

# Appendix A: Data File Specifications

## Effective October 1, 2014

### Background

The information presented on the following pages of *Appendix A: Data File Specifications* represents the field definitions required for file uploads to the NYSDOH for acceptance into the New York State Prescription Monitoring Program (PMP) Registry.

Electronic file submissions must adhere to the *American Society for Automation in Pharmacy (ASAP) Version 4.2*, character-delimited data formatting standards as described within this *Guide*. All information presented within this Appendix applies to the version 4.2 release of the ASAP specification.

Electronic prescribing, which is supported in ASAP Version 4.2, will become mandatory in New York State effective March 27, 2015. In order to support an orderly transition to electronic prescribing, NYSDOH will be requiring all data submissions to be in ASAP version 4.2 format as of October 1, 2014.

### General Composition

Every upload file utilizes the following core components to electronically communicate data into the PMP Registry:

- *Segment* – The ASAP standard uses a segment to convey information.
- *Segment Identifier* – A segment identifier indicates the beginning of a new segment.
- *Data Element* – Each segment is comprised of various data elements comprised of a reference (field name) and data element name (description). Usage for reporting purposes is identified within this Appendix as follows:
  - **R** = Required by ASAP
  - **S** = Situational by ASAP
  - **RR** = Required by the NYSPMP

**IMPORTANT: Data elements identified as either “R” or “RR” must be reported to the NYS PMP Registry. Data elements identified with a “!” following their usage type are additionally required to pass minimum system parsing; data files missing any such elements will be rejected during the file upload process.**

- *Data Delimiter* – A character, typically an asterisk (\*), used to separate segments and data elements within a segment. Each completed data element should be followed by an asterisk, and each blank data element should contain a single asterisk.
- *Segment Terminator* – A character, typically a tilde (~), used to indicate the end of a segment.

## Core Reporting Segments

- **Header**
  - ✓ TH – Transaction Header
  - ✓ IS – Information Source
  - ✓ PHA – Pharmacy Header
- **Detail**
  - ✓ PAT – Patient Information
  - ✓ DSP – Dispensing Record
  - ✓ PRE – Prescriber Information
  - ✓ CDI – Compound Drug Ingredient Detail
  - ✓ AIR – Additional Information Reporting
- **Summary**
  - ✓ TP – Pharmacy Trailer
  - ✓ TT – Transaction Trailer

## Error Classification Types

- *Error* – Data submission for a required element has been rejected due to a serious error. **Correction and resubmission is required.**
- *Warning* – Data submission for a situational element has been accepted, but the submitter should review their data for overall quality control purposes.

ASAP Reference Information			NYSPMP Field Requirements		
Reference	Data Element Name	Usage	Edit Validations	Error Message	Type
<b>&lt;&lt; HEADER &gt;&gt;</b>					
<b>Segment: TH – Transaction Header</b>					
This is a required header segment which indicates the beginning of a transaction. It also assigns the segment terminator, data element separator and control number.					
TH01	Version/Release Number	R (!)	Error if empty or null	Field value is missing	Error
			Value must be "4.2"	Field value is invalid	Error
TH02	Transaction Control Number *	R (!)			
TH03	Transaction Type	S			
TH04	Response ID	S			
TH05	Creation Date	R (!)			
TH06	Creation Time	R (!)			
TH07	File Type	R (!)	Error if empty or null	Field value is missing	Error
			Value must be "P" or "T"	Field value is invalid	Error
TH08	Routing Number	S			
TH09	Segment Terminator Character	R (!)			
<b>Segment: IS – Information Source</b>					
This is a required header segment which is used to report the name and identification numbers of the entity supplying the information.					
IS01	Unique Information Source ID	R			
IS02	Information Source Entity Name	R (!)			
IS03	Message	S			

\* Each occurrence of TH02 must represent a unique transaction control number. Duplicate transaction control numbers will result in the data submission being rejected.

<b>Segment: PHA – Pharmacy Header</b>					
This is a required header segment which is used to report pharmacy information.					
Reference	Data Element Name	Usage	Edit Validations	Error Message	Type
PHA01	National Provider Identifier	S	Every digit must be a number	Field value is not a valid number	Warning
			Value must begin with a "1"	Field value is not correct format	Warning
PHA02	NCPDP/ NABP Provider ID	RR (!)	Error if empty or null	Field value is missing	Error
			Error if more than 7 characters	Field value is invalid length	Error
			Error if not a valid NCPDP/NABP value	Field value is not on file	Error
PHA03	DEA Number	RR (!)	Error if empty or null	Field value is missing	Error
			Error if not a valid DEA value	Field value is not on file	Error
PHA04	Pharmacy/ Dispenser Name	S			
PHA05	Address Information – 1	S			
PHA06	Address Information – 2	S			
PHA07	City Address	S			
PHA08	State Address	S			
PHA09	ZIP Code Address	S			
PHA10	Phone Number	S			
PHA11	Contact Name	S			
PHA12	Chain Site ID	S			
<b>&lt;&lt; DETAIL &gt;&gt;</b>					
<b>Segment: PAT – Patient Information</b>					
This is a required detail segment which is used to report the patient's name and basic information as contained in the pharmacy record.					
PAT01	ID Qualifier of Patient Identifier	S			
PAT02	ID Qualifier	S			
PAT03	ID of Patient	S			
PAT04	ID Qualifier of Additional Patient Identifier	S			
PAT05	Additional Patient ID Qualifier	S			
PAT06	Additional ID	S			
PAT07	Last Name	R	Error if empty or null	Field value is missing	Error
			Alphanumeric characters and may contain "-", ",", and "."	Field value is invalid	Error

Reference	Data Element Name	Usage	Edit Validations	Error Message	Type
PAT08	First Name	R	Error if empty or null	Field value is missing	Error
			Alphanumeric characters and may contain “-“, “’” and “.”	Field value is invalid	Error
PAT09	Middle Name	S			
PAT10	Name Prefix	S			
PAT11	Name Suffix	S			
PAT12	Address Information – 1	R	Error if empty or null	Field value is missing	Error
PAT13	Address Information – 2	S			
PAT14	City Address	R	Error if empty or null	Field value is missing	Error
PAT15	State Address	S	Error if empty or null	Field value is missing	Warning
			Value must be from ASAP listing of jurisdictions	Field value is not on file	Warning
PAT16	ZIP Code Address *	R	Error if empty or null	Field value is missing	Error
			Error if all zeros	Field value is zeros	Error
			Value must be 5-digit or 9-digit number for US states	Field value is invalid	Error
PAT17	Phone Number	S			
PAT18	Date of Birth	R	Error if empty or null	Field value is missing	Error
			Value must be numeric	Field value is not a valid number	Error
			Error if all zeros	Field value is zeros	Error
			Format must be “CCYYMMDD”	Field value is not correct format	Error
			Value must be a date prior to today	Date value after today	Error
			Patient age must be less than 115	Age much be < 115	Error
PAT19	Gender Code	RR	Error if empty or null	Field value is missing	Error
			Value must be “M”, “F” or “U”	Field value is invalid	Error
PAT20	Species Code	RR	Error if empty or null	Field value is missing	Error
			Value must be “01” (Human) or “02” (Veterinary Patient)	Field value is invalid	Error

\*For PAT16, value may be up to a 9-character alphanumeric for non-US zip codes.

Reference	Data Element Name	Usage	Edit Validations	Error Message	Type
PAT21	Patient Location Code	S			
PAT22	Country of Non-U.S. Resident	S			
PAT23	Name of Animal	RR	Species code submitted = "02" (Veterinary Patient) and value is empty or null	Field value is blank or null for Veterinary Patient	Error
			Species code submitted = "01" (Human) and value is not blank or null	Field value is populated for Non-Veterinary Patient	Warning
			Alphanumeric characters and may contain "-", "'", and "."	Field value is invalid	Error
<b>Segment: DSP – Dispensing Record</b> This is a required detail segment which is used to report basic components of a dispensing of a given prescription order including the date and quantity.					
DSP01	Reporting Status	R	Error if empty or null	Field value is missing	Error
			Value must be "00", "01" or "02"	Field value is invalid	Error
DSP02	Prescription Number	R	Error if empty or null	Field value is missing	Error
			Every digit must be a number	Field value is not a valid number	Error
			Error if all zeros	Field value is zeros	Error
DSP03	Date Written	R	Error if empty or null	Field value is missing	Error
			Value must be numeric	Field value is not a valid number	Error
			Error if all zeros	Field value is zeros	Error
			Format must be "CCYYMMDD"	Field value is not correct format	Error
			Value must be > than patient's date of birth	Date of birth cannot be after date written	Error
			Value must be less than or equal to 5 years from today's date	Date value must be within last five years	Error
			If a new prescription (DSP06 ="00"), then value should be <= 30 days from date filled	Date written <= 30 days from date filled	Warning

Reference	Data Element Name	Usage	Edit Validations	Error Message	Type
DSP04	Refills Authorized	R	Error if empty or null	Field value is missing	Error
			Value must be numeric	Field value is not a valid number	Error
			Value must be between "00" and "05"	Field value is invalid	Error
DSP05	Date Filled	R	Error if empty or null	Field value is missing	Error
			Value must be numeric	Field value is not a valid number	Error
			Error if all zeros	Field value is zeros	Error
			Value must be less than or equal to 5 years from today's date	Date value must be within last five years	Error
			Value must be between today and date written	Date value after today	Error
				Date written cannot be after date filled	Error
Format must be "CCYYMMDD"	Field value is not correct format	Error			
DSP06	Refill Number	R	Error if empty or null	Field value is missing	Error
			Value must be numeric	Field value is not a valid number	Error
			Value must be between "00" and "99"	Field value is invalid	Error
DSP07	Product ID Qualifier	R (!)	Error if empty or null	Field value is missing	Error
			Value must be numeric	Field value is not a valid number	Error
			Value must be either a "01" (NDC) or a "06" (Compound)	Field value is invalid	Error
			If value = "06" (Compound), CDI Segment is required	Compound Drug Information missing	Error

Reference	Data Element Name	Usage	Edit Validations	Error Message	Type
DSP08	Product ID	R	Error if empty or null	Field value is missing	Error
			Value must be numeric	Field value is not a valid number	Error
			Error if all zeros	Field value is zeros	Error
			Value length must be 11 characters (NDC)	Field value is invalid length	Error
			Check if the substance is non-reportable in NY	This is not a NY reportable controlled substance	Warning
DSP09	Quantity Dispensed	R	Error if empty or null	Field value is missing	Error
			Value must be numeric	Field value is not a valid number	Error
			Error if all zeros	Field value is zeros	Error
			Alert if value is > 10,000	Value is > 10,000	Warning
DSP10	Days Supply	R	Error if empty or null	Field value is missing	Error
			Value must be numeric	Field value is not a valid number	Error
			Error if all zeros	Field value is zeros	Error
			Value must be between "1" and "186"	Field value is > 186	Warning
DSP11	Drug Dosage Units Code	RR	Error if empty or null	Field value is missing	Error
			Value must be numeric	Field value is not a valid number	Error
			Value must be "01", "02" or "03"	Field value is invalid	Error
DSP12	Transmission Form of Rx Origin Code	RR	Error if empty or null	Field value is missing	Error
			Value must be numeric	Field value is not a valid number	Error
			Value must be between "01" and "05" or be "99"	Field value is invalid	Error
			Alert if e-prescription (AIRO2 = 'eeeeeeee') and value not equal '05'	ElecSub - field value is invalid	Warning

Reference	Data Element Name	Usage	Edit Validations	Error Message	Type
DSP13	Partial Fill Indicator	RR	Error if empty or null	Field value is missing	Error
			Value must be between "00" and "99"	Field value is invalid	Error
DSP14	Pharmacist National Provider Identifier (NPI)	S	Error if empty or null	Field value is missing	Warning
			Value must be numeric	Field value is not a valid number	Warning
			Value length must be 10 characters	Field value is invalid length	Warning
			Value must begin with a "1" or "2"	Field value is not correct format	Warning
DSP15	Pharmacist State License Number	S			
DSP16	Classification Code for Payment Type	RR	Error if empty or null	Field value is missing	Error
			Value must be numeric	Field value is not a valid number	Error
			Value must be between "01" and "07" or be "99"	Field value is invalid	Error
DSP17	Date Sold	RR	Error if empty or null	Field value is missing	Error
			Value must be numeric	Field value is not a valid number	Error
			Error if all zeros	Field value is zeros	Error
			Value must be less than or equal to 5 years from today's date	Date value must be within last five years	Error
			Value must be between today and date written	Date written cannot be after date sold	Error
			Format must be "CCYYMMDD"	Field value is not correct format	Error
DSP18	RxNorm Product Qualifier	S			
DSP19	RxNorm Code	S			

Reference	Data Element Name	Usage	Edit Validations	Error Message	Type
<b>DSP20</b>	Electronic Prescription Reference Number	RR*	Value must be alpha-numeric when populated	Field value is not alpha-numeric	Error
			Value cannot be zero, blank or null if DSP21 is populated	Field must be populated if DSP21 is populated	Error
			Value must be populated if AIR01 = 'NY' and AIR02 = 'eeeeeeee'	Elec Script - required field value is missing	Error
<b>DSP21</b>	Electronic Prescription Order Number	RR*	Value must be alpha-numeric when populated	Field value is not alpha-numeric	Error
			Value cannot be zero, blank or null if DSP20 is populated	Field must be populated if DSP20 is populated	Error
			Value must be populated if AIR01 = 'NY' and AIR02 = 'eeeeeeee'	Elec Script - required field value is missing	Error
<b>Segment: PRE – Prescriber Information</b>					
This is a required detail segment which is used to identify the prescriber of the prescription.					
<b>PRE01</b>	National Provider Identifier (NPI)	S	Value must be numeric	Field value is not a valid number	Warning
			Value must begin with a "1"	Field value is invalid	Warning
<b>PRE02</b>	DEA Number	R	Error if empty or null	Field value is missing	Error
			Error if not a valid DEA number	Field value is not on file	Error
<b>PRE03</b>	DEA Number Suffix	S	If PRE02 (DEA Number) is an institutional DEA.	Field value is institutional DEA	Warning
<b>PRE04</b>	Prescriber State License Number	S			
<b>PRE05</b>	Last Name	S			
<b>PRE06</b>	First Name	S			
<b>PRE07</b>	Middle Name	S			
<b>PRE08</b>	Phone Number	S			

\* This field is required for an electronic prescription only.

**Segment: CDI – Compound Drug Ingredient Detail**

This is a situational detail segment which is used to identify medication dispensed as a compound and one of the ingredients is a reportable drug. If more than one ingredient is a reportable drug, then the CDI is incremented by one for each reportable ingredient. [Assumes DSP07 = "06"]

Reference	Data Element Name	Usage	Edit Validations	Error Message	Type
CDI01	Compound Drug Ingredient Sequence Number	R			
CDI02	Product ID Qualifier	R	Error if empty or null	Field value is missing	Error
			Value must be numeric	Field value is not a valid number	Error
			Value must be "01" (NDC)	Field value is invalid	Error
CDI03	Product ID	R	Error if empty or null	Field value is missing	Error
			Value must be numeric	Field value is not a valid number	Error
			Error if all zeros	Field value is zeros	Error
			Value length must be 11 characters (NDC)	Field value is invalid length	Error
CDI04	Component Ingredient Quantity	R	Error if empty or null	Field value is missing	Error
			Value must be numeric	Field value is not a valid number	Error
			Error if all zeros	Field value is zeros	Error
			Alert if value is > 10000	Value is > 10000	Warning
CDI05	Compound Drug Dosage Units Code	RR	Error if empty or null	Field value is missing	Error
			Value must be numeric	Field value is not a valid number	Error
			Value must be "01", "02" or "03"	Field value is invalid	Error

<b>Segment: AIR – Additional Information Reporting</b>					
This is a <u>required segment</u> for data submissions into the PMP Registry and is used to capture state-issued serialized Rx pad information.					
Reference	Data Element Name	Usage	Edit Validations	Error Message	Type
AIR01	State Issuing Rx Serial Number (for e-prescriptions, this is the State of prescriber who generated the prescription)	RR	Error if empty or null	Field value is missing	Error
			Must be a valid U.S.P.S. state code	Field value is not on file	Error
AIR02	State Issued Rx Serial Number	RR	Error if empty or null	Field value is missing	Error
			Error if all zeros	Field value is zeros	Error
			Value length must be 8 characters	Value is invalid number of characters	Error
			The following are additional requirements when AIR01 = "NY" and not an e-prescription*		
AIR02*	State Issued Rx Serial Number	RR	Value = "zzzzzzzz"	Out of State serial number	Warning
			Value must be < maximum serialized script number	Field value is > Max-Script	Error
			Value must begin with same character as in maximum serialized script number	Invalid format for Script Prefix	Error
			Value must not contain a vowel	No vowels allowed	Error
			Last two digits must be numeric	Last two digits must be 00-99	Error
			If old script number, then characters 2-7 must be numeric	Field value is invalid	Error
			Only 5-day supply for oral scripts ("99999999")	Oral Script(9s) > 5 days supply	Warning

\*For e-prescriptions, AIR02 must = 'eeeeeee'; see edits for DSP20 and DSP21.

Reference	Data Element Name	Usage	Edit Validations	Error Message	Type
AIR03	ID Issuing Jurisdiction	S			
AIR04	ID Qualifier of Person Dropping Off or Picking Up Rx	S			
AIR05	ID of Person Dropping Off or Picking Up Rx	S			
AIR06	Relationship of Person Dropping Off or Picking Up Rx	S			
AIR07	Last Name of Person Dropping Off or Picking Up Rx	S			
AIR08	First Name of Person Dropping Off or Picking Up Rx	S			
AIR09	Last Name or Initials of Pharmacist	S			
AIR10	First Name of Pharmacist	S			
AIR11	Dropping Off/Picking Up Identifier Qualifier	S			
<b>&lt;&lt; SUMMARY &gt;&gt;</b>					
<b>Segment: TP – Pharmacy Trailer</b>					
This is a required summary 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 segments).					
TP01	Detail Segment Count	R (!)			
<b>Segment: TT – Transaction Trailer</b>					
This is a required summary segment used to identify the end of the transaction and provide the count of the total number of segments included in the transaction.					
TT01	Transaction Control Number	R (!)			
TT02	Segment Count	R (!)			