeake Regional Information System for our Patients (CRISP), the designated statewide health data utility (HDU) to design, implement, and operate core PDMP information technology (IT) services. CRISP has contracted with Leap Orbit to develop a database that will collect and store data on the dispensing of controlled substances (CS) in the State. Leap Orbit's RxGov is a web-based program that facilitates the collection, analysis, and reporting of information on dispensed CS and naloxone prescriptions.

In the Maryland 2022 Legislative Session, Chapter 224 "Public Health – Prescription Drug Monitoring Program (PDMP) – Naloxone Medication Data" passed. This means that dispensers who currently report CS dispenses to the PDMP will also be required to report naloxone dispenses to the PDMP. Maryland law requires each dispenser submit, by electronic means, information regarding every CS and naloxone medication dispensed pursuant to a prescription to the PDMP.

During the same legislative session, the Maryland General Assembly passed Chapter 296 (House Bill 1127), *Public Health – State Designated Exchange – Health Data Utility* ("State law"). The law requires the State-Designated Health Information Exchange ("HIE"), CRISP, to operate a Health Data Utility ("HDU")[1] and mandates dispensers[2] to submit noncontrolled prescription drug[3] ("non-CDS") dispense information to CRISP.[4]

As the HDU for Maryland, CRISP shall electronically collect non-CDS dispense information from dispensers and as part of the medication history hosting service, RxGov provides appropriate infrastructure to accept data supplied by dispensers for this purpose as well as for PDMP data submission. More information about the non-CDS data submission requirements are available in the Non-CDS Dispenser Data Submission Manual.

MDH and CRISP establish and maintain procedures to ensure that the privacy, confidentiality, and security of patient information collected, recorded, transmitted, and maintained is not disclosed except as authorized by Health General Article, Section 21-2A, Annotated Code of Maryland, and Code of Maryland Regulations (COMAR) 10.47.07.

The *Maryland PDMP RxGov Data Submitter User Guide* serves as a step-by-step implementation and training resource for data submitters by providing detailed information dispensers need to comply with the reporting requirements for the PDMP.

The intended audience for this document is any licensed pharmacy or dispenser who dispenses a prescription drug in or into Maryland and/or the dispensing software vendor who facilitates uploading dispenses on behalf of a pharmacy or dispenser.

How Does RxGov Work?

RxGov serves as a universal point of contact at all steps of the prescription dispensing process.

When a patient visits a health care provider and the provider considers prescribing a controlled substance (CS) for a patient, the provider may first review the Prescription Drug Monitoring Program (PDMP) to manage the benefits and risks of CS medications and identify potentially harmful drug interactions.

Before dispensing a prescribed CS medication, a Dispenser may review the PDMP and verify that there is not a likelihood of harmful or hazardous use of the medication by the patient.

By submitting data for a Dispenser or group of dispensers, a Data Submitter keeps the RxGov database current and ensures that the data reviewed by health care providers and dispensers is accurate.

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[1] An HDU offers advanced technical services to support electronic exchange of clinical, non-clinical, administrative, and public health data to address challenges and achieve greater value for State agencies, payers, providers, community partners, and the public.

[2] "Dispenser" means a person authorized by law to dispense, as defined in the Health Occupations Article § 12-101, a prescription drug to a patient or the patient's agent in the State, including a nonresident pharmacy so authorized. See COMAR 10.25.18.02 for exceptions.

[3] Noncontrolled Prescription Drug means a prescription drug, as defined in §21-201 of Health General Article, which is not a controlled dangerous substance designated under Title 5, Subtitle 4 of the Criminal Law Article.

[4] CRISP is a 501(c)(3) independent non-stock Maryland membership corporation.

Program Overview

The Prescription Drug Monitoring Program (PDMP) is authorized by state statute to monitor dispensed medications, provide information to improve the health and safety of patients, and help prevent the harmful use of prescribed controlled substances (CS).

Those who submit or receive information from the PDMP must provide reasonable privacy protections in accordance with the Health Information Portability and Accountability Act (HIPAA).

In order to maintain the most comprehensive medication data set possible, patients cannot opt out of the PDMP.

Data Collection and Reporting Requirements

The PDMP is required by law to monitor the dispensing of prescription drugs that contain a Schedule II, III, IV, or V medication as designated under Title 5, Subtitle 4 of the Criminal Law Article, Annotated Code of Maryland. With few exceptions, Maryland's CS schedules parallel those in federal law. The Office of Controlled Substances Administration (OCSA), Maryland's CS permit authority, maintains a list of drugs included in the Maryland CS schedules that are not included in the federal schedules.

The following sections describe reporting expectations and exemptions, registration requirements, reporting methods, data standards, and guidelines for zero reporting within the RxGov PDMP platform.

Reporting Expectations

To fulfill the PDMP data collection requirement, CS dispensers are required to electronically report data on all Schedule II, III, IV, and V medications and naloxone prescription drugs dispensed to a patient or a patient's agent in the State. "Dispenser" includes licensed pharmacies, whether in-state or non- resident, as well as licensed healthcare practitioners who dispense CS and naloxone. Certain specified entities and types of drug delivery/dispensing are exempt from reporting. For more information see Reporting Exemptions. The following procedures must be followed per Maryland statute (Health-General Article, Section 21-2a):

- Dispensers are required to electronically report data on CS and naloxone prescription drugs dispensed to a patient (human or non-human) in the state or to an address in the state.
- Every 24 hours, dispensers are required to provide data in a standardized format, or they may provide zero reports if no medications were dispensed that met the required criteria.
- Data is encouraged to be provided as close to real-time as possible.
- In the event the records provided by a dispenser are not in the correct format, unreadable, or damaged, RxGov will not load the record and will report the error(s) to the data submitter for correction.

As part of the medication history hosting service, RxGov provides appropriate infrastructure to accept data supplied by dispensers as required by state statute.

- Chain pharmacy data may be submitted from your central office. Please verify this with your corporate or central office.
- If you are an independent pharmacy or dispensing practitioner who works with a pharmacy or practice management system vendor, forward the reporting requirements to your software vendor.
- System changes may be necessary to create the data file in the correct format, and the pharmacy or vendor may be able to submit the data on your behalf. If not, follow the instructions provided in the *Data Submission* section to submit the data.
- If you are a dispenser that submits its own data, follow the instructions provided in the *Data Submission* section to submit the data.

Reporting Exemptions

The following ***types of drug delivery*** are exempt from the PDMP reporting requirement:

1. Direct administration of CS to a patient.
2. Provision of patient drug samples at no charge (in accordance with Health Occupations Article, Section 12-102(d), Annotated Code of Maryland).

Inpatient Hospice Dispensing: Pharmacies that dispense CS to patients in an inpatient hospice facility may apply to MDH for a waiver from reporting PDMP data when dispensing to hospice inpatients. This waiver only applies to dispensing to inpatient facilities that are currently licensed as a "general license hospice" by the MDH Office of Health Care Quality (OHCQ) **AND** have a valid "Certificate of Need" issued by the Maryland Health Care Commission (MHCC). Pharmacies issued an inpatient hospice waiver still must report all other CS dispensing (i.e., outpatient dispensing). To apply for a waiver, pharmacies must provide information on how they will differentiate dispensing to hospice inpatients from other dispensing required to be reported to the PDMP and are subject to unannounced, on-site inspections by MDH to verify reporting on dispensing.

The following ***persons or entities*** are exempt from the PDMP reporting requirement:

1. Licensed hospital pharmacies that only distribute CS for direct administration to a patient receiving inpatient care in the hospital.
2. Pharmacies issued a waiver permit under COMAR 10.34.17.03 ("waiver pharmacies") that provide pharmaceutical specialty services exclusively to persons living in assisted living facilities, comprehensive care facilities, and developmental disabilities facilities.
3. Opioid treatment service programs that are certified under Health-General Article § 8-401 or licensed by the State under Health-General Article § 7.5–401, Annotated Code of Maryland, and comply with Code of Federal Regulations 42, Part 8, COMAR 10.47.02.11, and requirements for the secure storage and accounting of opioid medication imposed by the federal Drug Enforcement Administration and the State OCSA.
4. Veterinarians licensed under Agriculture Article, Title 2, Subtitle 3, Annotated Code of Maryland when dispensing controlled substances for animals in the usual course of providing professional services.

Registration Requirement

All persons or entities that are not exempt from the reporting requirement are required to submit data to the PDMP. The individual or entity submitting data must complete registration with RxGov. For more information, see the *Creating Your Account* section.

This requirement is separate from any duty for a pharmacist or prescriber to register for clinical access to PDMP data.

In general, the reporting registration requirement applies to holders of the following credentials:

- Pharmacies that have a current license issued by the Maryland Board of Pharmacy, a current CDS permit issued by the Maryland OCSA, and a Maryland DEA number.
- Licensed healthcare practitioners who have both a current CDS permit issued by the OCSA **AND** a current prescription drug dispensing permit issued by their board of licensure (including the Board of Physicians, the Board of Dental Examiners, and the Board of Podiatric Medical Examiners; the Board of Nursing does not issue dispensing permits).

Reporting Data Standard and Deadlines

The PDMP requires prescription data be reported electronically in the American Society for Automation in Pharmacy (ASAP) Standard for Prescription Monitoring Programs. Submission of paper reports or hard copies of digital media (e.g., mailed CD or floppy disk) are not permitted. Approved electronic reporting methods include secure FTP (SFTP) over SSH, SSL website, or the online Universal Claim Form (UCF).

All dispense information must be submitted at minimum in the American Society for Automation in Pharmacy (ASAP) 4.2A or 4.2B standard. The PDMP requires all reports be submitted in the ASAP Standard for Prescription Monitoring Programs. Detailed specifications for ASAP are listed in **Appendix A: ASAP Specifications**. Additions and changes to the ASAP format and Maryland requirements are indicated in **Appendix A.** These changes are due to Maryland acceptingASAP 4.2A, 4.2B, and ASAP 5.0 updates and aligning with current standards across the country to improve data quality and provide better information to clinicians/users.

Dispensers must report CS prescription drug dispensing to the PDMP every 24 hours, including the submission of a 'Zero Report' on days when no CS or naloxone prescriptions were dispensed.

If a dispenser's report is rejected by the PDMP as incomplete or inaccurate, the dispenser **must** submit a corrected report within three (3) business days of being notified by RxGov of receipt of incomplete or inaccurate data.

If a dispenser suffers a mechanical, electrical, or other technical failure that, as a direct consequence, precludes the dispenser's ability to submit an electronic report, the dispenser must notify MDH within 24 hours of discovery of the technical failure and report data on each drug dispensed during the period of technical failure as soon as possible, but no later than 24 hours following re-establishment of the means of electronic reporting.

To report a technical failure to MDH, e-mail mdh.pdmp@maryland.gov or call (410) 402-8686.

Guidelines for Zero Reporting

If a dispenser has no CS dispensing transactions to report for the day, the dispenser must submit a zero report, as described in the Reporting Zero Dispensing topic in this guide.

Submitter Account

The following sections describe RxGov PDMP account creation, modification, account lockout, updates to profile details, and viewing of system notifications.

Creating Your Account

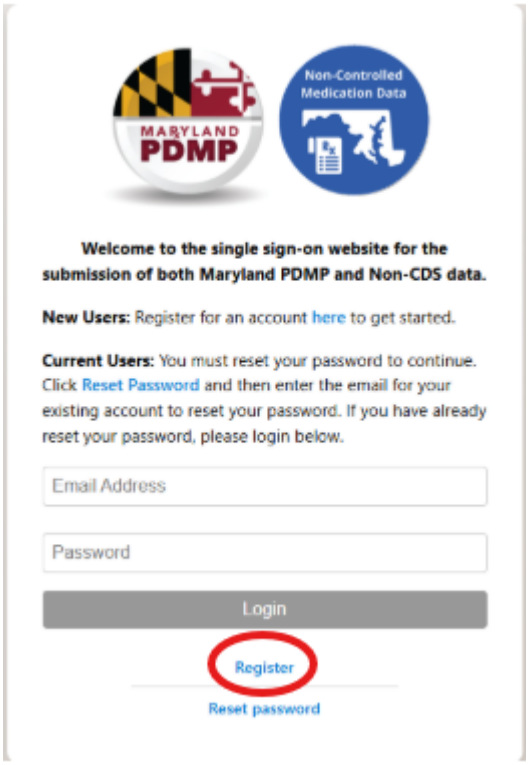
To submit data, you will first need to create a Submitter account. If you have already created your account, proceed to the appropriate section of this document that outlines the steps you must follow for Data Submission. As of July 23rd, 2025, the login process for data submissions was updated to accommodate non-controlled (Non-CDS) dispenses.

Complete the following steps to create a new RxGov user account:

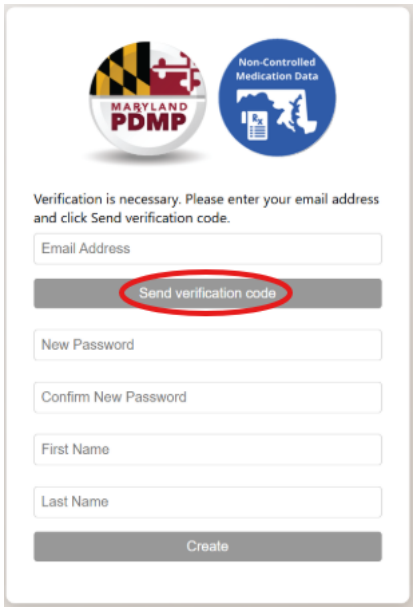
1. Go to the RxGov homepage at https://rxgovmd.oneleap.io.

   Note: Dispensers who need to report both non-CDS and CDS dispenses may submit one file with all dispenses through the method they are currently using. This applies to both SFTP submission and manual submission**. No new accounts need to be created for the submission of data for those who are currently reporting.** Non-CDS dispense information submitted alongside CDS information to RxGov will be separated by RxGov.

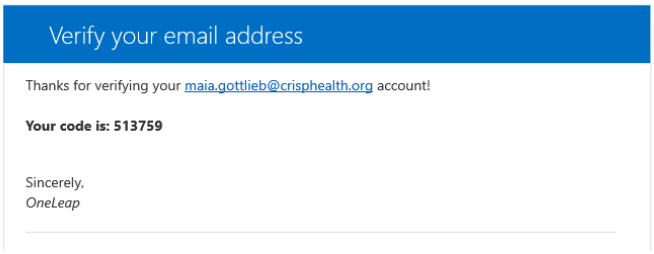
2. On the RxGov homepage, click **Register** and follow the instructions on the screen to create an account for the single sign on portal.



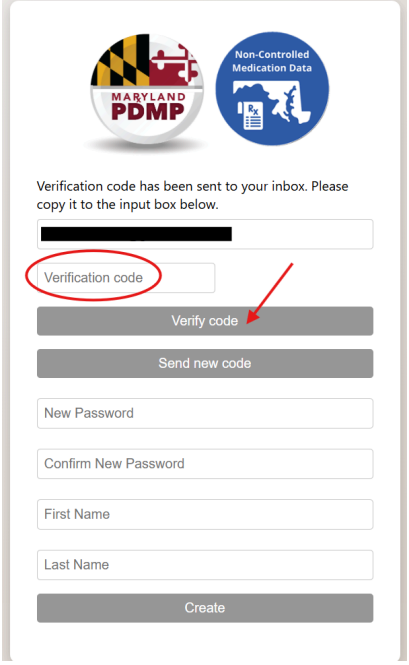
3. Enter the following required information:
    - **Email** - Use the email that will be best for receiving error reports and correspondence. This email will become your username.
    - Click **Send verification code** by retrieving the verification code to verify your email.



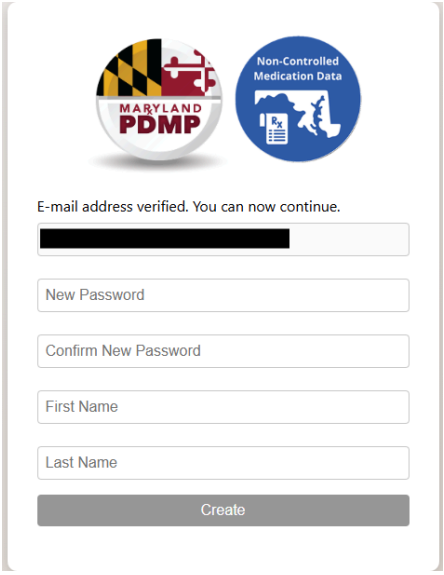
- Once you have entered your email address and clicked 'Send verification code' you will receive a verification code email that looks like this:



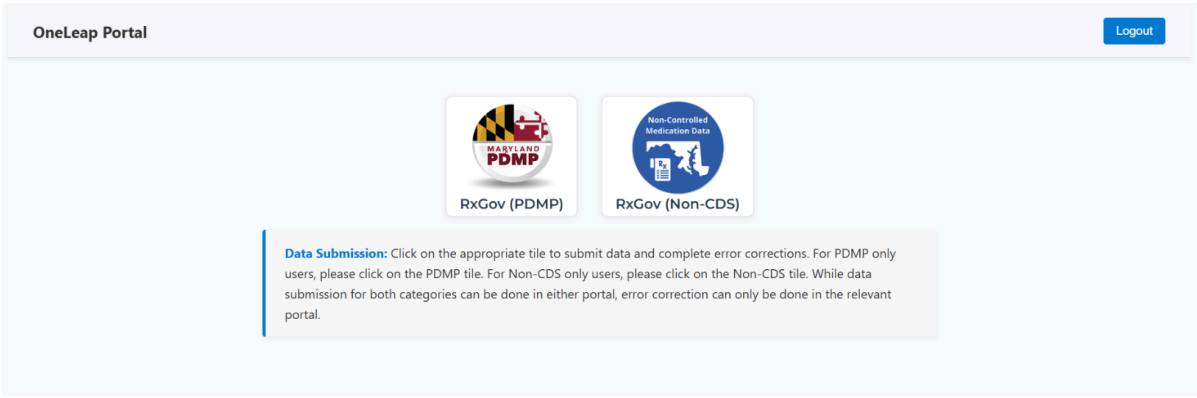
- Enter Verification code from email
- Click **Verify Code**



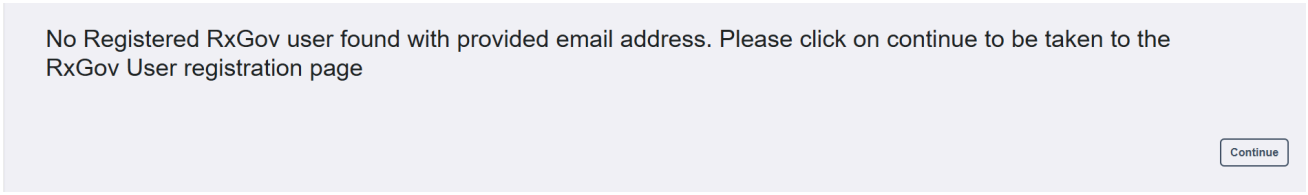
- **New Password:** Passwords must be at least 8 characters in length, contain uppercase and lowercase characters, and contain at least one special character and one digit.
- **Confirm Password**
- **First Name**
- **Last Name**



4. Once your log in account is created, you will return to the log in page to enter your newly created email address (username) and password and click the **Login** button.
5. Once logged in to RxGov, you will have the option to select one of two tiles (RxGov (PDMP) or RxGov (Non-CDS):

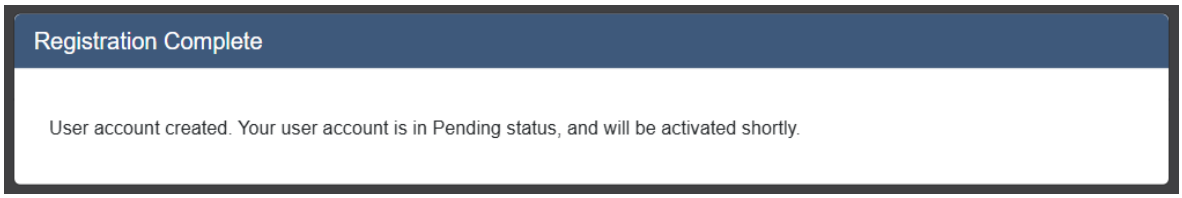


6. Click **Continue** to be taken to the RxGov registration screen: Clicking on either tile will display the following message:



7. Click **Continue** to be taken to the RxGov registration screen:

8. Enter the following information:
    - **Street address**
    - **City**
    - **Zip code**
    - **State**
    - **Mobile Phone Number**
    - In the Account Type menu, select **Submitter**.
    - Enter your **Submitter Name**.
    - Click **Register.**
9. View the displayed **Registration Complete** message.



10. Wait for an RxGov Administrator to activate the account. Newly created accounts must be activated by an RxGov Administrator before the user can proceed to log in.

11. After the RxGov Administrator activates the new account, a **Maryland PDMP RxGov Account Status Changed** email is sent to the email address associated with the account to notify that your account is now active.

***Note:** If a confirmation message is not received, check the Spam folder in your email application. If the message is not found, contact your Admin to have the confirmation resent.*

12. Once an Administrator has approved the account, open the RxGov URL and use the email address (username) and previously created password to log into RxGov.

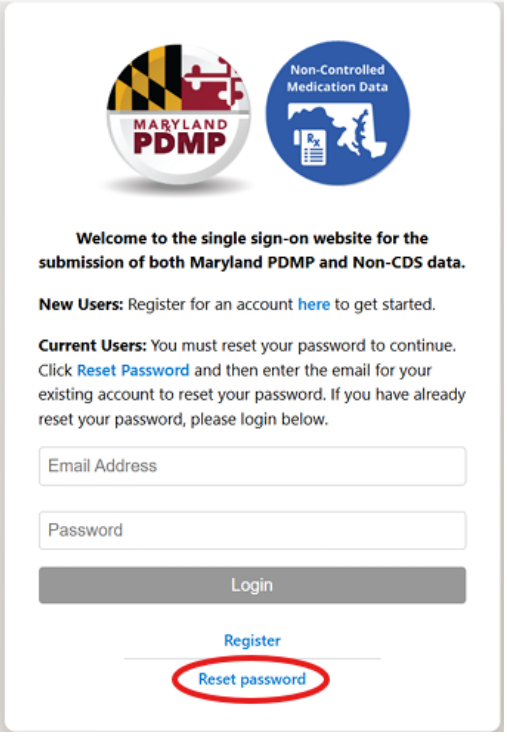
13. You will also receive an encrypted email from **@leaporbit.com** containing your credentials for SFTP submission. The email will contain the details needed to submit ASAP files through SFTP.

Modifying Your Account

Use the following procedures to recover a forgotten password or to change your password.

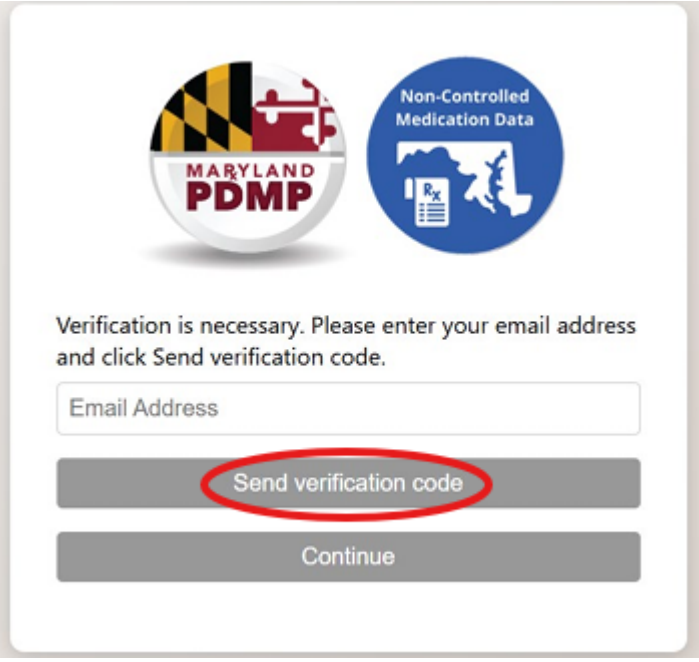
Forgot Your Password/Reset Password

1. Log on to the RxGov homepage at https://rxgovmd.oneleap.io
2. Select **Reset password.**

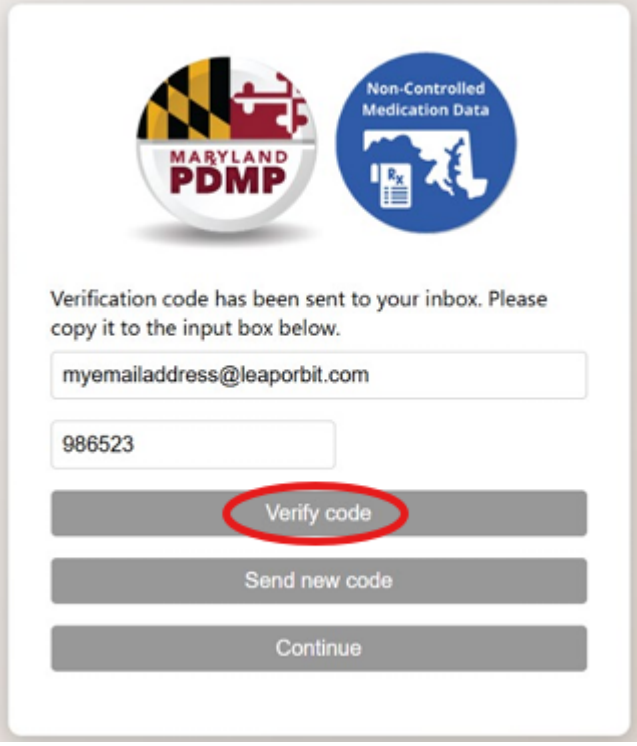


3. Enter email address associated with the account.

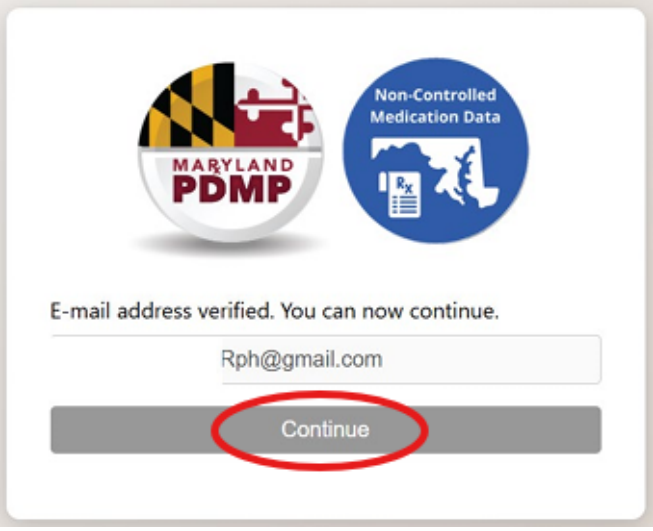
4. Select **Send verification code**.



5. Enter verification code and click **Verify code**.



6. Click **Continue.**



7. Enter a new password, confirm it, and select **Continue**.
8. Enter your email and new password on the log in screen.

Account Lockout

User accounts are locked out after five failed login attempts. The account remains locked for 30 minutes. After 30 minutes, the user can attempt to log in again. If needed, contact Support (rxgovsupport@leaporbit.com.

Viewing System Notifications

System notifications are set by System Administrators, are visible to all users, and contain information about updates, system outages, or planned downtime. They also contain information relevant to the use of the system.

Select **System Notifications** on the top menu bar to view system notifications. Select an option for the system notifications from the displayed drop-down menu.

Data Delivery Methods

The following sections provide information regarding descriptions of the various methods used to submit data from the RxGov application to the PDMP.

Timeline and Requirements

Upon receipt of this guide, dispensers and software vendors serving as data submitters can establish submission accounts by accessing https://rxgovmd.oneleap.io. If you are creating a new account, instructions are provided in the **Creating Your Account** topic in this document.

Reporting of Retroactive Dispensing Data

If there are any gaps in your data submission history to the PDMP, dispensers must retroactively report data on CS prescription drugs dispensed starting **January 1, 2014**, or the date the dispenser began dispensing CS

prescriptions, whichever is later. Naloxone dispenses should be reported starting on **July 20, 2023**, or the date the dispenser began dispensing naloxone, whichever is later.

Dispensers should report all available information from the fields identified in the **Required Prescription Information** section. Retroactive reporting ensures that the PDMP database has a complete history of CS and naloxone prescriptions.

DEA Validation

As a user, when submitting ASAP files via the user interface (UI), SFTP, UCF file, or when submitting Zero reports, the dispenser and prescriber DEA number must be validated to avoid incorrect DEA numbers from being submitted into the system.

DEA Validation occurs when the following events occur:

- A DEA number is entered during dispense submission.
- When a previously submitted DEA number is updated or edited in error corrections functionality.

When a DEA number is entered, it must be entered in a valid format. Additionally, the DEA number entered must match the DEA Registrant file. If the entered DEA number is not valid, an error or a warning is displayed depending on which parameter is invalid.

- **An error** – If the file is uploaded, but the dispense is not, the user must correct the dispense record from the RxGov UI or submit a new file.
- **A warning** – If the file and the dispense are uploaded, the user may correct the DEA number from the RxGov UI if it is incorrect or ignore the warning if the user is certain that the value is correct.

Expected Validation Outcomes

The DEA Validation process presents certain messages when the entered DEA number is not in a valid format or does not match the DEA Registrant file. Validation outcomes vary depending on the RxGov feature being performed. For example, invalid DEA number entries present different outcomes during initial registration, while editing a user profile in the User Management Menu, or while submitting a file in the various file submission methods. The following descriptions provide an outline of expected DEA Validation outcomes for each feature being performed.

User Registration DEA Validation

When a new user is registering an account, the following DEA Validation outcomes are expected.

- **Outcome when the entered DEA number is not in a valid format -** User registration is not processed until a DEA number with a valid format is provided.
- **Outcome when the DEA number entered does not match the DEA number on file -**The user registration is processed. In the User Management menu, Admins may view details indicating that the DEA number is not found in the DEA Registrant file. Admins have the option to update the DEA number in the user profile after it is confirmed with the registrant (following an out of the system process) and RxGov can match the new DEA entry with the most current DEA Registrant file.

ASAP File Submission DEA Validation

While submitting an ASAP file, the following DEA Validation outcomes are expected.

- **Outcome when the entered DEA number is not in a valid format-** The DEA number is **required** for both the dispenser and the prescriber (unless the dispense is for naloxone, then the DEA number or the NPI number for the prescriber will be accepted with the same caveat). When either DEA does not meet validation rules for format, an error for that dispense is displayed. The dispense is rejected and the data submitter must correct the error within 3 business days.
- **Outcome when the DEA number entered does not match the DEA number on file -** If the Dispenser or Prescriber DEA number does not match the DEA Registrant file, a warning for that dispense is displayed. In these cases, RxGov will validate that the DEA number is in the correct format and will check the DEA number retroactively when the new monthly DEA registrant file is received.

SFTP File Submission DEA Validation

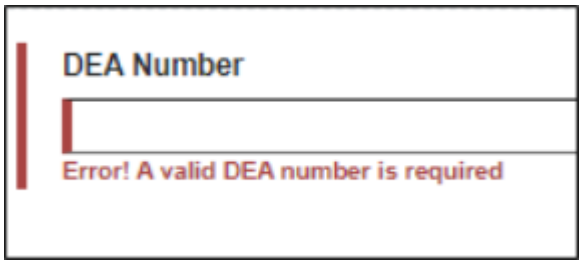
While submitting an SFTP file, the following DEA Validation outcomes are expected.

- **Outcome when the entered DEA number is not in a valid format:** The DEA number is **required** for both the dispenser and the prescriber (unless the dispense is for naloxone, then the DEA number or the NPI number for the prescriber will be accepted with the same caveat). When either DEA does not meet validation rules for format, an **error** for that dispense is displayed. The dispense is rejected and the data submitter must correct the error within 3 business days.
- **Outcome when the DEA number entered does not match the DEA number on file -** If the Dispenser or Prescriber DEA number does not match the most recent DEA file, a **warning** for that dispense is displayed. The data submitter must review the DEA number and correct it if it was entered erroneously. There are rare occasions when the DEA number is new and may not match the DEA Registrant file.

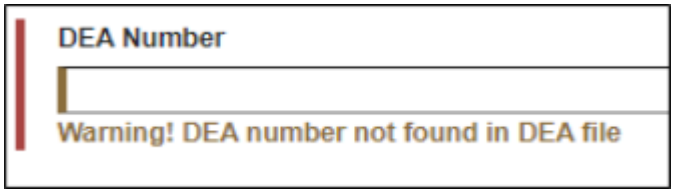
Universal Claim Form (UCF) File Submission DEA Validation

While submitting a file via Universal Claim Form, the DEA number format and DEA file validation is automatically verified upon entry. The following DEA Validation outcomes are expected.

- **Outcome when the entered DEA number is not in a valid format:** The DEA number is **required** for both the dispenser and the prescriber (unless the dispense is for naloxone, then the DEA number or the NPI number for the prescriber will be accepted with the same caveat). When either DEA does not meet validation rules for format, the manual submission is not processed until a DEA number (Dispenser and Prescriber) with a valid format is provided. The user cannot continue until the format in the DEA field is correct.



- **Outcome when the DEA number entered does not match the DEA number on file -** The manual submission is processed; however, a warning for the DEA number (Dispenser or Prescriber) is displayed and the user may either correct the value or do nothing if they know the submitted number is a valid DEA number. The data submitter must review the DEA number and correct it if it was entered erroneously. There are rare occasions when the DEA number is new and may not match the DEA Registrant file.



Zero Report File Submission DEA Validation

While submitting a Zero Report, the following DEA Validation outcomes are expected.

- **Outcome when the entered DEA number is not in a valid format –** The DEA number is **required** for the dispenser. When the DEA number does not meet the validation rules for format, the report submission is not processed until a DEA number with a valid format is provided. The user cannot continue until the format in the DEA field is correct.
- **Outcome when the DEA number entered does not match the DEA number on file –** The Zero Report is processed. A warning for the Dispenser DEA number is displayed. The user may either correct the value or do nothing if they know the DEA number submitted in the report is valid. The data submitter must review the DEA number and correct it if it was entered erroneously. There are rare occasions when the DEA number is new and may not match the DEA Registrant file.

Data File Submission Methods

The three main methods of submitting PDMP data files via RxGov are Secure FTP Over SSH, SSL Website (RxGov Portal), and Manual Prescription Entry. Before any submission occurs, the American Society for Automation in Pharmacy (ASAP) file is searched for National Drug Codes (NDC) and proper formatting.

When a prescription is submitted, RxGov first searches a manual drug list for the associated National Drug Code (NDC). This drug list is created from dispenser and state submitted information – see **Reporting Updates** below. If it is not on the manual list, RxGov then searches the FDA hosted National Drug Code Directory. If it is not available in either of those databases, RxGov will then search the Medispan database. If the NDC is not

found, the prescription will still be accepted, but a warning will be returned for the dispenser to review. The data submitter must review the NDC for correctness or the prescription will not contain all drug information in the PDMP clinical portal.

Reporting Updates

With the development of the non-controlled medication reporting requirements for the state of Maryland, submitters can now submit one file with **both** controlled and non-controlled information. The RxGov system will separate this data based on the schedule of the NDC provided. If the NDC is not identified in one of the above databases, it will be automatically routed to the controlled substance database. This may result in an error if the dispense does not have a DEA provided. Data submitters may request to submit medication information to the manual drug list by contacting rxgovsupport@leaporbit.com. Future dispenses with the provided NDCs will then be sorted into controlled and noncontrolled databases per the provided information.

FDA National Drug Code Directory

The NDC Directory contains product listing data submitted for all finished drugs including prescription and over-the-counter drugs, approved and unapproved drugs as well as repackaged and relabeled drugs. Drug establishments are required to provide FDA with a current list of all drugs including active pharmaceutical ingredients (API) manufactured, prepared, propagated, compounded or processed for sale in the U.S. at their facilities. Drugs are identified and reported using a unique, three-segment number called the NDC which serves as the FDA's identifier for drugs. FDA publishes the listed NDC numbers in the NDC directory which is updated daily. This is a publicly available database. See more here:
https://www.fda.gov/drugs/drug-approvals-and-databases/national-drug-code-directory

Medispan

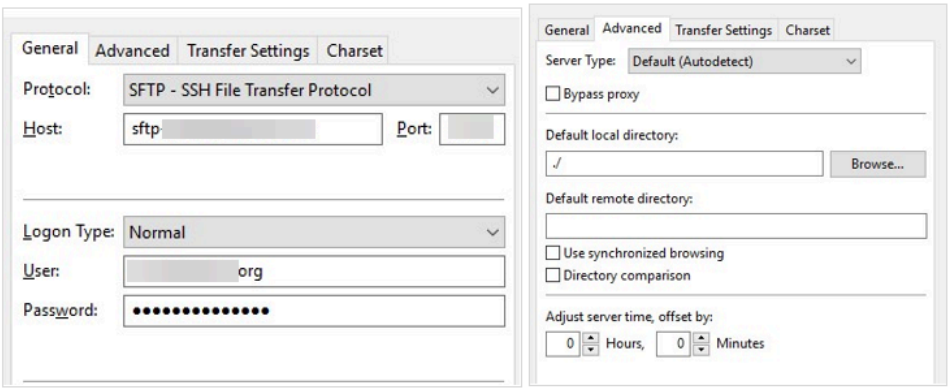
Medispan is a master drug database which provides descriptive drug information on name brand, generic, prescription, and over the counter medications, and herbal products. Medispan includes industry standard identifiers for all brand and generic drugs on the market including NDC, Universal Product Code (UPC) and Health Related Item (HRI) numbers. The database is updated daily and is the standard resource for pharmacies, pharmaceutical manufacturers, health care professionals, and payers.

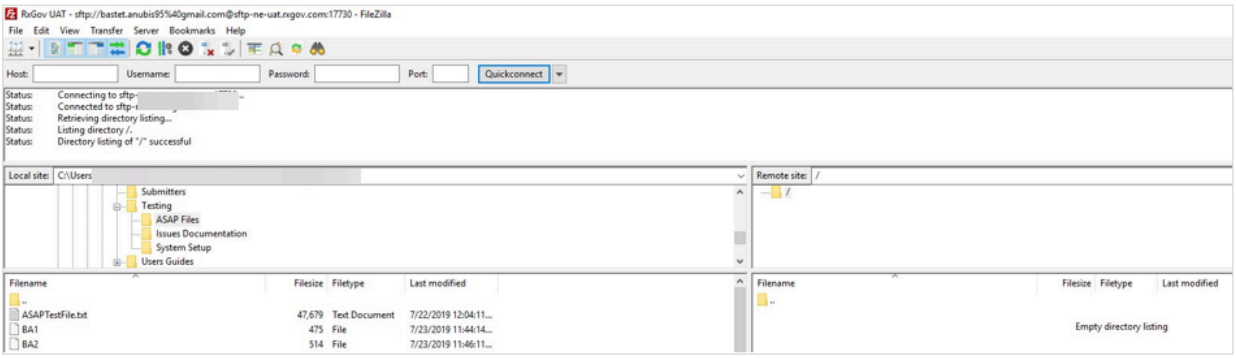
Submission Method #1: Secure FTP Over SSH

There are many free software products that support Secure FTP. The PDMP vendor, Leap Orbit, cannot direct or support your installation of operating system software for Secure FTP; however, once the software is set up in your specific environment, complete the following steps to submit files to RxGov using the Secure FTP over SSH method:

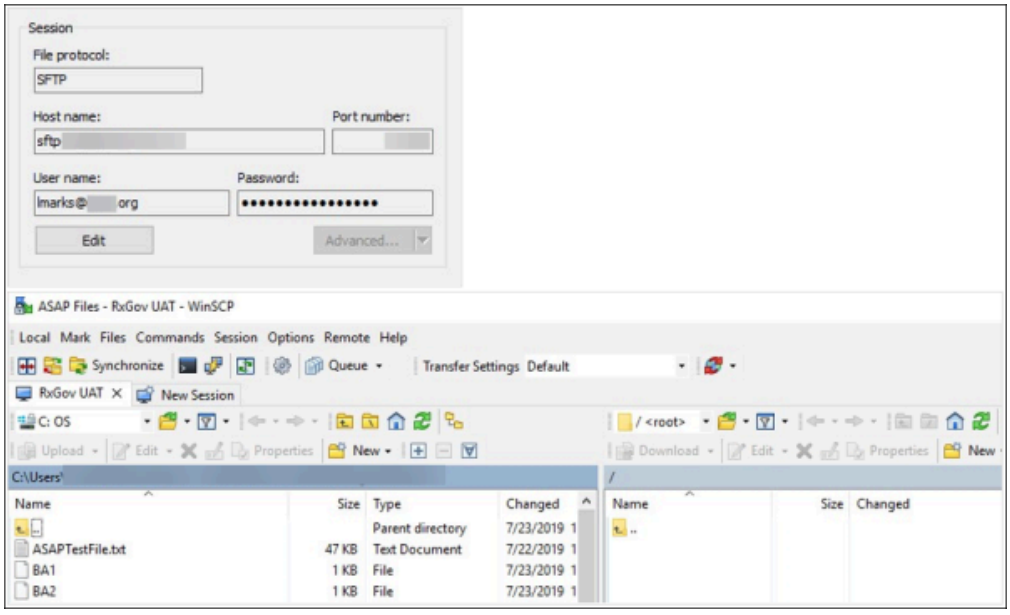
1. Prepare the data file for submission using the American Society for Automation in Pharmacy (ASAP) specifications described in **Appendix A: ASAP Specifications**.
2. Send the file to the appropriate SFTP URL and port determined by your Network Administrator.
3. When prompted, enter your data submitter credentials.
4. Route the file to the Root Directory.
5. If desired, view the results of the submission in the administration section of RxGov.
6. Log off when the file submission is complete.

Filezilla Example:





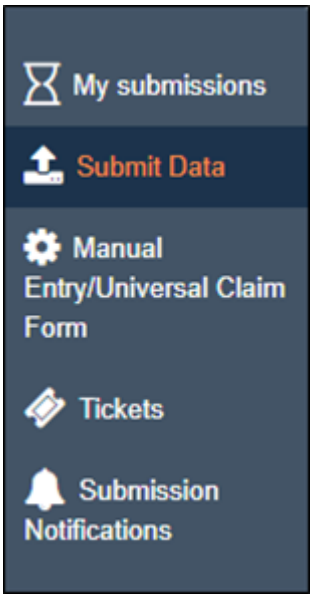
WinSCP Example:



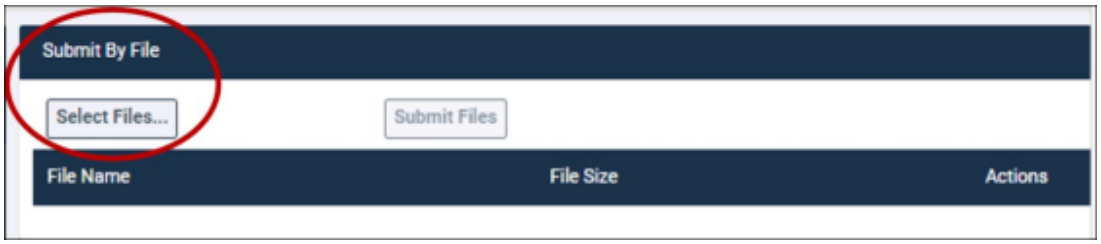
Submission Method #2: SSL Website (RxGov Portal)

Complete the following steps to submit files to RxGov using the SSL Website (RxGov Portal) method:

1. Prepare the data file for submission using the American Society for Automation in Pharmacy (ASAP) specifications described in **Appendix A: ASAP Specifications**.
2. Log on to RxGov.
3. On the left menu, click **Submit Data**.

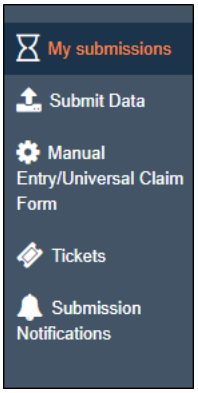


4. In the **Submit By File** section, click **Select Files**.



5. Select the file to be submitted from the stored file location on your computer and click **Open**.
    a. If a file was selected by mistake, select the red x in the Actions column to remove.
    b. When all desired files are listed, click Submit Files.

6. (Optional) View the results of the submission in My Submissions.

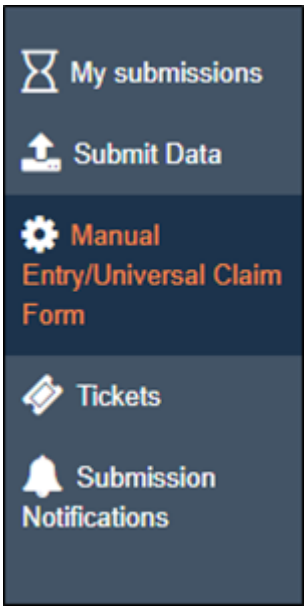


7. Log off when the file submission is complete.

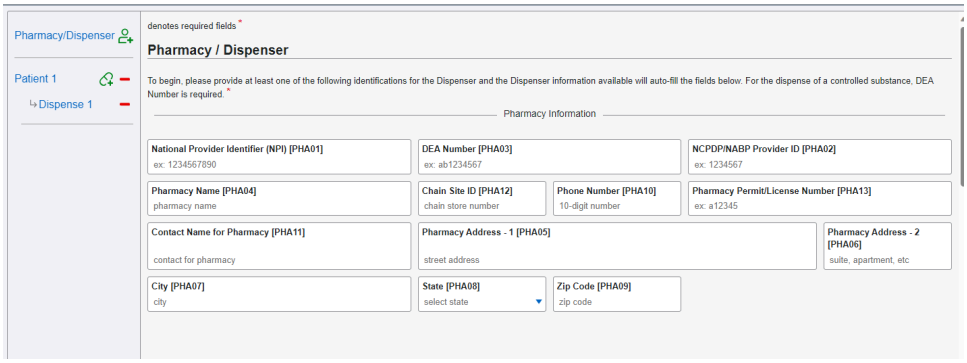
Submission Method #3: Manual Prescription Entry

Complete the following steps to submit files to RxGov using the Manual Prescription Entry method:

1. Log on to RxGov.
2. On the left menu, select Manual Entry/Universal Claim Form.



3. In the **Pharmacy (Dispenser) Information** section, enter the required information in the text fields (Required information is notated by red asterisks). For dispense of a controlled substance, DEA is required.



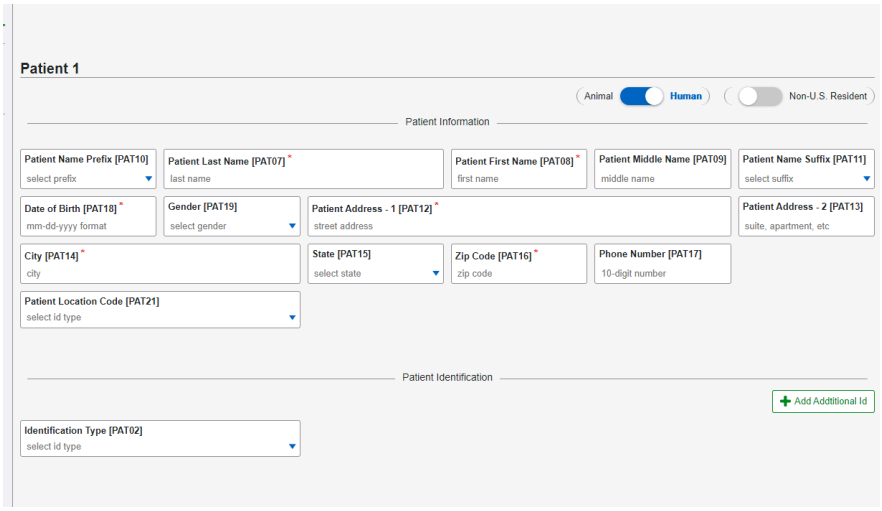
- Enter DEA Number

  Note: After entering a DEA or NPI, the available information from that data source will automatically populate. Please fill in any additional information.

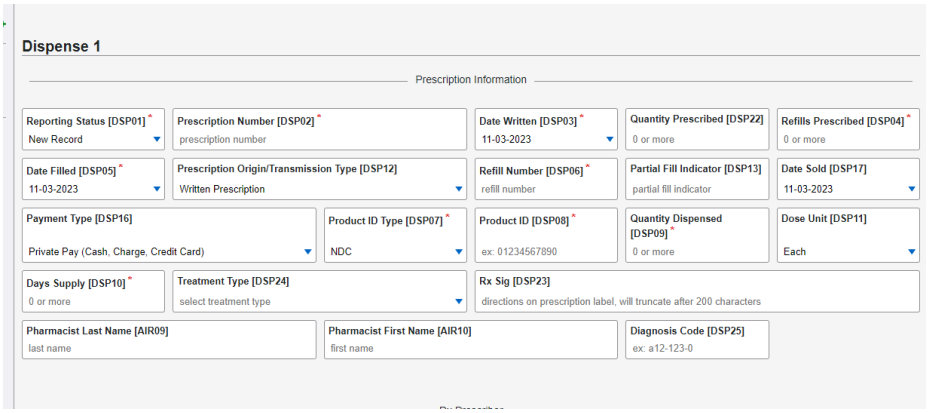
  - Pharmacy Name
  - Address Information - 1
  - Address Information - 2
  - City Address
  - State/Province
  - Zip/Postal Code
  - Phone Number
  - Contact Name - First name and last name
  - Pharmacy Name/Clinic Name
  - Pharmacy street address/Clinic street address
  - City
  - State
  - Zip code

- (Optional) Complete remaining blocks of information if desired.

4. In the **Patient Information** section, enter the required information in the text fields (required information is notated by red asterisks).



- **Patient last name**
- **Patient first name**
- **Patient address, city, state, and zip code**
- **Patient date of birth**
- **Species code (human or veterinary patients)**
- **Type of ID qualifier (i.e. driver's license number)**
- **Patient ID number**
- (Optional) Enter any additional information

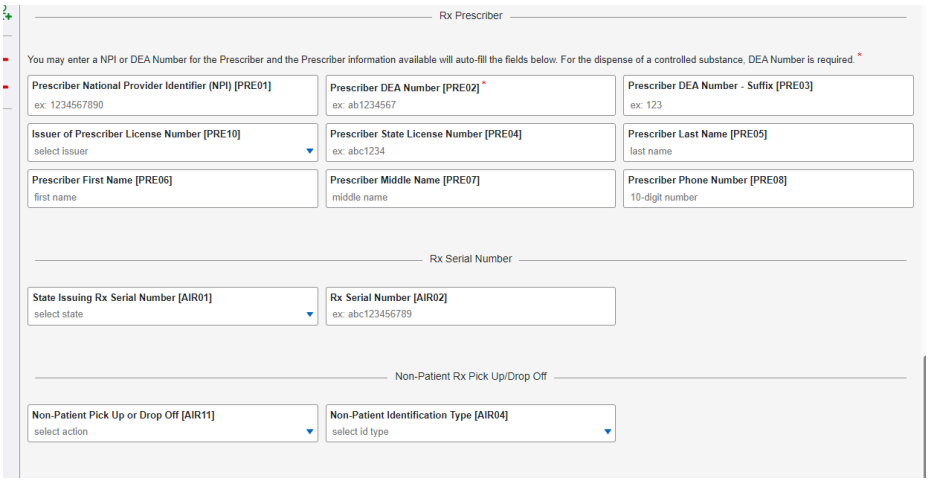


5. In the **Dispense Information** section, enter the required information in the text fields (required information is notated by red asterisks).
    - **Reporting Status**
        - **New Record** - Status for a new Rx.
        - **Revise** - Status of a record being edited.

- **Void** - Status for voided or canceled records.

- **Prescription Number**
- **Date Written**
- **Refills Authorized**
- **Date Filled**
- **Refill Number**
  - **00** for original dispensing.
  - **01** for first refill, **02** for second refill, etc. up to 99.
- **Product ID Qualifier** the drug National Drug Code (NDC)
- **Product ID**
- **Quantity Dispensed**
- **Days' Supply**
- **Drug Dosage Units Code** (liquid or non-liquid)
- **Partial Fill Indicator**
  - **00** for no partial fill
  - **01** for first partial fill, **02** for the second partial refill, etc. up to 99.
- Quantity Prescribed

Dispense Prescriber Information



6. In the **Dispense Prescriber Information** section, enter the required information in the text fields (required information is notated by red asterisks).

- **DEA or NPI Number**
  - (Prescriber) **Last Name**

- (Prescriber) **First Name**
- (Prescriber) **Phone Number**
- (Optional) Complete additional information as needed.

Note: After entering a DEA or NPI, the available information from that data source will automatically populate. Please fill in any additional information.

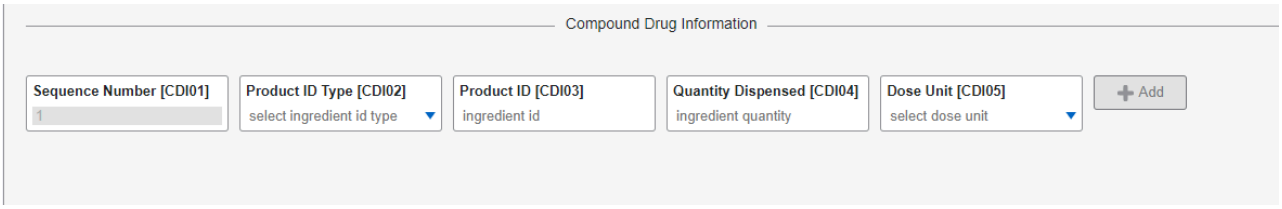
- DEA Number
- Pharmacy Name
- Address Information -1
- Address Information - 2
- City Address
- State/Province
- Zip/Postal Code
- Phone Number
- Contact Name - First name and last name

Dispense Additional Information

7. (Optional) Enter additional information as necessary.

8. Dispense Compound Medication

If Compound is chosen in the Product ID Type [DSP07] field, 99999 will automatically be filled in the Product ID field [DSP08]. When this occurs, an additional Compound Drug Information section will appear.



Enter the ingredients for compounded medications.

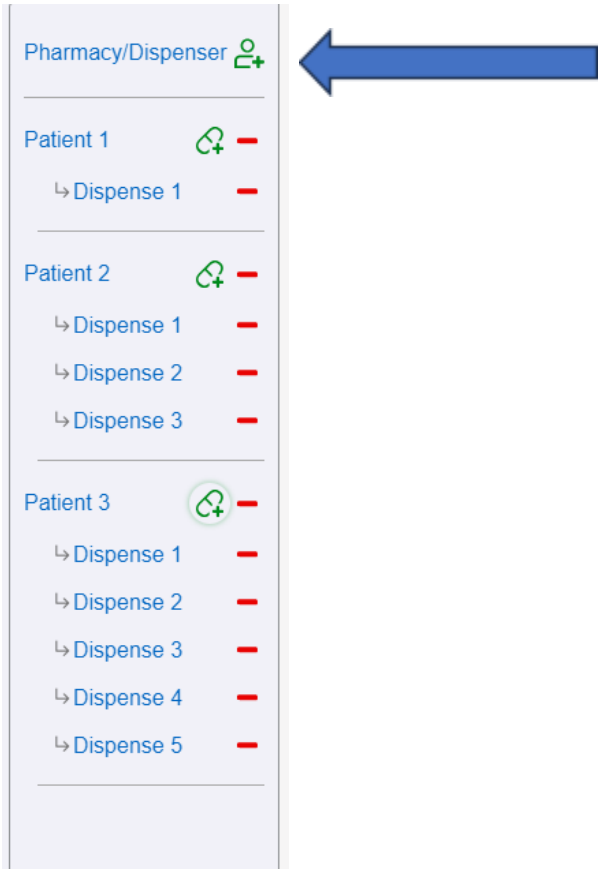
- **Sequence** - The order of ingredients in the compound. The number **1** is used for the first ingredient, **2** for the second, etc.
- **Product ID Type** (usually drug NDC) - Provide the number.
- **Quantity** - Enter the quantity of the ingredient.

- **Dosage Units Code** – select the appropriate code from the dropdown options.

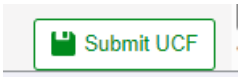
9. Click the Add button and more fields will appear for the next ingredient. Continue this process until all ingredients in the compound have been added.

10. To **Add a Dispense** for the same patient, click the green pill with the + and another dispense section will be added.

11. To Add a Patient, click the green person icon with the + on the menu on the left side. A Patient 2 section will appear.



12. Click the Submit UCF button when all data has been entered. If there are any errors on the screen, they will be indicated with a red box and information about the error. You will not be able to submit the dispense until all required information is present and indicated errors are corrected.



13. If a manually-submitted report contains an error or needs to be voided, on the **Submission History** screen, click **Manual Entry/Universal Claim Form** and repeat the entire process.

Submitted Reports and Edit Definitions

The following sections provide information regarding how a submitter may view reports, correct errors, and submit zero reports from the RxGov application.

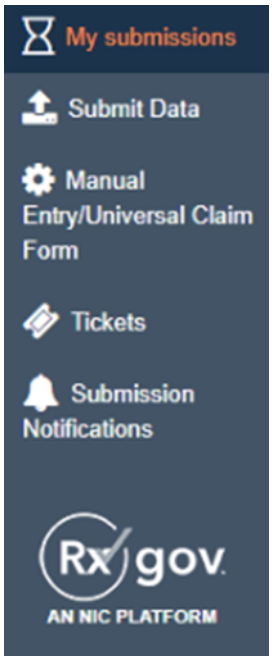
View Submitted Reports

Submitted data can be viewed in the RxGov platform.
***Note:** The submitter can only view records submitted via the account username/email.*

Complete the following steps to view submitted reports in RxGov:

1. Log on to RxGov.

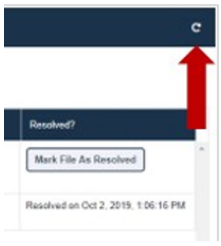
2. For CDS dispenses, click the CDS tile.
3. On the main dashboard, select **My Submissions** in the left menu.



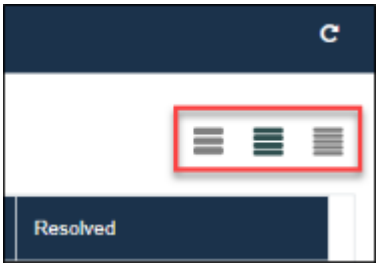
4. On the **Submission History** page, use the **Start Date** and **End Date** calendar menus to select the dates for viewing data. Refine the search by selecting one or more of the following checkboxes:
   ***Note:** After selections are made, the submission history search runs automatically.*
   - **Only Show Files w/ Errors**
   - **Hide Resolved Files**
   - **Hide Files w/ Fatal Errors**

***Note:** See [Appendix C: Submission History Errors and Messages] for a full list of possible Submission History error messages and descriptions.*

5. Click the **Refresh** icon to update the displayed data.

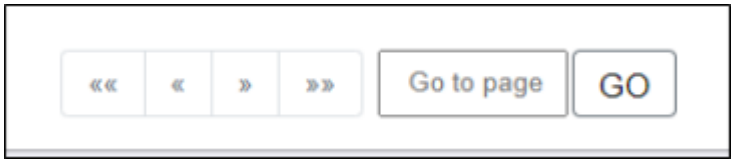


6. (Optional) Use the density controls to adjust displayed row formatting.

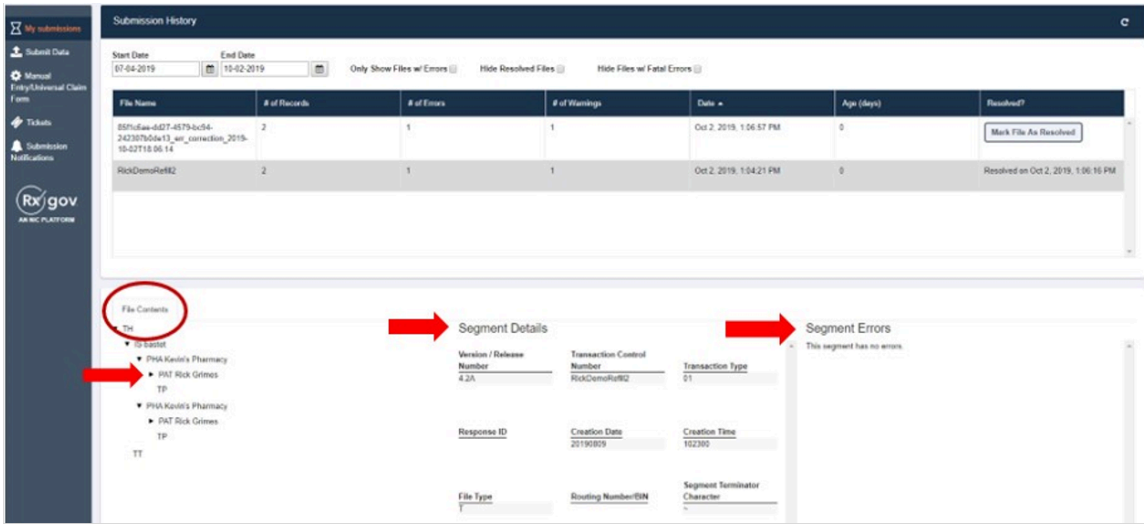


7. (Optional) Select the Rows per page drop-down menu to adjust the number of displayed rows.

8. (Optional) Use the pagination controls to jump to the next page, previous page, the first page, the last page, or enter a specific page number in the Go to page field and click GO to immediately open the page desired.

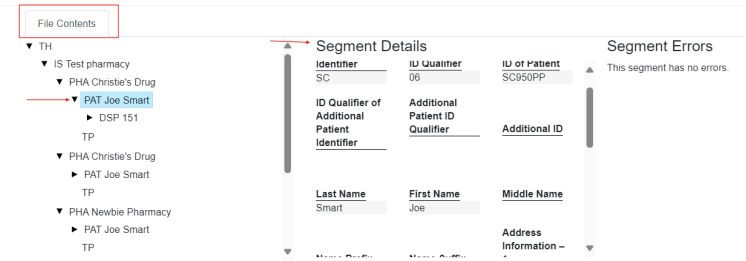


9. Click anywhere in the row containing the data to view the submitted data.
10. On the **Submission History** page, in the **File Contents** section, click the menu arrow next to a patient name to expand and view details about the patient.



11. View additional dispensing information in the **Segment Details** section and the **Segment Errors** section.

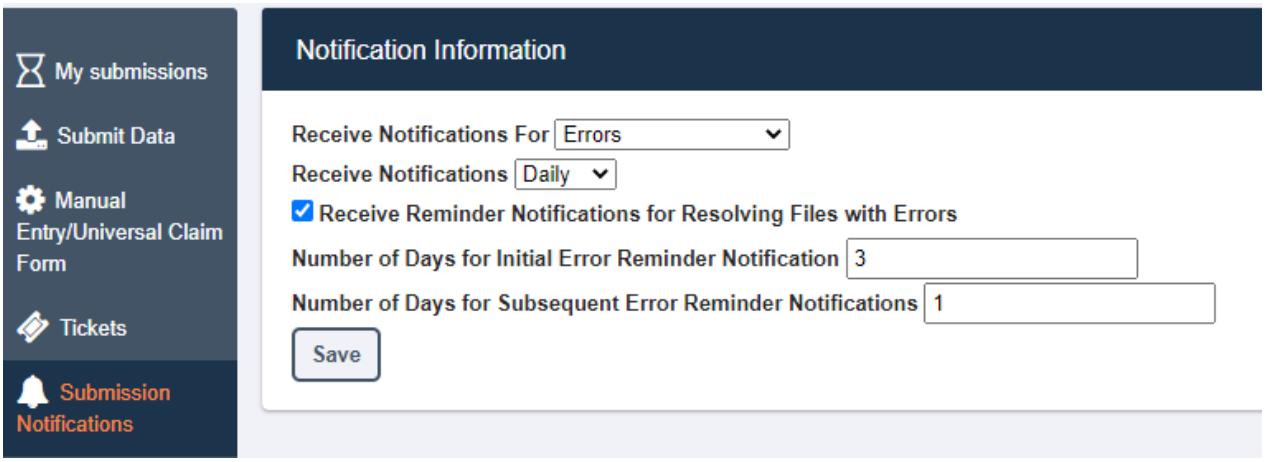
12. (Optional) Click the menu arrows in the **File Content** section to display further information.



- Patient information is displayed in the **Segment Details** section when the **PAT** line is highlighted.
- Prescription information is displayed in the **Segment Details** section when the **DSP** line is highlighted.
- Prescriber information is displayed in the **Segment Details** section when the **PRE** line is highlighted.

Submission Notifications

Notifications can be configured during setup by the Submitter to send an email alert for a variety of situations and frequencies. The schedule for sending the email alerts is determined by the Submitter. This schedule can be adjusted by the Submitter at any time to suit their needs; however, the email will continue to be sent or queued to be sent until the error is resolved and properly uploaded into the PDMP.



Complete the following steps to configure **Submission Notifications**.

1. On the **Submissions Notifications** menu, under the **Notification Information** section, select one of the following options from the **Receive Notifications For** drop-down menu:
   - **Nothing**
   - **Errors**
   - **Errors and Warnings**
   - **All Submissions**
2. Select one of the following frequency options from the **Receive Notifications** drop-down menu:

- **Hourly**
- **Daily**

3. (Optional) Select the **Receive Reminder Notifications for Resolving Files with Errors** checkbox.
4. Enter a number in the **Number of Days for Initial Error Reminder Notification** text field.
5. Enter a number in the **Number of Days for Subsequent Error Reminder Notifications** text field.
6. Click **Save**.

Manage Pharmacies and Dispense Correction

Error Correction

Data file error alerts are sent to the Submitter from RxGov when an error occurs. There are three error types: **Error**, **Warning**, and **Fatal Error**. Errors must be corrected in the correct environment (RxGov (PDMP) or RxGov (Non-CDS)).

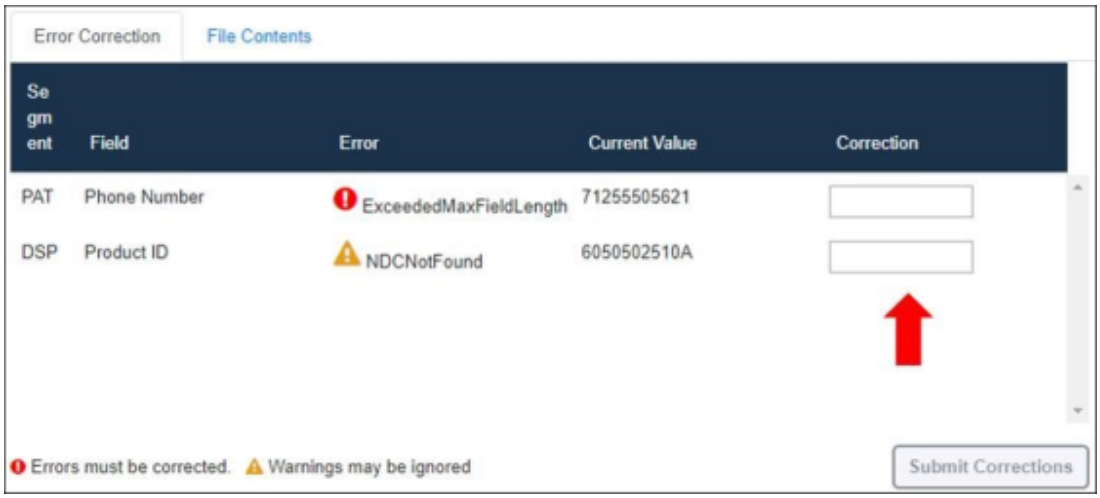
With the development of the non-controlled medication reporting requirements for the state of Maryland, submitters can now submit one file with **both** controlled and non-controlled information. The RxGov system will separate this data based on the schedule of the NDC provided. If the NDC is not identified in one of the above databases, it will be automatically routed to the controlled substance database. This may result in an error if a DEA is not provided as required. Data submitters may request to add medication information to the noncontrolled medication list by contacting rxgovsupport@leaporbit.com. Future dispenses of the provided NDC will then be sorted into controlled and noncontrolled databases per the provided information.

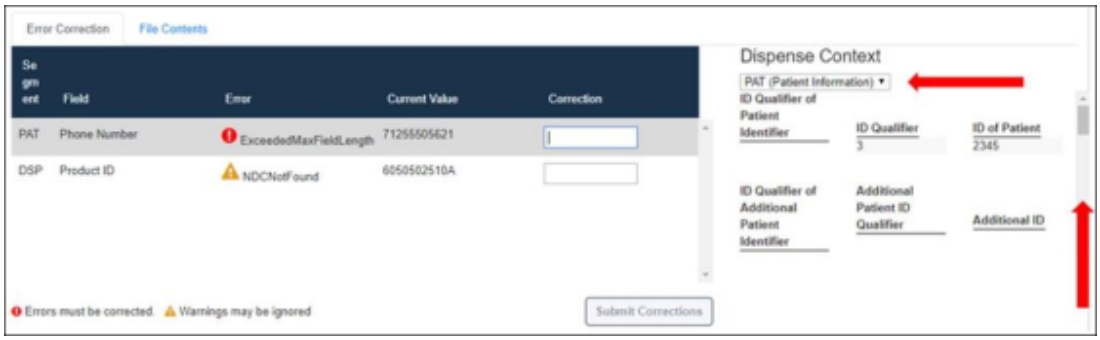
Errors and warnings are displayed in the **Submission History** page under the **My Submissions** menu in the bottom half of the screen. If allowed, corrections can be made within the RxGov **My Submissions** page or corrected within the file by the Submitter or by the Submitter's Uploader Vendor.

Complete the following steps in RxGov to correct errors in submitted reports:

1. On the **Submission History** page, in the **My Submissions** section, review the details of file errors, or click the email link provided in the RxGov email.
2. Determine which of the following three error types are associated with the file:
    - **Error** - Errors are defined as simple data errors that may be corrected inside the submission file through RxGov or corrected in the ASAP file and resent. **If the errors are not corrected, this dispense will not become part of the PDMP.**
    - **Warning** - Warnings are defined as simple data errors that can be corrected inside the submission file through RxGov but are not required to be corrected to proceed. **If the warnings are not corrected, this dispense will still become part of the PDMP.**
    - **Fatal Error** - Fatal Errors are defined as errors which cannot be corrected in the submission file through RxGov. **The file must be corrected by the Submitter or by the Submitter's Vendor and resubmitted to RxGov. No dispenses in this file will be uploaded to the PDMP.**
3. In the **My Submissions** section, under the **Error Correction** tab, select the file to display the details of the error on the bottom half of the screen.

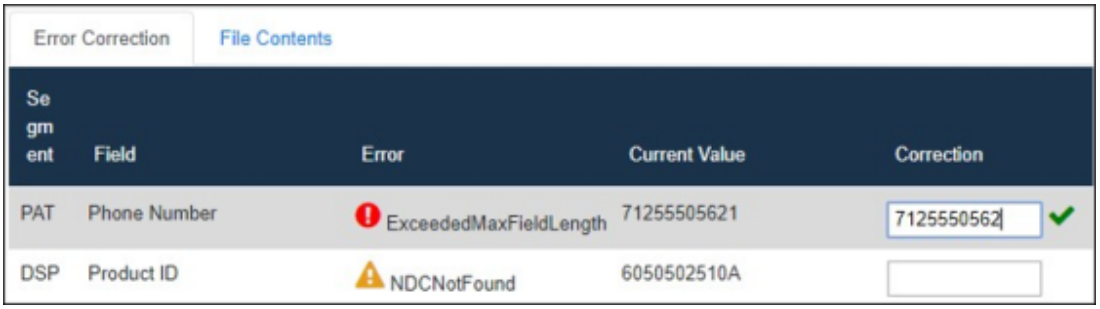
4. Click the **Correction** text box to display more information in the Dispense Context. The **Dispense Context** drop-down menu contains options for searching through the submitted prescription.





5. (Optional) Scroll down to view content in the **Dispense Context** screen.

***Note: Submit Corrections** is not an option until the error is addressed. A correct value must be entered. Once a corrected value is entered, a green check mark is displayed in the Correction column.*



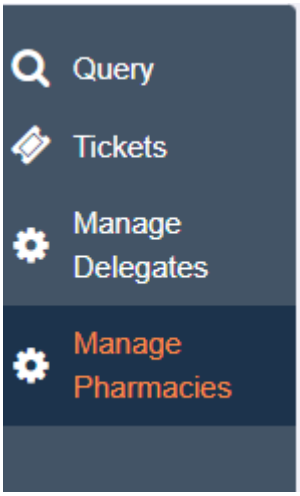
6. When the error has been corrected, click **Submit Corrections**. A Success box is displayed.

After the file has been corrected, the system creates a new file with the corrected information and resolves the file.

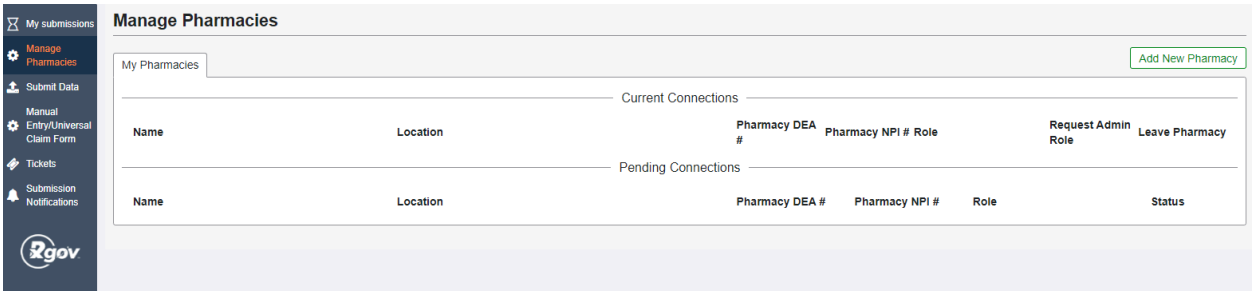
Submitter Delegate

Submitters may now grant access to other individuals to assist with error correction. As of 2024, an existing Submitter has automatically been given privileges as a Store Administrator. This designation allows for the approval or denial of requests by individuals to become a Submitter Delegate or a Store Administrator. Additionally, a Store Administrator can correct errors, but a Submitter Delegate can only assist in error Correction.

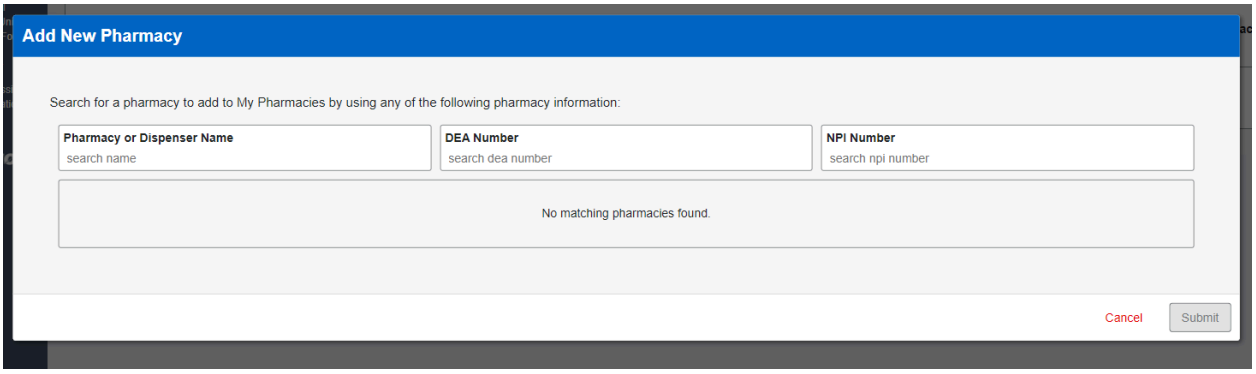
All users who have a role type of Submitter, Submitting Prescriber, Dispenser, Dispenser Delegate, Submitting Dispenser, and Store Administrator will have a “Manage Pharmacies” menu item on the main menu of RxGov.



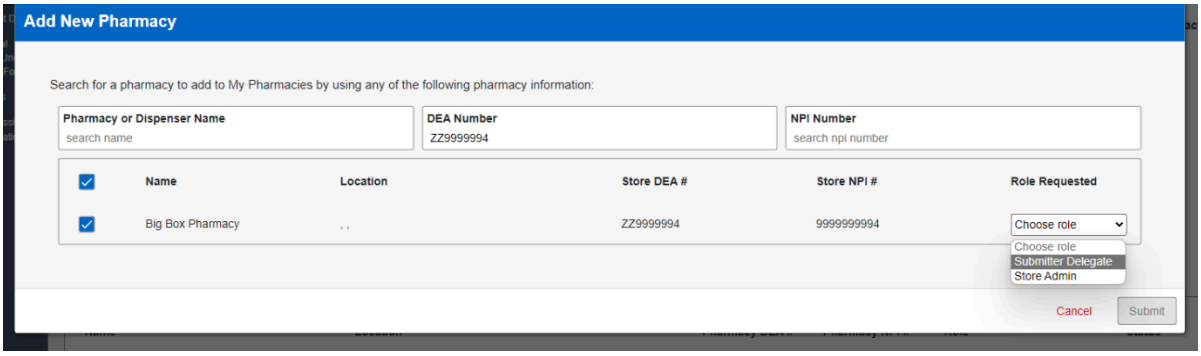
Click on “Manage Pharmacies” to view the :My Pharmacies” tab and the green “Add New Pharmacy” button.



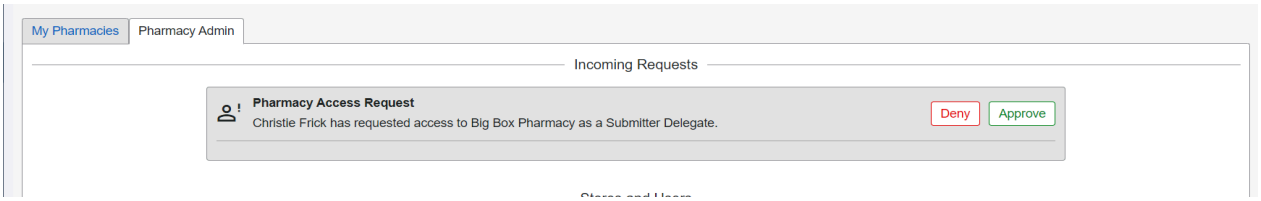
To request access to view errors from a pharmacy, click on the “Add New Pharmacy” button in the upper right corner.



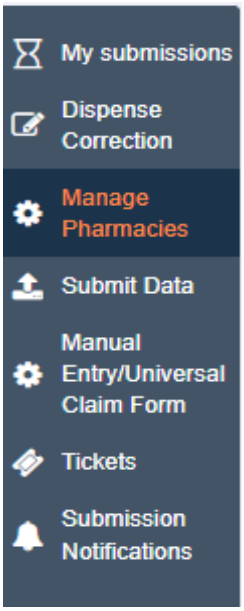
Pharmacies may be searched by name, DEA number, or NPI number. Only pharmacies provided by the state are available to search. Names are case sensitive so if you are unable to locate the pharmacy by name, please use the DEA number or NPI number. Once a valid entry is detected, the matching pharmacy will be displayed. Choose a pharmacy by checking the open box to the left. In the “Role Requested’ dropdown, choose the desired role. Click the “Submit” button when it appears.



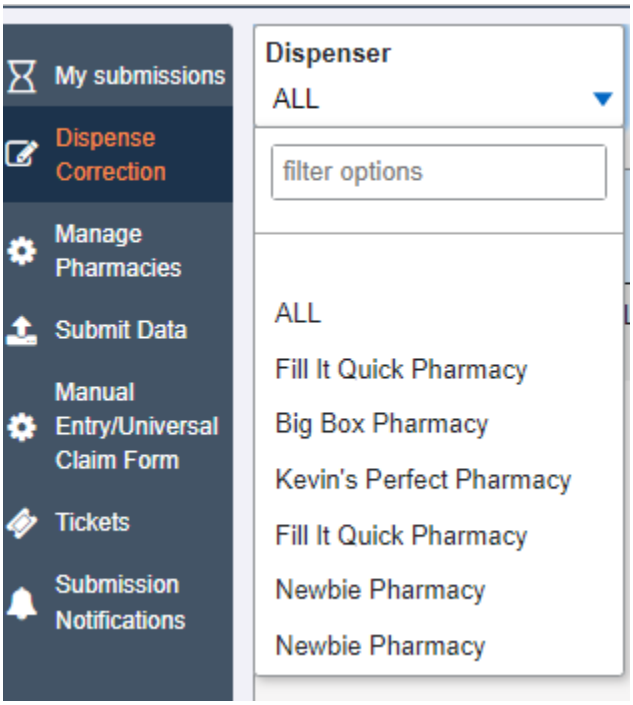
Pending requests will appear on the Pharmacy Admin page.



Once approved by the Store Administrator, the “Dispense Correction” menu item will appear on the main menu to the left of the screen. The Store Administrator will now be able to view errors and warnings for that pharmacy by selecting that menu item.

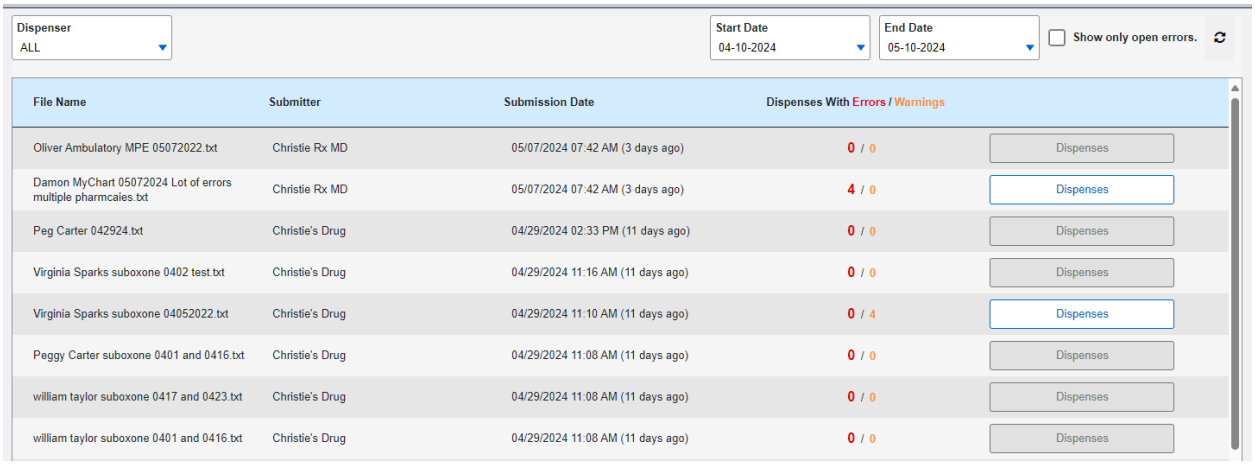


If a Store Administrator has access to more than one pharmacy, select the appropriate pharmacy/pharmacies from the drop-down menu at the top of the “Dispense Correction” page. Leaving it on ALL will show all dispenses with Errors and /Warnings.

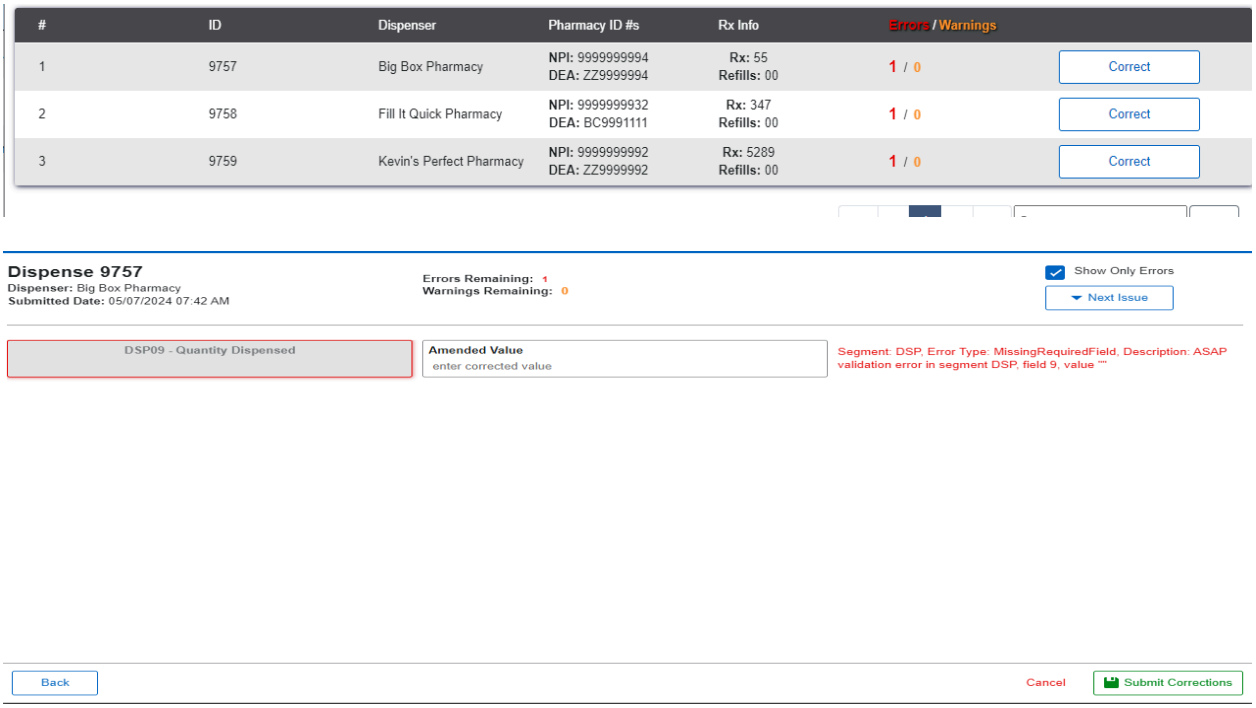


Once you the Store Administrator selects the pharmacy/pharmacies of interest, all dispenses will be displayed. There are also filters at the top of the screen to adjust the Start and End Dates, as well as an option to have only dispenses with open (uncorrected) errors displayed.

If a dispense has no Errors or Warnings, the “Dispenses” button will be grayed out. Only dispenses with Errors or Warnings can be opened and displayed.



Clicking on the “Dispenses” button will display each individual dispense with an Error or Warning allowing the Store Administrator to correct them one at a time and submit them individually if time does not permit for the bulk submission of all corrections at the same time.



Revise a Record

Complete the following steps 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 on the erroneous record: ***Note:** If any of the fields referenced in step 2 are part of the correction, the record must first be voided using the steps provided in the **Void a Record** section, then the record must be resubmitted using the value **00** in the **DSP01** field.*
    - **PHA03** (DEA Provider ID)
    - **DSP02** (Prescription Number)
    - **DSP05** (Date Filled)
3. Fill in all other data fields with the correct information. This information overrides the original data linked to the fields referenced in step 2.
4. Submit the record.

Void a Record

1. Create a record with the value **02** in the **DSP01** field.
2. Fill in all other data identical to the original record. This voids the original record submission.
3. Submit the record.

Zero Reports

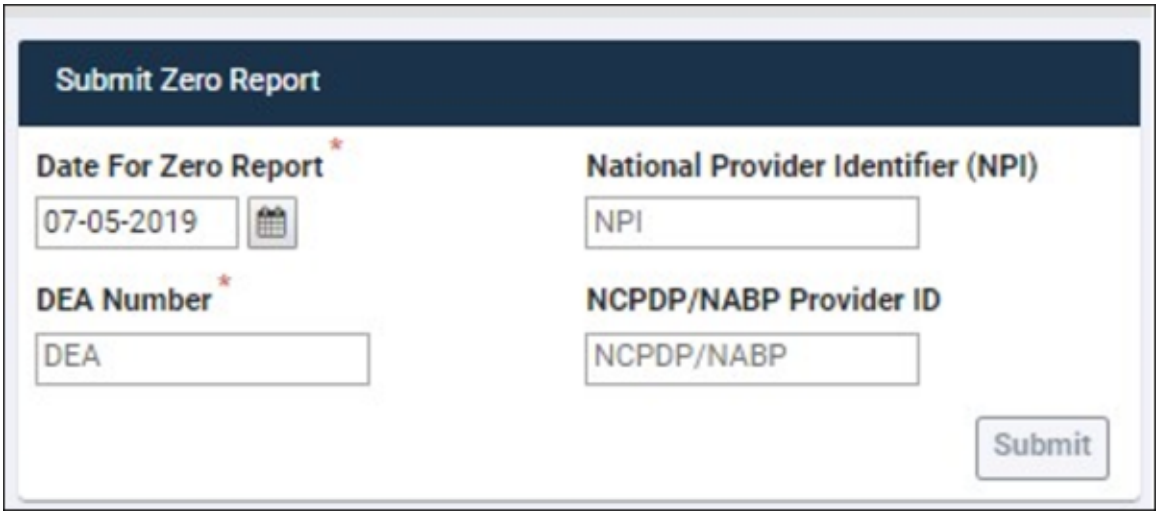
The **Zero Reports** function in RxGov allows data submitters to submit zero reports and to view previously-submitted zero reports. Zero report information is displayed on the **Submission History** page with other submitted data for a selected time.

Submission of Zero Report

Complete the following steps in RxGov to submit a zero report:

1. Log on to RxGov.
2. Select **Submit Data** from the left menu.

3. In the **Submit Zero Report** section, enter the **Date for Zero Report** of the report to be viewed.



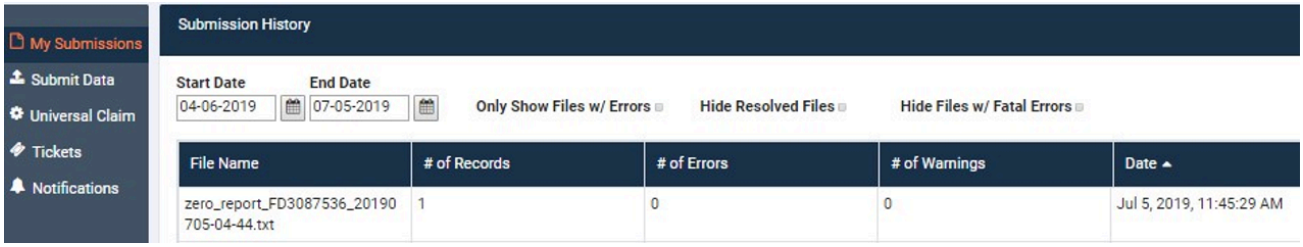
   - Enter the **DEA** information.
     ***Note:** DEA Validation occurs upon number entry. If an invalid DEA number is entered, a warning or error message is displayed indicating the DEA number is invalid or not found.*

4. Click **Submit**.

View Previously-Entered Zero Reports

Complete the following steps in RxGov to view previously-entered zero reports:

1. Log on to RxGov.
2. Select **My Submissions** in the left menu.
3. On the **Submission History** page, use the **Start Date** and **End Date** calendar menus to select the date range of the report to be viewed.
   ***Note:** Zero reports and full data upload files are displayed in the same list within the **My Submissions** section.*



4. (Optional) Enter optional search parameters or select checkboxes to refine the search as necessary.
5. Sort by file name and scroll through the alphabetical list until reaching the report in the **Zero Report** section.
6. Click the report name to open the report and view details.

Assistance and Support

If you have questions regarding data submission, please contact the Maryland RxGov Help Desk at rxgovsupport@leaporbit.com or call 1-888-514-6865 (24/7/365).

Glossary

ASAP - American Society for Automation in Pharmacy.

Batch - Group of files (report or query requests) that are processed in the background while other work is continued.

Data Submitter - A user who submits a data file containing controlled substance dispensing information.

Dispense - The procedure that results in the receipt of a prescription drug by a patient or the patient's agent, and which entails the

- Interpretation of an authorized prescriber's prescription for a drug or device.
- Selection and labeling of the drug or device prescribed pursuant to that prescription.
- Measuring and packaging of the prescribed drug or device in accordance with state and federal laws.

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Dispenser - A pharmacy or prescriber authorized by law to dispense a monitored prescription drug to a patient or a patient's agent in the State, including a nonresident pharmacy.

FTP - File Transfer Protocol; commonly used protocol for exchanging files over any network.

NDC - National Drug Code; describes specific drugs by drug manufacturer and package size.

PDMP - Prescription Drug Monitoring Program.

Prescriber - A practitioner who is lawfully authorized to prescribe a monitored prescription drug; and registered with the federal Drug Enforcement Administration in accordance with 21 USC 822 Part C and 21 CFR Part 1301.

RxGov - Prescription drug monitoring system owned by Tyler Technologies.

SFTP - Secure File Transfer Protocol (also referred to as "SSH File Transfer Protocol"); provides file transfer and manipulation functionality over any reliable data stream.

SSL - Secure Sockets Layer; cryptographic protocol that provides secure communications for data transfers.

UCF - Universal Claim Form; electronic form used by a dispenser that has internet access but is unable to submit its data in a batch submission.

Appendix A: ASAP Specifications

The following information contains the definitions for the specific contents required for uploading records (reporting) in the American Society for Automation in Pharmacy (ASAP) format to comply with the Prescription Drug Monitoring Program (PDMP) requirements.

Data Type Notation Matrix

Data Type Notation	Data Type	Character Set / Format
AN	Alphanumeric	Upper-case and lower-case alphabets: A to Z, a to z Numbers: 0 to 9 Printable characters: ~`!@#$%^&*()-_=+{}[]|';:"<>,.?/
DT	Date	Format: CCYYMMDD • CC represents century • YY represents year • MM represents month • DD represents Day
TM	Time	Format: HHMMSS or HHMM in 24 hours clock system (military format) • HH represents hour • MM represents minutes • SS represents seconds
N	Numeric	Used for a whole number, decimal not allowed
D	Decimal	Used for metric decimal. If whole number used, decimal not allowed.

File Naming Convention

- The uploaded files must be unique; no spaces allowed.
- **File ID** is assigned by the submitter or dispenser system to uniquely identify the uploaded file.
- **DateTimestamp** is the date and time of the file submission represented in the following format: CCYYMMDDHHMMS (example: 20170102160000).

Data Elements Within File

- **Segment Identifier** - Indicates the beginning of a new segment (i.e. PHA).
- **Field Delimiter** - Character used to separate fields or data elements within a segment (i.e. an asterisk*).
    - Each blank field should contain a single field delimiter.
    - If the last field in the segment is blank, it should be followed by the Segment Terminator.
- **Segment Terminator** - Character used to mark the end of a segment (i.e. the tilde ~).
- **Field TH09** in the Transaction Header segment contains a built-in segment terminator. Since TH09 also signifies the end of the segment, it should contain two tildes (~~).

Field Usage

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- **R** - Required by American Society for Automation in Pharmacy (ASAP)
- **RR** - Required by the Maryland PDMP
- **S** - Situational (not required; however, supply if available)
- Maryland is moving from ASAP v4.2 to ASAP v4.2B, with ASAP v4.2A changes included. These changes are indicated by fields highlighted in blue: the changes may be additional fields, choices for the fields, length of fields, or clarifying directions.
- Both **R** and **RR** fields must be reported. If the field is now required and was not required in the past, it is **bolded** with an asterisk*****.

Note: *For more information regarding ASAP specifications, please reference the ASAP website at https://asapnet.org/ for the full Implementation Guide for the ASAP Standard for Prescription-Monitoring Programs.*

Field	Field Name	Size	Description	Field Usage
TH: Transaction Header: Required segment; used to indicate the start of a transaction. It also assigns the data element separator, segment terminator, and control number.				
TH01	Version/Release Number	AN4	Code uniquely identifying the transaction. Value = 4.2, 4.2A, or 4.2B	R
TH02	Transaction Control Number	AN40	Sender assigned code uniquely identifying a transaction. This number must be used in TT01. Recommendation: Use a Globally Unique Identifier (GUID) or other non repeating alphanumeric combination to populate this field.	R
TH03	Transaction Type	N2	Identifies the purpose of initiating the transaction. 01 = Send/Request Transaction. 02 = Acknowledgement (in Response only). 03 = Error Receiving (in Response only). 04 = Void (Used to void a specific Rx in a real-time transmission or an entire batch that has been transmitted. When 04 is used, the appropriate control number in TH02 for the specific transaction or batch file must be included. When 04 is used only, the TH Header Segment and the Transaction Trailer Segment are used).	S
TH04	Response ID	AN40	Contains the Transaction Control Number of a transaction that initiated the transaction. Required in response transaction only.	S

TH05	Creation Date	DT8	Date the transaction was created: CCYYMMDD	R
TH06	Creation Time	TM6	Time the transaction was created: HHMMSS or HHMM	R
TH07	File Type	AN1	Code specifying the type of transaction. P = Production; T = Test	R
TH08	CDS or NonCDS Zero Report Indicator	N6	Used for indicating type of zero report submission. 01-CDS 02-Non-CDS Blank-Both zero reports will go to both the CDS and non-CDS data systems	S
TH09	Segment Terminator Character	AN1	This terminates the TH segment and sets the actual value of the data segment terminator for the entire transaction.	R

IS: Information Source: Required segment; used to convey the name and identification numbers of the entity supplying the information.				
IS01	Unique Information Source ID	AN10	Reference number or identification number as defined by the business partners.	R
IS02	Information Source Entity Name	AN60	Entity name of the Information Source.	R
IS03	Message	AN60	Freeform text message.	S
PHA: Pharmacy Header: Required segment; used to identify the pharmacy.				
PHA01	National Provider Identifier (NPI)	AN10	Identifier assigned to the pharmacy by CMS.	S
PHA02	NCPDP/NABP Provider ID	AN7	Identifier assigned to the pharmacy by the National Council for Prescription Drug Programs (NCPDP).	S
PHA03	DEA Number	AN9	Identifier assigned to the pharmacy by the Drug Enforcement Administration (DEA). Must be reported if any prescriptions are controlled substances.	RR
PHA04	Pharmacy or Dispensing Prescriber Name	AN60	Name of the Pharmacy or Dispensing Prescriber. Note: If a dispensing prescriber, the prescriber's name and professional degree should be entered, such as John Doe MD.	S
PHA05	Address Information – 1	AN55 4.2B	Free-Form Address information.	S
PHA06	Address Information - 2	AN55 4.2B	Free-Form Address information.	S
PHA07	City Address	AN35	City name.	S
PHA08	State Address	AN2	US postal service state code.	S
PHA09	Zip Code	AN9	US postal zip code. Exclude hyphen. 4.2B	S
PHA10	Phone Number	AN10	Complete phone number including area code. Exclude hyphens or other punctuation. 4.2B	S
PHA11	Contact name	AN30	Contact person name.	S

PHA12	Chain Site ID	AN10	Store number assigned by the chain to the pharmacy location.	S
PHA13 4.2A	Pharmacy Permit/License #	AN20	Use to help identify sending pharmacy	S

PAT: Patient Information: Required segment; used to report the patient's name and basic information as contained in the pharmacy record.				
PAT01	ID Qualifier of Patient Identifier	AN2	Code identifying the jurisdiction that issues the ID in PAT03.	S
PAT02	ID Qualifier	N2	Code to identify the type of ID in PAT03. OR OWNER or Handler	**RR***
			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	
			09 = Vendor Specific (such as Appriss Health, Experian, LexisNexis) 4.2B	
			10 = Veterinary Patient Microchip Number 4.2B	
			99 = Other (agreed upon ID)	
PAT03	ID of Patient	AN20	Identification number for the patient as indicated in PAT02. For PAT02 Codes 09 & 10, this field can only be populated when this identifier is provided on the prescription. 4.2B	RR
PAT04	ID Qualifier of Additional Patient Identifier	AN2	Code identifying the jurisdiction that issues the ID in PAT06. See Appendix A for list for jurisdictions.	S
PAT05	Additional Patient ID Qualifier	N2	Code to identify the type of ID in PAT06. If PAT05 is used, PAT06 is required.	S
			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	
			09 = Vendor Specific (such as Appriss Health, Experian, LexisNexis) 4.2B	
			10 = Veterinary Patient Microchip Number 4.2B	

			99 = Other (agreed upon ID)	
PAT06	Additional ID	AN20	Identification number for the patient as indicated in PAT05. For PAT05 Codes 09 & 10, this field can only be populated when this identifier is provided on the prescription. 4.2B	S
PAT07	Last Name	AN50	Patient's last name. If a patient has one name, list it as both the first and last name. If the prescription is written by a veterinarian, enter owner's or handler's last name.	RR
PAT08	First Name	AN50	Patient's first name. If a patient has one name, list it as both the first and last name. If the prescription is written by a veterinarian, enter owner's or handler's first name.	RR
PAT09	Middle Name	AN30	Patient's middle name.	S
PAT10	Name Prefix	AN10	Patient's name prefix such as Mr or Dr	S
PAT11	Name Suffix	AN10	Patient's name suffix such as Jr or the III	S
PAT12	Address Information – 1	AN55 4.2B	Address Line 1 of the patient.	RR
PAT13	Address Information - 2	AN55 4.2B	Address Line 2 of the patient.	S
PAT14	City Address	AN35 4.2B	City of residence of the patient.	RR
PAT15	State/Jurisdiction Code	AN10	Valid state/jurisdiction code.	RR
PAT16	Zip Code	AN9	US postal zip code of the patient. Populate with zeros ('00000') if patient address is outside the U.S. Exclude hyphen. 4.2B	RR
PAT17	Phone Number	AN10	Complete phone number including area code. ***Note:** Phone number is required, if available.* Exclude hyphens or other punctuation.	RR
PAT18	Date of Birth	DT8	Date of birth of the patient: CCYYMMDD; If the prescription is written by a veterinarian, enter owner or handler's DOB.	RR
PAT19	Gender Code	AN1	Value: F = Female; M = Male; U = Unknown/Undisclosed	RR
PAT20	Species Code	N2	Value: 01 = Human; 02 = Veterinary Patient	**RR***
PAT21	Patient Location Code	N2	Code indicating where the patient is located when receiving pharmacy services. 01 = Home 02 = Intermediary Care 03 = Nursing Home 04 = Long-Term/Extended Care 05 = Rest Home 06 = Boarding Home	S

			07 = Skilled-Care Facility	
			08 = Sub-Acute Care Facility	
			09 = Acute-Care Facility	
			10 = Outpatient	
			11 = Hospice	
			98 = Unknown	
			99 = Other	
PAT22	Country of Non-U.S. Resident	AN20	Used when the patient's address is in a foreign country, and PAT12 through PAT16 are left blank. This is a freeform text field.	S
PAT23	Name of Animal	AN30	Required if PAT20 = 02 Veterinary Patient.	S

DSP: Dispensing Record: Required segment; used to identify the basic components of a dispensing of a given prescription order including the date and quantity.				
DSP01	Reporting Status	N2	DSP01 requires one of the following codes. An empty or blank field no longer indicates a new prescription transaction. 00 = New Record (indicates a new prescription dispensing transaction) 01 = Revise (indicates that one or more data element values in a previously submitted transaction are being revised) 02 = Void (message to the PDMP to remove the original prescription transaction from its data, or to mark the record as invalid or to be ignored).	R
DSP02	Prescription Number	AN25	Serial number assigned to the prescription by the pharmacy.	R
DSP03	Date Written	DT8	Date the prescription written (authorized): CCYYMMDD	R
DSP04	Refills Authorized	N2	Number of prescriber authorized refills.	R
DSP05	Date Filled	DT8	Date prescription was prepared: CCYYMMDD	R
DSP06	Fill Number (Relabeled from “Refill Number” 4.2B)	N2	Number of the fill of the prescription. 0 = original dispensing; refills = 01-99	R
DSP07	Product ID Qualifier	N2	Type of product ID contained in DSP08.	R
			01 = NDC	
			06 = Compound (See DSP08) (CDI segment required if used)	

DSP08	Product ID	AN15 4.2A	Full product identification as indicated in DSP07, including leading zeros without punctuation. NDC must be 11-digits. If the product is a compound, populate with 99999 as the first five characters of the product code. The remaining six digits are assigned by the pharmacy. The CDI then becomes a required segment. Note: If a controlled substance is part of a kit, the NDC of the kit should be reported as long as it is a legitimate manufacturer's NDC. If not, the NDC of the controlled substance within the kit should be reported. Also, if the multiple controlled substances are in the kit, use the CDI segment to report it as a compound.	R
DSP09	Quantity Dispensed	D11	Number of metric units dispensed in metric decimal format. Example: 2.5. Note: For compounds, show the first quantity in CDI04. The format allows for 5 digits to the left and right of the decimal (i.e., 99999.99999).	R
DSP10	Days Supply	N3	The calculated or estimated number of days the medication will cover.	R
DSP11	Drug Dosage Units Code	N2	Identifies the unit of measure for the quantity dispensed in DSP09. 01 = Each (used to report solid dosage units or indivisible package). 02 = Milliliters (ml) (adjust liters to the decimal milliliter equivalent). 03 = Grams (gm) (adjust milligrams to the decimal gram equivalent).	**RR***
DSP12	Transmission Form of Rx Origin Code	N2	Code indicating how the pharmacy received the prescription. 01 = Written Prescription. 02 = Telephone Prescription. 03 = Telephone Emergency Prescription. 04 = Fax Prescription. 05 = Electronic Prescription. 06 = Transferred/Forwarded. 4.2A 99 = Other.	S
DSP13	Partial Fill Indicator	N2	Used when the quantity in DSP09 is less than the metric quantity per dispensing authorized by the prescriber. 00 = Not a partial fill 01 = First partial fill	S

			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.	
DSP14	Pharmacist National Provider Identifier (NPI)	AN10	Identifier assigned to the pharmacist/dispenser by CMS. This number can be used to identify the pharmacist dispensing the medication.	S
DSP15	Pharmacist State License Number	AN10	Assigned to the pharmacist/dispenser by the State Licensing Board. This data element can be used to identify the pharmacist dispensing the medication.	S
DSP16	Classification Code for Payment Type	N2	Code identifying the type of payment.	RR
			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.	
DSP17	Date Sold	DT8	Date prescription was dispensed (left the pharmacy).	**RR***
DSP18	RxNorm Product Qualifier	N2	RxNorm code that is populated in the DRU-010-09 field in the SCRIPT transaction (electronic prescription transmitted to the pharmacy). DSP18 and DSP19 are placeholder fields pending RxNorm becoming an industry standard.	S
			01 = Semantic Clinical Drug (SCD).	
			02 = Semantic Branded Drug (SBD).	
			03 = Generic Package (GPK).	
			04 = Branded Package (BPK).	
DSP19	RxNorm Code	AN15	Used for electronic prescriptions to capture the prescribed drug product identification.	S
DSP20	Electronic Prescription Reference Number	AN35	Transaction Message ID value sent from field UIH-030-01 in the SCRIPT standard in the electronic prescription transmitted to the pharmacy.	S

DSP21	Electronic Prescription Order Number	AN35	Prescriber Order Number value sent in the electronic prescription transmitted to the pharmacy.	S
DSP22 4.2A	Quantity Prescribed	N15 4.2B	Used to add clarity to the value reported in DSP13 Partial Fill Indicator.	S
DSP23 4.2A	Rx SIG	AN200	The actual directions printed on the prescription label. If greater than 200 characters, truncation would be allowed.	S
DSP24 4.2A	Treatment Type	N2	This field is used to explain the reason for an opioid prescription. If the prescription is not an opioid, then this field would not be used. 01 = Not used for opioid dependency treatment. 02 = Used for opioid dependency treatment. 03 = Pain associated with active/aftercare cancer treatment. 04 = Palliative Care in conjunction with a serious illness. 05 = End-of-Life and Hospice Care. 06 = Pregnant individual with preexisting Rx for opioids. 07 = Acute pain with existing opioid for Chronic pain. 08 = Active taper of opioid. 09 = Patient under Pain Management Contract. 10 = Acute Opioid Therapy 4.2B 11 = Chronic Opioid Therapy 4.2B 99 = Other.	S
DSP25 4.2A	Diagnosis Code	AN7	ICD-10 Code. Exclude decimal point. 4.2B	S
PRE: Prescriber Information: Required segment; used to identify the prescriber of the prescription.				
PRE01	National Provider Identifier (NPI)	AN10	Must be populated with the NPI for a non controlled drug prescriber if a DEA # is not provided in PRE02. If the prescriber's DEA is provided in PRE02, this field can be left blank. Note: This field is required if the prescriber prescribed a noncontrolled substance that is a reportable drug to the PDMP and does not have a DEA #.	**RR***
PRE02	DEA Number	AN9	Must be populated with the DEA number if the reported medication is a controlled substance.	R
PRE03	DEA Number Suffix	AN7	Identifying number assigned to a prescriber by an institution when the Institution's DEA number is used.	S

			Note: This field is required only when institutional DEA # is used to identify the prescribing practitioner.	
PRE04	Prescriber Jurisdiction or State License Number	AN20	Identification assigned to the Prescriber by the State Licensing Board.	S
PRE05	Last Name	AN50	Prescriber's last name.	RR
PRE06	First Name	AN50	Prescriber's first name.	**RR***
PRE07	Middle Name	AN30	Prescriber's middle name or initial.	S
PRE08	Phone Number	N10	Prescriber's primary phone number; include area code; do not use hyphens.	S
PRE09 4.2A	XDEA Number	AN9	XDEA# (NADEAN) in the PRE Segment when prescription is for opioid dependency. **Note:** Since the issuance of the X-waiver has ended, this field will be sunsetted.	S
PRE10 4.2A	Jurisdiction or State Issuing the Prescriber Number in PRE04	AN2	Jurisdiction or State issuing license in PRE04.	S
CDI: Compound Drug Ingredient Detail: Use of this segment is situational; however, it is **required when medication dispensed is a compound.				
CDI01	Compound Drug Ingredient Sequence Number	N2	The first reportable ingredient is 1. Each additional reportable ingredient is incremented by 1.	R**
CDI02	Product ID Qualifier	N2	Code to identify the type of product ID contained in CDI03. 01 = NDC	R**
CDI03	Product ID	AN15	Product identifier. If the ingredient does not have an NDC, the recommended entry is 88888888888.	R**
CDI04	Component Ingredient Quantity	D11	Metric decimal quantity of the ingredient identified in CDI03. The format allows for 5 digits to the left and right of the decimal (i.e., 99999.99999).	R**
CDI05	Compound Drug Dosage Units Code	N2	Identifies the unit of measure for the quantity dispensed in CDI04. 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).	R**

AIR: Additional Information Reporting Use of this segment is situational. However, if this segment is used, at least one of the data elements (fields) are required.				
AIR01	State Issuing Rx Serial Number	AN2	State issuing serialized prescription blank.	S
AIR02	State Issued Rx Serial Number	AN20	Number assigned to state issued serialized prescription blank.	S
AIR03	ID Issuing Jurisdiction	AN2	Code identifying the jurisdiction that issues the ID contained in AIR05.	S
AIR04	ID Qualifier of Person Dropping Off or Picking Up Rx	N2	Code indicating the type of ID in AIR05 if required by the PMP.	S
			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.	
			09 = Vendor Specific (such as Appriss Health, Experian, LexisNexis) 4.2B	
			10 = Veterinary Patient Microchip Number 4.2B	
			99 = Other (agreed upon ID).	
AIR05	ID of Person Dropping Off or Picking Up Rx	AN20	ID number of the person dropping off or picking up the prescription.	S
AIR06	Relationship of Person Dropping Off or Picking Up Rx	N2	Code indicating the relationship to the person dropping off or picking up Rx.	S
			01 = Patient.	
			02 = Parent/Legal Guardian.	
			03 = Spouse.	
			04 = Caregiver.	
			99 = Other.	
AIR07	Last Name of Person Dropping Off or Picking Up Rx	AN50	Last name of the person dropping off or picking up Rx.	S
AIR08	First Name of Person Dropping Off or Picking Up Rx	AN50	First name of the person dropping off or picking up Rx.	S
AIR09	Last Name or Initials of Pharmacist	AN50	Last name or initials of the pharmacist dispensing the medication.	S
AIR10	First Name of Pharmacist	AN50	First name of the pharmacist dispensing the medication.	S
AIR11	Dropping Off/Picking Up Identifier Qualifier	N2	Additional qualifier for the ID contained in AIR05.	S

			01 = Person Dropping Off. 02 = Person Picking Up. 98 = Unknown/Not Applicable.	

TP: Pharmacy Trailer: Required segment; 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	N10	Number of detail segments included for the pharmacy including the pharmacy header (PHA) including the pharmacy trailer (TP) segments.	R
TT: Transaction Trailer: Required segment; 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	AN40	Unique identifying control number assigned by the originator of the transaction. Must match the number in TH02.	R
TT02	Segment Count	N10	Total number of segments included in the transaction including the header and trailer segments.	R

Sample of dispense reporting – *parsed to be legible*:

***Note:** The following examples use sample data for presentation only. For actual use, valid data must be used.*

TH*4.2*3c72d952-9f89-4f42-a059-3e5d5e73476c*01**20161001*031535*T**~~

IS*DF001*NIC Test*~

PHA*9876543210*9876543*FA9999999*NIC Test Pharmacy*987654321 Any Street**Any

City*{your state}*98765*9999876543*9876543~

PAT**06*N9999999*{your state}***Patient*Test****987654 N Test Avenue**Test

City*{your state}*98765*1111111111*19850315*M*01***~

DSP*01*98765432100100001*20161001*12*20161001*0*01*12345678901*30*30*01*05****01*********~

PRE*1234567890*AS1234567***Prescriber*Test**8001234567*~

TP*5~

TT*3c72d952-9f89-4f42-a059-3e5d5e73476c*8~

Appendix B: Zero Report Specifications (U.S. Only)

The following information contains the definitions for the specific contents required of uploading zero reports in the American Society for Automation in Pharmacy (ASAP) format to comply with state Prescription Drug Monitoring Program (PDMP) requirements.

The zero report specification is a complete transaction that includes the information that would normally be sent with a batch, but of the required detail segments, only the patient first name, last name, and date filled fields are populated. The following values are used to populate these fields:

- First name = Zero
- Last name = Report
- Date filled = Date report sent

All other fields in the detail segments should be left blank.

Sample of zero reporting – *parsed to be legible*:

***Note:** The following examples use sample data for presentation only. For actual use, valid data must be used.*

Single pharmacy in transaction.

TH*4.2*2b72d952-9f89-4f42-a059-3e5d5e73476c*01**20161001*031535*T**~~
IS*DF001*NIC Test*#20161001#-#20161001#~
PHA*9876543210*9876543*FA9999999*NIC Test Pharmacy *987654321 Any Street**Any City*{your state}*98765*9999876543*9876543~
PAT*******Report*Zero***************~
DSP*****20190601****************~
PRE**~
TP*5~
TT*2b72d952-9f89-4f42-a059-3e5d5e73476c*8~

Multiple pharmacies in one transaction.

TH*4.2*2b72d952-9f89-4f42-a059-3e5d5e73476c*01**20161001*031535*T**~~
IS*DF001*NIC Test*#20161001#-#20161001#~
PHA*9876543210*9876543*FA9999999*NIC Test Pharmacy 1*987654321 A Street**Any City*{your state}*98765*5559876543*9876543~
PAT*******Report*Zero***************~
DSP*****20190602****************~
PRE**~
TP*5~
PHA*0123456789*3456789FA9999998*NIC Test Pharmacy 2*987654321 B Street**Any City*{your state}*98765*5553456789*9876544~

PAT*******Report*Zero***************~
DSP*****20190602***************~
PRE**~
TP*5~
TT*2b72d952-9f89-4f42-a059-3e5d5e73476c*13~

For more information, contact your administrator or NIC RxGov representative.

Appendix C: Submission History Error Messages

MissingFieldDelimiter

MissingSegmentDelimiter

MissingRequiredField

ExceededMaxFieldLength

DoesNotMeetMinFieldLength

DoesNotMeetMinNumericFieldValue

ExceededMaxNumericFieldValue

DoesNotMeetMinDecimalFieldValue

ExceededMaxDecimalFieldValue

DoesNotMeetMinDateFieldValue

ExceededMaxDateFieldValue

FailedFieldComparison

FailedRegexComparison

InvalidNumericFieldValue

InvalidDecimalFieldValue

InvalidDateFieldValue

InvalidProductIdentifier

InvalidTimeFieldValue

InvalidComparisonTargetType

FieldContainsForbiddenCharacter

FieldValueNotInAllowedList

InvalidSegmentIdentifier

InvalidSegmentSequence

InvalidFinalSegment

ExtraFieldsInSegment

MissingFinalSegmentDelimiter

MismatchedTransactionControlNumber

MismatchedTransactionSegmentCount

MismatchedPharmacySegmentCount

DuplicateDispense

MissingRequiredSegment

InvalidSegmentDelimiterUsage

CouldNotValidate

InvalidCDIProductId

InvalidCDIProductIdType

SegmentLoopingIncomplete

PRE01MissingIdValue

PRE02MissingIdValue

PHA01MissingIdValue

PHA02MissingIdValue

PHA03MissingIdValue

InvalidDeaNumberFormat

DeaNumberDoesNotExist

InvalidXDeaNumberFormat

PRE04MissingIdValue

PRE09MissingIdValue

PHA01InvalidLocValue

PHA13InvalidLocValue

PHA02MissingPharmLicenseValue

NpiNotFoundInRegistry

InvalidNpiFormat