



# Nebraska Prescription Drug Monitoring Program (PDMP)

## Data Submitter Registration and Implementation Guide

Nebraska Department of Health and Human Services (DHHS) &  
Nebraska Health Information Initiative (NEHII)



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## 1. PURPOSE AND CONTENT

The *Nebraska PDMP Data Submitter Registration and Implementation Guide* serves as a step-by-step implementation and training resource for data submitters providing detailed information which a dispenser needs to comply with the reporting requirements for the Nebraska Prescription Drug Monitoring Program.

The intended audience for this document is any licensed pharmacy, dispenser or dispensing software vendor who dispenses a prescription drug in the state of Nebraska or to an address in the state of Nebraska.

### COPYRIGHT NOTICE

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## 2. PROGRAM OVERVIEW

The Nebraska Prescription Drug Monitoring Program (PDMP) is authorized by Nebraska Rev. Statutes §§ 71-2454 through 71-2455 to monitor the care and treatment of patient medications, provide information to improve the health and safety of our patients, and help prevent the misuse of prescribed controlled substances.

The Nebraska PDMP is administered in collaboration between the Nebraska Department of Health and Human Services (DHHS) and the Nebraska Health Information Initiative (NEHII) to provide a medication query functionality available to all prescribers and dispensers in Nebraska at no cost to providers.

Patients cannot opt out of the Nebraska PDMP functionality, maintaining the most comprehensive medication data set possible. The data is available through a separate application tile on the NEHII HIE 2.0 dashboard.

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



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Exchange  
HIE 2.0



Nebraska PDMP



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## 3. DATA COLLECTION AND REPORTING REQUIREMENTS

### DATA REPORTING REQUIREMENTS

#### REPORTING EXPECTATIONS

- Submission of ALL prescription drugs dispensed (both controlled and non-controlled substances), except for prescription drugs dispensed for non-human patients in which the veterinarian or other dispenser must submit Controlled Substances CII-CV only.
- To fulfill the PDMP data collection requirement, dispensers are required to electronically report data on prescription drugs dispensed to a patient (human or non-human) in the State or to an address in the State.
  - “Dispenser” includes the following license types:
    - Nebraska Community Pharmacy License
    - Nebraska Mail Order Pharmacy Permit
    - Dispensing Practitioner Pharmacy License
    - Delegated Dispensing Permit
    - Remote Dispensing Pharmacy
    - Veterinarians (report Schedule CII to CV)
  - Certain specified entities and types of drug delivery/dispensing are exempt from reporting. For more information see [Reporting Exemptions](#), below.
- Dispensers are required to provide data daily in a standardized format or 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 shall report the error to the applicable dispenser for remedy.
- As part of the medication history hosting service, RxGov provides appropriate infrastructure to accept data supplied by dispensers as required by Nebraska Rev. Statutes §§ 71-2454 through 71-2455.

#### **\*Note:**

- **If you are a chain pharmacy**, your 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**, please forward the reporting requirements to your software vendor.
- System changes may be necessary to create the data file in the correct format, and they may be able to submit the data on your behalf. If not, follow the instructions provided in the Data Submission chapter to submit the data.
- **If you are a dispenser that submits its own data**, follow the instructions provided in the Data Submission chapter to submit the data.

## Reporting Exemptions

The following events are exempt from being reported to the Nebraska PDMP:

- The delivery of a prescription drug for immediate use for purposes of inpatient hospital care or emergency department care
- The administration of a prescription drug by an authorized person upon the lawful order of a prescriber
- A wholesale distributor of a prescription drug monitored by the prescription drug monitoring system
- The dispensing to a nonhuman patient of a prescription drug which is not a controlled substance listed in Schedule II, Schedule III, Schedule IV, or Schedule V of section 28-405.
- Licensed dispensers that do not dispense any prescription drugs.

If a pharmacy or other dispenser meets one of the exemptions as identified according to Neb. Rev. Stat. § 71-2454 (13)(d) above, you may complete the Exemption Information Form located at <http://dhhs.ne.gov/Pages/Drug-Overdose-Prevention-PDMP-Reporting.aspx> or <https://nehii.org/nebraska-prescription-drug-monitoring-program/>.

## REGISTRATION REQUIREMENT

All persons or entities that are not exempt from the PDMP reporting requirement are required to submit data to the Nebraska PDMP.

- The individual or entity submitting data must complete registration with RxGov. For more information see [CREATING YOUR ACCOUNT](#), below
  - This requirement is separate from any duty for a pharmacist or prescriber to register for clinical user access to PDMP data.

In general, the registration requirement applies to holders of:

- Nebraska Community Pharmacy License
- Nebraska Mail Order Pharmacy Permit
- Dispensing Practitioner Pharmacy License
- Delegated Dispensing Pharmacy Permit
- Remote Dispensing Pharmacy
- Veterinarian License (report Schedule CII to CV)

## REPORTING METHODS AND DATA STANDARD

The Nebraska PDMP requires that all reports be submitted in the American Society for Automation in Pharmacy (ASAP) Standard for Prescription Monitoring Programs v4.2A. Detailed specifications for ASAP v4.2A are listed in [Appendix A: ASAP 4.2A Specifications](#)

## GUIDELINES FOR ZERO REPORTING

- If a Dispenser has no dispensing transactions to report for the day, the dispenser is encouraged to submit a zero report, as described in the Reporting Zero Dispensing topic in this guide.
- If a Dispenser reporting by Manual Prescription Entry has no dispensing transactions to report for the day, no action is necessary.

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## 4. DATA SUBMISSION

### DATA SUBMITTERS

“Data submitter” refers to users who submit dispenser data to the Nebraska PDMP RxGov system. Data submitters are not always dispensers, and some data submitters may submit data for large organizations that may have multiple pharmacies or dispensers. Requirements for who must submit data are listed in the Dispenser Reporting section above.

### 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 to submit your data.

**Note:** Dispensing data from multiple pharmacies can be submitted in the same file. For example, chain pharmacies may send in one file the information for all their pharmacies licensed in the state of Nebraska. **Chains with multiple stores only need to set up one account to submit a file.**



[Forgot password?](#)


[Register](#)

[Login](#)



Email

Submitter@egov.com

Password 

.....

Confirm Password

First Name

Last Name

Street Address 1

Street Address 2

City

State

Zipcode

Phone Number

Mobile Phone Number

Account Type

[← Back to Login](#)

Register

### Steps to Create a New Account

1. Go to <https://nepdmp.rxgov.com>
  2. On the RxGov home page, click **Register**.
  3. Enter the following required information:
    - a. Email
      - This e-mail will become your user name
      - Use the e-mail that will be best for receiving error reports and correspondence.
    - b. Password
    - c. First Name
    - d. Last Name
    - e. State
    - f. Phone Number
- You are not required to enter any additional information, but you are encouraged to enter as much of the following information as possible:*
- g. Street Address
  - h. City
  - i. Zip Code
3. In the Account Type menu, select **Submitter**.
  4. Enter your **Submitter Name**
  5. Click **Register**.

After review by a NEHII Nebraska PDMP administrator, an email is sent to the submitted email address notifying you that your account is now accessible.



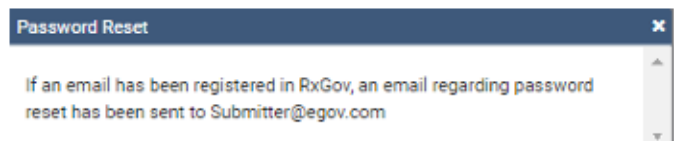
## MODIFYING YOUR ACCOUNT

### FORGOT YOUR PASSWORD

1. At RxGov: <https://nepdmp.rxgov.com>
2. Select Forgot password
3. An email will be sent to the email on-file providing a link to reset the password



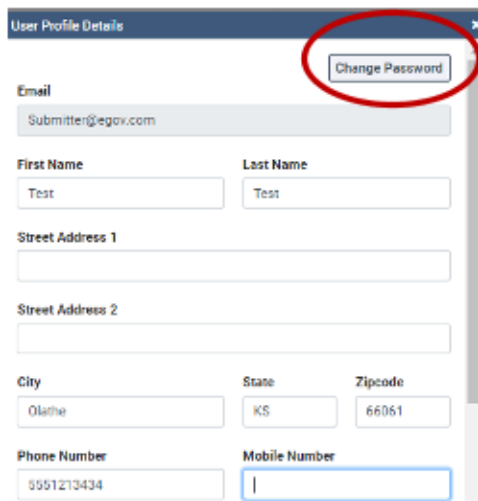
The image shows the RxGov login interface. At the top is the RxGov logo with the tagline 'AN NIC PLATFORM'. Below the logo are two input fields: 'Submitter@egov.com' and 'Password'. Below the 'Password' field is a red circle around the text 'Forgot password?'. To the right of this text are two buttons: 'Register' and 'Login'.



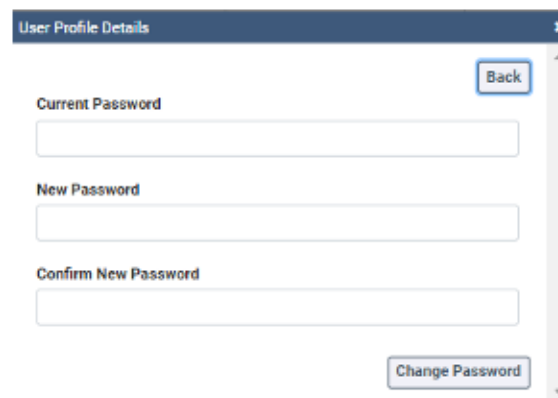
The image shows a 'Password Reset' notification window. The title bar says 'Password Reset'. The main text reads: 'If an email has been registered in RxGov, an email regarding password reset has been sent to Submitter@egov.com'. There are up and down arrow icons on the right side of the window.

### CHANGE YOUR PASSWORD

1. Log on to RxGov: <https://nepdmp.rxgov.com>
2. On the top menu bar, click **your username**. Note: Your username is your email address entered when registering your account.
3. On the User Profile Details page, click **Change Password**.
4. Type your current password in the **Current Password** box.
5. Type your new password in the **New Password** box.
6. Type your new password in the **Confirm New Password** box.
7. Click **Change Password**.



The image shows the 'User Profile Details' page. The title bar says 'User Profile Details'. There is a 'Change Password' button circled in red. Below the button are several input fields: 'Email' (Submitter@egov.com), 'First Name' (Test), 'Last Name' (Test), 'Street Address 1', 'Street Address 2', 'City' (Olathe), 'State' (KS), 'Zipcode' (66061), 'Phone Number' (5551213434), and 'Mobile Number'.



The image shows the 'User Profile Details' page with the password change form. The title bar says 'User Profile Details'. There is a 'Back' button. Below the 'Back' button are three input fields: 'Current Password', 'New Password', and 'Confirm New Password'. At the bottom right is a 'Change Password' button.

## UPDATE PROFILE DETAILS

1. Log on to RxGov: <https://nepdmp.rxgov.com>
2. On the top menu bar, click **your username**. Note: Your username is your email address entered when registering your account.
3. On the **User Profile Details page**, you can update any of the following information:
  - a. First Name
  - b. Last Name
  - c. Street Address
  - d. City
  - e. State
  - f. Zip Code
  - g. Phone Number
  - h. Mobile Number
4. After updating your information, click **Save**.

## UPDATE SUBMITTER NAME

1. Log on to RxGov: <https://nepdmp.rxgov.com>
2. On the top menu bar, click **your username**. Note: Your username is your email address entered when registering your account.
3. On the User Profile Details page, click **Change Identifier Fields**.
4. On the Create User Identifier Change Request Ticket page, please provide an explanation as to why you need to change your identifier in the comment box. Enter a new submitter name in the **Submitter Name** box.
5. Click **Submit**.

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## 5. DATA DELIVERY METHODS

### NOTES ABOUT NDC NUMBERS

Many prescription medication packages have the NDC code displayed on the package in a 10-digit format which may include hyphens (-). To submit successfully to the Nebraska PDMP this 10-digit NDC format will need to be converted to an 11-digit format without the hyphen(s).

The following table shows common formats on packaging and the appropriate way to convert to the 11-digit format needed for reporting. The correctly formatted, additional "0" is bold and underlined in the following example. Hyphens are provided to demonstrate the various formatting examples for the NDC but would not be transmitted in ASAP format.

Do not use hyphens when entering the actual data in the Nebraska PDMP. If there are any hyphens (-) or less/more than 11-digits in the field, the file will come back with an error for that record.

10-Digit Format on Package	10-Digit Format Example	11-Digit Format	11-Digit Format Example	Actual 10-Digit NDC Example	11-Digit Conversion of Example
4-4-2	9999-9999-99	5-4-2	<b><u>0</u></b> 9999-9999-99	0228-2027-10	<b><u>0</u></b> 0228202710
5-3-2	99999-999-99	5-4-2	99999- <b><u>0</u></b> 999-99	58284-100-14	58284 <b><u>0</u></b> 10014
5-4-1	99999-9999-9	5-4-2	99999-9999- <b><u>0</u></b> 9	60575-4112-1	605754112 <b><u>0</u></b> 1

### SUBMISSION METHOD #1: SECURE FTP OVER SSH

There are many free software products that support Secure FTP. Neither Nebraska DHHS, NEHII nor the PDMP Vendor (NIC/RxGov) are in a position to direct or support your installation of operating system software for Secure FTP.

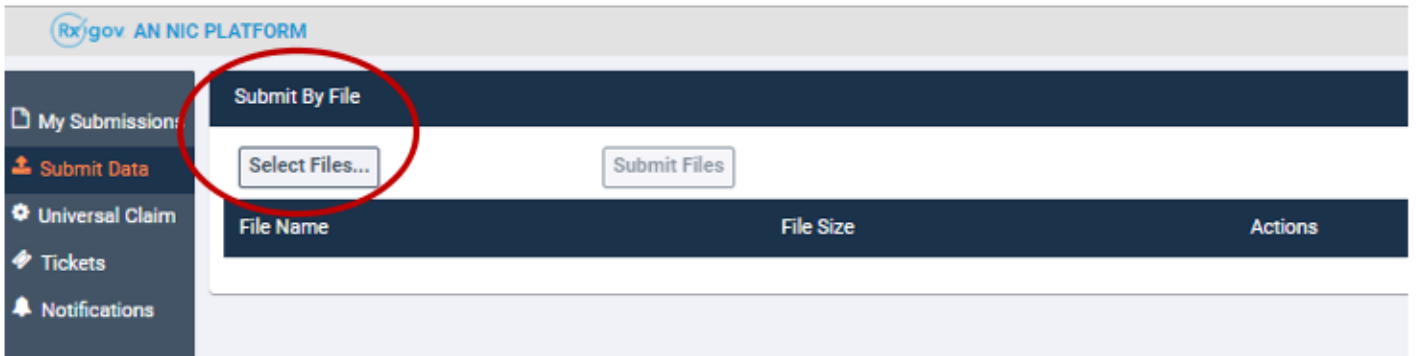
However, once the software is setup use the following steps to submit files to RxGov:

1. Prepare the data file for submission using the ASAP specifications described in [Appendix A: ASAP 4.2A Specifications](#).
2. SFTP the file to: `sftp://sftp-nepdmp.rxgov.com`
  - Port: 177330
3. When prompted, type your data submitter credentials (e.g., username and password).
4. Place the file in the new 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.

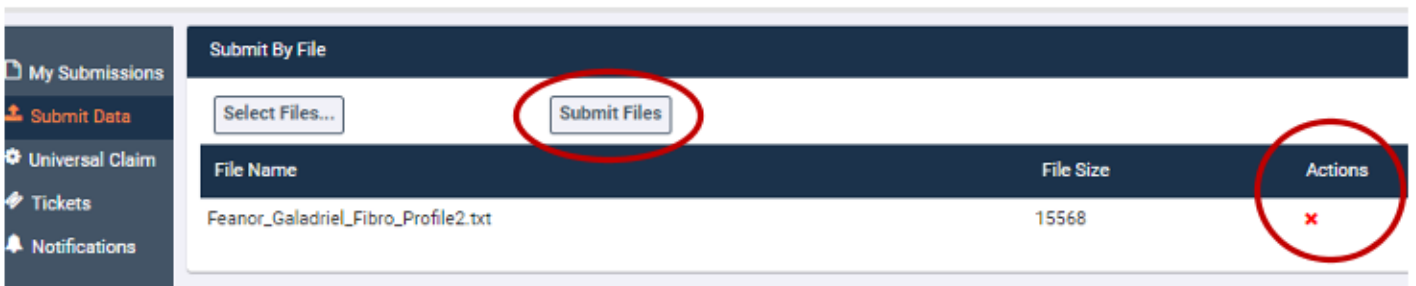
### SUBMISSION METHOD #2: SSL WEBSITE (RXGOV PORTAL)

1. Prepare the data file for submission using the ASAP specifications described in [Appendix A: ASAP 4.2 Specifications](#).
2. Log on to RxGov: <https://nepdmp.rxgov.com>

3. On the left menu, click **Submit Data**.
4. In the "Submit By File" section, click **Select Files**.



5. Select the file on your computer and click **Open**.
  - If selected file is an error, select the red X in the Actions column to remove.
  - When all desired files are listed, click **Submit Files**.



7. If desired, view the results of the submission in the administration section of RxGov.
8. Log off when the file submission is complete.

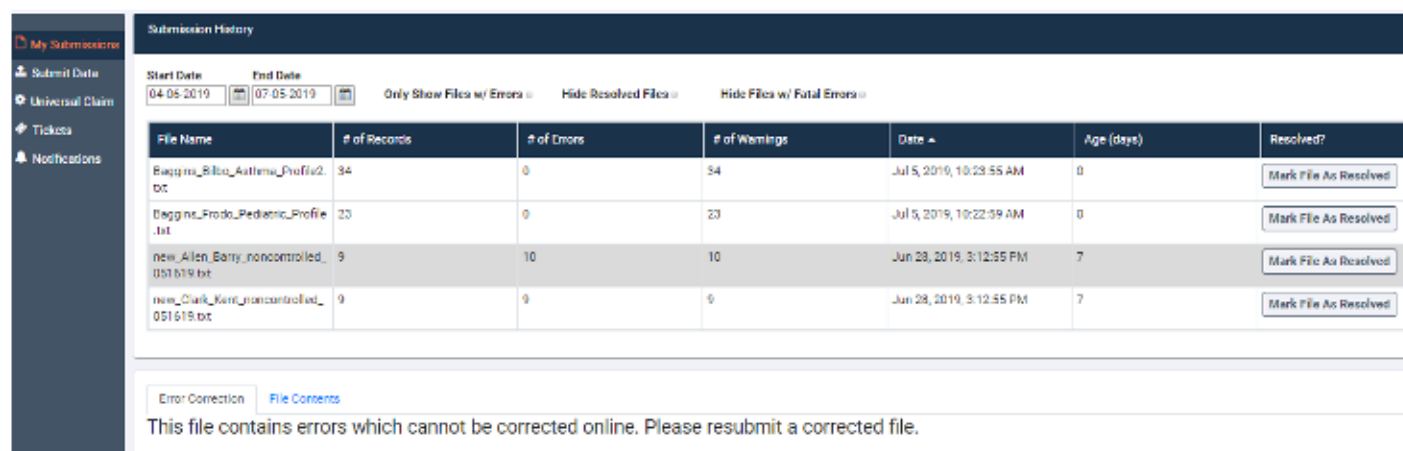
### SUBMISSION METHOD #3: MANUAL PRESCRIPTION ENTRY

1. This method will be included in the Full version of the **Nebraska PDMP Data Submitter Registration and Implementation Guide**

## 6. SUBMITTED REPORTS AND EDIT DEFINITIONS

### VIEW SUBMITTED REPORTS

You can view your submitted data in the RxGov platform, however, you are only able to view records you have submitted via your account username.



**Submission History**

Start Date: 04-05-2019 End Date: 07-05-2019 Only Show Files w/ Errors Hide Resolved Files Hide Files w/ Fatal Errors

File Name	# of Records	# of Errors	# of Warnings	Date	Age (days)	Resolved?
Buggins_Bilco_Autism_Profile2.txt	34	0	34	Jul 5, 2019, 10:23:55 AM	0	Mark File As Resolved
Buggins_Prodo_Pediatric_Profile.txt	23	0	23	Jul 5, 2019, 10:22:39 AM	0	Mark File As Resolved
new_Allen_Barry_noncontrolled_051619.txt	9	10	10	Jun 28, 2019, 3:12:55 PM	7	Mark File As Resolved
new_Clark_Kent_noncontrolled_051619.txt	9	0	0	Jun 28, 2019, 3:12:55 PM	7	Mark File As Resolved

Error Correction File Contents

This file contains errors which cannot be corrected online. Please resubmit a corrected file.

1. Log on to RxGov: <https://nepdmp.rxgov.com>
2. Click **My Submissions** in the left menu.
3. On the Submission History page, use the **Start Date** and **End Date** boxes to select the dates for which you want to view data. You can also choose to view only files with errors by selecting the **Only Show Files w/ Errors** box, and you can hide resolved files by selecting **the Hide Resolved Files** box.
4. When you have finished making your selections, the submission history search is run automatically. You can also update the displayed data by clicking the **refresh icon** at the top right of the page.
5. To view submitted data, click the line containing the data you want to view.
6. The File Contents section contains information on all submitted patients. You can view details on a patient by clicking the **expand arrow next to the patient name**.
7. Additional dispensing information is displayed in the Segment Details section:
  - a. Errors in the submitted segment are displayed in the Segment Errors section.
  - b. Patient information is displayed in the Segment Details section when the PAT line is highlighted.
  - c. Prescription information is displayed in the Segment Details section when the DSP line is highlighted.
  - d. Prescriber information is displayed in the Segment Details section when the PRE-line is highlighted.

## VIEW ZERO REPORTS

This function lets data submitters 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

#### Submit Zero Report

<b>Date For Zero Report *</b> 07-05-2019	<b>National Provider Identifier (NPI)</b> NPI
<b>DEA Number *</b> DEA	<b>NCPDP/NABP Provider ID</b> NCPDP/NABP

### Viewing Previously entered Zero Reports

#### Submission History

Start Date: 04-06-2019 End Date: 07-05-2019

Only Show Files w/ Errors  Hide Resolved Files  Hide Files w/ Fatal Errors

File Name	# of Records	# of Errors	# of Warnings	Date
zero_report_FD3087536_20190705-04-44.txt	1	0	0	Jul 5, 2019, 11:45:29 AM

1. Log on to RxGov: <https://nepdmp.rxgov.com>
2. Click **My Submissions** in the left menu.
3. On the Submission History page, use the **Start Date** and **End Date** boxes to select the dates for which you want to view data. You can also choose to view only files with errors by selecting the **Only Show Files w/ Errors** box, and you can hide resolved files by selecting the **Hide Resolved Files** box.
4. When you have finished making your selections, the submission history search is run automatically. You can also update the displayed data by clicking the **refresh icon** at the top right of the page.
5. To view submitted data, click the line containing the data you want to view.

## ERROR CORRECTION

Fatal errors will cause a record NOT to be loaded. If this occurs, correct the data that caused the error and resubmit the entire record. Fatal error corrections must be resubmitted in a timely manner. If a record with a serious or minor error is loaded and a correction is required, records can be corrected using the DSP01 values as explained below.

**Note:** Edit Number V1 as shown in the Edit Definitions table should not be resubmitted. All other records with errors that are not fatal will be loaded unless the batch thresholds are reached. Error thresholds are defined in the Submit Reports section.

The ASAP 4.2A standard requires a dispenser to select an indicator in the **DSP01** (Reporting Status) field. Dispensers may submit new records, revise and resubmit records, and void (delete) erroneous records.

These actions are indicated by supplying one of the following values in the **DSP01** field:

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

Use the information in the following topics to create, revise/resubmit, or void an erroneous record.

### SUBMIT A NEW RECORD

1. Create a record with the value **00** in the **DSP01** field.
2. Populate all other required fields and submit the record.

**Note:** These steps are used to submit new records *or* to submit records that were previously submitted but received a fatal status on your error report. **Records with fatal errors are not loaded to the system.** The errors in these records must be corrected in your system and resubmitted using the **00** status in the **DSP01** field.

### 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:
  - a. PHA01 (NPI)
  - b. DSP02 (Prescription Number)
  - c. DSP05 (Date Filled)
3. Fill in all other data fields with the correct information. This information will override the original data linked to the fields referenced in step 2.
4. Submit the record.

**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, and then you must re-submit the record using the value **00** in the **DSP01** field.

### VOID A RECORD

1. Send a record with the value **02** in the **DSP01** field.
2. Fill in all other data identical to the original record. This will void the original record submission.

## Edit Definitions

The following table describes the current list of edits:

Edit Number	Message	Severity
Edit 01	Format of File Error	Fatal
Edit 02	Pharmacy DEA is blank	Fatal
Edit 05	Pharmacy ID not found	Fatal
Edit 09	Invalid DOB	Fatal
Edit 10	Gender is invalid	Fatal
Edit 14	Reporting status is invalid	Fatal
Edit 15	Date Dispensed is invalid or irrational	Fatal
Edit 18	Quantity is invalid	Serious
Edit 20	Days' Supply > 360	Serious
Edit 21	NDC not found	Serious
	NDC not found (used when CDI segment is used)	Serious
Edit 22	Product ID Qualifier is invalid	Fatal
Edit 25	Prescriber ID not found	Minor
	Prescriber ID is blank	Fatal
Edit 26	Prescriber Last Name is blank	Fatal
Edit 28	Date Rx Written is invalid	Fatal
Edit 31	Classification Code for Payment Type is invalid	Fatal
Edit 50	Patient Last Name blank	Fatal
Edit 51	Patient First Name blank	Fatal
Edit 52	Patient Address blank	Fatal
Edit 53	Patient ZIP Code is blank	Fatal
Edit 54	Patient ZIP and State Code conflict	Serious
Edit 56	Patient City is blank	Fatal
Edit 60	Patient State Code is blank	Fatal
Edit 61	Patient State Code is invalid	Fatal
Edit 62	Customer Phone Number is blank	Minor
Edit 200	Prescription Number is blank	Fatal
Edit VI	Record already exists <b>Note:</b> Duplicate records are not loaded. The number of duplicate records, if any, is displayed on the submitted report produced after data file transmission has completed.	Fatal



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## 7. ASSISTANCE AND SUPPORT

If you have questions regarding the Nebraska PDMP, please email [pdmp@nehii.org](mailto:pdmp@nehii.org) or call 402.506.9900 x1.

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## 8. DOCUMENT INFORMATION

### VERSION HISTORY

The Version History records the publication history of this document.

Publication Date	Version Number	Comments
7/09/2019	1.0	Initial publication

**Table 1 – Document Version History**

### CHANGE LOG

The Change Log records the changes and enhancements included in each version.

Version Number	Chapter/Section	Change
1.0	N/A	N/A

**Table 2 – Document Change Log**

## Appendix A: ASAP 4.2A Specifications

The following information contains the definitions for the specific contents required of uploading records (reporting) in the American Society for Automation in Pharmacy (ASAP) 4.2A format to comply with the Nebraska PDMP requirements.

### DATA TYPE NOTATION MATRIX

Data Type Notation	Data Type	Character Set / Format
AN	Alphanumeric	Upper- and lower-case alphabets: A to Z, a to z Numbers: 0 to 9 Printable characters: ~`!@#\$%^&*()-_+=[]\ '":;<>.,?/
DT8	Date	Format: CCYYMMDD <ul style="list-style-type: none"> <li>• CC represents century</li> <li>• YY represents year</li> <li>• MM represents month</li> <li>• DD represents Day</li> </ul>
TM6	Time	Format: HHMMSS or HHMM in 24 hours clock system (military format) <ul style="list-style-type: none"> <li>• HH represents hour</li> <li>• MM represents minutes</li> <li>• SS represents seconds</li> </ul>
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.
  - Recommended format: SendingOrganizationName\_FileID\_DateTime
- The recommended file extensions are .dat, .txt, or .csv
- File ID is assigned by the submitter/dispenser system to uniquely identify the uploaded file.
  - This ID will also be provided back on the summary report and can be used for tracking (example: A001)
- DateTimestamp is the Date and time of the file submission in this format: CCYYMMDDHHMMS (example: 20170102160000)

### Data Elements within File

1. **Segment Identifier** – indicates the beginning of a new segment, for example *PHA*.
2. **Data Delimiter** – character used to separate segments and the data elements within a segment, for example, an asterisk (\*).
  - a. Each completed field should be followed by an asterisk
  - b. Each blank field should contain a single asterisk.
  - c. If the last field in the segment is blank, it should contain an asterisk and a tilde (~).
3. **Segment Terminator** – character used to mark the end of a segment, for example, the tilde (~).
  - a. 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

- R = Required by ASAP
- RR = Required by the Nebraska PDMP
- S = Situational (not required; however, supply if available)
- Fields **highlighted in blue** are part of the ASAP v4.2A set
- Both “R” and “RR” fields must be reported.

**Note:** For more information regarding ASAP 4.2A specifications, please reference the American Society for Automation in Pharmacy (ASAP) at [www.asapnet.org](http://www.asapnet.org) for the full *Implementation Guide for the ASAP Standard for Prescription-Monitoring Programs*.

Field	Field Name	Size	Description	Field Usage
<b>TH: Transaction Header:</b> 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 or 4.2A	R
TH02	Transaction Control Number	AN40	Sender assigned code uniquely identifying a transaction	R
TH03	Transaction Type	N2	Identifies the purpose of initiating the transaction.	R
			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.)			
TH04	Response ID	AN40	Transaction Control Number for response transaction.	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	Routing Number/BIN	N6	Can be used for real-time transmissions that use switcher to indicate state to route transaction to	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
<b>IS: Information Source:</b> 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.	R
IS02	Information Source Entity Name	AN60	Entity name of the Information Source.	R
IS03	Message	AN60	Freeform text message	S

<b>PHA: Pharmacy Header:</b> Required segment; used to identify the pharmacy.				
PHA01	National Provider Identifier (NPI)	AN10	Identifier assigned to the pharmacy by CMS	RR
PHA02	NCPDP/NABP Provider ID	AN7	Identifier assigned to the pharmacy by the National Council for Prescription Drug Programs.	S
PHA03	DEA Number	AN9	Identifier assigned to the pharmacy by the Drug Enforcement Administration. Must be reported if any prescriptions are controlled substances	S
PHA04	Pharmacy or Dispensing Prescriber Name	AN60	Name of the Pharmacy or Dispensing Prescriber.	RR
PHA05	Address Information - 1	AN30	Free-Form Address information	RR
PHA06	Address Information - 2	AN30	Free-Form Address information	S
PHA07	City Address	AN25	City name	RR
PHA08	State Address	AN2	US Postal Service state code	RR
PHA09	Zip Code	AN9	US Postal Zip Code	RR
PHA10	Phone Number	AN10	Complete Phone number including Area Code.	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
<b>PHA13</b>	<b>Pharmacy Permit/License #</b>	<b>AN20</b>	<b>Use to help identify sending pharmacy</b>	<b>S</b>
<b>PAT: Patient Information:</b> 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. (i.e. NE for Nebraska)	S
PAT02	ID Qualifier	N2	Code to identify the type of ID in PAT03.	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	
99 = Other (agreed upon ID)				
PAT03	ID of Patient	AN20	Identification number for the patient as indicated in PAT02.	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
PAT06	Additional ID	AN20	Identification number for the patient as indicated in PAT05.	S
PAT07	Last Name	AN50	Patient's Last name.	RR
PAT08	First Name	AN50	Patient'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	AN35	Address Line 1 of the Patient.	RR
PAT13	Address Information - 2	AN35	Address Line 2 of the Patient.	S
PAT14	City Address	AN20	City of the Patient.	RR
PAT15	State Address	AN10	Valid State 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.	RR
PAT17	Phone Number	AN10	Complete Phone number including Area Code. No Hyphens. Note: Phone number is required, if available	RR
PAT18	Date of Birth	DT8	Date of Birth of the Patient: CCYYMMDD	RR
PAT19	Gender	AN1	Value: F = Female; M = Male; U = Unknown	RR
PAT20	Species Code	N2	Value: 01 = Human; 02 = Veterinary Patient	RR
PAT21	Patient Location Code	N2	Code indicating where 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 07 = Skilled-Care Facility 08 = Sub-Acute Care Facility 09 = Acute-Care Facility 10 = Outpatient 11 = Hospice 98 = Unknown 99 = Other	S
PAT22	Country of Non-U.S. Resident	AN20	If Patient's address is in foreign country leave PAT12-PAT16 blank and free-text address here.	S
PAT23	Name of Animal	AN30	Required if PAT20 = "02" Veterinary Patient.	S
<b>DSP: Dispensing Record:</b> 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	Value: 00 = New Record; 01 = Revise; 02 = Void	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 dispensed: CCYYMMDD	R
DSP06	Refill Number	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	
			02 = UPC	
			03 = HRI (Human Readable)	
			04 = UPN	
			05 = DIN	
DSP08	Product ID	AN15	Full identification including leading zeros without punctuation. NDC must be 11-digits If the product is a compound, populate with 99999999999	R
DSP09	Quantity Dispensed	D11	Number of metric units dispensed. 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 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.	RR
			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)	
DSP12	Transmission Form of Rx Origin Code	N2	Code indicating how the pharmacy received the prescription.	S
			01 = Written Prescription	
			02 = Telephone Prescription	
			03 = Telephone Emergency Prescription	
			04 = Fax Prescription	
			05 = Electronic Prescription	
			06 = Transferred/Forwarded	
99 = Other				
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 For additional fills per prescription, increment by 1 so the second partial fill would be reported as 02, up to a maximum of 99.	S
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	S

			be used to identify the pharmacist dispensing the medication.	
DSP16	Classification Code for Payment Type	N2	Code identifying the type of payment. 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	RR
DSP17	Date Sold	DT8	Date prescription left the pharmacy	S
DSP18	RxNorm Product Qualifier	N2	RxNorm value sent in the electronic prescription transmitted to the pharmacy. 01 = Semantic Clinical Drug (SCD) 02 = Semantic Branded Drug (SBD) 03 = Generic Package (GPK) 04 = Branded Package (BPK)	S
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	Quantity Prescribed	N100	Used to add clarity to the value reported in DSP13	S
DSP23	Rx Sig	AN200	The actual directions printed on prescription label. If greater than 200 characters, will truncate.	S
DSP24	Treatment Type	N2	Indications for use 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	S

			99 = Other	
DSP25	Diagnosis Code	AN7	ICD-10 Code	S
<b>PRE: Prescriber Information:</b> Required segment; used to identify the prescriber of the prescription.				
PRE01	National Provider Identifier (NPI)	AN10	Must be populated with the NPI. If the provider does not have a NPI, it is recommended to populate PRE01 with the 10-digit Prescriber Phone Number (PRE08).	RR
PRE02	DEA Number	AN9	Must be populated with the DEA if the reported medication is a controlled substance.	S
PRE03	DEA Number Suffix	AN7	Identifying number assigned to a prescriber by an institution when the Institution's DEA number is used.	S
PRE04	Prescriber 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	AN10	Prescriber's primary phone number; include area code; do not use hyphens	S
PRE09	XDEA Number	AN9	XDEA# (NADEAN) may be required when Rx for opioid dependency	S
<b>CDI: Compound Drug Ingredient Detail:</b> 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.	R*
			01 = NDC	
			02 = UPC	
			03 = HRI	
			04 = UPN	
05 = DIN				
CDI03	Product ID	AN15	Product identifier. If the ingredient does not have an NDC, the recommended entry is 888888888888	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.	R*
			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)	



**AIR: Additional Information Reporting**

Use of this segment is situational. However, if this segment is used, at least one of the data elements (fields) will be 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 = 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	
09 = 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				

<b>TP: Pharmacy Trailer:</b> 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
<b>TT: Transaction Trailer:</b> 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:**

TH\*4.2\*3c72d952-9f89-4f42-a059-3e5d5e73476c\*01\*\*20161001\*031535\*T\*\*~  
 IS\*DF001\*NeHII Test\*~  
 PHA\*9876543210\*9876543\*FA9999999\*NeHII Test Pharmacy\*987654321 Any Street\*\*Any City\*NE\*98765\*9999876543\*9876543~  
 PAT\*\*06\*N9999999\*NE\*\*\*Patient\*Test\*\*\*\*987654 N Test Avenue\*\*Test City\*NE\*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~

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## Appendix B: Zero Report Specifications

The following information contains the definitions for the specific contents required of uploading zero reports in the American Society for Automation in Pharmacy (ASAP) 4.2A format to comply with the Nebraska 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 values populating these fields are:

1. First Name = Zero
2. Last Name = Report
3. Date Filled = Date report sent

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

### Sample of Zero-Reporting – Parsed to be legible:

#### Single Pharmacy in transaction

```
TH*4.2*2b72d952-9f89-4f42-a059-3e5d5e73476c*01**20161001*031535*T**~  
IS*DF001*NeHII Test*#20161001#-#20161001#~  
PHA*9876543210*9876543*FA9999999*NeHII Test Pharmacy *987654321 Any Street**Any City*NE*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*NeHII Test*#20161001#-#20161001#~  
PHA*9876543210*9876543*FA9999999*NeHII Test Pharmacy 1*987654321 A Street**Any City*NE*98765*5559876543*9876543~  
PAT*****Report*Zero*****~  
DSP*****20190602*****~  
PRE**~  
TP*5~  
PHA*0123456789*3456789FA9999998*NeHII Test Pharmacy 2*987654321 B Street**Any City*NE*98765*5553456789*9876544~  
PAT*****Report*Zero*****~  
DSP*****20190602*****~  
PRE**~  
TP*5~  
TT*2b72d952-9f89-4f42-a059-3e5d5e73476c*13~
```