Bamboo Health

Data Submission Guide for Dispensers

South Carolina Prescription Monitoring Program

January 2025
Version 4.0

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1 Document Overview

This document serves as a training guide and support manual for dispensers of Schedule II through Schedule IV controlled substances in South Carolina who use Bamboo Health's PMP Clearinghouse repository to report their dispensations. It includes such topics as:

- Reporting requirements for dispensers in the State of South Carolina
- Data file submission guidelines and methods
- Creating a PMP Clearinghouse account
- Creating a data file
- Uploading or reporting data
- Understanding and correcting errors

This guide is intended for use by all dispensers in the State of South Carolina required to report the dispensing of controlled substances.

2 Data Collection and Tracking

2.1 Data Collection Overview

This guide provides information regarding the South Carolina Prescription Monitoring Program (SC PMP) also known as the South Carolina Reporting & Identification Prescription Tracking System (SCRIPTS). SCRIPTS is South Carolina's solution for monitoring Schedule II, III and IV controlled substances dispensed in South Carolina.

South Carolina Legislature House Bill 3803 authorizes the South Carolina Department of Health and Environmental Control (DHEC) to establish and maintain a program to monitor the prescribing and dispensing of all Schedule II–IV controlled substances by professionals licensed to prescribe or dispense the substances in South Carolina. The purpose of this legislation is to improve the State's ability to identify and stop diversion of prescription drugs in an efficient and cost-effective manner that will not impede the appropriate medical utilization of licit controlled substances. *S.C. Code Ann. § 44-53-1640* requires dispensers to submit to DHEC, by electronic means, information regarding each prescription dispensed for Schedule II–IV controlled substances using the latest edition of the "ASAP Telecommunications Format for Controlled Substances". The data collected will be used in the prevention of diversion, abuse, and misuse of controlled substances through the provision of education, early intervention, and enforcement of existing laws that govern the use of controlled substances.

Information about controlled substance dispensing activities is reported daily to the State of South Carolina through the authorized data collection vendor. Pharmacies and other dispensers are required by law to provide such reporting to the data collection vendor in approved formats and frequencies. This includes mail order pharmacies that mail orders into the state.

2.2 Reporting Requirements

All dispensers of Schedule II, III, and IV controlled substance prescriptions are required to collect and report their dispensing information.

"Dispenser" means a person who delivers a Schedule II–IV controlled substance to the ultimate user in South Carolina, **but does not include**:

a. A licensed hospital pharmacy that distributes controlled substances for the purpose of inpatient hospital care or dispenses prescriptions for controlled substances at the time of discharge from the hospital;
b. A practitioner or other authorized person who administers these controlled substances; or
c. A wholesale distributor of a Schedule II–IV controlled substance;

Each dispenser shall submit the required fields to the data repository daily for any day that you are open for business and operational. If you are closed for business, you do not have to report or zero report for that day.

In the event the dispenser is unable to report the information within the timeframe required as outlined in this section due to unforeseen circumstances, such as the system is not operational or there is some other temporary electrical or technological failure, this inability shall be documented in the dispenser's records. Once the electrical or technological failure has been resolved, the dispenser shall promptly report the information.

If you are a chain pharmacy, your data will likely be submitted from your home office. Please verify this with your home office. If you are an independent pharmacy or other entity, please forward the reporting requirements to your software vendor. They will need to create the data file, 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.

Note for dispensing provider clinics: *The dispenser for your facility is the DEA number used to purchase the drugs. This only applies to medications that go home with your patient. If a facility DEA number is used to purchase the drugs, the dispenser would be the name of your facility. If a provider's DEA number is used to purchase the drugs for the facility, the provider's name would be the dispenser. All other providers within the practice would be listed as the prescriber if they order the medication for dispensation. The prescriber is the person who writes or orders the prescription after a medical record review or physical examination. The prescriber may be the same as the dispenser if he or she is the person who ordered the prescription and uses his or her DEA number to purchase drugs for the facility. Do not register multiple dispensers for your facility if only 1 DEA number is purchasing all drugs used for your location. If a provider within the practice dispenses using the clinic's stock and is not the owner of the drugs, they will need a power of attorney on file to use the medications kept within the facility. Please contact your local DHEC agent if a Power of Attorney form is needed for your facility.*

Dispensers of controlled substances are required to collect and report the following information to the data repository per South Carolina Code of Laws 44-16-1460:

- Dispenser's DEA number
- Date the drug was dispensed
- Prescription number
- Indication of whether the prescription was new or refill
- NDC code for drug dispensed (Refer to Appendix D: Compound Drugs). NDCs will always be 10-digit numbers and will be formatted in a 5-4-1, 5-3-2 or 4-4-2 format (e.g., 12345-1234-1). However, to establish a standardized format, reported NDCs must be "normalized" to a format of 5-4-2. To normalize an NDC number, add a leading zero to the section that is missing a digit (e.g., 1234-1234-01 would become 01234-1234-01 and 12345, 1234-1 would become 12345-1234-01
- Quantity dispensed
- Approximate number of days supplied
- Patient name
- Patient's full address (address, city, state and zip code)
- Patient's Date of Birth
- Prescriber's federal DEA number – **Do not report X waiver numbers. If an X waiver number is submitted in place of the federal DEA number, you will be required to go in and complete an error correction providing the federal DEA number for the prescription to enter the PMP database.**

- Date the prescription was written

Notes:

- *If any of the above requirements are excluded or submitted inaccurately within the file, you will receive a critical error, and the file will not enter the PMP database. It is important that all dispensers check for error corrections on a weekly basis to ensure that prescriptions are getting into the database. For information on how to perform error corrections, please refer to the Error Correction section within this document.*
- *Additional fields are required by ASAP. For the complete list of all required fields, please refer to Appendix A: ASAP 4.2B Specifications.*

A National Drug Code (NDC) number is a universal product identifier and is present on many nonprescription and all prescription medication packages. If the NDC number cannot be found on the medication/tablet package, please contact your distributor. NDCs will always be 10-digit numbers and will be formatted in a 5-4-1, 5-3-2 or 4-4-2 format (e.g., 12345-1234-1). However, to establish a standardized format, reported NDCs must be "normalized" to a format of 5-4-2. To normalize an NDC number, add a leading zero to the section that is missing a digit (e.g., 1234-1234-01 would become 01234-1234-01 and 12345, 1234-1 would become 12345-1234-01). The NDC number must be entered without dashes or spaces for it to be accepted. For more information on National Drug Codes, see https://www.fda.gov/drugs/drug-approvals-and-databases/national-drug-code-directory.

Note: *All reporting is done through Clearinghouse. To set up a Clearinghouse account, please refer to the Accessing Clearinghouse section of this manual.*

3 Accessing Clearinghouse

This chapter describes how to create your PMP Clearinghouse account and how to log in to the PMP Clearinghouse web portal.

3.1 Creating Your Account

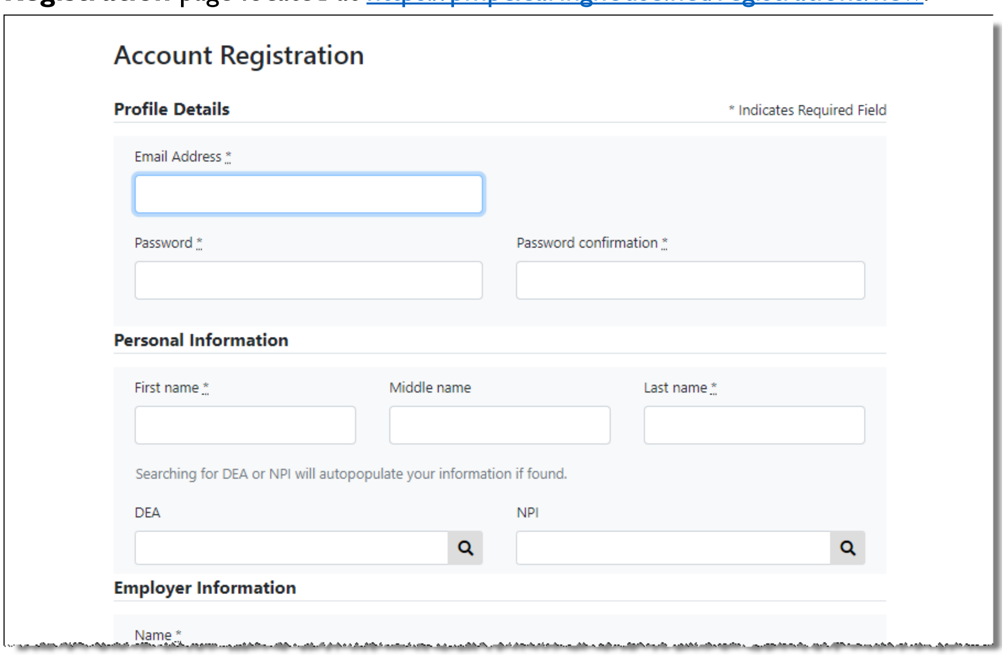
Prior to submitting data, you must create an account. **If you are currently registered with the Bamboo Health PMP Clearinghouse system, you *do not* need to register for a new account—you will be able to add South Carolina to your existing account for data submissions.** If you have an existing PMP Clearinghouse account, please refer to Adding PMPs to Your Upload Account to add PMPs to your account.

Notes:

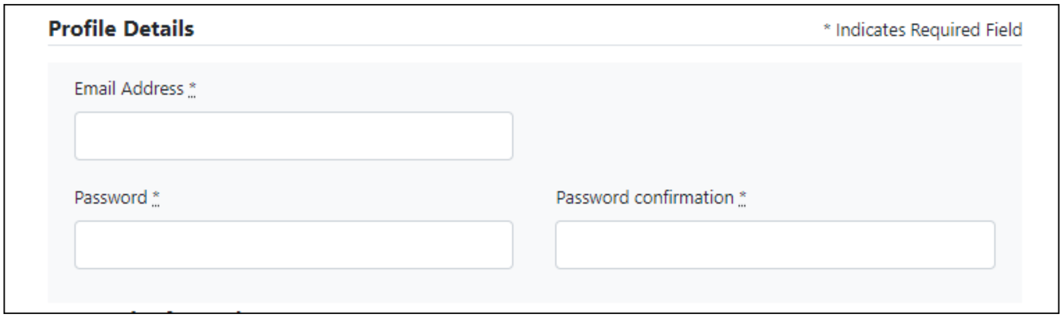
- *Data from multiple pharmacies can be uploaded in the same file. For example, chain pharmacies may send in one file containing controlled substance dispensing information for all their pharmacies licensed in the State of South Carolina. Therefore, chains with multiple stores need only to set up one account to upload a file.*
- *PMP Clearinghouse allows users to submit data through the web portal via manual entry (UCF) or upload of ASAP files. For users who prefer an encrypted transfer method, SFTP access is also available. You may set up your SFTP account during the account creation process.*
- *If you need to make changes to an existing PMP Clearinghouse upload account, please refer to Managing Your Upload Account.*

Perform the following steps to create an account:

1. Open an internet browser window and navigate to the **PMP Clearinghouse Account Registration** page located at https://pmpclearinghouse.net/registrations/new.



2. Complete your **Profile Details**.



   a. Enter your current, valid email address in the **Email Address** field.

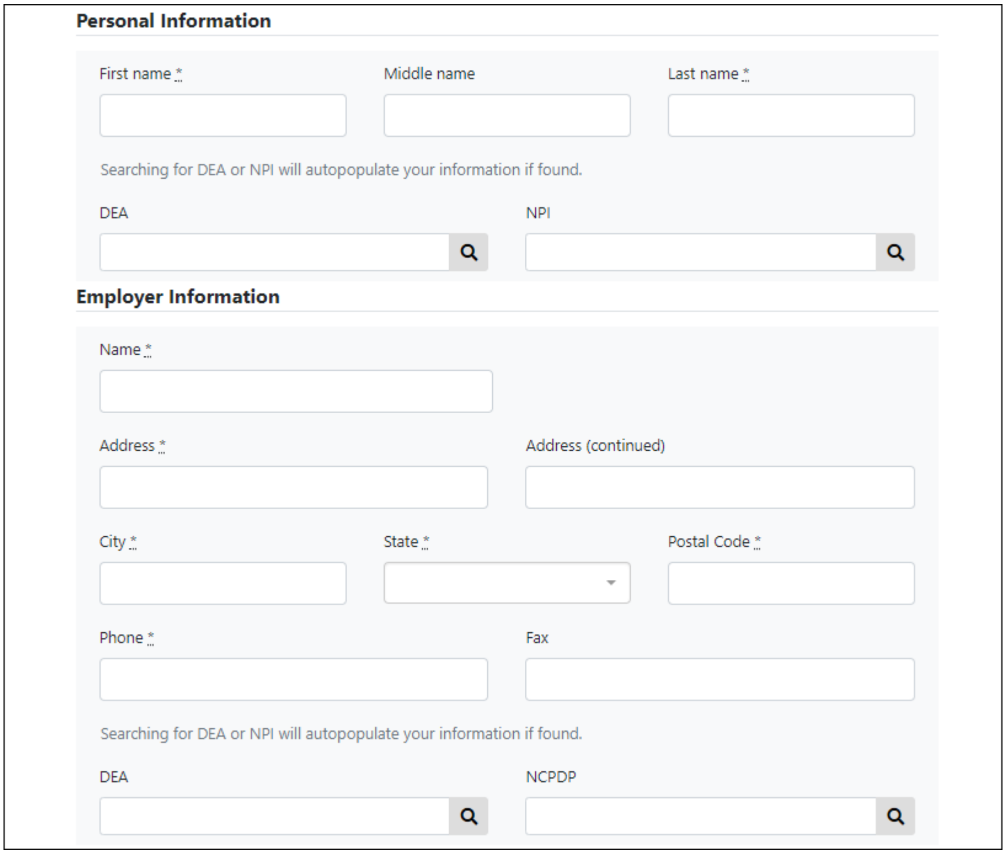
   Note: *The email address you provide here will act as your username when logging into the PMP Clearinghouse system.*

   b. Enter a password for your account in the **Password** field, then re-enter it in the **Password Confirmation** field. The password requirements are provided below.

   Passwords must contain:

   - *At least eight (8) characters*
   - *One (1) uppercase letter*
   - *One (1) lowercase letter*
   - *One (1) number*
   - *One (1) special character, such as !, @, #, $, etc.*

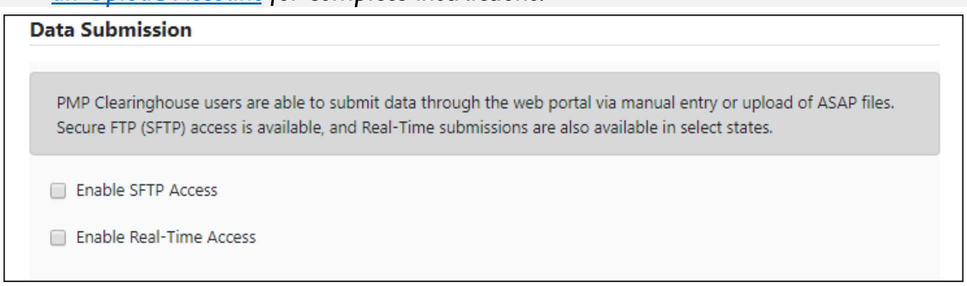
3. Complete your **Personal** and **Employer** information, noting the following:
   - Required fields are marked with an asterisk (*).
   - You may be able to auto-populate your Personal and/or Employer information by entering your (or your employer's) **DEA**, **NPI**, and/or **NCPDP** number, then clicking the search icon ( ). If the number you entered is found, your information will automatically be populated.



4. If secure file transfer protocol (SFTP) is required, complete the **Data Submission** section of the page.

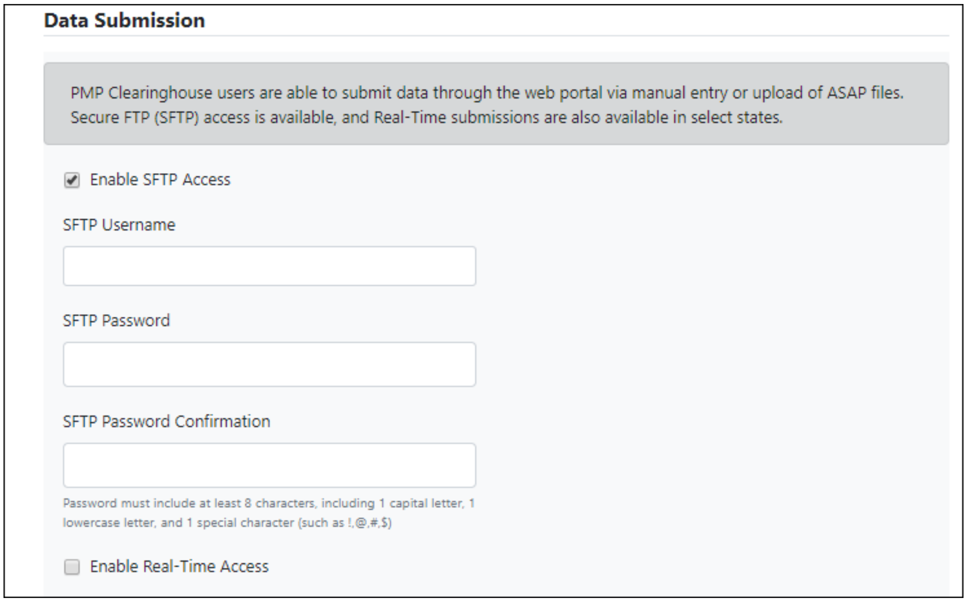
Notes:

- *If SFTP access is not required, you do not need to complete the Data Submission section and you may continue to step 5.*
- *You may add SFTP access to an existing account. Please refer to [Adding SFTP Access to an Upload Account]() for complete instructions.*



a. Click to select the **Enable SFTP Access** checkbox.

The SFTP access fields are displayed.



b. Your **SFTP Username** is automatically generated using the first five characters of your employer's name + your employer's phone number. For example, if you entered "Test" as your employer's name and "555-555-5555" as your employer's phone number, your SFTP username would be *test5555555555*.

c. Enter a password for your SFTP account in the **SFTP Password** field, then re-enter it in the **SFTP Password Confirmation** field. The password requirements are provided below.

Passwords must contain:

- *At least eight (8) characters*
- *One (1) uppercase letter*
- *One (1) lowercase letter*
- *One (1) number*
- *One (1) special character, such as !, @, #, $, etc.*

This password will be input into the pharmacy software so that submissions can be automated.

Notes:

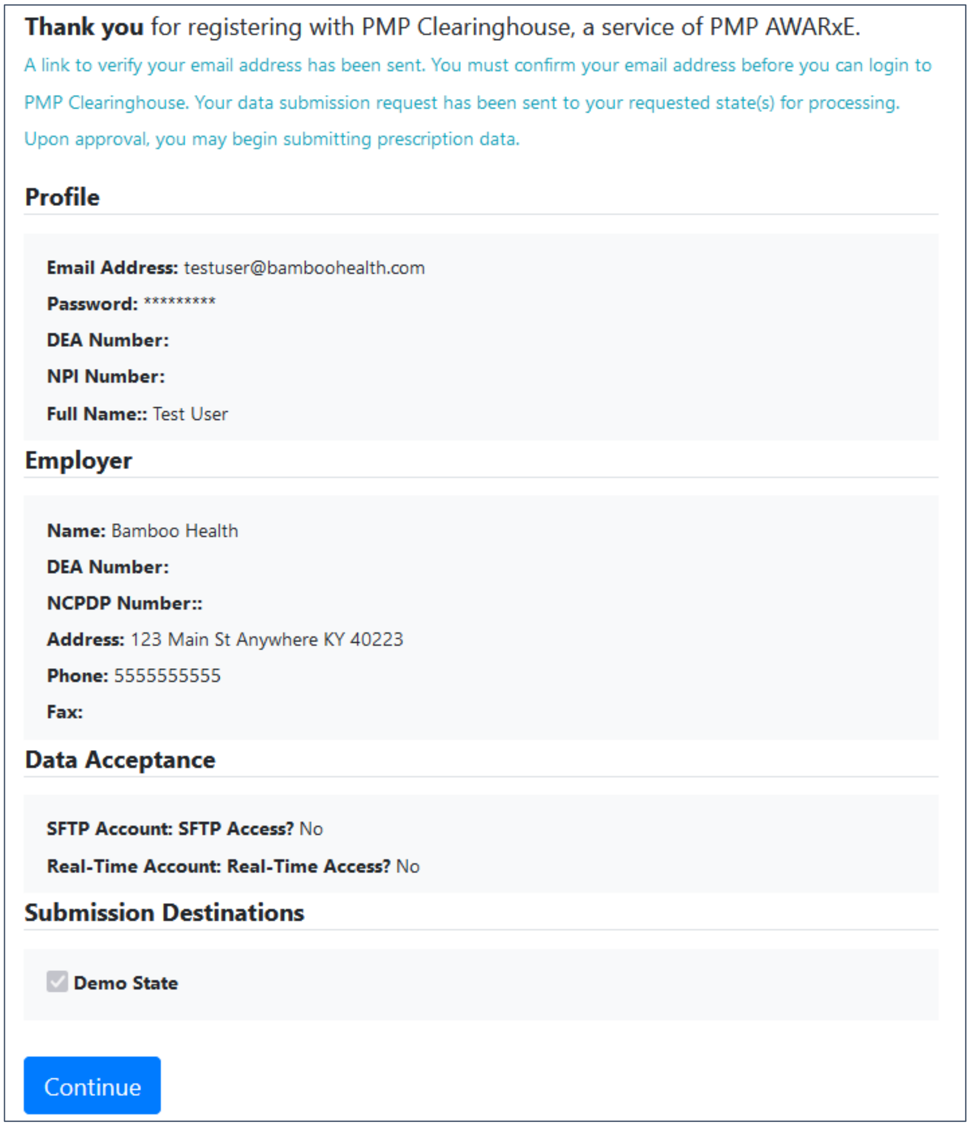
- *This password can be the same as the one previously entered under **Profile**.*
- *Unlike the Profile password (i.e., your user account password), the SFTP password does not expire.*
- *The URL to connect via SFTP is http://submissions.healthcarecoordination.net/.*
- *Additional details on SFTP configuration can be found in* *Appendix C: SFTP Configuration*.

5. In the **Submission Destinations** section of the page, select the PMP(s) for which you will be submitting data.

   Note: *Selecting multiple PMPs to which to submit data* ***does not*** *enable interstate sharing.*

6. Click **Submit**.

   The request is submitted to the PMP administrator for each of the PMPs you selected for data submission, and the **Registration Information Overview** page is displayed.



Thank you for registering with PMP Clearinghouse, a service of PMP AWARxE.

A link to verify your email address has been sent. You must confirm your email address before you can login to PMP Clearinghouse. Your data submission request has been sent to your requested state(s) for processing. Upon approval, you may begin submitting prescription data.

Profile

Email Address: testuser@bamboohealth.com
Password: *********
DEA Number:
NPI Number:
Full Name:: Test User

Employer

Name: Bamboo Health
DEA Number:
NCPDP Number::
Address: 123 Main St Anywhere KY 40223
Phone: 5555555555
Fax:

Data Acceptance

SFTP Account: SFTP Access? No
Real-Time Account: Real-Time Access? No

Submission Destinations

Demo State

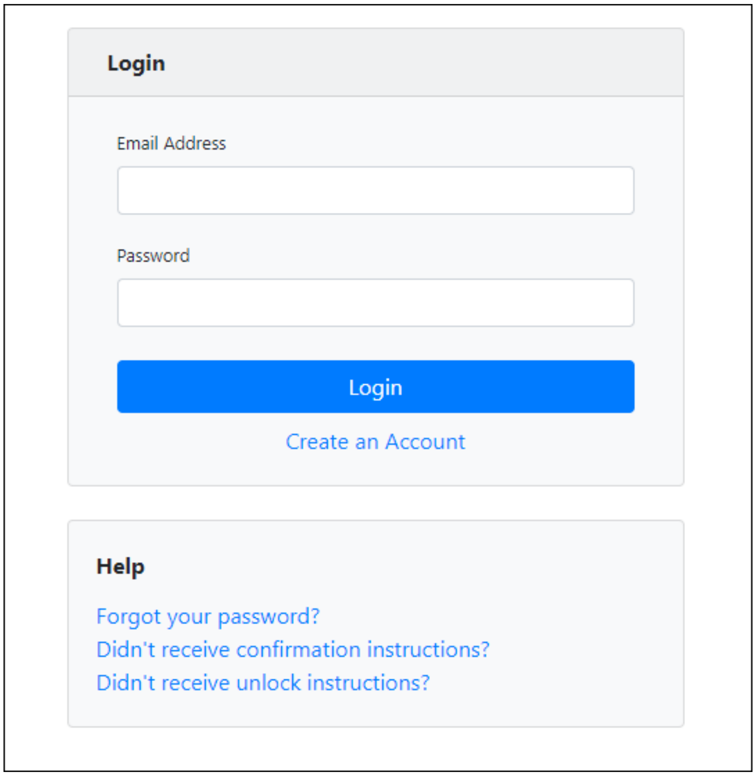
Continue

7. Click **Continue**.

   The **PMP Clearinghouse Login** page is displayed. However, you will not be able to log in until your account has been approved. Once your account is approved, you will receive a welcome email instructing you to confirm your account. Follow the instructions in the email to confirm your account and begin submitting data to PMP AWARxE.

3.2 Logging In to PMP Clearinghouse

1. Open an internet browser window and navigate to the **PMP Clearinghouse Login** page located at https://pmpclearinghouse.net/users/sign_in.

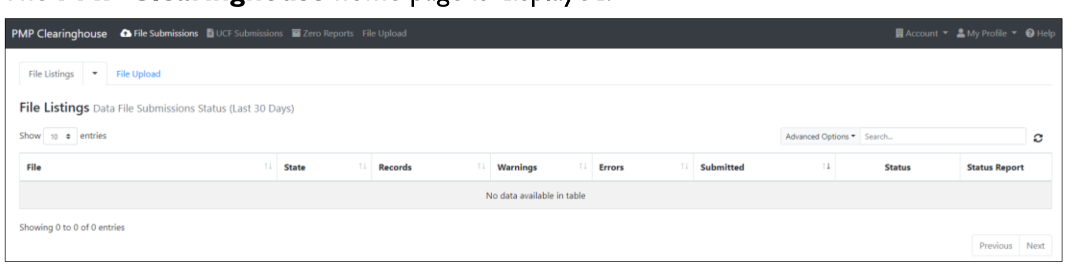


2. Enter the email address you used to create your account in the **Email Address** field.
3. Enter your password in the **Password** field.

Note: *If you have forgotten your password, have completed your registration but did not receive the account confirmation email, or your account has been locked and you did not receive the email with instructions for unlocking your account, please refer to the links in the* ***Help*** *section of the page. For detailed instructions on resetting your password, refer to [Resetting Your Password](#).*

4. Click **Login**.

The **PMP Clearinghouse** home page is displayed.



4 Data Submission

This chapter provides information and instructions for submitting data to the PMP Clearinghouse repository.

4.1 Timeline and Requirements

- Pharmacies and software vendors can establish submission accounts and begin submitting data upon receipt of this guide. See Creating Your Account for more information.
- As of November 20, 2015, dispensers are required to transmit their data using PMP Clearinghouse in accordance with the guidelines outlined under Reporting Requirements.

4.2 Upload Specifications

Files should be in the ASAP 4.2B format, which was released in September 2011, as defined in Appendix A: ASAP 4.2B Specifications. Files for upload should be named in a unique fashion, with a prefix constructed from the date (YYYYMMDD) and a suffix of ".dat". An example file name would be "20220415.dat". All of your upload files will be kept separate from the files of others.

Reports for multiple dispensers/pharmacies can be in the same upload file in any order.

Prescription information must be reported daily for the preceding 24 hours. This includes zero reporting if there has been no dispensing.

5 Data Delivery Methods

This chapter provides information about data delivery methods you can use to upload your controlled substance reporting data file(s) to PMP Clearinghouse.

For quick reference, you may click the desired hyperlink in the following table to view the step-by-step instructions for your chosen data delivery method:

5.1 Secure FTP

If you are submitting data to PMP Clearinghouse using SFTP, you must configure individual subfolders for the PMP systems to which you are submitting data. These sub-folders must be created in the *homedir/directory* folder, which is where you are directed once authenticated, and **should be named using the PMP abbreviation (e.g., SC, DC, GU, KS, MS, PR, etc.).** Data files not submitted to a PMP subfolder will be required to have a manual PMP assignment made on the File Listings page. Please refer to PMP Subfolders for additional details on this process.

1. If you do not have a PMP Clearinghouse account, perform the steps in Creating Your Account.

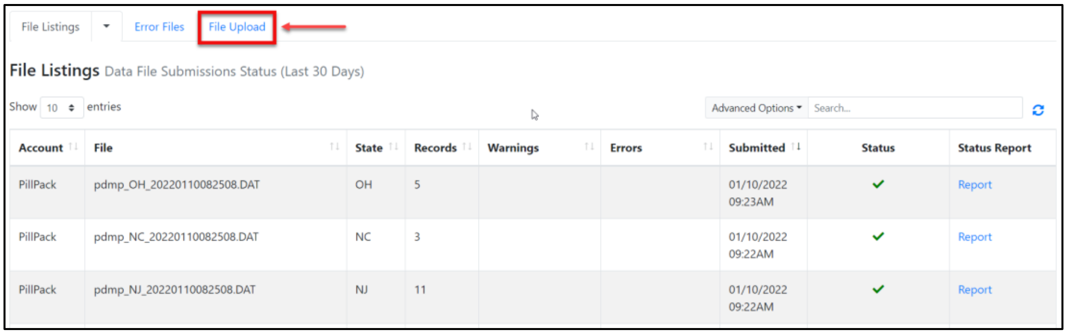
   Or
2. If you have a PMP Clearinghouse account but have not enabled SFTP access, perform the steps in Adding SFTP Access to an Upload Account.
3. Prepare the data file(s) for submission, using the ASAP specifications described in Appendix A: ASAP 4.2B Specifications.
4. SFTP the file to sftp://sftp.pmpclearinghouse.net.
5. When prompted, enter the username and password you created when setting up the SFTP account.
6. Place the file in the appropriate PMP-abbreviated directory.
7. You can view the results of the transfer/upload on the Submissions page in PMP Clearinghouse.

***Note:** If you place the data file in the root directory and not a PDMP sub-folder, a ? symbol with a mouse over hint of "**Determine PMP**" is displayed on the **File Status** page, and you will be prompted to select a destination PMP to which the data should be sent.*

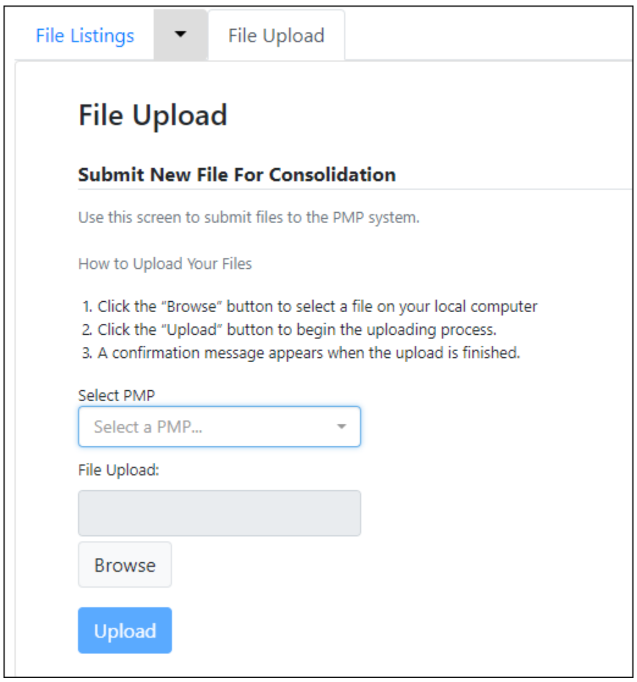
5.2 Web Portal Upload

1. If you do not have an account, perform the steps in Creating Your Account.
2. Prepare the data file(s) for submission, using the ASAP specifications described in Appendix A: ASAP 4.2B Specifications.
3. Log in to PMP Clearinghouse.

4. From the home page, click the **File Upload** tab.

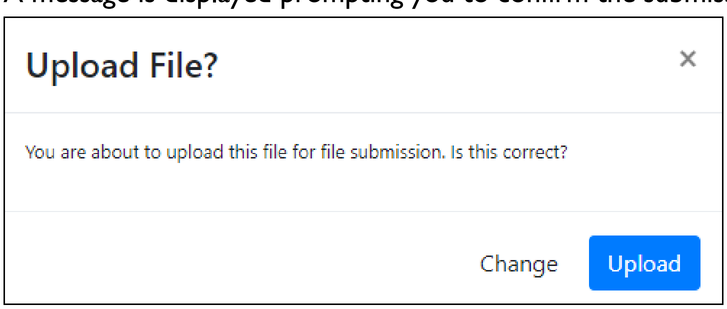


The **File Upload** page is displayed.



5. Select the PMP to which you are submitting the file from the drop-down list in the **Select PMP** field.
6. Click the **Browse** button, located next to the **File Upload** field, and select the file you created in step 2.
7. Click **Upload**.

   A message is displayed prompting you to confirm the submission.



8. Click **Upload** to continue with the file submission.

Your file is uploaded, and you can view the results of the upload on the **File Listings** page.

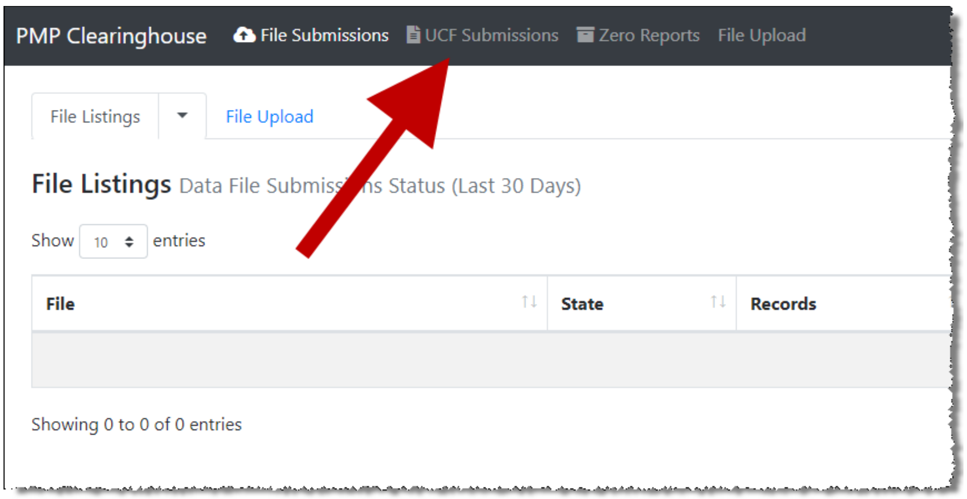
Note: *When uploading a file, the file name must be unique. If the file name is not unique, a message is displayed indicating that the file name has already been taken.*

5.3 Manual Entry (UCF)

You can manually enter your prescription information into the PMP Clearinghouse system using the Universal Claim Form (UCF) within the PMP Clearinghouse web portal. This form allows you to enter patient, prescriber, dispenser, and prescription information.

Please refer to Reporting Requirements for the complete list of reporting requirements.

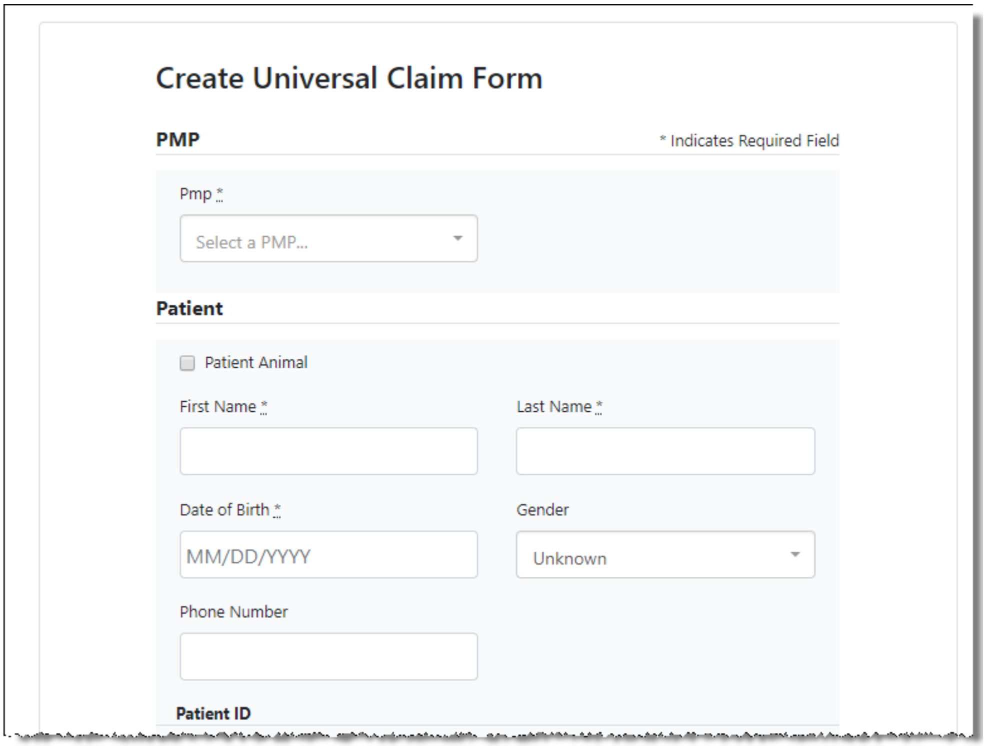
1. If you do not have an account, perform the steps in Creating Your Account.
2. Log in to PMP Clearinghouse.
3. Click **UCF Submissions**.



The **UCF Listings** page is displayed.

4. Click the **New Claim Form** tab, located at the top of the page.

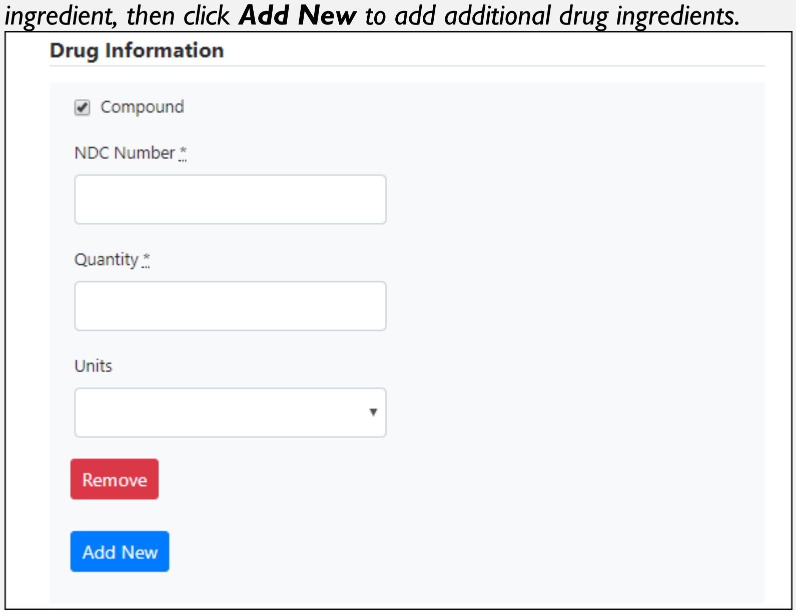
The **Create Universal Claim Form** page is displayed.



5. Select the PMP to which you are submitting data from the drop-down list in the **Select PMP** field.
6. Complete the required fields.

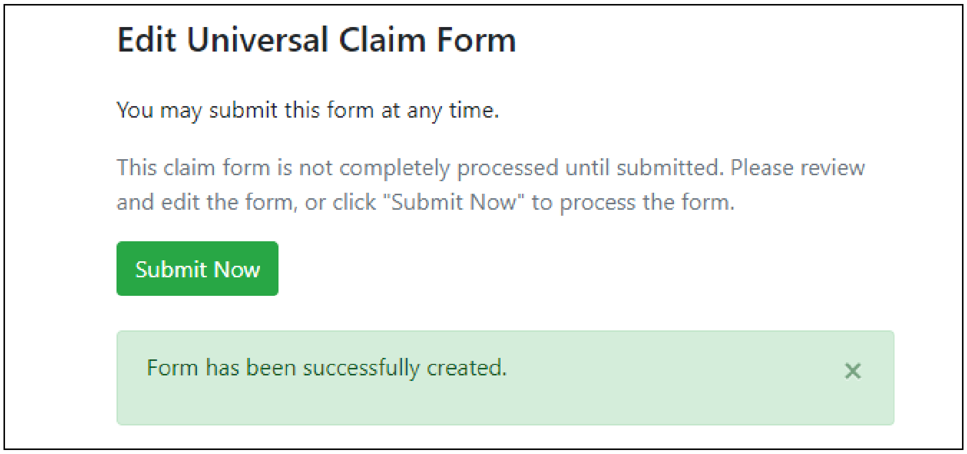
Notes:

- *An asterisk (*) indicates a required field.*
- ***If you are entering a compound**, click the **Compound** checkbox in the Drug Information section of the page, complete the required fields for the first drug ingredient, then click **Add New** to add additional drug ingredients.*



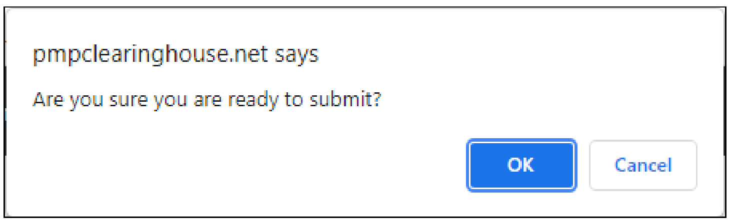
7. Once you have completed all required fields, click **Save**.

The **Submit Now** button is displayed at the top of the page.



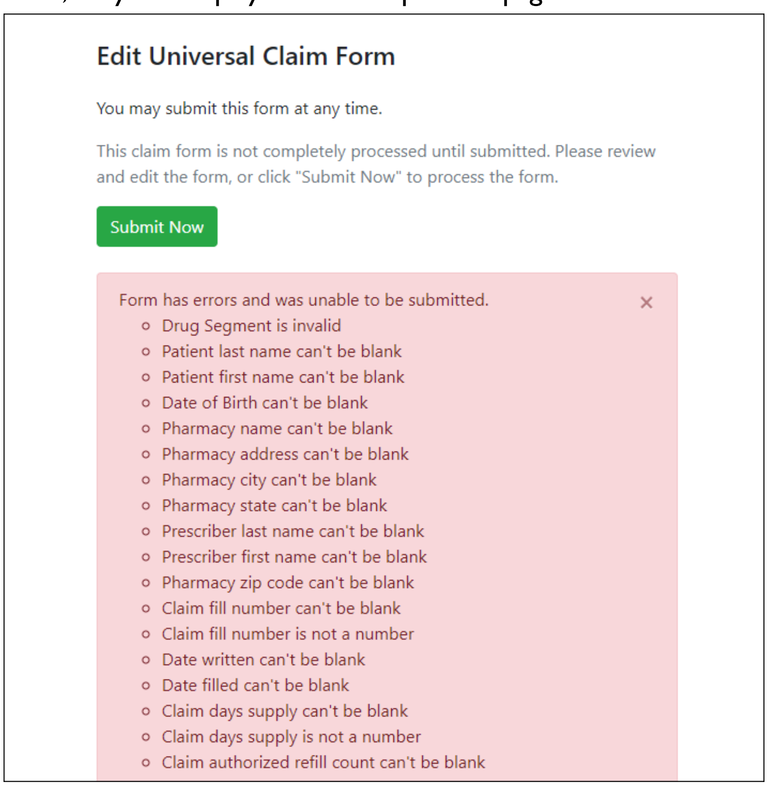
8. Click **Submit Now** to continue with the data submission process.

   A message is displayed prompting you to confirm the data submission.



9. Click **OK**.

   Your data will be validated upon submission. If there are any errors on the UCF form, they are displayed at the top of the page.



> ***Note:** If there are no errors, you are returned to the **Submitted Claim Forms** page and your report is listed there.*

10. Correct the indicated errors, then repeat steps 7–9.
11. Once your data has been successfully submitted, your report is listed on the **UCF Listings** page.

5.4 Zero Reports

If you have no dispensations to report for the preceding reporting period, you must report this information to the SC PMP.

You may submit your zero report through the PMP Clearinghouse web portal by following the steps below or via SFTP using the ASAP Standard for Zero Reports. For additional details on submitting via SFTP, please refer to Appendix B: ASAP Zero Report Specifications.

You may submit zero reports through the PMP Clearinghouse web portal using one of the following methods:

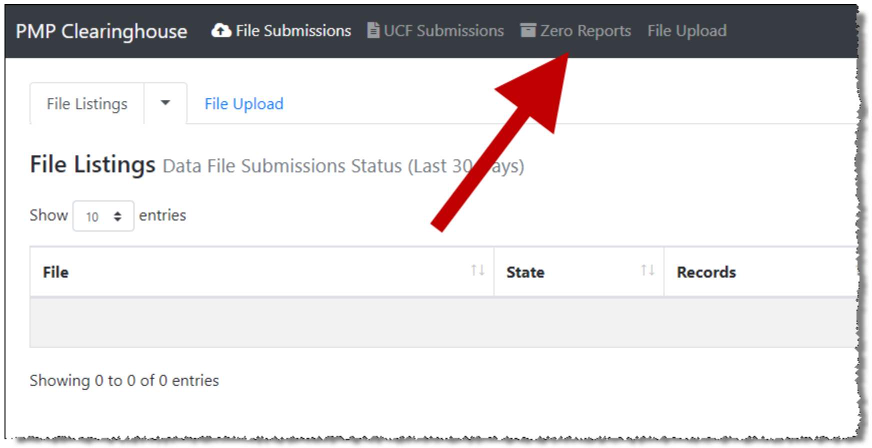
- Submit a single-click zero report
- Create a new zero report

5.4.1 Submit a Single-Click Zero Report

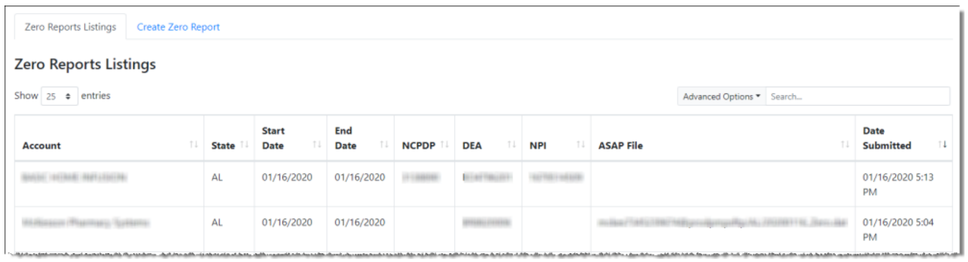
Single-click zero reporting allows you to create a profile for the pharmacy that includes its identifiers (e.g., DEA, NPI, NCPDP), so you do not have to enter it each time you submit a zero report.

To create a pharmacy profile and begin submitting single-click zero reports:

1. If you do not have an account, perform the steps in Creating Your Account.
2. Log in to PMP Clearinghouse.
3. Click **Zero Reports**.



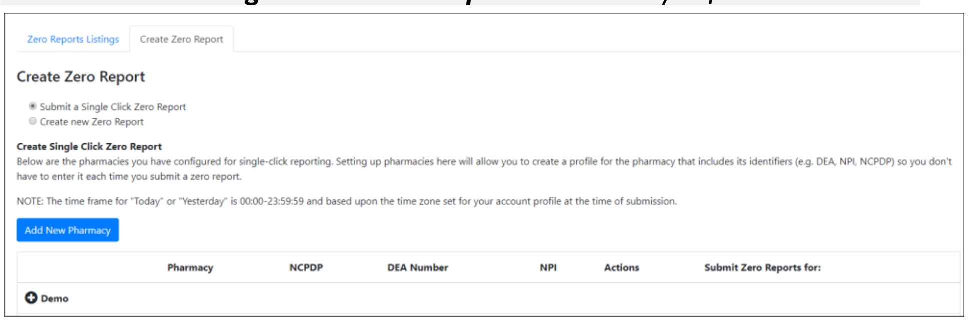
The **Zero Report Listings** page is displayed.



4. Click the **Create Zero Report** tab.

   The **Create Zero Report** page is displayed.

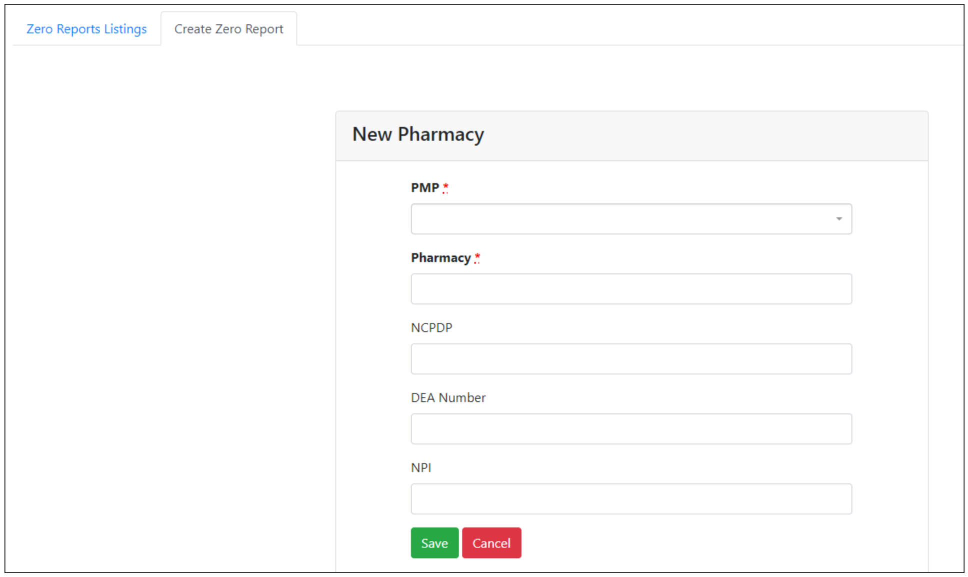
   ***Note*: *Submit a Single Click Zero Report* is selected by default.**



   - Any pharmacies you have already configured for single-click zero reporting are displayed at the bottom of the page. Continue to step 10 to submit a zero report for those pharmacies.
   - If you have not configured your pharmacy for single-click zero reporting, continue to step 5.

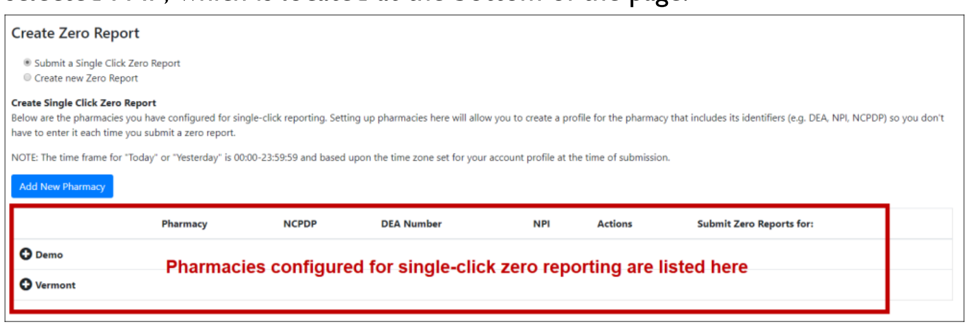
5. Click **Add New Pharmacy**.

   The **New Pharmacy** page is displayed.



6. Select the PMP for which you are submitting a zero report from the drop-down list in the **PMP** field.
7. Enter the pharmacy's name in the **Pharmacy** field.
8. Populate the **NCPDP**, **DEA Number**, and/or **NPI** fields as required by the PMP you selected in step 6. If any of these fields are required, a red asterisk (*) will be displayed next to that field once you have selected a PMP.
9. Click **Save**.

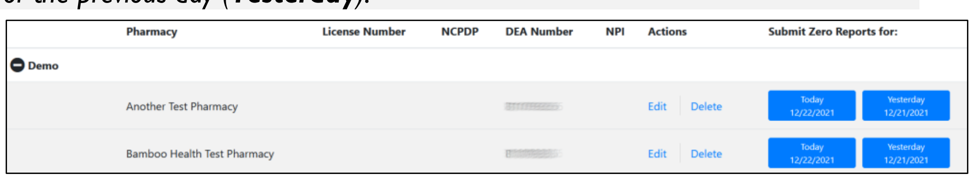
   The pharmacy is saved and will be listed under the drop-down for the selected PMP, which is located at the bottom of the page.



10. Click the plus sign ("+") next to the PMP for which you wish to submit a zero report.

    The list of pharmacies you have configured for single-click zero reporting for that PMP is displayed.

    Note: *This page allows you to submit a zero report for the current date (**Today**) or the previous day (**Yesterday**).*

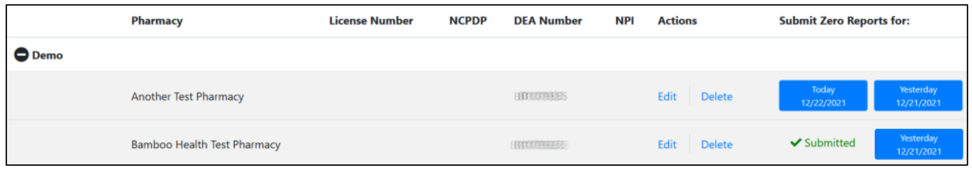


11. Click **Today** to submit a zero report for the current date;

Or

12. Click **Yesterday** to submit a zero report for the previous date.

    Once the report is submitted, the submission is indicated on the screen, and the zero report is displayed on the **Zero Report Listings** tab.

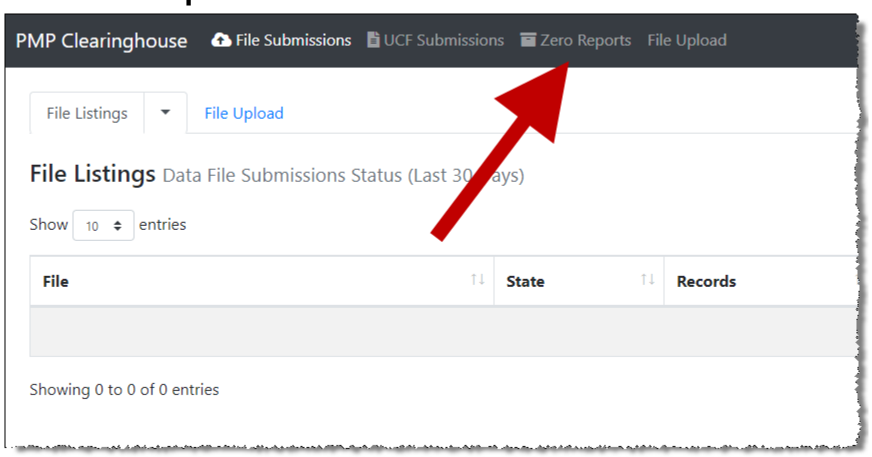


Note: *You may edit or delete a pharmacy from this page.*

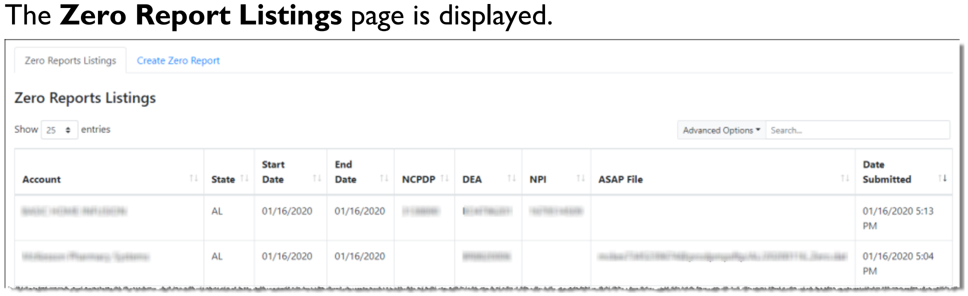
- *To edit a pharmacy, click* ***Edit*** *to display the Edit Pharmacy page and make any necessary changes. Refer to steps 6–9 for guidance on entering pharmacy information.*
- *To delete a pharmacy, click* ***Delete****. You will be prompted to confirm the deletion. Once you confirm the deletion, the pharmacy configuration will be removed.*

5.4.2 Create a New Zero Report

1. If you do not have an account, perform the steps in [Creating Your Account].
2. [Log in to PMP Clearinghouse].
3. Click **Zero Reports**.



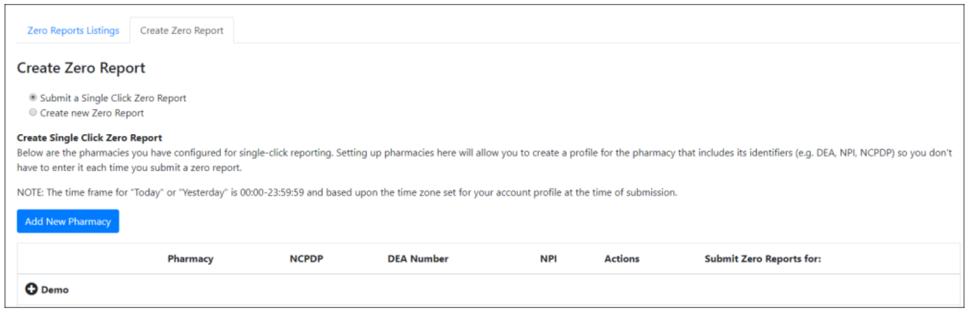
The **Zero Report Listings** page is displayed.



4. Click the **Create Zero Report** tab.

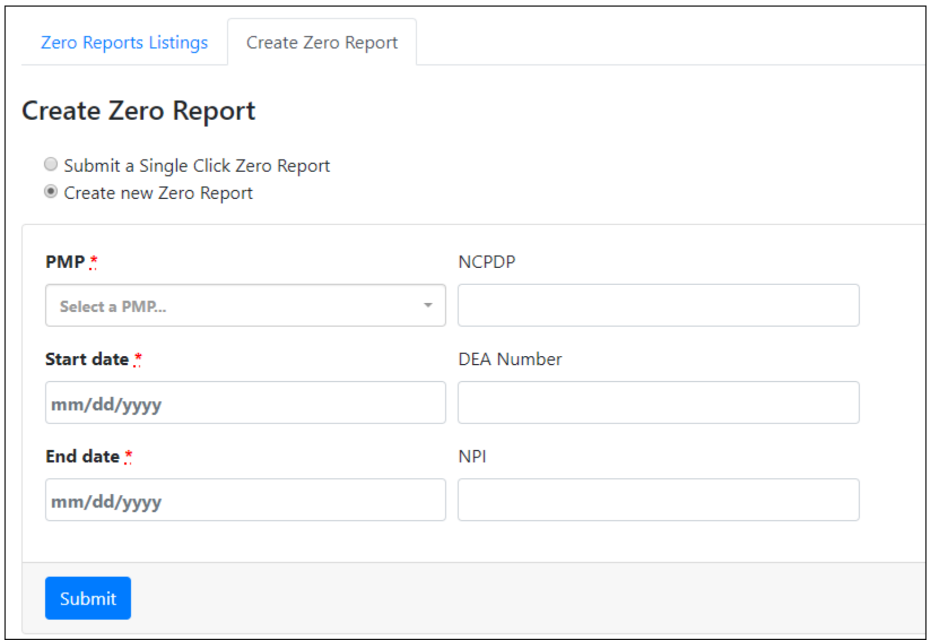
   The **Create Zero Report** page is displayed.

Note: Submit a Single Click Zero Report *is selected by default.*

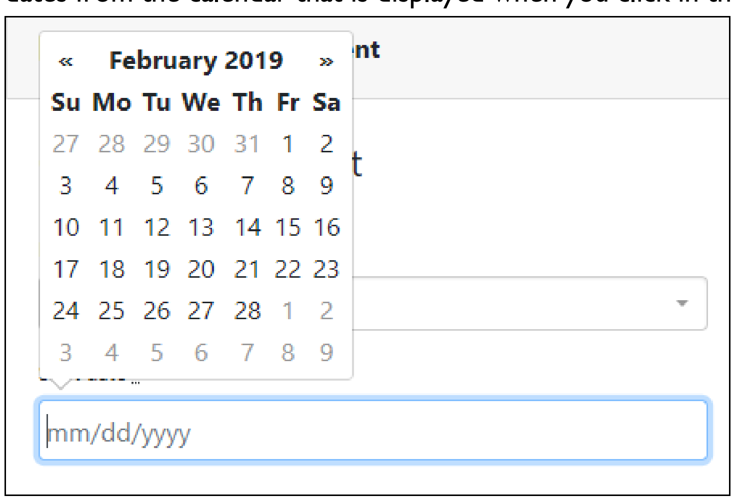


5. Click the button to select **Create new Zero Report**.

   The **Create Zero Report** page is displayed.



6. Select the PMP for which you are submitting a zero report from the drop-down list in the **PMP** field.
7. Enter the start date and end date for the zero report in the **Start date** and **End date** fields using the *MM/DD/YYYY* format. You may also select the dates from the calendar that is displayed when you click in these fields.



8. Enter your NCPDP, DEA, and/or NPI numbers, if required by your PMP.

   Note: *If any of these fields are required by your PMP, they will be marked with a red asterisk (*).*

9. Click **Submit**.

   Your zero report is submitted to PMP Clearinghouse and will be displayed on the **Zero Report Listings** tab.

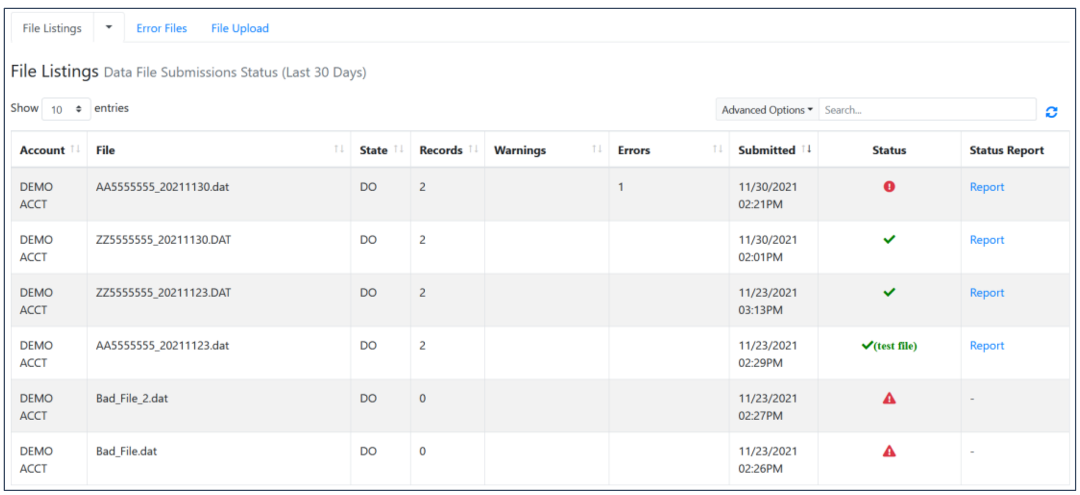
6 Data Compliance

This chapter describes how to view the status of your submitted data files and how to correct errors.

6.1 File Listings

The **File Listings** page displays information extracted from the data files submitted to PMP Clearinghouse, including the file name, number of records identified within the data file, number of records that contain warnings, number of records that contain errors, and the date and time of submission. The **File Listings** page is displayed upon logging in to Clearinghouse; you may also click **File Submissions** from the menu at any time to access this page.

You may sort the **File Listings** page by account name, file name, PMP, number of records, warning count, error count, and date submitted. You may also click the account name to display the account details.



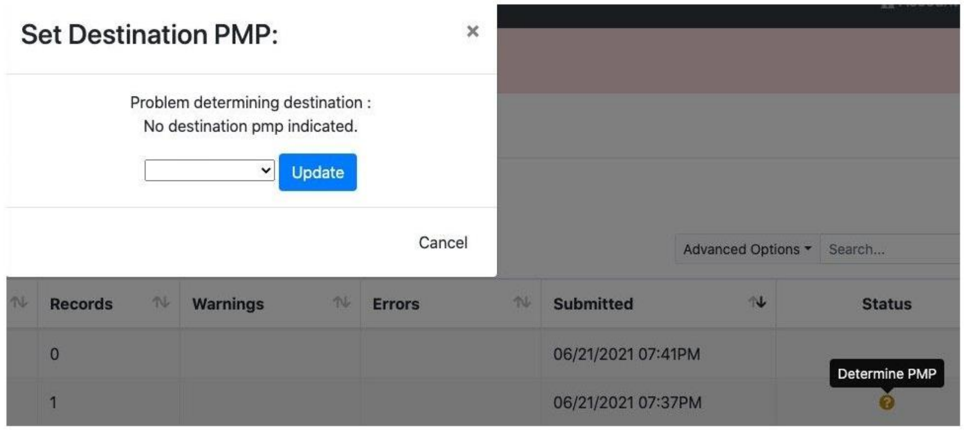
Account	File	State	Records	Warnings	Errors	Submitted	Status	Status Report
DEMO ACCT	AA5555555_20211130.dat	DO	2		1	11/30/2021 02:21PM		Report
DEMO ACCT	ZZ5555555_20211130.DAT	DO	2			11/30/2021 02:01PM		Report
DEMO ACCT	ZZ5555555_20211123.DAT	DO	2			11/23/2021 03:13PM		Report
DEMO ACCT	AA5555555_20211123.dat	DO	2			11/23/2021 02:29PM	(test file)	Report
DEMO ACCT	Bad_File_2.dat	DO	0			11/23/2021 02:27PM		-
DEMO ACCT	Bad_File.dat	DO	0			11/23/2021 02:26PM		-

- The **Status** column, located at the end of each row, displays the file status via color-coded icon. Hovering over the icon will display the status message.
- The **Status Report** column, located next to the **Status** column, contains a link to the status report for that file. Please refer to File Status Report for more information on how to read and interpret this report.

If a file contains errors, it will have a symbol with a mouse over hint of "**Pending Dispensation Error**" within the status column. You can click the error icon in the **Status** column to display the Error Correction page, which allows you to view the records containing errors (see View Records for more information). Please refer to Error Correction for instructions on how to correct errors.

If a file is unable to be parsed into the PMP Clearinghouse application, it will have an symbol with a mouse over hint of "**ASAP Errors**." Clicking the icon will display the detailed error, which indicates what element was missing or malformed. To correct these errors, a new file must be submitted to PMP Clearinghouse. It is not necessary to void a file that failed parsing since it was not successfully submitted to PMP Clearinghouse.

If you submitted a file via SFTP without using a PMP-specific sub-folder, the file will be displayed, and symbol will be displayed in the status column with a mouse over hint of "**Determine PMP**." Clicking the icon will prompt you to select a destination PMP to which the data file will be transferred.

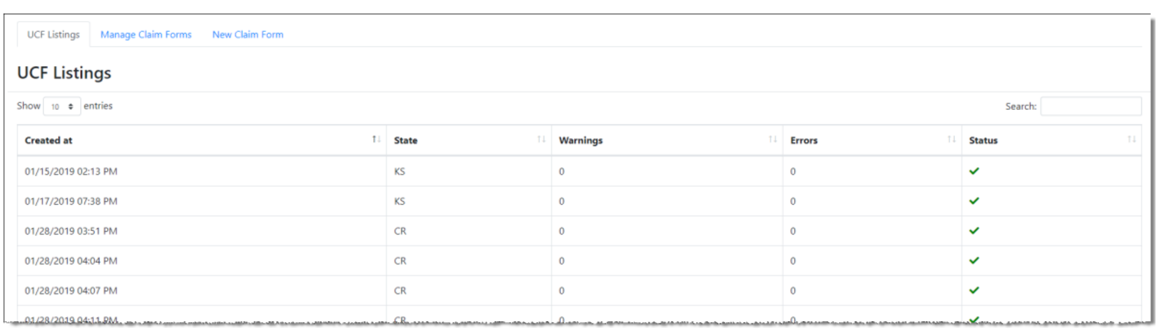


If you submitted a zero report via file upload or SFTP that is malformed or missing information, the file will be displayed, and an exclamation mark icon inside a red triangle will be displayed in the status column. Hovering over the icon will display the "Invalid Zero Report" error. Clicking on the icon will display the detailed error message. To correct these errors, a new zero report must be submitted. Error example:

6.2 UCF Listings

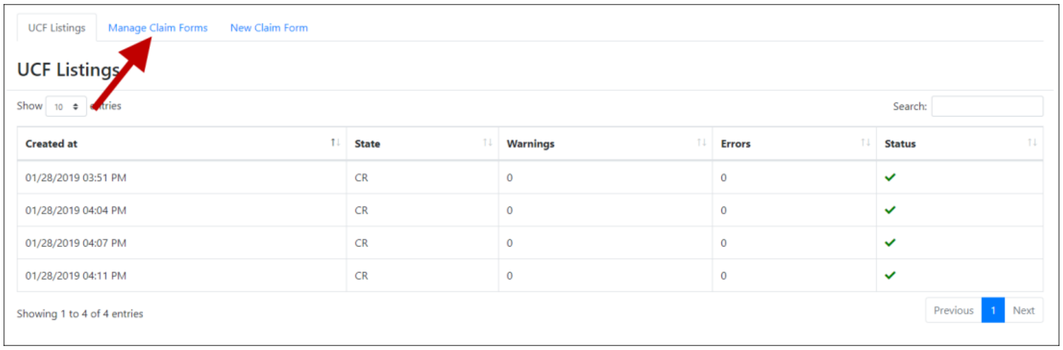
The **UCF Listings** page displays information about the UCFs submitted to PMP Clearinghouse, including the number of warnings and errors. Click **UCF Submissions** to access this page.

You may sort the **UCF Listings** page date created, PMP, warning count, error count, and status.

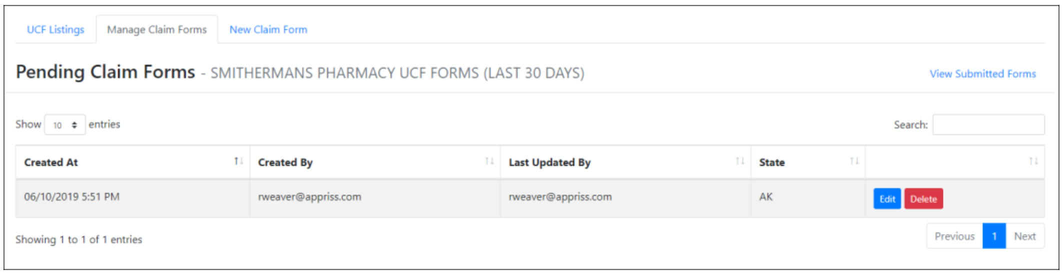


The **Status** column, located at the end of each row, displays the UCF's status. Data entered into the UCF is validated upon submission; therefore, successfully submitted UCFs should not contain errors. However, if you have attempted to submit a UCF with errors and did not immediately correct those errors and submit the record, you have up to one (1) year to make updates to these records in Clearinghouse.

1. To view pending or incomplete submissions, click the **Manage Claim Forms** tab on the **UCF Listings** page.



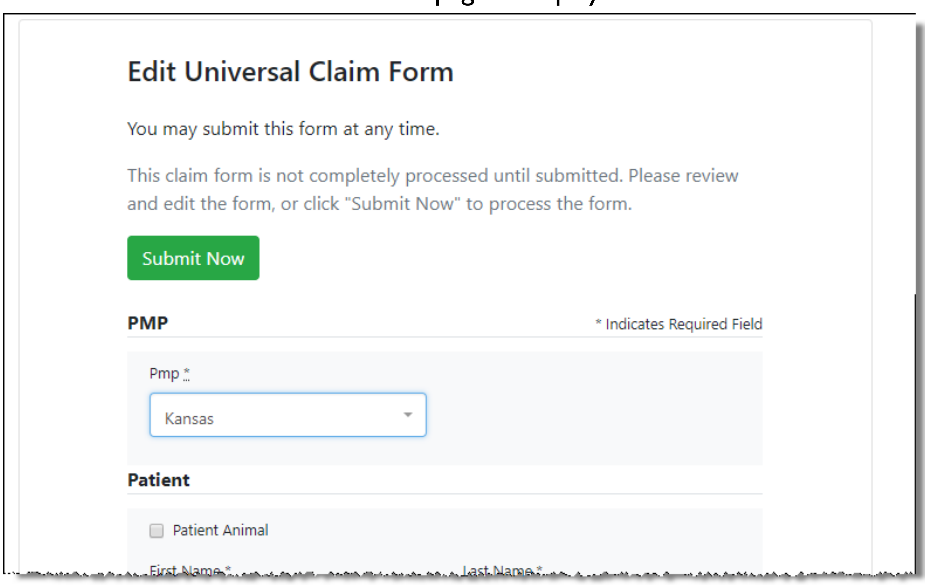
The **Pending Claim Forms** page is displayed.



2. Click **Edit** next to the form you wish to update.

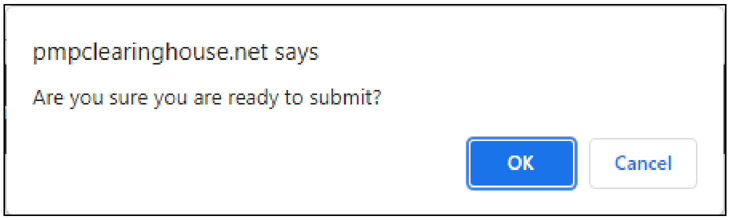
Note: *If it has been longer than one (1) year, the* ***Edit*** *option will no longer be available. You must click* ***Delete*** *to delete the record and start over.*

The **Edit Universal Claim Form** page is displayed.



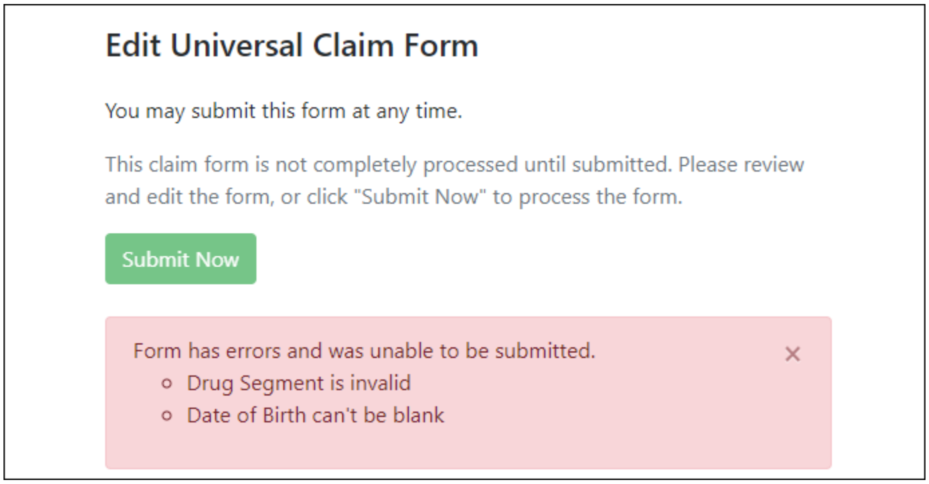
3. Make the necessary corrections or changes, and then click **Submit Now**, located at the top of the page.

A message is displayed prompting you to confirm the data submission.



4. Click **OK**.

   Your data will be validated upon submission. If there are any remaining errors on the UCF form, they are displayed at the top of the page.



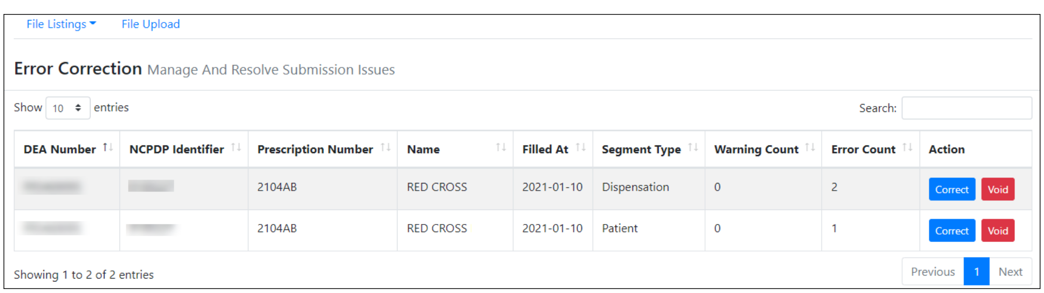
   Note: *If there are no errors, you are returned to the* ***UCF Listings*** *page and your report is listed there.*

5. Correct the indicated errors, then repeat steps 3-4.
6. Once your data has been successfully submitted, your report is listed on the **UCF Listings** page.

6.3 Error Correction

6.3.1 View Records with Errors

The **Error Correction** page displays more information about the records within a selected data file that need correcting, including **Prescription Number**, **Segment Type**, **Warning Count**, and **Error Count**. To access this page, click the "**Pending Dispensation Error**" message in the **Status** column of the File Listings page.

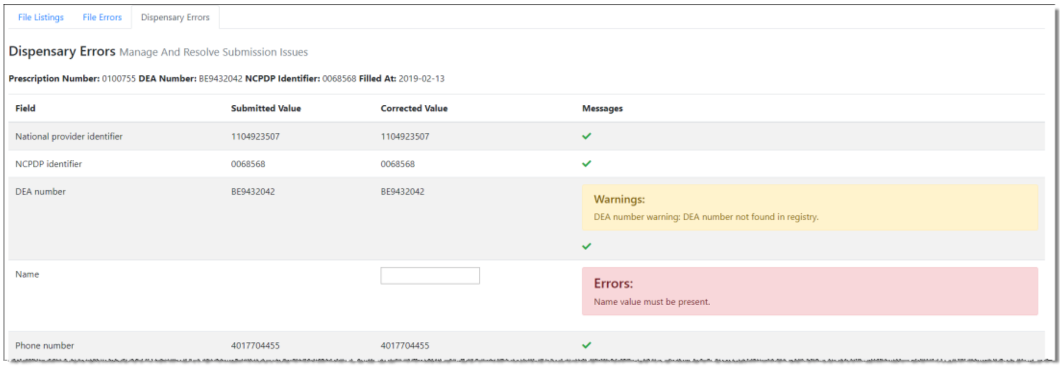


DEA Number	NCPDP Identifier	Prescription Number	Name	Filled At	Segment Type	Warning Count	Error Count	Action
[illegible]	[illegible]	2104AB	RED CROSS	2021-01-10	Dispensation	0	2	Correct Void
[illegible]	[illegible]	2104AB	RED CROSS	2021-01-10	Patient	0	1	Correct Void

The **Correct** button, located at the end of each row, allows you to make corrections to the record.

6.3.2 Error Correction via PMP Clearinghouse

Once you click **Correct** on the **Error Correction** page, the **Errors** page is displayed. This page displays detailed information about the records within a selected data file that need correcting, including all the fields contained within the record and the originally submitted value, and allows you to correct those records.



- The **Corrected Value** column allows you to enter a new value to correct the error.
- The **Messages** column displays the relevant error message explaining why the value entered in that field did not pass the validation rules.

For files that failed to parse, the error identified is "best effort" and any information we could not parse is listed as "unparseable" in the file. In this case, you must submit a corrected file.

To correct records:

1. Identify the fields that require corrections. Fields containing errors are highlighted in red, as shown in the screenshot above.
2. Enter the corrected value in the **Corrected Value** column.
3. Click **Submit**.

   The error is processed through the validation rules.

   a. If the changes pass the validation rules, the record is valid and a message is displayed indicating that the errors have been corrected. The File Listings and Error Correction pages are also updated.
   b. If the changes fail the validation rules, a message is displayed indicating that there was a problem correcting the errors, and the **Message** column is updated with any new error message. Repeat steps 2–3 until the errors have been corrected and the file can be successfully submitted.

6.3.3 Error Correction via File Submission

The ASAP 4.2b standard requires a pharmacy to select an indicator in the **DSP01** (Reporting Status) field. These indicators allow you to 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 have been revised

  To revise a record:

  a. Create a record with the value "***01***" in the **DSP01** field.
  b. Populate the following fields with the same information originally submitted in the record that is being revised:
     - **PHA03** (DEA Number)
     - **DSP02** (Prescription Number)
     - **DSP05** (Date Filled)
  c. 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.
  d. Submit the record.

  Important Note: *When submitting revisions for the Prescription Number (DSP02), Pharmacy DEA (PHA03), Date Filled (DSP05), Quantity Filled (DSP09), and/or Refill Number (DSP06) fields, a Void submission (02) on the original record should be processed before re-submitting a New Record (00). Submitting Revise (01) for one of these five fields will process as a new prescription and both submissions will appear. All other field revisions may be processed as 01.*

- **02 Void** – indicates that the original record should be removed

  To void a record:

  a. Create a record with the value "***02***" in the **DSP01** field.
  b. Fill in all other data identical to the original record.
  c. Submit the record. This will void the original record.

7 Email Reports

Email status reports are automatically sent to all users associated with a specific data submitter account. These reports are used to identify errors in files that have been submitted and to confirm zero report submissions. This chapter describes the status reports you may receive via email.

7.1 File Failed Report

You will receive the *File Failed Report* if a submitted file was not able to be parsed and was not processed into PMP Clearinghouse. The report contains a description of the error encountered within the file. In the event of a failed file, a new file should be submitted with the necessary corrections.

Note: *Failed files are not parsed into Clearinghouse and do not require a voided ASAP file to remove it from the system.*

An example *File Failed Report* is provided below.

```
SUBJ: South Carolina ASAP file: fake-test3.txt - Parse Failure

BODY:
Error Message
--------------------------------------------------------------------------
Failed to decode the value '04' for the bean id 'transactionControlType'.


Summary:
* File Name: fake-test3.txt
* ASAP Version: 4.2B
* Transaction Control Number: unparseable
* Transaction Control Type: unparseable
* Date of Submission: April 30, 2022

NOTE: This file could not be received into the system because the system could not
recognize its content as a valid ASAP format.  Action is required to resolve the issues and
a subsequent file should be submitted. As such the information provided in this report is
"best effort" and any information we could not parse is listed as "unparseable" in the
fields above.
```

7.2 File Status Report

The *File Status Report* serves as notification that a data file is currently being parsed by the PMP system.

This report identifies specific records in the submitted data file and returns identifying information about the record, including specific errors identified during the validation process. It uses fixed-width columns and contains a summary section after the error listings. Each column contains a blank two-digit pad at the end of the data.

The columns are set to the following lengths:

Column	Length
DEA	11 (9 + pad)
NCPDP	9 (7 + pad)
NPI	12 (10 + pad)
Prescription	27 (25 + pad)
Filled	10 (8 + pad)
Segment	18 (16 + pad)
Field	18 (16 + pad)
Type	9 (7 + pad)
Message	Arbitrary

The *File Status Report* notifies you of the following scenarios:

- **Total records**: The total number of records contained in the submitted data file.
- **Duplicate records**: The number of records that were identified as already existing within the PMP system. Duplicate records are not imported to prevent improper patient information.
- **Records in process**: The number of records remaining to be processed into the system (usually only displays a number if the file has not finished loading at the time the report is sent out).

  Note: *Records remaining to be processed will continue to be processed even after the status report is sent.*
- **Records with errors**: The number of records that contain errors. These errors must be corrected for the record to be imported into the system. If a zero (0) is displayed, there are no errors in the data. Please refer to Error Correction for instructions on correcting errors.
- **Records with warnings**: The number of records that contain warnings. These warnings do not need to be corrected for the record to be imported into the system. If a zero (0) is displayed, there are no warnings in the data.
- **Records imported with warnings**: The number of records with warnings that were imported. If a record contains both warnings and errors, the errors must be corrected to be submitted to the system. Please refer to Error Correction for instructions on correcting errors.
- **Records imported without warnings**: The number of records without warnings that were imported.

Note: *The initial File Status Report is sent out two (2) hours after the file has been submitted to the system. Additional reports will be sent out every 24 hours if errors continue to be identified within a submitted data file.*

An example *File Status Report* is provided on the following page.


```
SUBJ: South Carolina ASAP file: fake-test3.txt - Status Report

BODY:
DEA        NCPDP    NPI         Prescription        Filled    Segment       Field          Type     Message
--------------------------------------------------------------------------------------------------------------------
BE1234567  1347347  9034618394  123486379596-0      20220429  Dispensation  refill_number  WARNING  message example
DE9841394  3491849  4851947597  357199504833-345    20220429  Dispensation  days_supply    ERROR    message example


Summary:
* File Name: fake-test3.txt
* ASAP Version: 4.2B
* Transaction Control Number: 23489504823
* Transaction Control Type: send
* Date of Submission: April 30, 2022
* Total Record Count: ###
* Duplicate Records: ###
* In Process Count: ###
* Records with Error Count: ###
* Imported Records Count: ###
* Records Imported with Warning Count: ###
```

7.3 Zero Report Confirmation

You will receive a *Zero Report Confirmation* after successfully submitting a zero report to PMP Clearinghouse. This report displays the PMP to which the zero report was submitted, date range for the zero report, date the zero report was submitted to PMP Clearinghouse, and date the report was originally created.

An example of *Zero Report Confirmation* is provided below.

SUBJ: ASAP Zero Report: zero_reports_20220306KSMCPS.DAT BODY: Summary: * File Name: zero_reports_20220306KSMCPS.DAT * PMP Name: South Carolina * Date Range: 2022-03-06 - 2022-03-06 * Submission Date: 2022-03-07 * ASAP Creation Date: 2022-03-06

8 Managing Your Upload Account

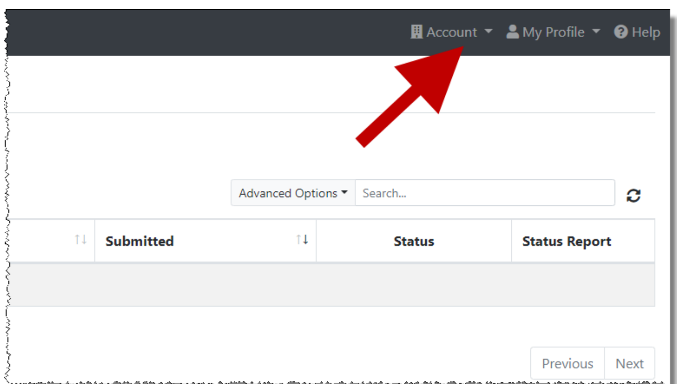
The **Account** menu option allows you to manage the information associated with your organization's upload account, including adding users, PMPs, and SFTP access to your account as well as editing your organization's account information.

Note: *This chapter contains information for managing the upload account with which your user account is associated. For information about editing and managing your individual user account, including how to change your password, please refer to [Managing Your User Profile](#).*

8.1 Adding Users to Your Upload Account

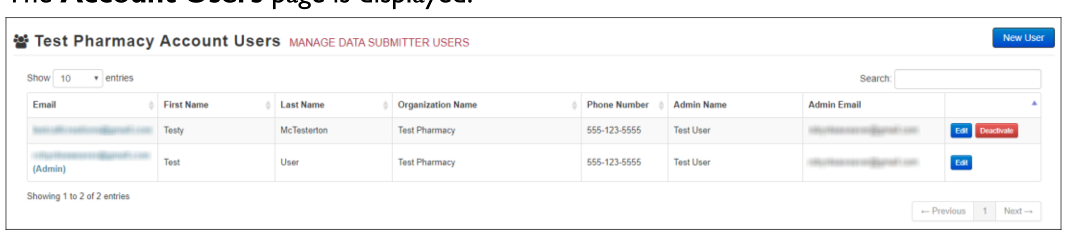
PMP Clearinghouse allows data submitters to add new users to the system who have the same rights and access to submitting data and viewing file status. This practice allows you to create an account to be used for a backup individual.

1. [Log in to PMP Clearinghouse](#).
2. Click **Account**.



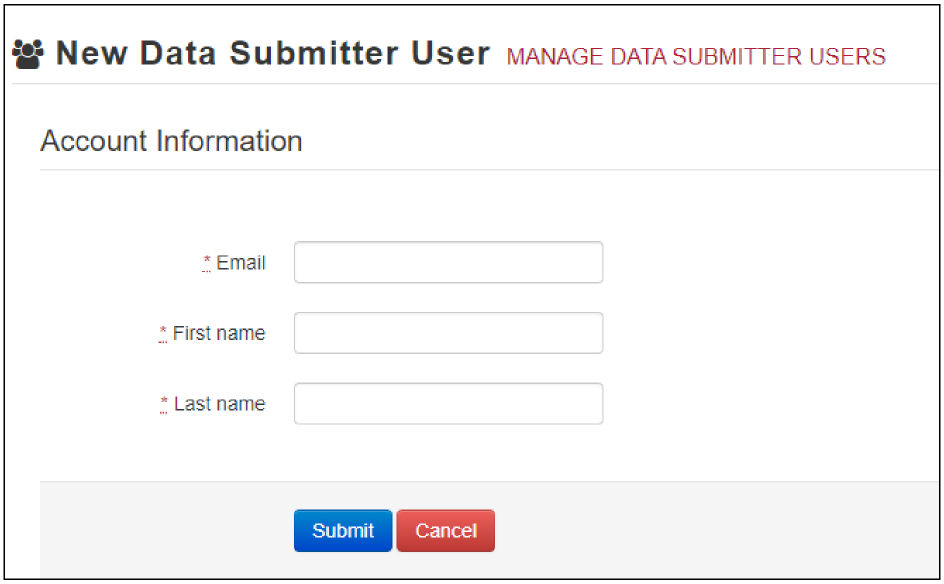
3. Select **Users** from the **Account** drop-down menu.

   The **Account Users** page is displayed.



4. Click **New User**, located in the top right corner of the page.

The **New Data Submitter User** page is displayed.



5. Enter the new data submitter's email address, first name, and last name in the appropriate fields.

   ***Note**: All fields are required.*

6. Click **Submit**.

   The user is added to the list of data submitters for your organization, and you are returned to the **Account Users** page.

7. Please inform the new user of the account creation.

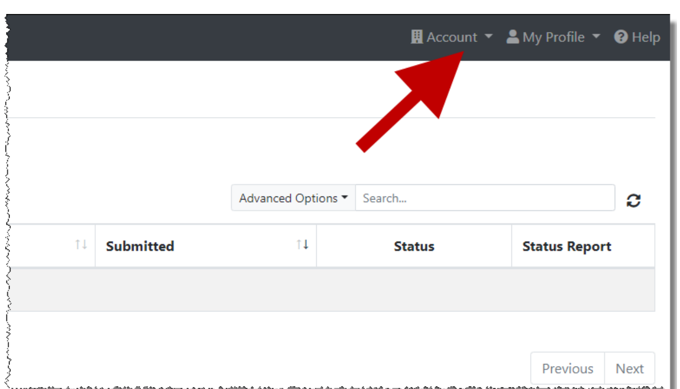
   a. The user will receive an email with a link for them to confirm their account.

   b. Once the account has been confirmed, the user will need to navigate to the PMP Clearinghouse Login page and click **Forgot your password?** to create a password for their account and log in.

   c. Upon logging in, the user will be able to view all files submitted for your organization's upload account.

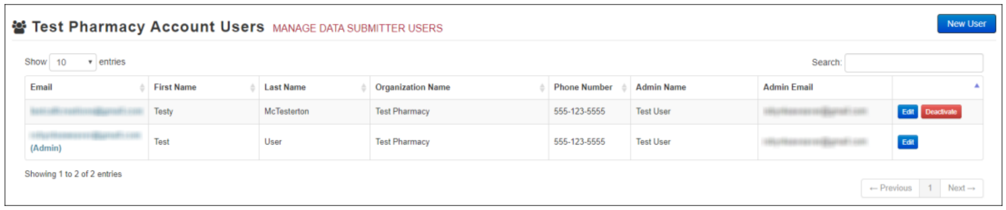
8.1.1 Changing Another User's Password

1. [Log in to PMP Clearinghouse](#).
2. Click **Account**.



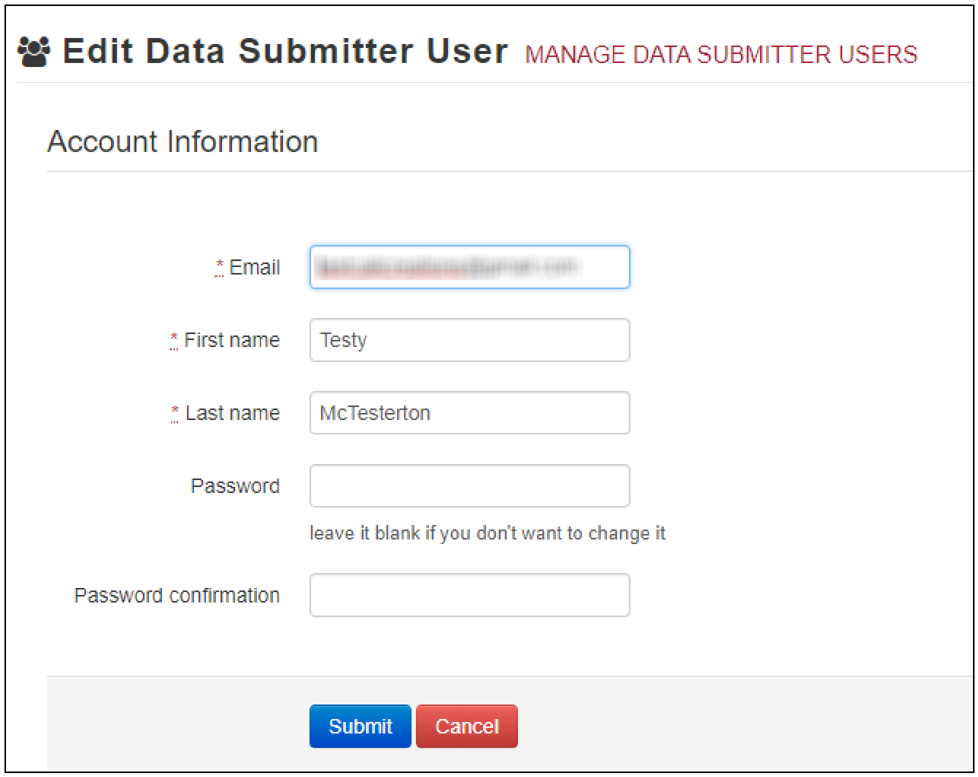
3. Select **Users** from the **Account** drop-down menu.

The **Account Users** page is displayed.



4. Click the **Edit** button, located to the right of the user's information.

   The **Edit Data Submitter User** page is displayed.



5. Enter a new password for the user in the **Password** field, then re-enter it in the **Password confirmation** field. The password requirements are provided below.

   Passwords must contain:

   - *At least eight (8) characters*
   - *One (1) uppercase letter*
   - *One (1) lowercase letter*
   - *One (1) number*
   - *One (1) special character, such as !, @, #, $, etc.*

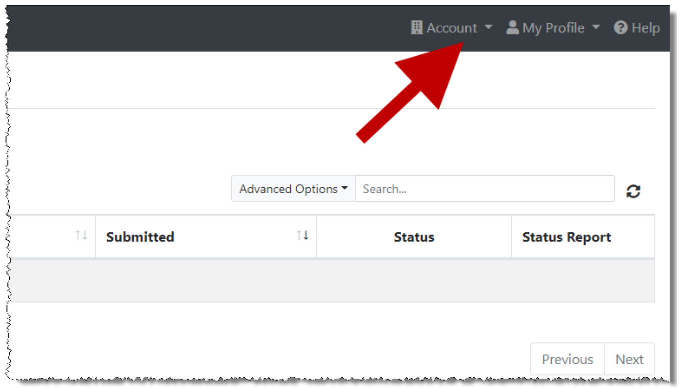
6. Click **Submit**.

   The password is changed.

8.2 Adding PMPs to Your Upload Account

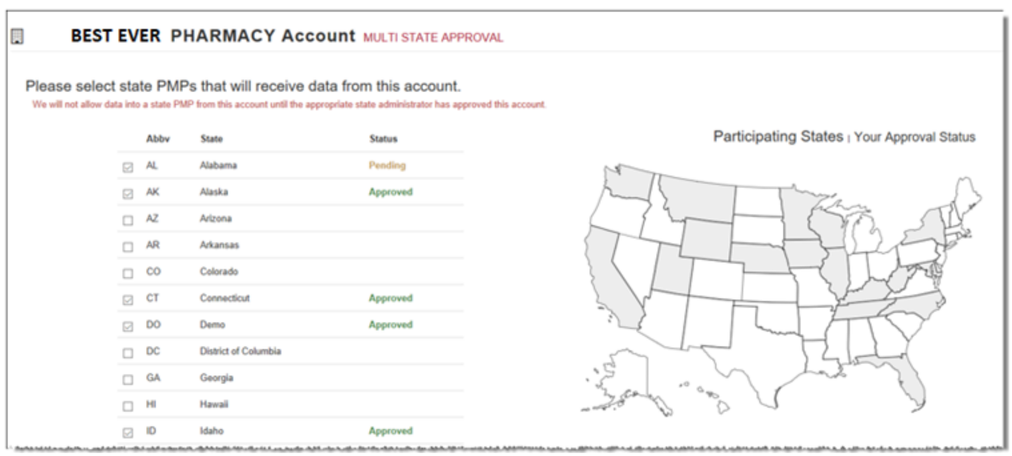
If your organization needs to submit data files to an additional PMP that uses PMP AWARxE, you can submit the request through PMP Clearinghouse.

1. Log in to PMP Clearinghouse.
2. Click **Account**.



3. Select **Multi State Approval** from the **Account** drop-down menu.

   The **Multi State Approval** page is displayed. This page displays all PMPs currently using the PMP AWARxE system as well as your data sharing status with each PMP.



4. To request to submit data to another PMP, click to select the checkbox next to that PMP.

   PMP Clearinghouse automatically saves your changes, and your request is submitted to the PMP administrator for review and approval. Once the request has been approved, the status for that PMP will change from "*Pending*" to "*Approved*," and you may begin submitting data to that PMP.

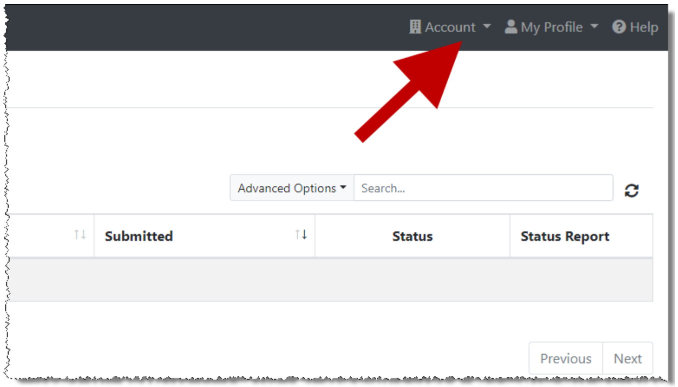
Notes:

- *If you are submitting data via SFTP, the file must be located in the proper sub-folder to ensure delivery to the desired PMP.*
- *To cancel data submission to a PMP, uncheck the box for that PMP. Note that if you need to submit data to that PMP again in the future, you will have to go through the approval process again.*

8.3 Adding SFTP Access to an Upload Account

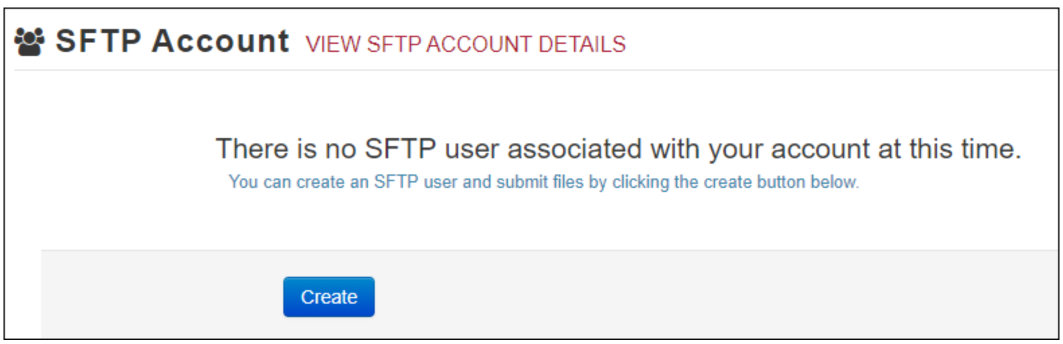
If a registered upload account did not request an SFTP account during the account creation process, you can request one at any time using the **Account** menu option.

1. [Log in to PMP Clearinghouse](#).
2. Click **Account**.

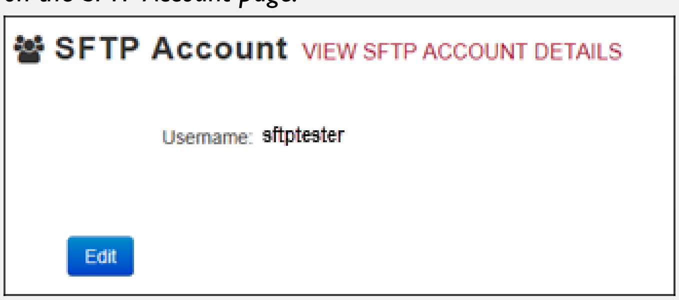


3. Select **SFTP Details**.

The **SFTP Account** page is displayed.



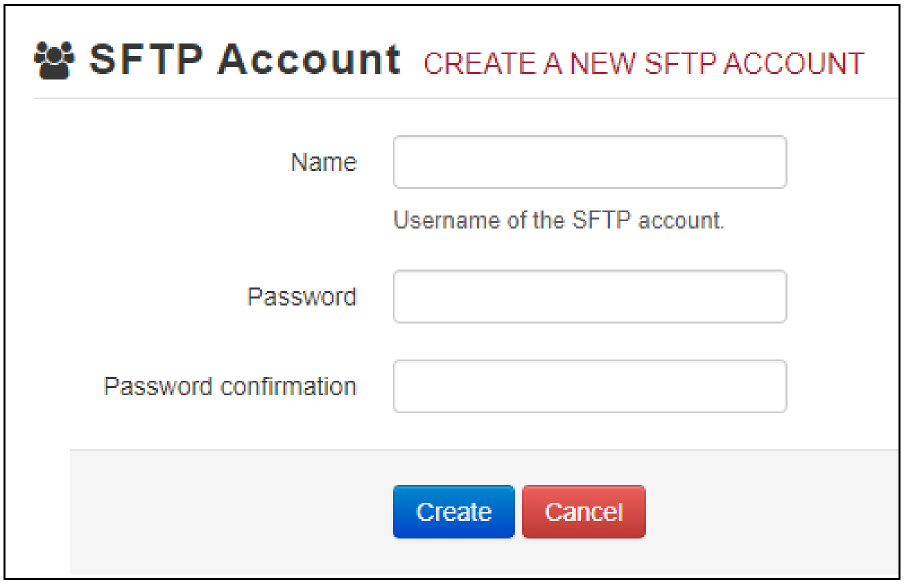
Note: *If an SFTP account already exists for the upload account, the username is displayed on the SFTP Account page.*



*You cannot change the SFTP account username. However, you can update the password by clicking **Edit**.*

4. Click **Create**.

The **Create a New SFTP Account** page is displayed.



5. Enter a username for the account in the **Name** field.

   Notes:

   - *The username must contain a minimum of eight (8) characters.*
   - *Once the SFTP account has been created, you cannot change the username.*

6. Enter a password for the account in the **Password** field, then re-enter it in the **Password confirmation** field. The password requirements are provided below.

   Passwords must contain:

   - *At least eight (8) characters*
   - *One (1) uppercase letter*
   - *One (1) lowercase letter*
   - *One (1) number*
   - *One (1) special character, such as !, @, #, $, etc.*

   Once the account has been successfully created, this password will be input into the pharmacy software so that submissions can be automated.

   Notes:

   - *This password can be the same as the one used when the upload account was created.*
   - *Unlike your Profile password (i.e., your user account password), the SFTP password does not expire.*
   - *The URL to connect via SFTP is http://submissions.healthcarecoordination.net/.*
   - *Additional details on SFTP configuration can be found in Appendix C: SFTP Configuration.*

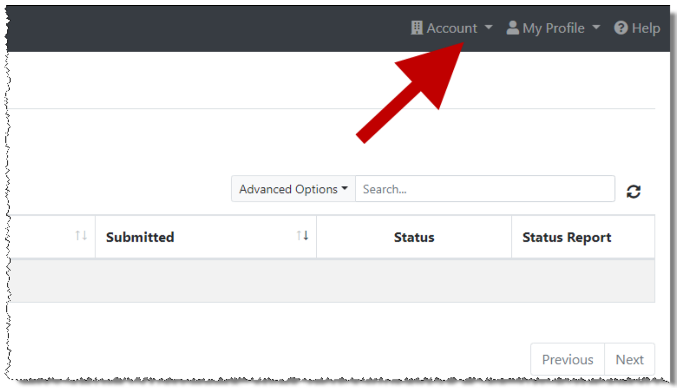
7. Click **Create**.

   The account is created, and the username is displayed.

8.4 Editing Your Upload Account

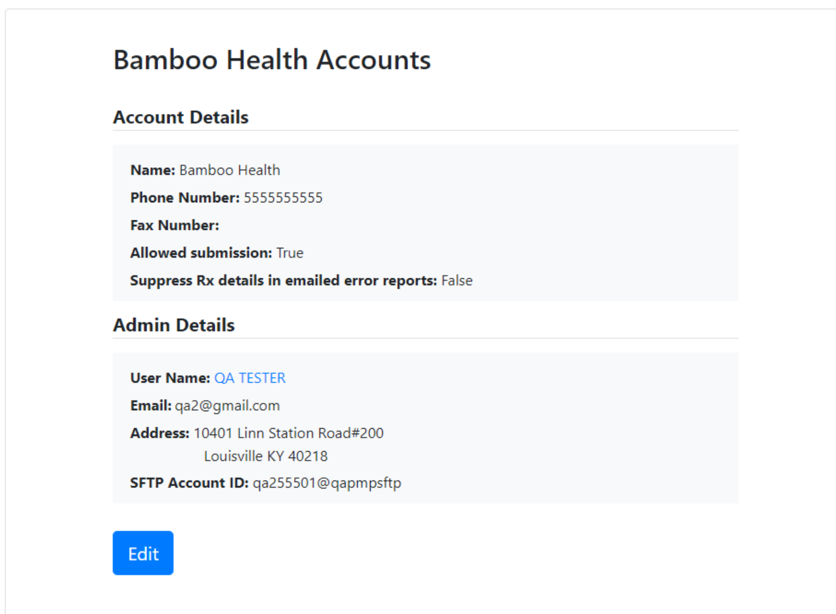
Note: *This function only allows you to edit your organization's upload account. If you need to edit your individual profile information, please refer to [Editing Your Profile](#).*

1. [Log in to PMP Clearinghouse](#).
2. Click **Account**.



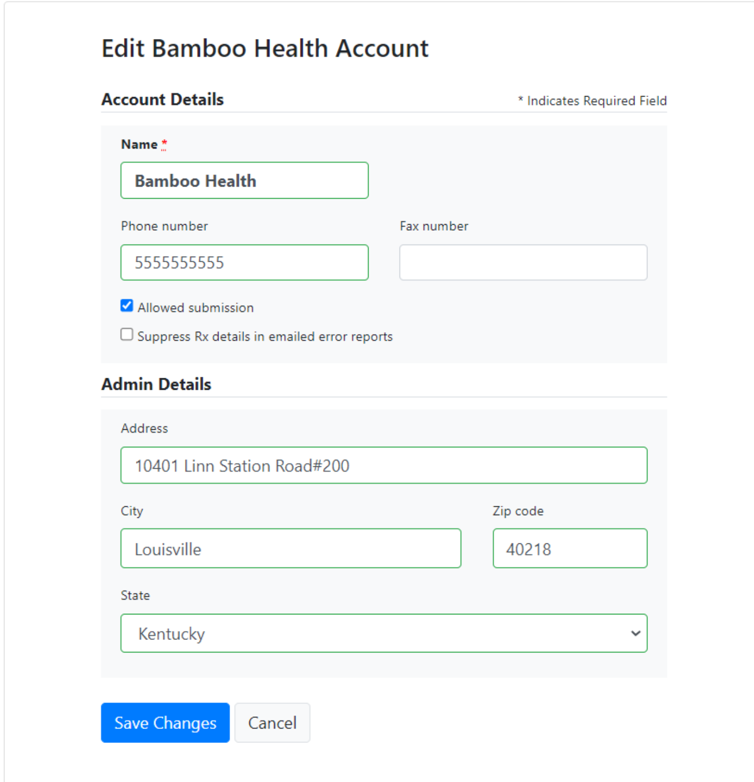
3. Select **Account Details**.

   The **Account** page is displayed as shown on the following page.



4. Click **Edit**.

   The **Edit Account** page is displayed.



5. Update the information as necessary, then click **Save Changes**.
   The account information is updated.

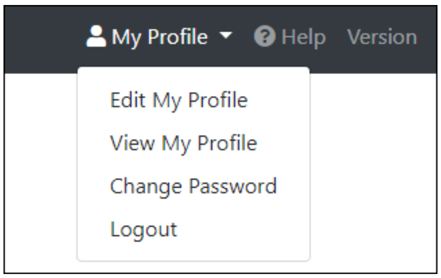
9 Managing Your User Profile

This chapter describes how to manage your individual user profile, including how to edit your profile and manage your password.

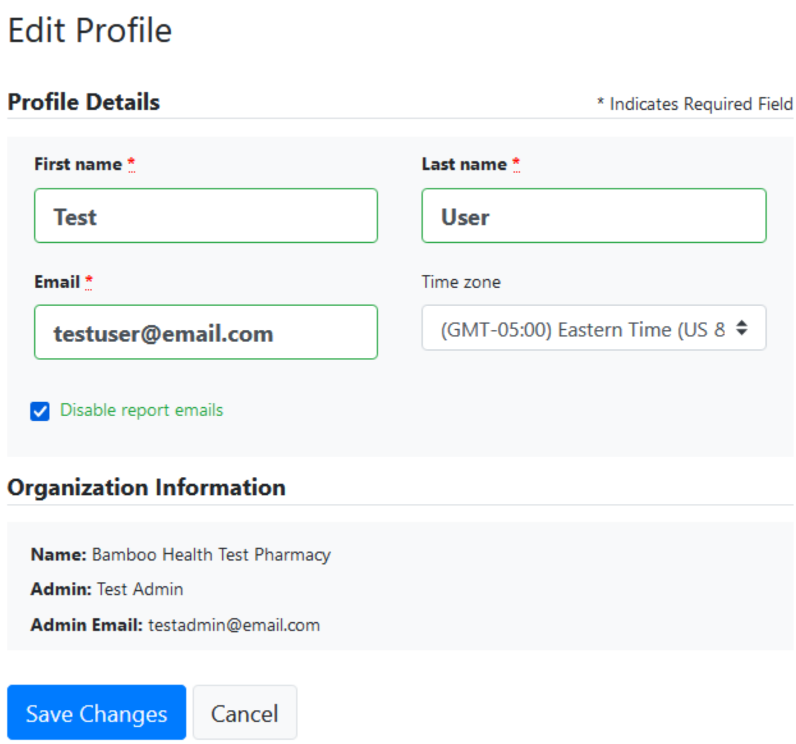
Note: *This chapter contains information for managing your individual user profile. For information about managing your organization's upload account, including how to add users, please refer to [Managing Your Upload Account](#).*

9.1 Editing Your Profile

1. [Log in to PMP Clearinghouse](#).
2. Click **My Profile**.



3. Select **Edit My Profile**.



4. Update your information as necessary, then click **Save Changes**.

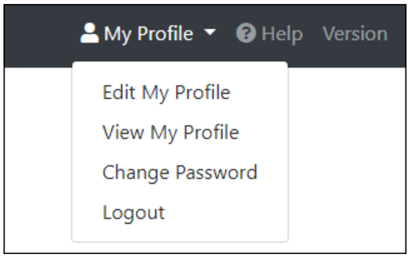
Note: *This function only allows you to edit your individual profile information. If you need to edit the Organization Information, please refer to [Editing Your Upload Account](#).*

Your changes are saved, and your updated profile is displayed.

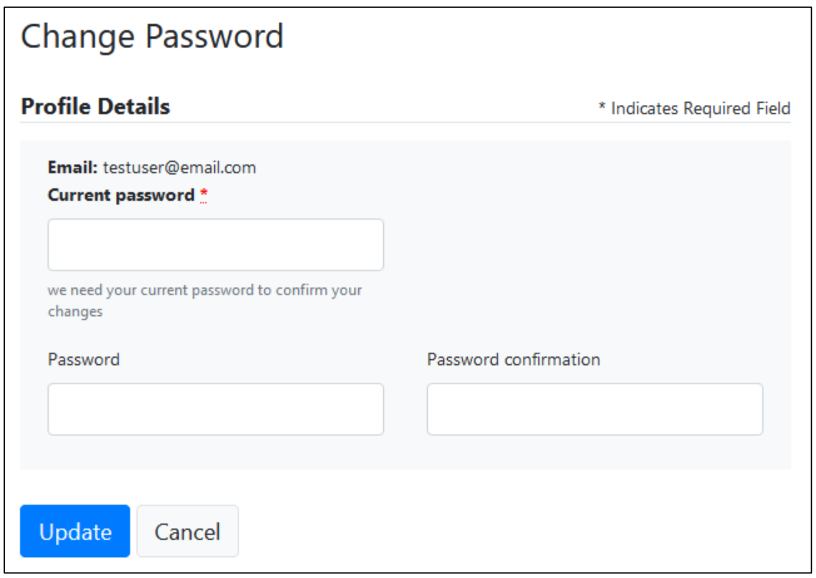
9.2 Changing Your Password

Note: *Clearinghouse passwords expire every 90 days. You can use this function to proactively change your password before it expires. If your password has already expired, or you have forgotten your password, navigate to the PMP Clearinghouse Login page and click* ***Forgot your password?*** *to reset it. Please refer to* *Resetting Your Password* *for more information.*

1. Log in to PMP Clearinghouse.
2. Click **My Profile**.



3. Select **Change Password**.



4. Enter your current password in the **Current Password** field.
5. Enter your new password in the **Password** field, then re-enter it in the **Password confirmation** field. The password requirements are provided below.

Passwords must contain:

- *At least eight (8) characters*
- *One (1) uppercase letter*
- *One (1) lowercase letter*
- *One (1) number*
- *One (1) special character, such as !, @, #, $, etc.*

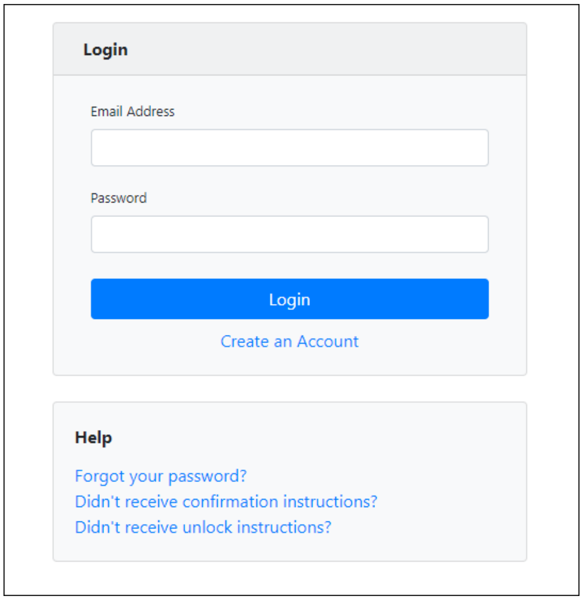
6. Click **Update**.

   Your password is updated, and you will use it the next time you log in to PMP Clearinghouse.

9.3 Resetting Your Password

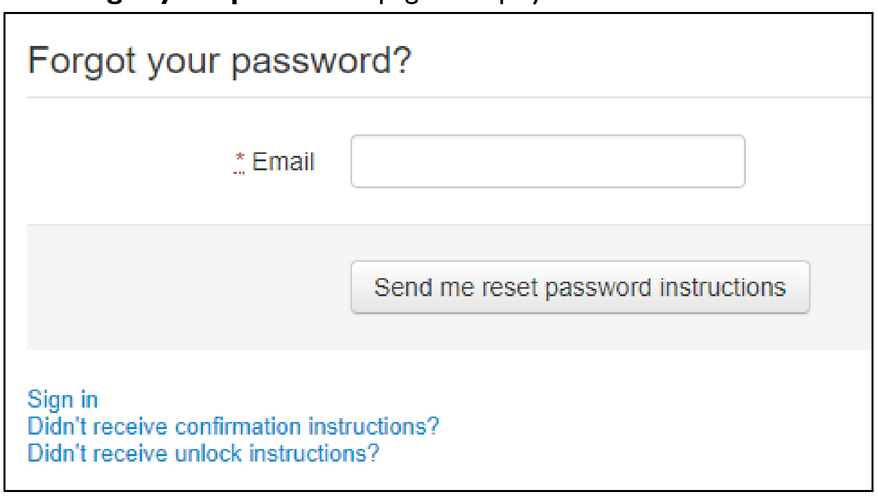
If you have forgotten your password or your password has expired, perform the following steps to reset it.

1. Open an internet browser window and navigate to the **PMP Clearinghouse Login** page located at https://pmpclearinghouse.net/users/sign_in.



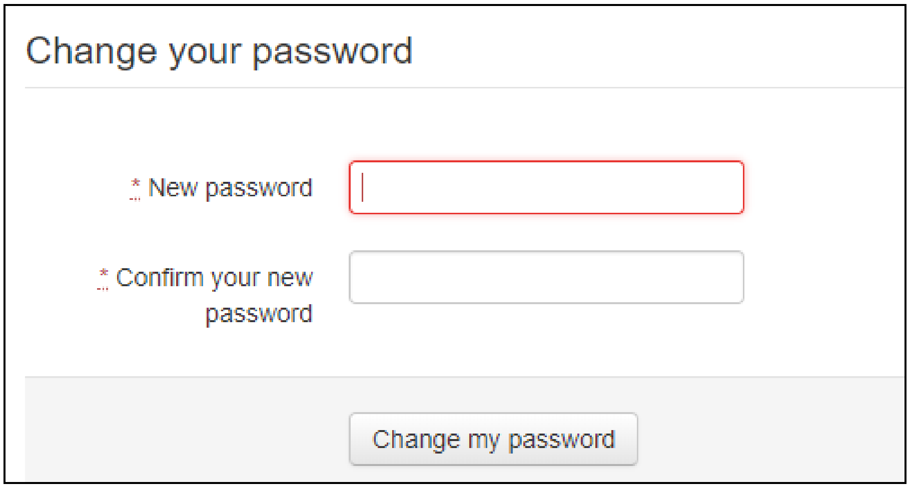
2. Click the **Forgot your password?** link, located in the **Help** section of the page.

   The **Forgot your password?** page is displayed.



3. Enter the email address associated with your user account, then click **Send me reset password instructions**.
4. Once you receive the reset password email, click the **Change my password** link within the email.

The **Change your password** page is displayed.



5. Enter your new password in the **New password** field, then re-enter it in the **Confirm your new password** field. The password requirements are provided below.

Passwords must contain:

- *At least eight (8) characters*
- *One (1) uppercase letter*
- *One (1) lowercase letter*
- *One (1) number*
- *One (1) special character, such as !, @, #, $, etc.*

6. Click **Change my password**.

   Your password is changed, and you can now use it to log in to PMP Clearinghouse.

10 Assistance and Support

10.1 Technical Assistance

If you need additional help with any of the procedures outlined in this guide, you can:

- Contact Bamboo Health at 1-844-5SC-4PMP (1-844-572-4767);
  OR
- Create a support request at the following URL:
  https://pmpclearinghouse.zendesk.com/hc/en-us/

Technical assistance is available 24 hours per day, 7 days per week, 365 days per year.

10.2 Administrative Assistance

If you have non-technical questions regarding the South Carolina PMP, please contact:

South Carolina Prescription Monitoring Program
DHEC Bureau of Drug Control
2600 Bull Street
Columbia, SC 29210-1708

Phone: (803) 896-0688
Fax: (803) 896-0686

Tracie M. Paschall, CPhT – Program Coordinator
Email: paschatm@dhec.sc.gov

11 Document Information

11.1 Disclaimer

Bamboo Health has made every effort to ensure the accuracy of the information in this document at the time of printing. However, information is subject to change.

11.2 Change Log

Version	Date	Chapter/Section	Change Made
1.0	09/21/2015	N/A	N/A; initial publication
2.0	05/15/2019	Global	Updated to current document template
2.1	01/16/2020	2.2/Reporting Requirements	Updated the definition of “dispenser” per state request
			Removed information regarding exemptions
		4.2/Upload Specifications	Removed information regarding exemptions
		5.4/Zero Reports	Separated into two sections (Submit a Single-Click Zero Report and Create a New Zero Report) to reflect the addition of the single-click zero report submission functionality
		5.4.1/Submit a Single-Click Zero Report	Added new section with instructions for submitting a single-click zero report
2.2	03/09/2022	Global	Updated guide to reflect Bamboo Health branding
		Appendix D/Compound Drugs	Added new appendix
3.0	05/09/2022	Global	Upgraded from ASAP 4.2 Specifications to ASAP 4.2B
3.1	07/12/2022	Appendix A/ASAP 4.2B Specifications	Updated PHA13 description to be generic and not state specific
4.0	01/03/2025	General	Update guide to reflect new branding guidelines
		General	Update guide to reflect new sFTP hostname information
		6.1/File Listings	Update UCF time to edit/delete from 30 days to 1 year
		6.3.3/Error Correction via File Submission	Add additional guidance on correcting and voiding records

Appendix A: ASAP 4.2B Specifications

The information on the following pages contains the definitions for the specific contents required of uploaded records in the American Society for Automation in Pharmacy (ASAP) format to comply with the SC PMP requirements.

The following elements are used in each upload file:

- **Segment Identifier** – indicates the beginning of a new segment, for example, *PHA*.
- **Data Delimiter** – character used to separate segments and the data elements within a segment, for example, an asterisk (*).

  Each completed field should be followed by an asterisk, and each blank field should contain a single asterisk.

  If the last field in the segment is blank, it should contain an asterisk and a tilde (~).
- **Segment Terminator** – character used to mark the end of a segment, for example, the tilde (~).

  ***Note**: 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 (~~).*
- **Requirement**
  - R = Required by South Carolina
  - N = Not required but accepted if submitted
  - S = Situational

***Note**: For more information, contact the American Society for Automation in Pharmacy for the full Implementation Guide for the ASAP Standard for Prescription-Monitoring Programs. That guide includes some acceptable field attributes, such as allowed values, some formats and examples.*

Segment	Element ID	Element Name	Requirement
TH: Transaction Header (required) Used to indicate the start of a transaction. It also assigns the data element separator, segment terminator, and control number.			
	TH01	**Version/Release Number** Code uniquely identifying the transaction. Format = x.xx	**R**
	TH02	**Transaction Control Number** Sender assigned code uniquely identifying a transaction.	**R**
	TH03	**Transaction Type** Identifies the purpose of initiating the transaction. • 01 Send/Request Transaction • 02 Acknowledgement (used in Response only) • 03 Error Receiving (used in Response only) • 04 Void (used to void a specific Rx in a real-time transmission or an entire batch that has been transmitted)	**N**
	TH04	**Response ID** Contains the Transaction Control Number of a transaction that initiated the transaction. Required in response transaction only.	**N**
	TH05	**Creation Date** Date the transaction was created. Format: CCYYMMDD.	**R**
	TH06	**Creation Time** Time the transaction was created. Format: HHMMSS or HHMM.	**R**
	TH07	**File Type** • P = Production • T = Test	**R**
	TH08	**Routing Number** Reserved for real-time transmissions that go through a network switch to indicate, if necessary, the specific PMP the transaction should be routed to.	**N**
	TH09	**Segment Terminator Character** This terminates the TH segment and sets the actual value of the data segment terminator for the entire transaction.	**R**
IS: Information Source (required) Used to convey the name and identification numbers of the entity supplying the information.			
	IS01	**Unique Information Source ID** Reference number or identification number. (Example: phone number)	**R**
	IS02	**Information Source Entity Name** Entity name of the Information Source.	**R**
	IS03	**Message** Free-form text message.	**N**

Segment	Element ID	Element Name	Requirement
PHA: Pharmacy Header (required) Used to identify the pharmacy. **Note:** It is required that information be provided in at least one of the following fields: PHA01, PHA02, or PHA03.			
	PHA01	**National Provider Identifier (NPI)** Identifier assigned to the pharmacy by CMS.	**N**
	PHA02	**NCPDP/NABP Provider ID** Identifier assigned to pharmacy by the National Council for Prescription Drug Programs.	**N**
	PHA03	**DEA Number** Identifier assigned to the pharmacy by the Drug Enforcement Administration.	**R**
	PHA04	**Pharmacy Name** Free-form name of the pharmacy or dispensing practitioner's name.	**R**
	PHA05	**Address Information – 1** Free-form text for address information.	**N**
	PHA06	**Address Information – 2** Free-form text for address information.	**N**
	PHA07	**City Address** Free-form text for city name.	**N**
	PHA08	**State Address** U.S. Postal Service code.	**N**
	PHA09	**ZIP Code Address** U.S. Postal Service ZIP Code. Do not include hyphens.	**N**
	PHA10	**Phone Number** Complete phone number including area code. Do not include hyphens.	**N**
	PHA11	**Contact Name** Free-form name.	**N**
	PHA12	**Chain Site ID** Store number assigned by the chain to the pharmacy location. Used when the PMP needs to identify the specific pharmacy from which information is required.	**N**
	PHA13	**Pharmacy's Permit Number/License Number** Identification assigned to the Pharmacy by the Board of Pharmacy. To be utilized only when the pharmacy does not have an NPI number or DEA number. In this instance, leave PHA01 and PHA03 blank and insert the Pharmacy's permit number in PHA13 (e.g., PHY.00#####-XX).	**S**
PAT: Patient Information (required) Used to report the patient's name and basic information as contained in the pharmacy record.			
	PAT01	**ID Qualifier of Patient Identifier** Code identifying the jurisdiction that issues the ID in PAT03.	**N**

Segment	Element ID	Element Name	Requirement
	PAT02	**ID Qualifier** Code to identify the type of ID in PAT03. If PAT02 is used, PAT03 is required. • 01 Military ID • 02 State Issued ID • 03 Unique System ID • 04 Permanent Resident Card (Green Card) • 05 Passport ID • 06 Driver's License ID • 07 Social Security Number • 08 Tribal ID • 09 Vendor Specific (such as Bamboo Health, Experian, LexisNexis) • 10 Veterinary Patient Microchip Number • 99 Other (agreed upon ID)	**N**
	PAT03	**ID of Patient** Identification number for the patient as indicated in PAT02. An example would be the driver's license number.	**N**
	PAT04	**ID Qualifier of Additional Patient Identifier** Code identifying the jurisdiction that issues the ID in PAT06. Used if the PMP requires such identification.	**N**
	PAT05	**Additional Patient ID Qualifier** Code to identify the type of ID in PAT06 if the PMP requires a second identifier. If PAT05 is used, PAT06 is required. • 01 Military ID • 02 State Issued ID • 03 Unique System ID • 04 Permanent Resident Card (Green Card) • 05 Passport ID • 06 Driver's License ID • 07 Social Security Number • 08 Tribal ID • 09 Vendor Specific (such as Bamboo Health, Experian, LexisNexis) • 10 Veterinary Patient Microchip Number • 99 Other (agreed upon ID)	**N**
	PAT06	**Additional ID** Identification that might be required by the PMP to further identify the individual. An example might be that in PAT03 driver's license is required and in PAT06 Social Security number is also required.	**N**
	PAT07	**Last Name** Patient's last name.	**R**

Segment	Element ID	Element Name	Requirement
	PAT08	**First Name** Patient's first name.	**R**
	PAT09	**Middle Name** Patient's middle name or initial if available.	**N**
	PAT10	**Name Prefix** Patient's name prefix such as Mr. or Dr.	**N**
	PAT11	**Name Suffix** Patient's name suffix such as *Jr*. or *the III*.	**N**
	PAT12	**Address Information – 1** Free-form text for street address information.	**R**
	PAT13	**Address Information – 2** Free-form text for additional address information.	**N**
	PAT14	**City Address** Free-form text for city name.	**R**
	PAT15	**State Address** U.S. Postal Service state or other regional jurisdiction code	**R**
	PAT16	**ZIP Code Address** U.S. Postal Service ZIP code. Do not include hyphens. **Note:** Populate with zeros if patient address is outside the U.S.	**R**
	PAT17	**Phone Number** Complete phone number including area code. Do not include hyphens.	**N**
	PAT18	**Date of Birth** Date patient was born. Format: CCYYMMDD	**R**
	PAT19	**Gender Code** Code indicating the sex of the patient. • F Female • M Male • U Unknown	**N**
	PAT20	**Species Code** Used if required by the PMP to differentiate a prescription for an individual from one prescribed for an animal. • 01 Human • 02 Veterinary Patient	**S**

Segment	Element ID	Element Name	Requirement
	PAT21	**Patient Location Code** 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	**N**
	PAT22	**Country of Non-U.S. Resident** Used when the patient's address is a foreign country and PAT12 through PAT16 are left blank.	**N**
	PAT23	**Name of Animal** Used if required by the PMP for prescriptions written by a veterinarian and the pharmacist has access to this information at the time of dispensing the prescription.	**S**
DSP: Dispensing Record (required) Used to identify the basic components of a dispensing of a given prescription order including the date and quantity.			
	DSP01	**Reporting Status** DSP01 requires one of the following codes, and 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 PMP to remove the original prescription transaction from its data, or to mark the record as invalid or to be ignored). ***Note:** For prescriptions voided with code "02", a limited data set is being offered as an option PMPs can elect to use rather than requiring the entire prescription to be voided. This option is offered in order to streamline the process in the pharmacy when voiding a prescription.	**R**
	DSP02	**Prescription Number** Serial number assigned to the prescription by the pharmacy.	**R**

Segment	Element ID	Element Name	Requirement
	DSP03	**Date Written** Date the prescription was written (authorized). Format: CCYYMMDD	**R**
	DSP04	**Refills Authorized** The number of refills authorized by the prescriber.	**R**
	DSP05	**Date Filled** Date prescription was filled. Format: CCYYMMDD	**R**
	DSP06	**Fill Number** Number of the fill of the prescription. 0 indicates New Rx; 01-99 is the fill number.	**R**
	DSP07	**Product ID Qualifier** Used to identify the type of product ID contained in DSP08. • 01 NDC • 06 Compound (indicates a compound; if used, the CDI segment becomes a required segment)	**R**
	DSP08	**Product ID** Full product identification as indicated in DSP07, including leading zeros without punctuation. If code “06” (indicating a compound) is indicated in DSP07, use “99999” as the first 5 characters; CDI then becomes required.	**R**
	DSP09	**Quantity Dispensed** Number of metric units dispensed in metric decimal format. Example: 2.5 **Note:** For compounds show the first quantity in CDI04.	**R**
	DSP10	**Days’ Supply** Estimated number of days the medication will last.	**R**
	DSP11	**Drug Dosage Units Code** Identifies the unit of measure for the quantity dispensed in DSP09. • 01 Each • 02 Milliliters (ml) • 03 Grams (gm)	**N**
	DSP12	**Transmission Form of Rx Origin Code** 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 Transfer/Forwarded • 99 Other	**N**

Segment	Element ID	Element Name	Requirement
	DSP13	**Partial Fill Indicator** Used when the quantity in DSP 09 is less than the metric quantity per dispensing authorized by the prescriber. This dispensing activity is often referred to as a split filling. • 00 Not a Partial Fill • 01 First Partial Fill ***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.*	**N**
	DSP14	**Pharmacist National Provider Identifier (NPI)** Identifier assigned to the pharmacist by CMS. This number can be used to identify the pharmacist dispensing the medication.	**N**
	DSP15	**Pharmacist State License Number** This data element can be used to identify the pharmacist dispensing the medication. Assigned to the pharmacist by the State Licensing Board.	**N**
	DSP16	**Classification Code for Payment Type** Code identifying the type of payment (i.e., how it was paid for). • 01 Private Pay • 02 Medicaid • 03 Medicare • 04 Commercial Insurance • 05 Military Installations and VA • 06 Workers' Compensation • 07 Indian Nations • 99 Other	**R**
	DSP17	**Date Sold** Used to determine the date the prescription left the pharmacy, not the date it was filled, if the dates differ. Format: CCYYMMDD	**N**
	DSP18	**RxNorm Code Qualifier** RxNorm Code that is populated in the DRU-010-09 field in the SCRIPT transaction. • 01 Semantic Clinical Drug (SCD) • 02 Semantic Branded Drug (SBD) • 03 Generic Package (GPCK) • 04 Branded Package (BPCK)	**N**
	DSP19	**RxNorm Code** Used for electronic prescriptions to capture the prescribed drug product identification.	**N**
	DSP20	**Electronic Prescription Reference Number** This field should be populated with the MessageID in the XML format of the SCRIPT transaction.	**N**

Segment	Element ID	Element Name	Requirement
	DSP21	**Electronic Prescription Order Number** This field should be populated with the PrescriberOrderNumber in the XML format of the SCRIPT standard.	N
	DSP22	**Quantity Prescribed** This field adds clarity to the value reported in DSP13, Partial Fill Indicator.	S
	DSP23	**Rx SIG** This field captures the actual directions printed on the prescription vial label.	S
	DSP24	**Treatment Type** This field is used to explain the reason for an opioid prescription. If the prescription is not for an opioid, this field should not be used. • 01 Not used for opioid dependency treatment • 02 Used for opioid dependency treatment • 03 Pain associated with active and aftercare cancer treatment • 04 Palliative care in conjunction with a serious illness • 05 End-of-life and hospice care • 06 A pregnant individual with a pre-existing prescription for opioids • 07 Acute pain for an individual with an existing opioid prescription for chronic pain • 08 Individuals pursuing an active taper of opioid medications • 09 Patient is participating in a pain management contract • 10 Acute Opioid Therapy • 11 Chronic Opioid Therapy • 99 Other (trading partner agreed upon reason)	S
	DSP25	**Diagnosis Code** This field is used to report the ICD-10 code or CDT. If required by a PMP, this field would be populated only when the ICD-10 or CDT code is available. **Note:** Exclude the decimal point when reporting this field.	S
PRE: Prescriber Information (required) Used to identify the prescriber of the prescription.			
	PRE01	**National Provider Identifier (NPI)** Identifier assigned to the prescriber by CMS.	N
	PRE02	**DEA Number** Identifying number assigned to a prescriber or an institution by the Drug Enforcement Administration (DEA). For prescribers or reportable drugs that have no DEA number, another identifier, such as their NPI or Prescriber License Number must be submitted. **Note:** This field is required when the prescription is a controlled substance, based on either federal or other more local regulation.	R

Segment	Element ID	Element Name	Requirement
	PRE03	**DEA Number Suffix** Identifying number assigned to a prescriber by an institution when the institution's number is used as the DEA number.	S
	PRE04	**Prescriber License Number** Identification assigned to the prescriber by the Licensing Board. To be utilized for non-controlled substances (e.g., gabapentin) only when the prescriber does not have an NPI number or DEA number (e.g., veterinarian). In this instance, leave PRE01 and PRE02 blank and insert the prescriber's state license number in PRE04. **Note:** This field can be used for veterinary prescriptions.	S
	PRE05	**Last Name** Prescriber's last name.	R
	PRE06	**First Name** Prescriber's first name.	R
	PRE07	**Middle Name** Prescriber's middle name or initial.	N
	PRE08	**Phone Number** Complete phone number including area code. Do not include hyphens.	N
	PRE09	**XDEA Number** This field is in addition to Treatment Type in the DSP segment. This gives PMPs the option to require the XDEA Number (NADEAN) in the PRE segment.	S
	PRE10	**Jurisdiction or State Issuing Prescriber License Number** Use this field to further identify the information provided in PRE04.	S
CDI: Compound Drug Ingredient Detail (situational) Use of this segment is required when medication dispensed is a compound and one of the ingredients is a PMP reporting drug. If more than one ingredient is for a prescription monitoring program reporting drug, then this would be incremented by one for each compound ingredient being reported. If CDI is filled in, the NDC of DSP08 must be 99999999999.			
	CDI01	**Compound Drug Ingredient Sequence Number** First reportable ingredient is 1; each additional reportable ingredient is incremented by 1.	S
	CDI02	**Product ID Qualifier** Code to identify the type of product ID contained in CDI03. • 01 NDC	S
	CDI03	**Product ID** Full product identification as indicated in CDI02, including leading zeros without punctuation.	S
	CDI04	**Compound Ingredient Quantity** Metric decimal quantity of the ingredient identified in CDI03. Example: 2.5	S

Segment	Element ID	Element Name	Requirement
	CDI05	**Compound Drug Dosage Units Code** Identifies the unit of measure for the quantity dispensed in CDI04. • 01 Each (used to report as package) • 02 Milliliters (ml) (for liters, adjust to the decimal milliliter equivalent) • 03 Grams (gm) (for milligrams, adjust to the decimal gram equivalent)	S
AIR: Additional Information Reporting (situational) Used when state-issued serialized Rx pads are used, the PMP requires information on the person dropping off or picking up the prescription, or for data elements not included in other detail segments. ***Note:*** *If this segment is used, at least one of the data elements (fields) will be required.*			
	AIR01	**State Issuing Rx Serial Number** U.S.P.S. state code or other regional jurisdiction code that issued serialized prescription blank. This is required if AIR02 is used.	N
	AIR02	**State Issued Rx Serial Number** Number assigned to state issued serialized prescription blank.	N
	AIR03	**Issuing Jurisdiction** Code identifying the jurisdiction that issues the ID in AIR04. Used if required by the PMP and AIR04 is equal to 02 or 06.	N
	AIR04	**ID Qualifier of Person Dropping Off or Picking Up Rx** Used to identify the type of ID contained in AIR05 for person dropping off or picking up the prescription. • 01 Military ID • 02 State Issued ID • 03 Unique System ID • 05 Passport ID • 06 Driver's License ID • 07 Social Security Number • 08 Tribal ID	N
	AIR05	**ID of Person Dropping Off or Picking Up Rx** ID number of patient or person picking up or dropping off the prescription.	N
	AIR06	**Relationship of Person Dropping Off or Picking Up Rx** Code indicating the relationship of the person. • 01 Patient • 02 Parent/Legal Guardian • 03 Spouse • 04 Caregiver • 99 Other	N
	AIR07	**Last Name of Person Dropping Off or Picking Up Rx** Last name of person picking up the prescription.	N
	AIR08	**First Name of Person Dropping Off or Picking Up Rx** First name of person picking up the prescription.	N

Segment	Element ID	Element Name	Requirement
	AIR09	**Last Name or Initials of Pharmacist** Last name or initials of pharmacist dispensing the medication.	**N**
	AIR10	**First Name of Pharmacist** First name of pharmacist dispensing the medication.	**N**
	AIR11	**Dropping Off/Picking Up Identifier Qualifier** Additional qualifier for the ID contained in AIR05 • 01 Person Dropping Off • 02 Person Picking Up • 03 Unknown/Not Applicable	**N**
TP: Pharmacy Trailer (required) 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** Number of detail segments included for the pharmacy including the pharmacy header (PHA) and the pharmacy trailer (TP) segments.	**R**
TT: Transaction Trailer (required) 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** Identifying control number that must be unique. Assigned by the originator of the transaction. Must match the number in TH02.	**R**
	TT02	**Segment Count** Total number of segments included in the transaction including the header and trailer segments.	**R**

Appendix B: ASAP Zero Report Specifications

The following table contains the required definitions for submitting zero reports via SFTP or manual upload to the SC PMP. It lists the **Segment** and **Element ID** with pre-populated data to be used as an example for constructing a zero report. For more details regarding these Segment or Elements IDs, or for details on reporting actual dispensations, please refer to Appendix A: ASAP 4.2B Specifications.

Segment	Element ID	Element Name	Requirement
TH: Transaction Header (required)			
	TH01	4.2B	**R**
	TH02	123456	**R**
	TH05	20220301	**R**
	TH06	223000	**R**
	TH07	P	**R**
	TH09	\\	**R**
IS: Information Source (required)			
	IS01	7705555555	**R**
	IS02	PHARMACY NAME	**R**
	IS03	Date Range of Report #CCYYMMDD#-#CCYYMMDD#	**R**
PHA: Pharmacy Header (required)			
	PHA03	ZZ1234567	**R**
PAT: Patient Information (required)			
	PAT07	REPORT	**R**
	PAT08	ZERO	**R**
DSP: Dispensing Record (required)			
	DSP05	20220301	**R**
PRE: Prescriber Information (required; can be null as follows: PRE*****\)**			
CDI: Compound Drug Ingredient Detail			
AIR: Additional Information Reporting			
TP: Pharmacy Trailer (required)			
	TP01	7	**R**
TT: Transaction Trailer (required)			
	TT01	123456	**R**
	TT02	10	**R**

Sample Zero Report

The following example illustrates a zero report using the above values.

```
TH*4.2B*123456*01**20220108*223000*P**\\
IS*7705555555*PHARMACY NAME*#20220107#-#20220107#\
PHA*** ZZ1234567\
PAT*******REPORT*ZERO************\
DSP*****20220108******\
PRE*\
CDI*\
AIR*\
TP*7\
TT*123456*10\
```

Appendix C: SFTP Configuration

This appendix describes the SFTP configurations required to upload your data to PMP Clearinghouse.

Note: *Submitting data via SFTP requires you have an existing PMP Clearinghouse account with SFTP access.*

- *If you need to create a PMP Clearinghouse account, please refer to Creating Your Account. You will be able to set up your SFTP account during the account creation process.*
- *If you have an existing PMP Clearinghouse account but do not have SFTP access, please refer to Adding SFTP Access to an Upload Account.*

SFTP Connection Details

***Hostname:* http://submissions.healthcarecoordination.net/**

Bamboo Health recommends that you use the hostname when configuring the connection rather than the IP address, as the IP address is subject to change.

Port: 22

Note: *The port will always be 22.*

Credentials: Your SFTP account credentials (username and password) can be found within the PMP Clearinghouse website. To locate your credentials, log in to PMP Clearinghouse, then click ***Account*** > ***SFTP Details*** > ***Edit***.

Your username cannot be modified; however, you can update your password.

Note: *Your current SFTP password cannot be seen or recovered. If you have forgotten or lost it, you will need to create a new one. For more information on changing the SFTP password, please refer to Adding SFTP Access to an Upload Account.*

Once you have established SFTP access, you can test the SFTP connection, but you will not be able to submit data to a PMP until your account has been approved by the PMP administrator.

PMP Subfolders

PMP Clearinghouse is the data repository for numerous PMPs. As such, data submitted via SFTP must be placed in the appropriate folder for the PMP for which you are submitting data so that it can be properly imported to that PMP. The creation of subfolders must be done outside of the PMP Clearinghouse website using third-party software, such as an SSH client or a command line utility. Files placed in the root/home directory of the SFTP server will not be imported, as this will cause the dispensing entity to appear as noncompliant/delinquent.

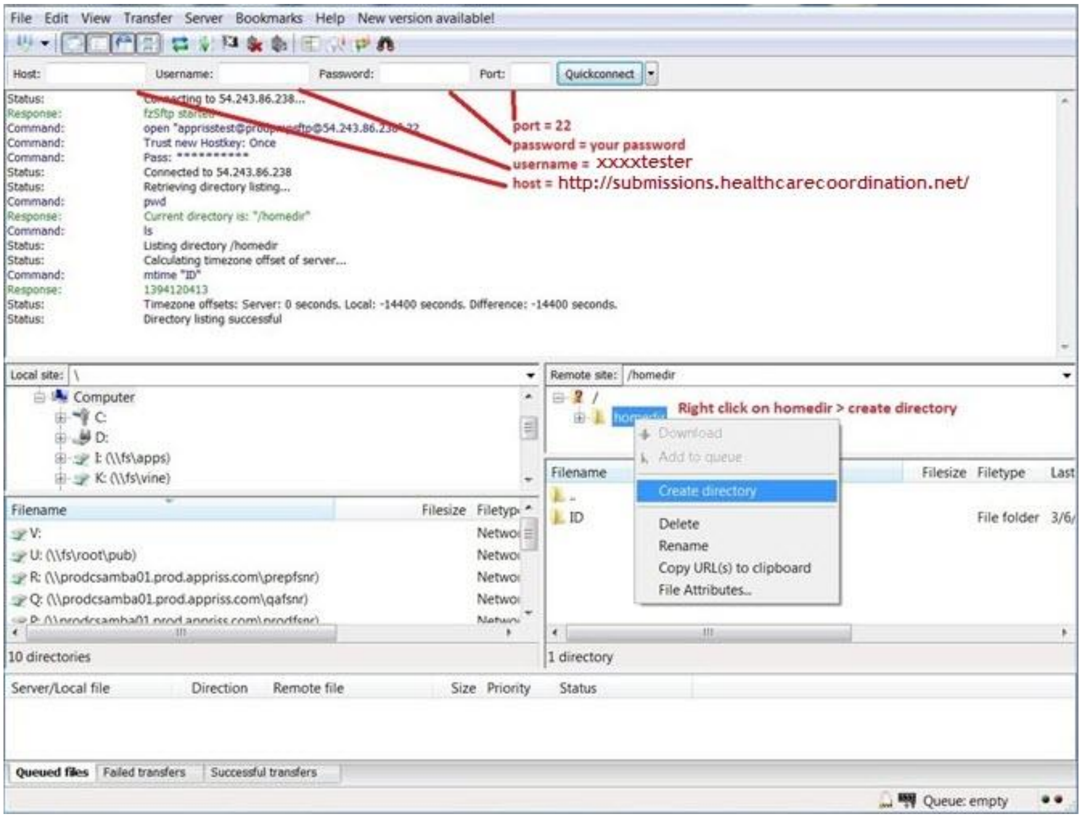
Your pharmacy software will need to be configured to place files in the appropriate PMP folder when submitting. You may need to contact your software vendor for additional assistance with this process.

***NOTE**: Capitalization of the abbreviated PMP folders' names has no bearing on whether or not Clearinghouse processes the files; however, some pharmacy systems, especially *nix-based systems, will require that the exact case is used when specifying the target folder.*

There are two methods by which to create PMP subfolders for SFTP submissions:

1. **Via SSH client** (e.g., WinSCP, FileZilla, etc.)
   a. Log in to your SFTP account.

b. Create the required directories under ***/homedir***.

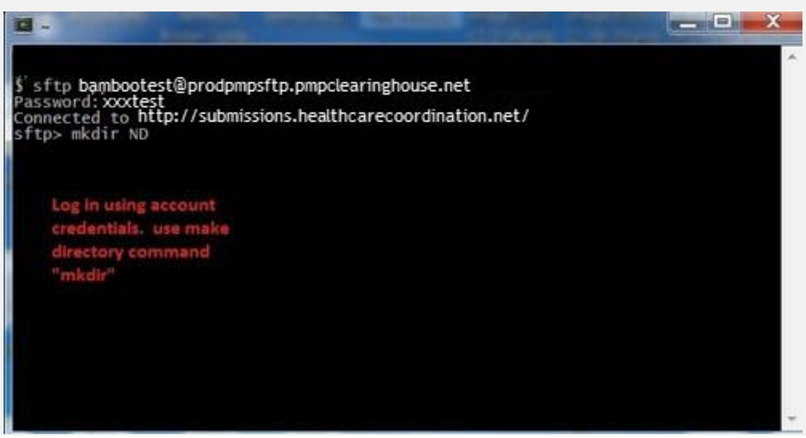


2. Via command prompt

c. Log in to your SFTP account using command prompt.

d. Type "**mkdir**" followed by a space and then the PMP abbreviation you are using (e.g., ***mkdir SC***).

NOTE: *The PMP folder must be titled with the two-letter abbreviation as specified above.*

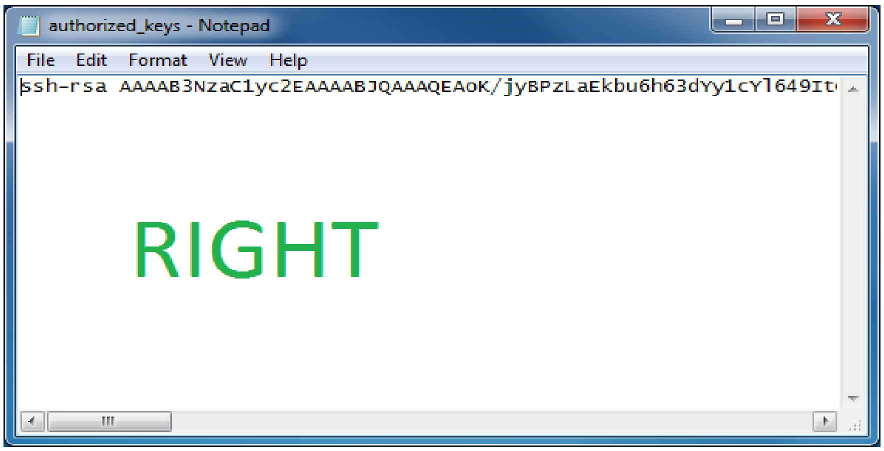


Public (SSH/RSA) Key Authentication

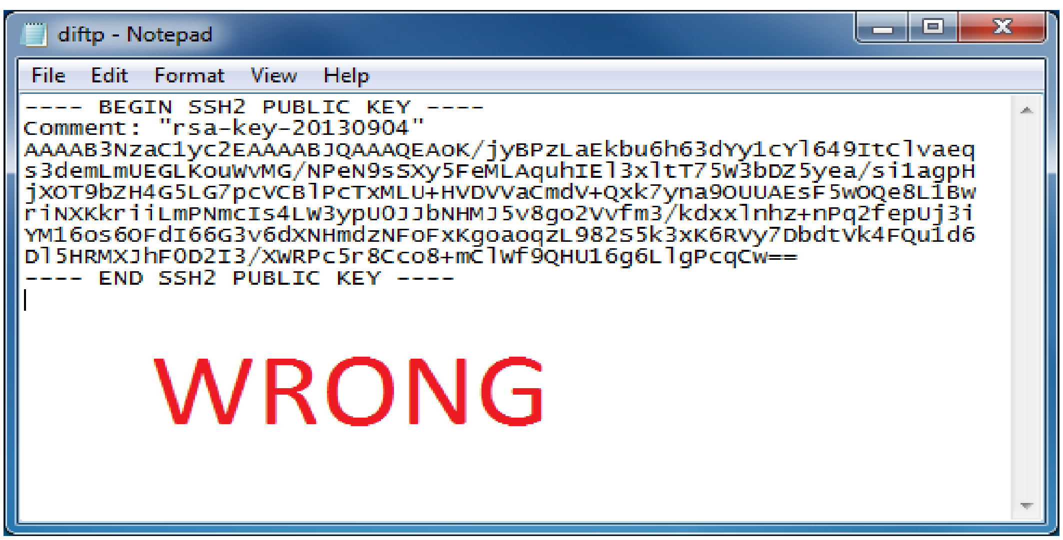
PMP Clearinghouse supports SSH key authentication. The generation of the key is outside the scope of this document; however, general guidelines about the key, along with how to import/load it, are provided below.

Note: PGP Encryption *is not supported.*

- **Supported Key Types:**
  – SSH-2 RSA 2048 bit length
- **Unsupported Key Types:**
  – SSH-1 RSA
  – SSH-2 DSA
- **Correct Public Key Format:** If opened in a text editor, the key should look like the screenshot below.



- **Incorrect Public Key Format:** If opened in a text editor, the key SHOULD NOT look like the screenshot below.



Once the key has been generated, it should be named "***authorized_keys***".

Notes:

- *There is no file extension.*
- *There is an underscore between the words **authorized** and **keys**.*

A *.ssh* subfolder needs to be created in the SFTP account's home directory. The "***authorized_keys***" file must be placed in the *.ssh* folder. The creation of this folder follows the same process as creating a PMP subfolder. Please refer to PMP Subfolders for steps on creating subfolders.

Appendix D: Compound Drugs

What are Compound Drugs and Why Do We Use Them?

Compound drugs are reportable drugs that have combined, mixed, or altered ingredients to create a medication with two or more drugs that meet the tailored needs of an individual patient. Compounding medication allows for treatment of patients who may not be able to be treated with an FDA-approved medication for such reasons as allergies to certain dyes.

This appendix provides information about data delivery methods you can use to submit compound drugs to PMP Clearinghouse. Each individual state or PMP determines how and when users are to submit compound drugs to PMP Clearinghouse.

Submitting a Manual Entry (UCF) for a Compound Drug

You can manually enter your compound drug prescription information into the PMP Clearinghouse system using the Universal Claim Form (UCF) within the PMP Clearinghouse web portal. This form allows you to enter patient, prescriber, dispenser, and prescription information.

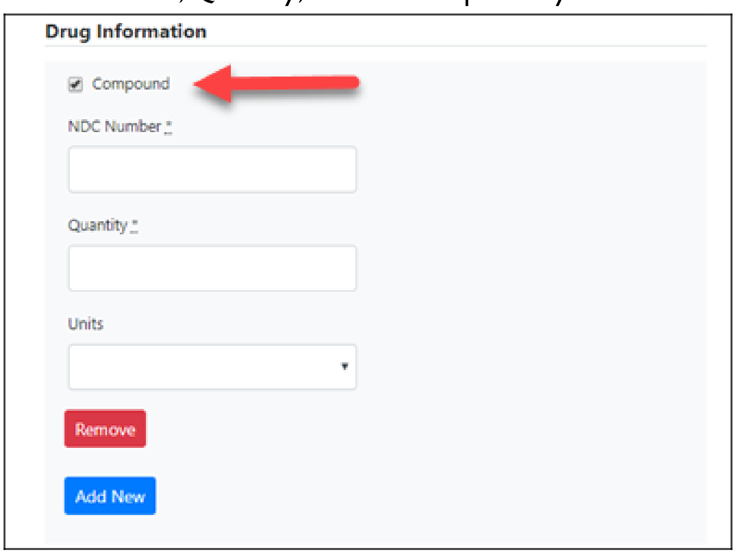
Please refer to Reporting Requirements for the complete list of reporting requirements.

If you do not have an account, please refer to Creating Your Account for further details.

1. To submit a Compound Drug via **UCF Submission,** first Log in to PMP Clearinghouse.

   For additional information on submitting a **UCF Submission**, refer to Manual Entry (UCF).
2. Click the **New Claim Form** tab, located at the top of the page.

   The Create Universal Claim Form page is displayed.
3. Complete the required fields. Be sure to click the **Compound** checkbox in the Drug Information section as shown below and include each ingredient in the Compound Drug by NDC Number, Quantity, and units respectively.



Note: *If a drug/compound is not found in the NDC database, the ingredient drug name will appear in the Prescription table as "Compound Drug Ingredient." A compound drug should consist of at least one "Active" ingredient that is typically FDA-approved and will therefore have an NDC number. The* *remainder of the ingredients in the compound drug may or may not be FDA-approved and therefore may not have an NDC number.*

4. Once you have completed all required fields and clicked the **Compound** checkbox, follow the prompts to save and submit your form. For additional assistance with your submission, to include completing your submission, and errors please refer to Manual Entry (UCF) and Error Correction.

Viewing Records with Errors

If the **Error Correction** page displays, it will provide more information about the records within a selected data file that need correcting, including **Prescription Number**, **Segment Type**, **Warning Count**, and **Error Count**. To access this page, click the "**Pending Dispensation Error**" message in the **Status** column of the File Listings page. For further information on how to correct an error, please refer to Error Correction.

Submitting a Compound Drug via ASAP 4.2B Specifications

The information in the following table contains the definitions for the specific contents required of uploaded records in the American Society for Automation in Pharmacy (ASAP) format to comply with the SC PMP requirements for compound drugs. For more information, contact the American Society for Automation in Pharmacy for the full *Implementation Guide for the ASAP Standard for Prescription-Monitoring Programs*. That guide includes some acceptable field attributes, such as allowed values, some formats, and examples.

The following elements are used in each upload file:

- **Segment Identifier** – indicates the beginning of a new segment, for example, *PHA*.
- **Data Delimiter** – character used to separate segments and the data elements within a segment, for example, an asterisk (*).

Each completed field should be followed by an asterisk, and each blank field should contain a single asterisk.

If the last field in the segment is blank, it should contain an asterisk and a tilde (~).

- **Segment Terminator** – character used to mark the end of a segment, for example, the tilde (~).
- **Requirement**
  - R = Required by South Carolina
  - N = Not required but accepted if submitted
  - S = Situational

Note: *For more information, contact the American Society for Automation in Pharmacy for the full Implementation Guide for the ASAP Standard for Prescription-Monitoring Programs. That guide includes field lengths, acceptable attributes, and examples.*

Segment	Element ID	Element Name	Requirement
DSP: Dispensing Record (required) Used to identify the basic components of a dispensing of a given prescription order including the date and quantity.			
	DSP01	**Reporting Status** DSP01 requires one of the following codes, and 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 PMP to remove the original prescription transaction from its data, or to mark the record as invalid or to be ignored).	**R**
	DSP02	**Prescription Number** Serial number assigned to the prescription by the pharmacy.	**R**
	DSP03	**Date Written** Date the prescription was written (authorized). Format: CCYYMMDD	**R**
	DSP04	**Refills Authorized** The number of refills authorized by the prescriber.	**R**
	DSP05	**Date Filled** Date prescription was filled. Format: CCYYMMDD	**R**
	DSP06	**Refill Number** Number of the fill of the prescription. 0 indicates New Rx; 01-99 is the refill number.	**R**
	DSP07	**Product ID Qualifier** Used to identify the type of product ID contained in DSP08. • 01 NDC • 06 Compound (indicates a compound; if used, the CDI segment becomes a required segment)	**R**
	DSP08	**Product ID** Full product identification as indicated in DSP07, including leading zeros without punctuation. If "06 Compound" is indicated in DSP07, use 99999 as the first five characters; CDI then becomes required.	**R**
	DSP09	**Quantity Dispensed** Number of metric units dispensed in metric decimal format. Example: 2.5 **Note:** For compounds show the first quantity in CDI04.	**R**
	DSP10	**Days' Supply** Estimated number of days the medication will last.	**R**

Segment	Element ID	Element Name	Requirement
	DSP11	**Drug Dosage Units Code** Identifies the unit of measure for the quantity dispensed in DSP09. • 01 Each • 02 Milliliters (ml) • 03 Grams (gm)	**N**
	DSP12	**Transmission Form of Rx Origin Code** Code indicating how the pharmacy received the prescription. • 01 Written Prescription • 02 Telephone Prescription • 03 Telephone Emergency Prescription • 04 Fax Prescription • 05 Electronic Prescription • 99 Other	**N**
	DSP13	**Partial Fill Indicator** Used when the quantity in DSP 09 is less than the metric quantity per dispensing authorized by the prescriber. This dispensing activity is often referred to as a split filling. • 00 Not a Partial Fill • 01 First Partial Fill ***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.*	**N**
	DSP14	**Pharmacist National Provider Identifier (NPI)** Identifier assigned to the pharmacist by CMS. This number can be used to identify the pharmacist dispensing the medication.	**N**
	DSP15	**Pharmacist State License Number** This data element can be used to identify the pharmacist dispensing the medication. Assigned to the pharmacist by the State Licensing Board.	**N**
	DSP16	**Classification Code for Payment Type** Code identifying the type of payment (i.e., how it was paid for). • 01 Private Pay • 02 Medicaid • 03 Medicare • 04 Commercial Insurance • 05 Military Installations and VA • 06 Workers' Compensation • 07 Indian Nations • 99 Other	**R**
	DSP17	**Date Sold** Usage of this field depends on the pharmacy having a point-of-sale system that is integrated with the pharmacy management system to allow a bidirectional flow of information.	**N**

Segment	Element ID	Element Name	Requirement
	DSP18	**RxNorm Code Qualifier** RxNorm Code that is populated in the DRU-010-09 field in the SCRIPT transaction. • 01 Semantic Clinical Drug (SCD) • 02 Semantic Branded Drug (SBD) • 03 Generic Package (GPCK) • 04 Branded Package (BPCK)	**N**
	DSP19	**RxNorm Code** Used for electronic prescriptions to capture the prescribed drug product identification.	**N**
	DSP20	**Electronic Prescription Reference Number** This field should be populated with the Initiator Reference Number from field UIB-030-01 in the SCRIPT transaction.	**N**
	DSP21	**Electronic Prescription Order Number** This field will be populated with the Initiator Control Reference from field UIH-030-01 in the SCRIPT standard.	**N**
CDI: Compound Drug Ingredient Detail (situational) Use of this segment is required when medication dispensed is a compound and one of the ingredients is a PMP reporting drug. If more than one ingredient is for a prescription monitoring program reporting drug, then this would be incremented by one for each compound ingredient being reported. If CDI is filled in, the NDC of DSP08 must be 99999999999.			
	CDI01	**Compound Drug Ingredient Sequence Number** First reportable ingredient is 1; each additional reportable ingredient is incremented by 1.	**S**
	CDI02	**Product ID Qualifier** Code to identify the type of product ID contained in CDI03. • 01 NDC	**S**
	CDI03	**Product ID** Full product identification as indicated in CDI02, including leading zeros without punctuation.	**S**
	CDI04	**Compound Ingredient Quantity** Metric decimal quantity of the ingredient identified in CDI03. Example: 2.5	**S**
	CDI05	**Compound Drug Dosage Units Code** Identifies the unit of measure for the quantity dispensed in CDI04. • 01 Each (used to report as package) • 02 Milliliters (ml) (for liters, adjust to the decimal milliliter equivalent) • 03 Grams (gm) (for milligrams, adjust to the decimal gram equivalent)	**S**

Patient Report

Compound drugs are listed in a single line item in the **Patient Report Prescriptions** table with compound ingredients grouped or associated by their Rx Number. The multiple ingredients listing is the only indicator on the **Patient Report** that the drug was part of the compound.

Prescriptions

Total: 1 | Private Pay: 0

Showing 1-1 of 1 Items View 15 Items 1 of 1

Filled	Written	ID	Drug	QTY	Days	Prescriber	RX #	Dispenser	Refill	Daily Dose*	Pymt Type	PMP
02/12/2022	02/12/2022	1	Testosterone Micronized Powder	0.23	90	Pr Man	5635678	K m (1258)	0/0		Comm Ins	DO
02/12/2022	02/12/2022	1	Lactose Monohydrate Powder	7.41	90	Pr Man	5635678	K m (1258)	0/0		Comm Ins	DO
02/12/2022	02/12/2022	1	Sucrose Crystals	3.18	90	Pr Man	5635678	K m (1258)	0/0		Comm Ins	DO

Disclaimer

Showing 1-1 of 1 Items View 15 Items 1 of 1

Example of the dispensation record to create prescription pictured above.

DSP|00|5635678|20220212|0|20220212|00|06|99999999999|90|90|01|01|00|||04|||||\

PRE||BB555551|||DOCTOR|GOOD||\

CDI|01|01|38779016305|0.225|03\

CDI|02|01|38779031508|7.41|03\

CDI|03|01|51552050205|3.18|03\

Appendix E: SC Prescription Monitoring Act

ARTICLE 15

Prescription Monitoring Program

SECTION 44-53-1610. *Citation of article.*

This article may be cited as the "South Carolina Prescription Monitoring Act".

HISTORY: 2006 Act No. 396, Section 1, eff June 14, 2006.

SECTION 44-53-1620. *Purpose.*

This article is intended to improve the state's ability to identify and stop diversion of prescription drugs in an efficient and cost effective manner that will not impede the appropriate medical utilization of licit controlled substances.

HISTORY: 2006 Act No. 396, Section 1, eff June 14, 2006.

SECTION 44-53-1630. *Definitions.*

As used in this article:

(1) "Authorized delegate" means an individual who is approved as having access to the prescription monitoring program and who is directly supervised by an authorized practitioner or pharmacist.

(2) "Controlled substances" means those substances listed in Schedules II, III, and IV of the schedules provided for in Sections 44-53-210, 44-53-230, 44-53-250, and 44-53-270.

(3) "Dispenser" means a person who delivers a Schedule II-IV controlled substance to the ultimate user, but does not include:

(a) a licensed hospital pharmacy that distributes controlled substances for the purpose of inpatient hospital care or dispenses prescriptions for controlled substances at the time of discharge from the hospital;

(b) a practitioner or other authorized person who administers these controlled substances; or

(c) a wholesale distributor of a Schedule II-IV controlled substance.

(4) "Drug control" means the Department of Health and Environmental Control, Bureau of Drug Control.

(5) "Patient" means the person or animal who is the ultimate user of a drug for whom a prescription is issued or for whom a drug is dispensed, or both.

(6) "Practitioner" means an individual authorized pursuant to state and federal law to prescribe controlled substances.

HISTORY: 2006 Act No. 396, Section 1, eff June 14, 2006; 2014 Act No. 244 (S.840), Section 1, eff June 6, 2014; 2017 Act No. 91 (H.3824), Section 2, eff May 19, 2017.

Effect of Amendment

2017 Act No. 91, Section 2, in the introductory paragraph, substituted "article" for "section"; redesignated (5), relating to the definition of authorized delegate, as (1), and redesignated accordingly; and added (6), relating to the definition of practitioner.

SECTION 44-53-1640. *Authority to establish and maintain prescription monitoring program; electronic submission of information by dispensers; exemptions.*

(A) The Department of Health and Environmental Control, Bureau of Drug Control shall establish and maintain a program to monitor the prescribing and dispensing of all Schedule II, III, and IV controlled substances by professionals licensed to prescribe or dispense these substances in this State and the administering of opioid antidotes pursuant to Sections 44-130-60 and 44-130-80.

(B)(1) A dispenser shall submit to drug control, by electronic means, information regarding each prescription dispensed for a controlled substance. The following information must be submitted for each prescription:

(a) dispenser DEA registration number;

(b) date drug was dispensed;

(c) prescription number;

(d) whether prescription is new or a refill;

(e) NDC code for drug dispensed;

(f) quantity dispensed;

(g) approximate number of days supplied;

(h) patient name;
(i) patient address;

(j) patient date of birth;

(k) prescriber DEA registration number;

(l) date prescription issued by prescriber.

(2) A dispenser shall submit daily to the department the information required pursuant to subsection (B)(1) in accordance with transmission methods and protocols provided in the latest edition of the "ASAP Telecommunications Format for Controlled Substances", developed by the American Society for Automation in Pharmacy.

(3) Drug control may issue a waiver to a dispenser who is unable to submit prescription information by electronic means. The waiver may permit the dispenser to submit prescription information by paper form or other means if all information required pursuant to subsection (B)(1) is submitted in this alternative format.

HISTORY: 2006 Act No. 396, Section 1, eff June 14, 2006; 2014 Act No. 244 (S.840), Section 2, eff June 6, 2014; 2017 Act No. 91 (H.3824), Section 3, eff May 19, 2017; 2019 Act No. 65 (H.3728), Section 3, eff January 1, 2021.

Editor's Note

2019 Act No. 65, preamble, provides as follows:

"Whereas, the South Carolina General Assembly is committed to combatting the opioid epidemic occurring within this State; and

"Whereas, the South Carolina General Assembly has enacted and is working to enact legislation aimed at stemming the misuse of opioids in South Carolina; and

"Whereas, collecting information related to opioid use and misuse helps those working to better understand the complexities of substance abuse disorders and enables those working with patients suffering from this disease to develop strategies for treatment, education, and care; and

"Whereas, the purpose of this legislation is to provide data to health care professionals treating patients who have been diagnosed with an opioid overdose and received an antidote in response to that overdose; and

"Whereas, the South Carolina General Assembly intends for the information collected pursuant to this law to be used by health care professionals to assist patients in getting appropriate treatment including, but not limited to, treatment for substance abuse disorder; and
"Whereas, the General Assembly intends further that the information collected pursuant to this law should not be used as the sole determining factor in a decision regarding whether to treat or refuse to treat a patient suffering from an opioid misuse. Now, therefore, [text of act]."

Effect of Amendment

2017 Act No. 91, Section 3, in (A), substituted "shall establish" for "may establish".

2019 Act No. 65, Section 3, in (A), added "and the administering of opioid antidotes pursuant to Sections 44-130-60 and 44-130-80" at the end.

SECTION 44-53-1645. *Requirement to review patient's prescription history.*

(A) A practitioner, or the practitioner's authorized delegate, shall review a patient's-controlled substance prescription history and history of the administering of an opioid antidote to the patient pursuant to Section 44-130-60 or 44-130-80, as maintained in the prescription monitoring program, before the practitioner issues a prescription for a Schedule II controlled substance. If an authorized delegate reviews a patient's-controlled substance prescription history and history of the administering of an opioid antidote to the patient as provided in this subsection, the practitioner must consult with the authorized delegate regarding the prescription and opioid antidote administering history before issuing a prescription for a

Schedule II controlled substance. The consultation must be documented in the patient's medical record.

(B) The requirements of this section do not apply to:

(1) a practitioner issuing a prescription for a Schedule II controlled substance to treat a hospice-certified patient;

(2) a practitioner issuing a prescription for a Schedule II controlled substance that does not exceed a five-day supply for a patient;

(3) a practitioner prescribing a Schedule II controlled substance for a patient with whom the practitioner has an established relationship for the treatment of a chronic condition; however, the practitioner must review the patient's controlled substance history maintained in the prescription monitoring program at least every three months;

(4) a practitioner approving the administration of a Schedule II controlled substance by a health care provider licensed in South Carolina;

(5) a practitioner prescribing a Schedule II controlled substance for a patient in a skilled nursing facility, nursing home, community residential care facility, or an assisted living facility and the patient's medications are stored, given, and monitored by staff; or
(6) a practitioner who is temporarily unable to access the prescription monitoring program due to exigent circumstances; however, the exigent circumstances and the potential adverse impact to the patient if the prescription is not issued timely must be documented in the patient's medical record.

(C) A practitioner is deemed to be in compliance with this section if the practitioner utilizes technology that automatically displays the patient's controlled substance prescription history from the prescription monitoring program in the practitioner's electronic medical record system. The practitioner must be able to demonstrate that this technology has been deployed in his practice, but no additional documentation is required in the patient's medical record.

HISTORY: 2017 Act No. 91 (H.3824), Section 1, eff May 19, 2017; 2019 Act No. 65 (H.3728), Section 4, eff January 1, 2021.

Editor's Note

2019 Act No. 65, preamble, provides as follows:

"Whereas, the South Carolina General Assembly is committed to combatting the opioid epidemic occurring within this State; and

"Whereas, the South Carolina General Assembly has enacted and is working to enact legislation aimed at stemming the misuse of opioids in South Carolina; and

"Whereas, collecting information related to opioid use and misuse helps those working to better understand the complexities of substance abuse disorders and enables those working with patients suffering from this disease to develop strategies for treatment, education, and care; and

"Whereas, the purpose of this legislation is to provide data to health care professionals treating patients

who have been diagnosed with an opioid overdose and received an antidote in response to that overdose; and

"Whereas, the South Carolina General Assembly intends for the information collected pursuant to this law to be used by health care professionals to assist patients in getting appropriate treatment including, but not limited to, treatment for substance abuse disorder; and

"Whereas, the General Assembly intends further that the information collected pursuant to this law should not be used as the sole determining factor in a decision regarding whether to treat or refuse to treat a patient suffering from an opioid misuse. Now, therefore, [text of act]."
Effect of Amendment

2019 Act No. 65, Section 4, in (A), in the first sentence, inserted "and history of the administering of an opioid antidote to the patient pursuant to Section 44-130-60 or 44-130-80", and in the second sentence, inserted "and history of the administering of an opioid antidote to the patient as provided in this subsection" and "and opioid antidote administering".

***SECTION 44-53-1650.** Confidentiality; persons to whom data may be released.*

(A) Prescription information submitted to drug control is confidential and not subject to public disclosure under the Freedom of Information Act or any other provision of law, except as provided in subsections (C) and (D).

(B) Drug control shall maintain procedures to ensure that the privacy and confidentiality of patients and patient information collected, recorded, transmitted, and maintained is not disclosed, except as provided for in subsections (C) and (D).

(C) If there is reasonable cause to believe a violation of law or breach of professional standards may have occurred, drug control shall notify the appropriate law enforcement or professional licensure, certification, or regulatory agency or entity and shall provide prescription information required for an investigation.

(D) Drug control may provide data in the prescription monitoring program to the following persons:

(1) a practitioner or pharmacist or authorized delegate who requests information and certifies that the requested information is for the purpose of providing medical or pharmaceutical treatment to a bona fide patient;

(2) an individual who requests the individual's own prescription monitoring information in accordance with procedures established pursuant to state law;

(3) a designated representative of the South Carolina Department of Labor, Licensing and Regulation responsible for the licensure, regulation, or discipline of practitioners, pharmacists, or other persons authorized to prescribe, administer, or dispense controlled substances and who is involved in a bona fide specific investigation involving a designated person;

(4) a local, state, or federal law enforcement or prosecutorial official engaged in the administration, investigation, or enforcement of the laws governing licit drugs and who is involved in a bona fide specific drug-related investigation involving a designated person;

(5) the South Carolina Department of Health and Human Services regarding Medicaid program recipients;

(6) a properly convened grand jury pursuant to a subpoena properly issued for the records;

(7) personnel of drug control for purposes of administration and enforcement of this article;

(8) qualified personnel for the purpose of bona fide research or education; however, data elements that would reasonably identify a specific recipient, prescriber, or dispenser must be deleted or redacted from such information prior to disclosure. Further, release of the information only may be made pursuant to a written agreement between qualified personnel and the department in order to ensure compliance with this subsection;

(9) a coroner, deputy coroner, medical examiner, or deputy medical examiner who is involved in a specific inquiry into the cause and manner of death of a designated person pursuant to Chapter 5, Title 17;

(10) a practitioner in a prescription report card provided to practitioners in accordance with Section 44-53-1655; and

(11) the presiding judge of a drug court pertaining to a specific case involving a designated person.

HISTORY: 2006 Act No. 396, Section 1, eff June 14, 2006; 2014 Act No. 244 (S.840), Section 3, eff June 6, 2014; 2018 Act No. 168 (H.4488), Section 1, eff May 3, 2018; 2018 Act No. 201 (S.918), Section 3, eff May 15, 2018; 2018 Act No. 212 (H.4117), Section 1, eff May 18, 2018.

Code Commissioner's Note

At the direction of the Code Commissioner, the amendments to (D) made by 2018 Act No. 168, 2018 Act No. 201, and 2018 Act No. 212 were read together and renumbered appropriately.

Effect of Amendment

2018 Act No. 168, Section 1, in (D), added (9), authorizing drug control to provide coroners and medical examiners data maintained in the prescription drug monitoring program, and made non-substantive changes.

2018 Act No. 201, Section 3, in (D), added (10), authorizing drug control to provide practitioners in a prescription report card data maintained in the prescription drug monitoring program.

2018 Act No. 212, Section 1, in (D), added (11), authorizing drug control to provide presiding judges of drug courts data maintained in the prescription drug monitoring program.

***SECTION 44-53-1655.** Practitioner prescription report cards.*

(A) The department shall develop and maintain as part of the prescription monitoring program a system to provide prescription report cards to practitioners to inform the practitioner about certain prescribing trends. The report card must provide, at a minimum:

(1) a comparison of the practitioner's number of prescriptions issued per month by therapeutic class code or by specific substances to peer averages by specialty throughout the State;

(2) a comparison of the practitioner's number of milligrams prescribed per month by therapeutic class code or by specific substances to peer averages by specialty throughout the State;

(3) the total number of patients receiving ninety morphine milligram equivalents (MMEs) or more a day;

(4) the total number of patients receiving opioid medications for thirty days or more;

(5) the total number of patients receiving opioids and benzodiazepines medications at the same time;

(6) the total number of patients issued prescriptions from three or more practitioners;

(7) the total number of patients filling prescriptions at three or more pharmacies;

(8) the total number of patients with controlled substance prescriptions whose dispensing dates overlap;

(9) the total number of patients obtaining refills on their prescriptions more than one week early; and

(10) the total number of prescription drug monitoring program queries made by the practitioner and a ratio of the queries to the number of patients or prescriptions issued.

The report card also must provide data on the number of practitioners registered against which the comparisons of items (1) and (2) are being made and any other demographic data relating to the pool of practitioners and may include regional or nationwide prescribing comparison data that would be useful to the practitioner. Prescription report cards, data, documents, records, and any other information accessed or compiled in preparing prescription report cards, are confidential and not subject to discovery, subpoena, or introduction into evidence in any civil action, unless confidentiality is waived by the practitioner.

(B) The department shall coordinate with the Board of Medical Examiners and any other appropriate professional boards as part of the development and implementation of a prescription report card program. The department may contract with another agency of the State or with a private vendor, as necessary, to ensure effective operation of the report card program, as provided in Section 44-53-1660, and may apply for public or private grants or other funding to develop, implement, and maintain the program.

HISTORY: 2018 Act No. 201 (S.918), Section 2, eff November 15, 2018.

Editor's Note

2018 Act No. 201, Section 4, provides as follows:

"SECTION 4. SECTION 2 is effective six months after the effective date of this act. All other SECTIONS are effective upon approval by the Governor."

SECTION 44-53-1660. *Contract for administration by other state agency or private vendor.*

Drug control may contract with another agency of this State or with a private vendor, as necessary, to ensure the effective operation of the prescription monitoring program. A contractor shall comply with the provisions regarding confidentiality of prescription information in Section 44-53-1650 and is subject to the penalties specified in Section 44-53-1680 for unlawful acts.

HISTORY: 2006 Act No. 396, Section 1, eff June 14, 2006.

SECTION 44-53-1670. *Promulgation of regulations.*

Drug control may promulgate regulations setting forth the procedures and methods for implementing this article.

HISTORY: 2006 Act No. 396, Section 1, eff June 14, 2006.

SECTION 44-53-1680. *Violations and penalties.*
(A) A dispenser or authorized delegate who knowingly fails to submit prescription monitoring information to drug control as required by this article, or who knowingly submits incorrect prescription information, is guilty of a misdemeanor and, upon conviction, must be fined not more than two thousand dollars or imprisoned not more than two years, or both.

(B) A person who knowingly discloses prescription monitoring information in violation of this article is guilty of a felony and, upon conviction, must be fined not more than ten thousand dollars or imprisoned not more than ten years, or both.

(C) A person who knowingly uses prescription monitoring information in a manner or for a purpose in violation of this article is guilty of a felony and, upon conviction, must be fined not more than ten thousand dollars or imprisoned not more than ten years, or both.

(D) A pharmacist or practitioner, licensed in Title 40, who knowingly discloses prescription monitoring information in a manner or for a purpose in violation of this article shall be reported to his respective board for disciplinary action.

(E) Nothing in this chapter requires a pharmacist to obtain information about a patient from the prescription monitoring program. A practitioner or authorized delegate of a practitioner who knowingly fails to review a patient's controlled substance prescription history, as maintained in the prescription monitoring program, or a practitioner who knowingly fails to consult with his authorized delegate regarding a patient's controlled substance prescription history before issuing a prescription for a Schedule II controlled substance, as required by this article, must be reported to his respective board for disciplinary action.

(F) A pharmacist or practitioner does not have a duty and must not be held liable in damages to any person in any civil or derivative criminal or administrative action for injury, death, or loss to person or property on the basis that the pharmacist or practitioner did or did not seek or obtain information from the prescription monitoring program. A pharmacist or practitioner acting in good faith is immune from any civil, criminal, or administrative liability that might otherwise be incurred or imposed for requesting or receiving information from the prescription monitoring program.

HISTORY: 2006 Act No. 396, Section 1, eff June 14, 2006; 2014 Act No. 244 (S.840), Section 4, eff June 6, 2014; 2017 Act No. 91 (H.3824), Section 4, eff May 19, 2017.

Effect of Amendment

2017 Act No. 91, Section 4, amended the section, establishing a penalty if a practitioner or authorized delegate fails to review a patient's controlled substance prescription history before prescribing a schedule II controlled substance.

