Bamboo Health

PMP AWARxE®

Data Submission Guide for Medical Cannabis Dispensers

Mississippi Prescription Monitoring Program

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1 Document Overview

This document serves as a training guide and support manual for dispensers of medical cannabis in Mississippi 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 Mississippi
- Data file submission guidelines and methods
- Creating a PMP Clearinghouse account
- Creating a data file
- Uploading or reporting data
- Understanding and correcting errors

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2 Data Collection and Tracking

2.1 Data Requirements

The Mississippi Prescription Monitoring Program (MS PMP) is Mississippi's solution for the monitoring of medical cannabis by healthcare providers. Senate Bill 2095 set forth the legal requirement to report medical cannabis to the MS PMP and to follow Mississippi state statute 73-21-127. The reporting of medical cannabis is required every 24 hours. This includes zero reports. All medical cannabis is to be reported in MMCEUs (Mississippi Medical Cannabis Equivalency Units)

There are 4 categories of medical cannabis and the NDCs that will be reported are as follows.

- NDC 67660000001 Cannabis Flower Smoked: 1 each = 1MCEU
- NDC 67660000002 Cannabis Concentrate vape/tincture: 1 each = 1MCEU
- NDC 67660000003 Cannabis Infused Edibles: 1 each = 1MCEU
- NDC 67660000004 Cannabis Infused Non-Edibles 1 each = 1MCEU
  (Non Edibles are no longer reported to the MSPMP.)

The primary beneficiaries of the Mississippi PMP are patients throughout Mississippi. Because of the Mississippi PMP, healthcare providers can make better and more informed treatment decisions that allow them to provide the most appropriate medical care for their patients.

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3 Data Submission

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

3.1 Timeline and Requirements

- Dispensaries can create their PMP Clearinghouse accounts upon receipt of this guide. See Creating Your Account for more information.
- You can begin submitting data to PMP Clearinghouse as soon as your account has been approved. Dispensers are required to transmit their data using PMP Clearinghouse in accordance with the guidelines outlined under Reporting Requirements.
- If a dispensary does not dispense any medical cannabis for the preceding reporting period, it must file a zero report for that reporting period, or it will be considered noncompliant. See Zero Reports for additional details.

3.2 Upload Specifications

Files should be in the ASAP 4.2B format 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 dispensaries can be in the same upload file in any order.

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4 Accessing Clearinghouse

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

4.1 Creating Your Account

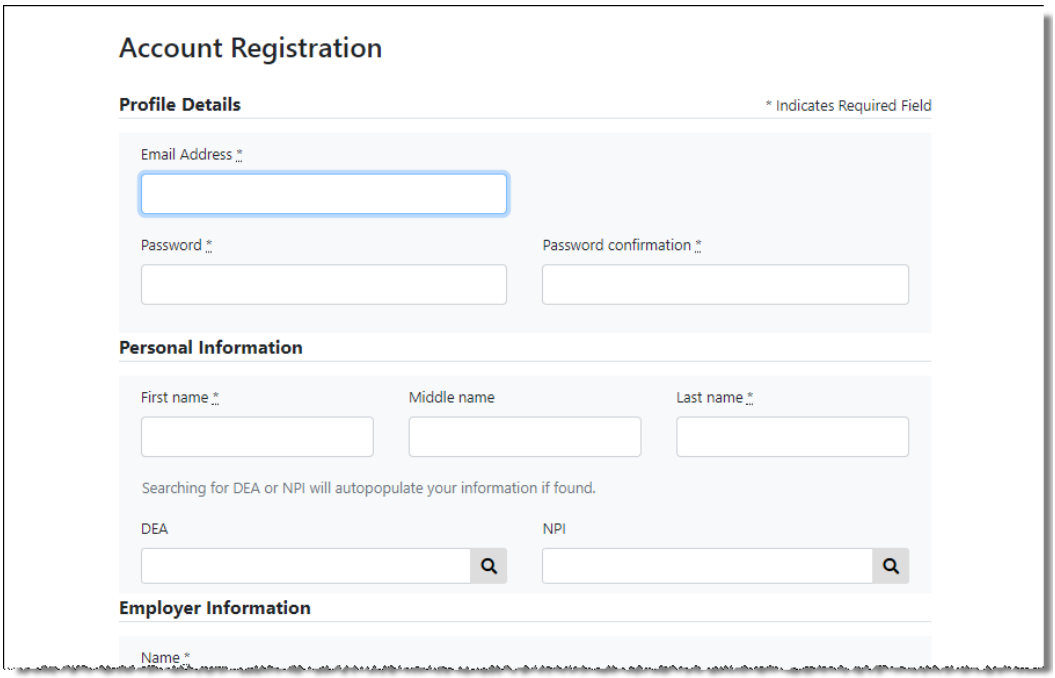
Prior to submitting data, you must create an account. Employer Information will the name of your dispensary as it appears on your state issued permit.

***Notes**:*

- *Data from multiple dispensaries can be uploaded in the same file. For example, dispensaries may send in one file containing medical cannabis information for all their dispensaries licensed in the state. Dispensaries 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.



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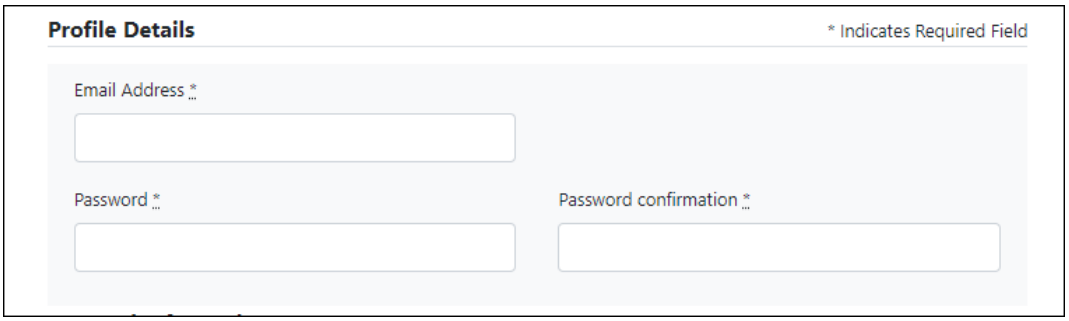
2. Complete your Profile Details.



   a. Enter your current, valid email address in the **Email Address** field. This email address will need to be access daily by the dispensary for reporting purposes.

   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 a red asterisk (*).
   - You will list your license number issued to you by the Mississippi Department of Revenue.

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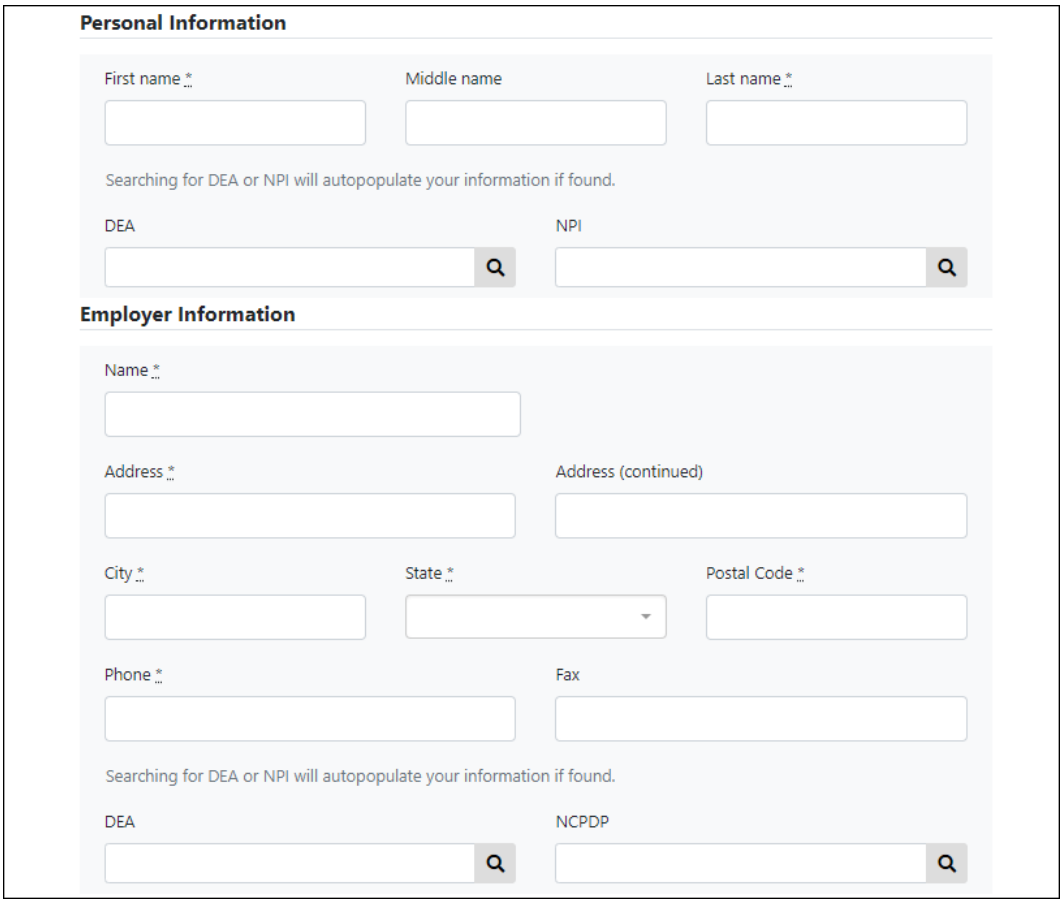
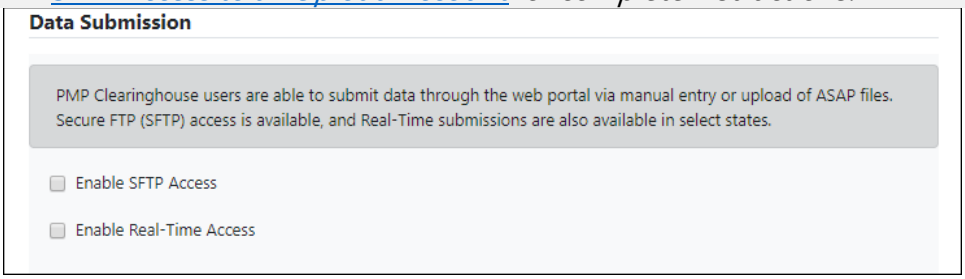


4. If secure file transfer protocol (SFTP) is required, complete the **Data Submission** section of the page.

***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.

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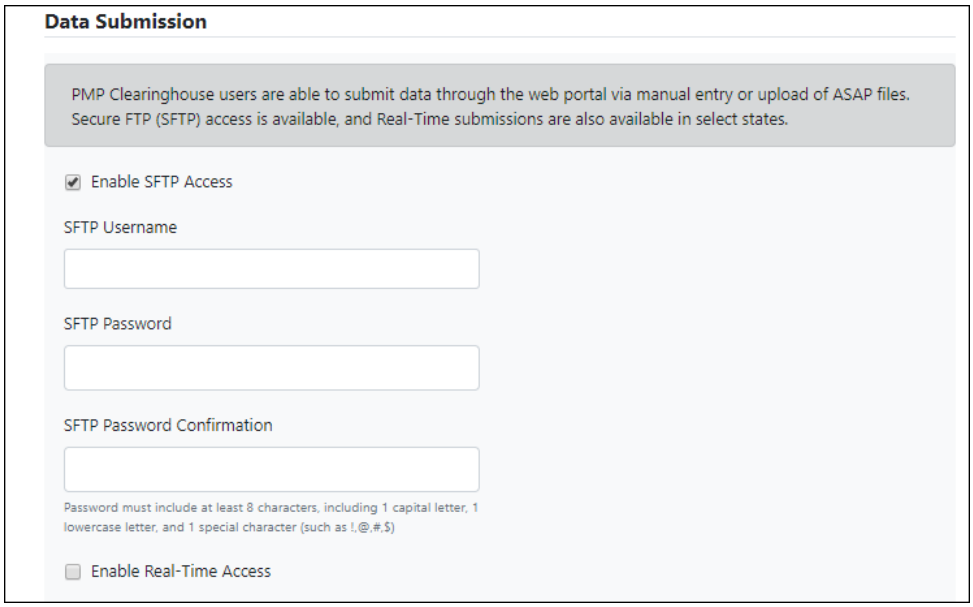
The SFTP access fields are displayed.



b. Your **SFTP Username** is automatically generated using the first five characters of your employer's name + your employer's phone number + @prodpmpsftp. 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@prodpmpsftp*.

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 sftp://sftp.pmpclearinghouse.net.*
- *Additional details on SFTP configuration can be found in Appendix C: SFTP Configuration.*

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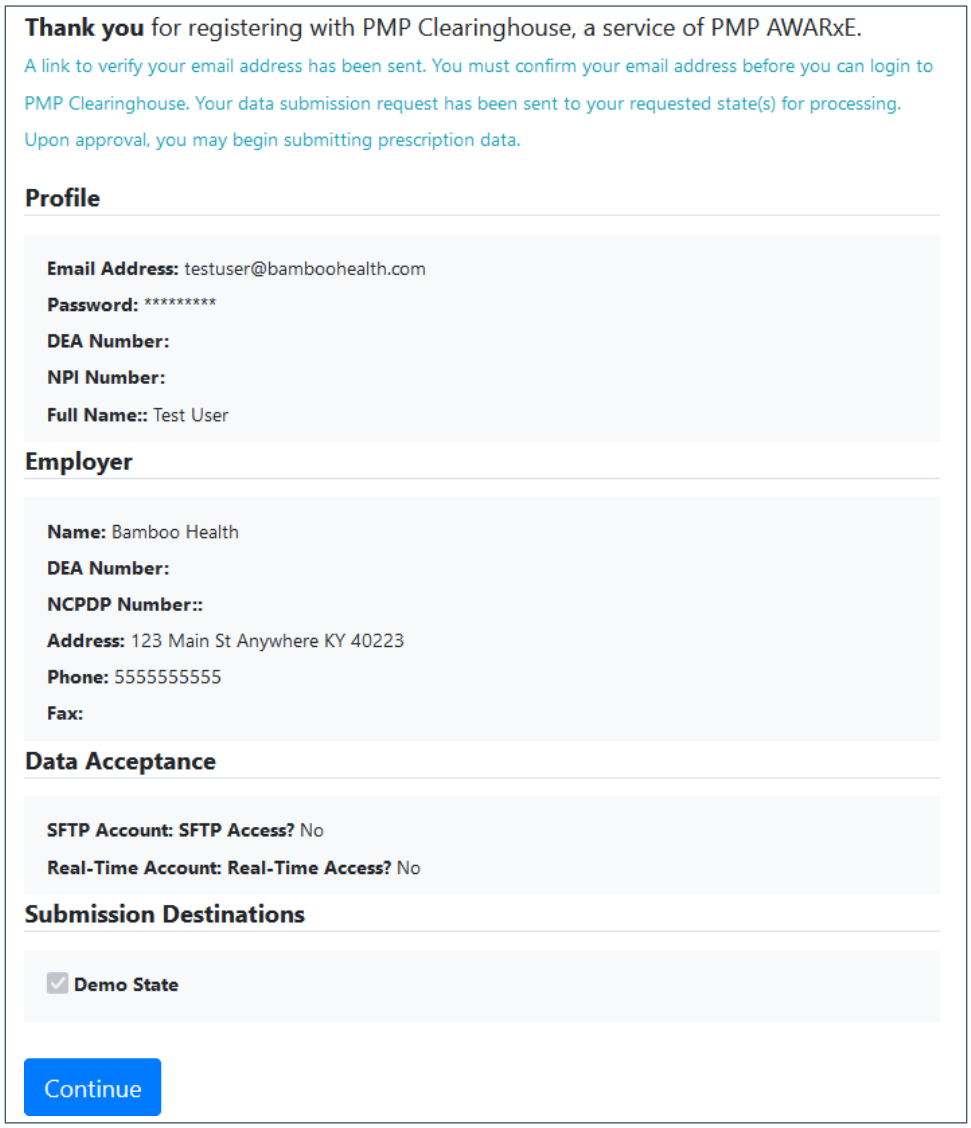
5. In the Submission Destinations section of the page, select Mississippi to submit data to
6. Click **Submit**.

   The request is submitted to the PMP administrator and the **Registration Information Overview** page is displayed.



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 the state administrator has approved your request, 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.

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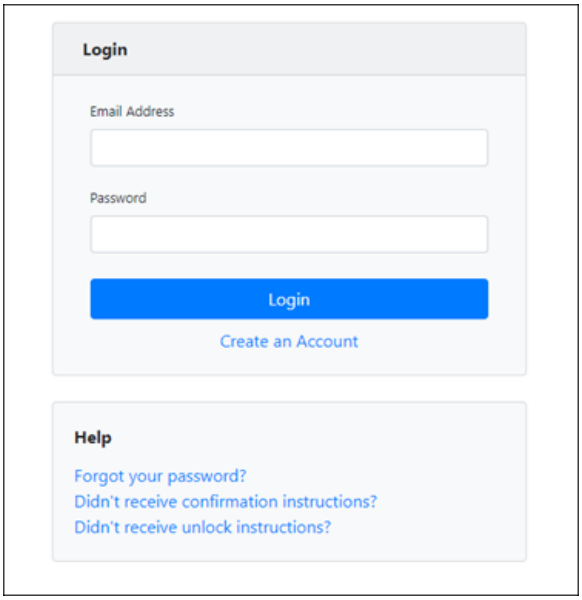
4.2 Logging In to PMP Clearinghouse

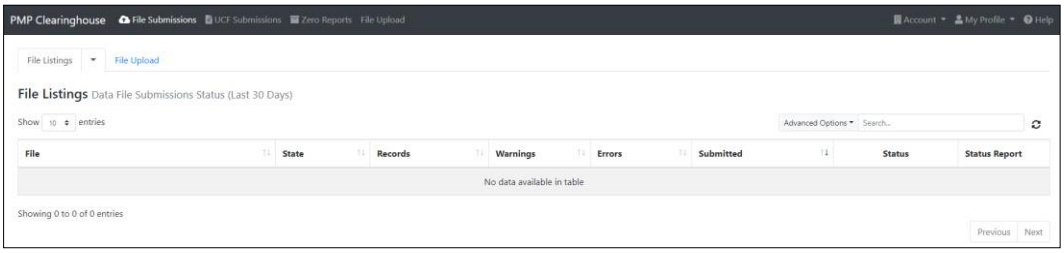
1. Open an internet browser window and navigate to the PMP Clearinghouse Login page located at https://pmpclearinghouse.net/users/sign_in.



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.



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5 Data Delivery Methods

This chapter provides information about data delivery methods you can use to upload your medical cannabis 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:

Delivery Method	Page
Secure FTP	10
Web Portal Upload	11
Manual Entry (UCF)	12
Zero Reports	15

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 subfolders 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., 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.*

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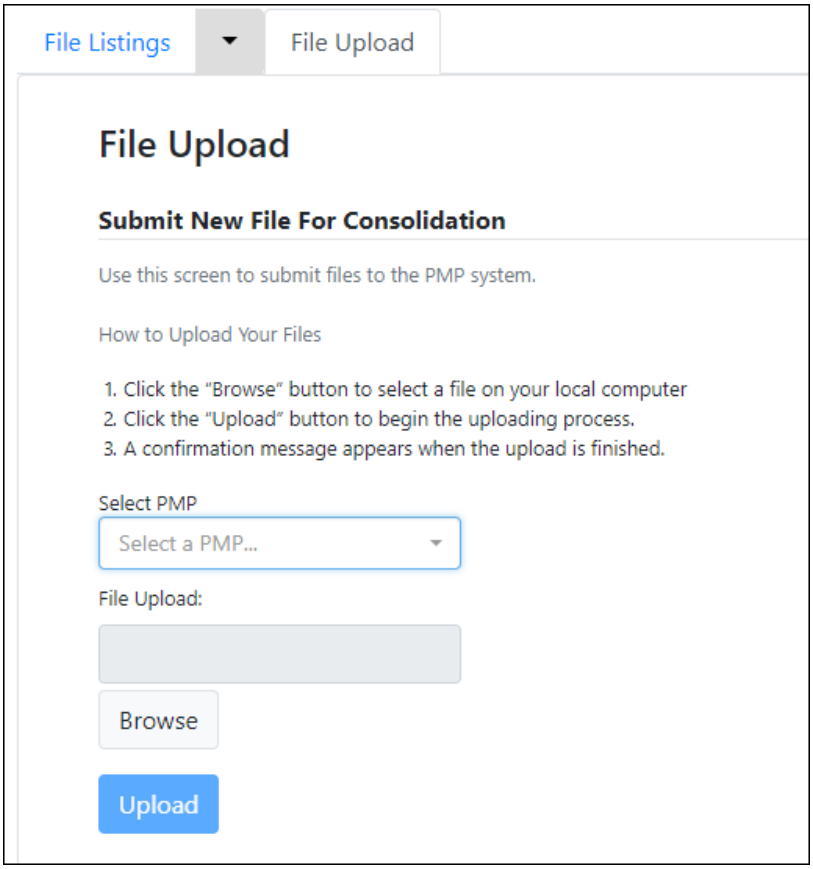
5.2 Web Portal Upload

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 as shown on the following page.



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

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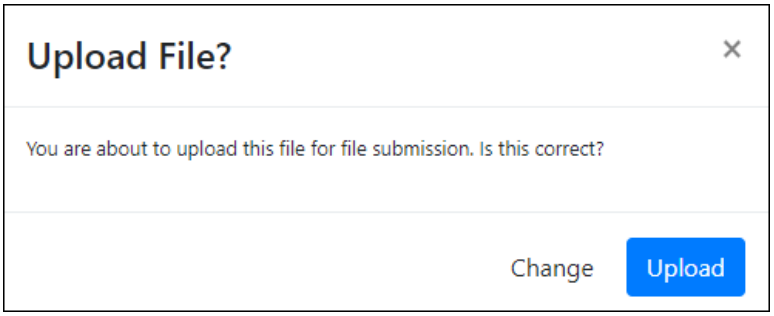
7. Click **Upload**.

   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 Submissions page.

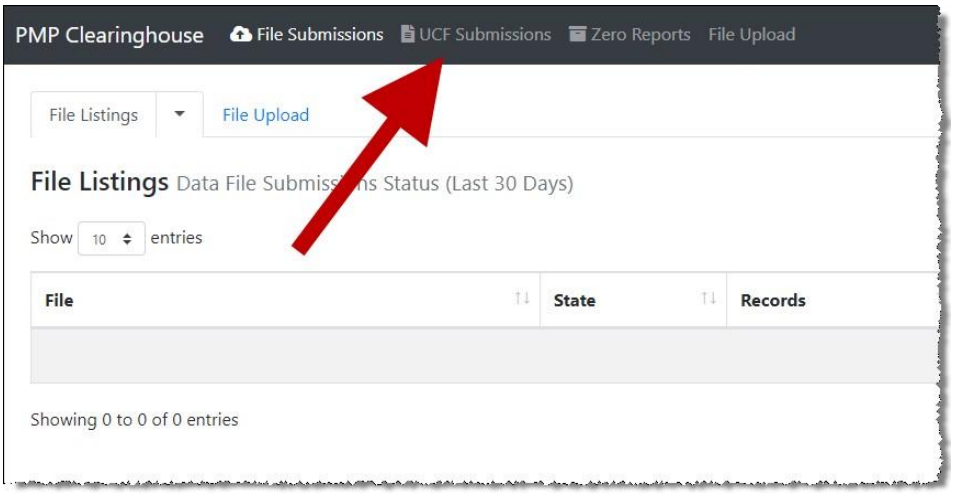
   Note: *When uploading a file, the file name must be unique. If the file name is not unique, a message is displayed indicating that the file name has already been taken.*

5.3 Manual Entry (UCF)

You can manually enter your dispensing 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**.



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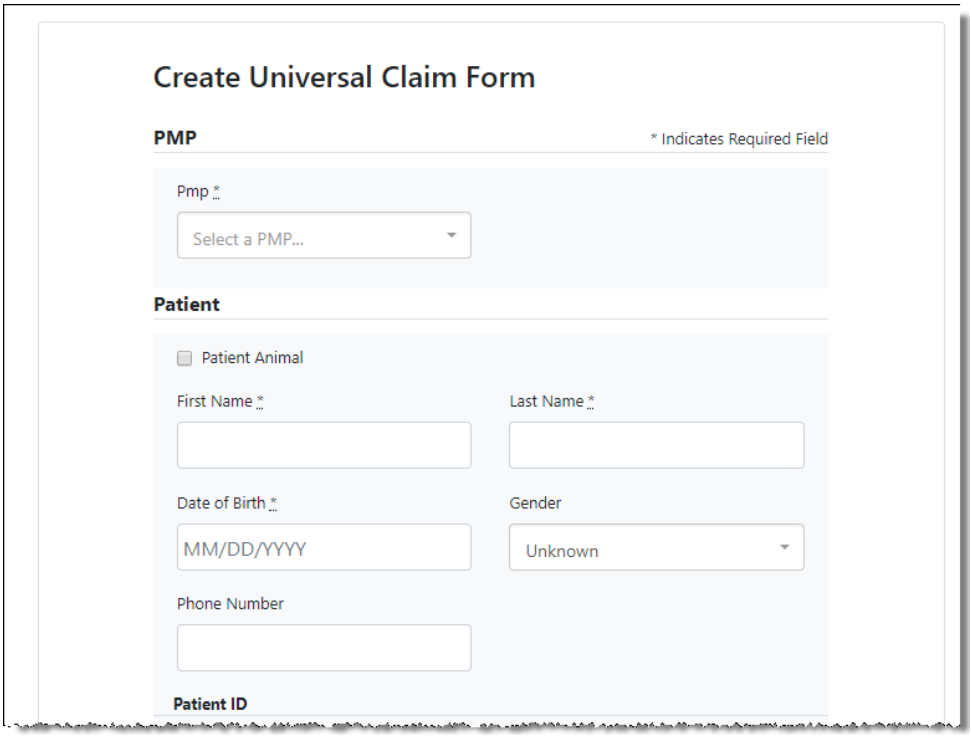
The UCF Listings page is displayed.

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 a PMP** field.
6. Complete the required fields.

   Notes:

   - *An asterisk (*) indicates a required field.*
7. Once you have completed all required fields, click **Save**.

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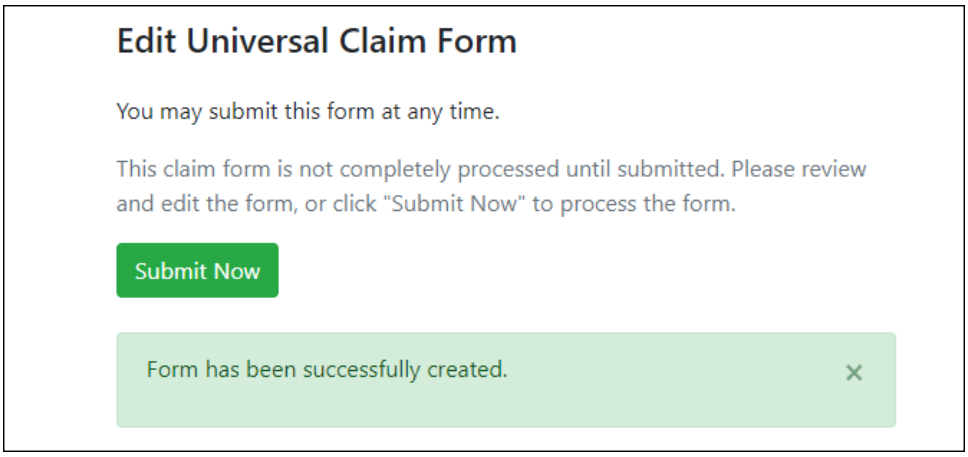
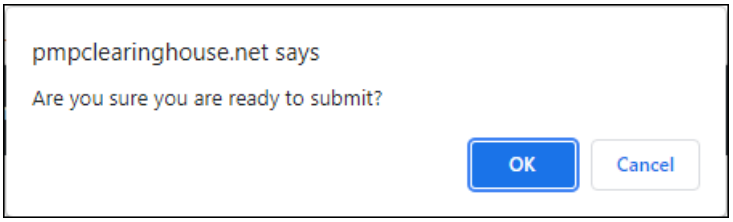
The **Submit Now** button is displayed at the top of the page.



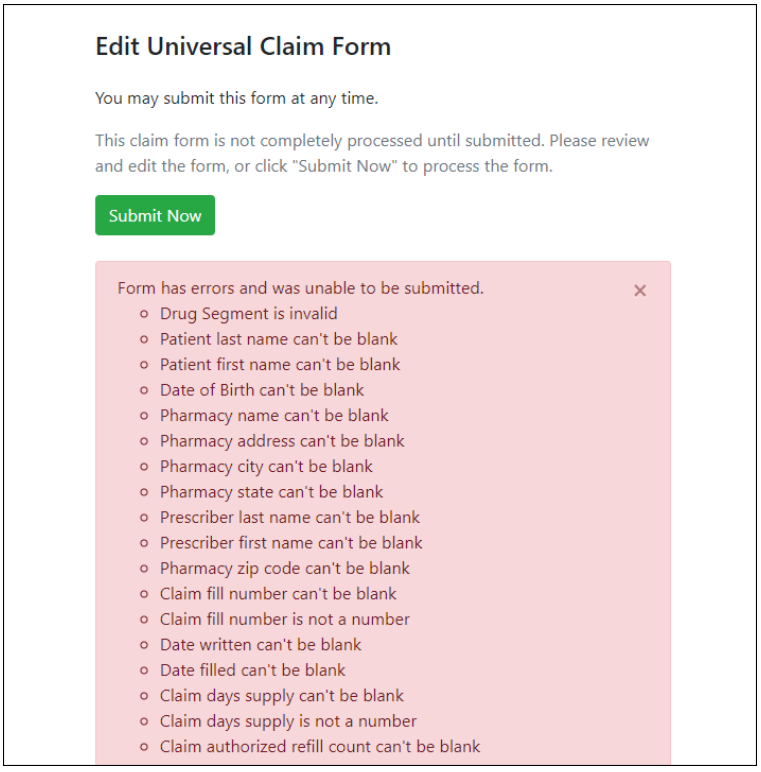
8. Click **Submit Now** to continue with the data submission process.

   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.



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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.

    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 Mississippi 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 dispensary that includes its identifiers (e.g., state license), 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**.

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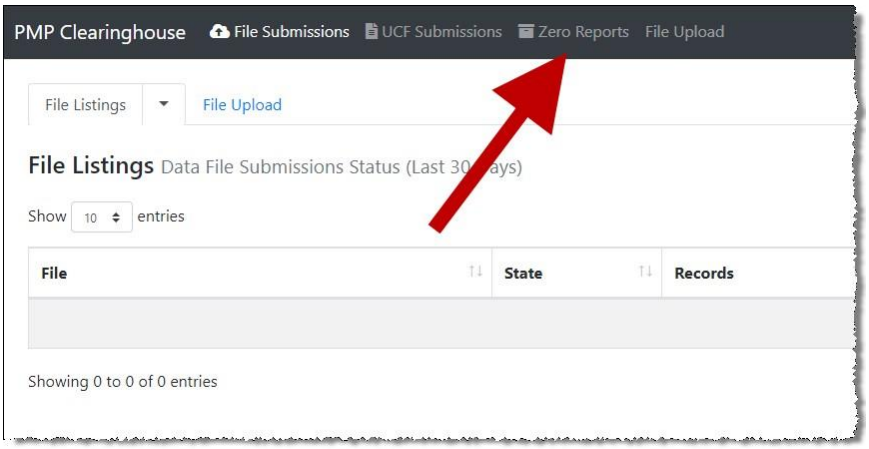
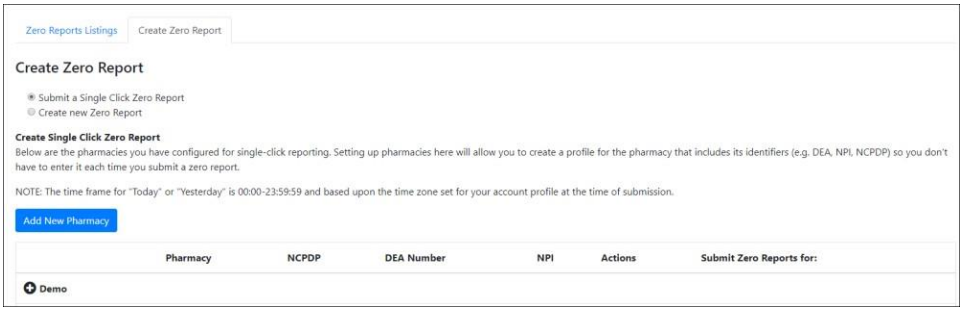


The Zero Report Listings page is displayed.

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

   The Create Zero Report page is displayed. *Note that **Submit a Single Click Zero Report** is selected by default.*



   - Any dispensaries 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 dispensary for single-click zero reporting, continue to Step 5.

5. Click **Add New Pharmacy**.

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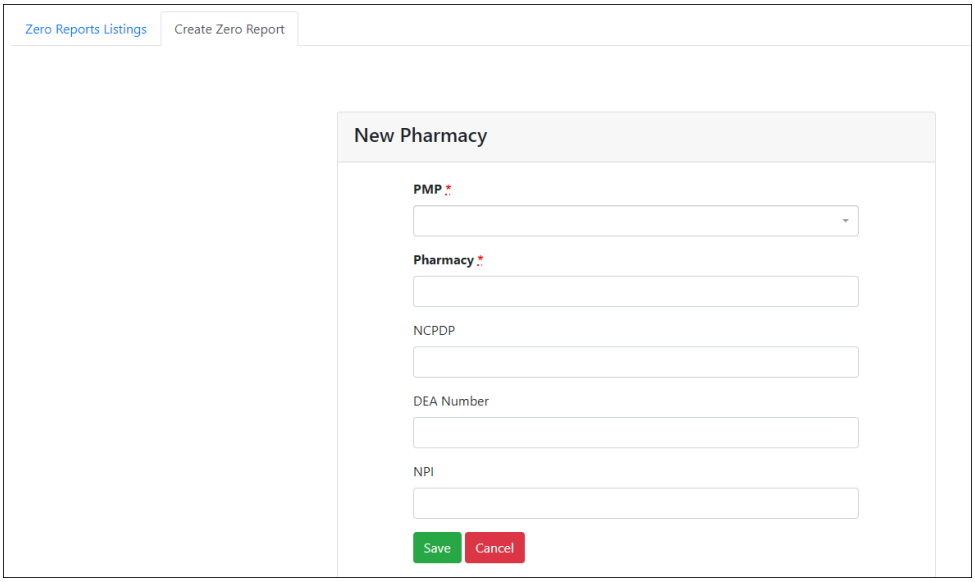
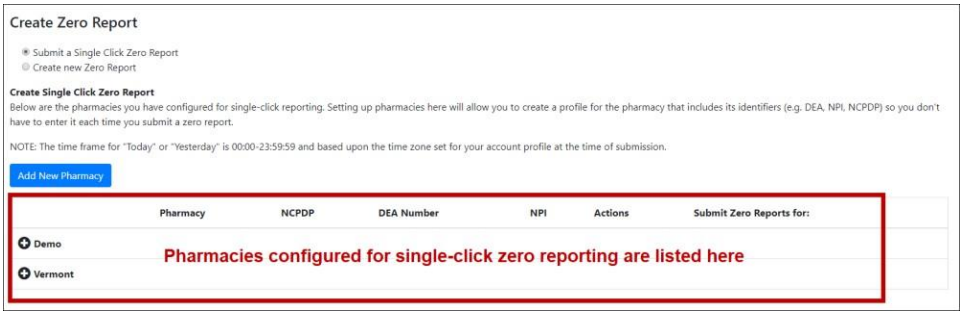
The New Pharmacy page is displayed. This will be your dispensary name.



6. Select the PMP for which you are submitting a zero report from the drop-down list in the **PMP** field.
7. Enter the dispensary's name in the **Pharmacy** field.
8. Populate the **s state license number** 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 dispensary 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 dispensaries you have configured for single-click zero reporting for that PMP is displayed. *Note that this page allows you to submit a zero report for the current date (**Today**) or the previous day (**Yesterday**).*

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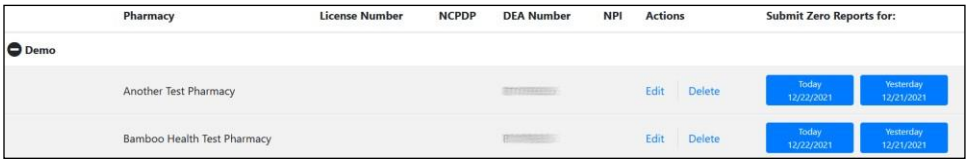
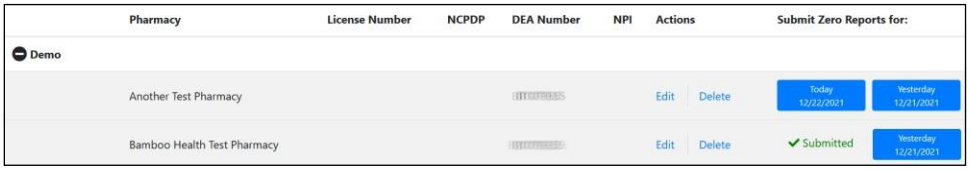


11. Click **Today** to submit a zero report for the current date;

    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.

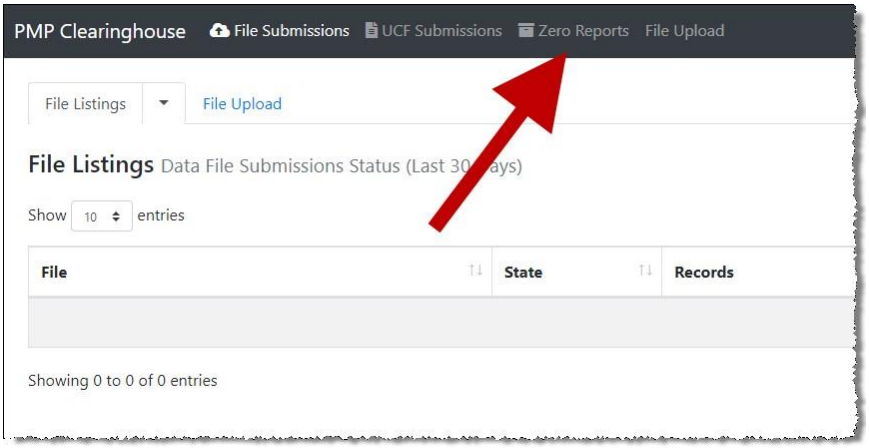


Note: *You may edit or delete a pharmacy from this page.*

- *To edit a dispensary, 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 dispensary, 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.

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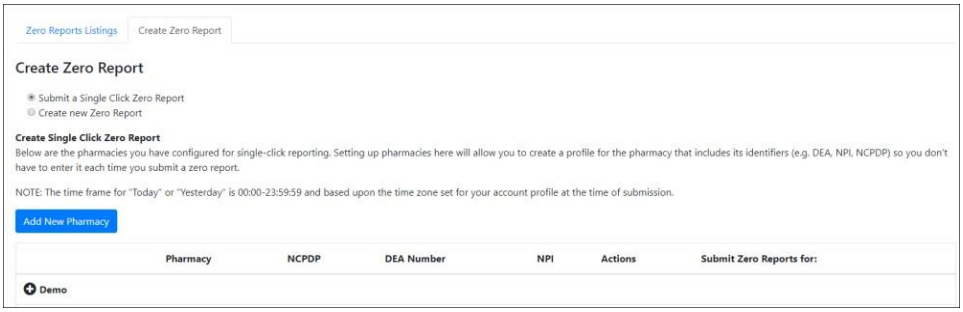
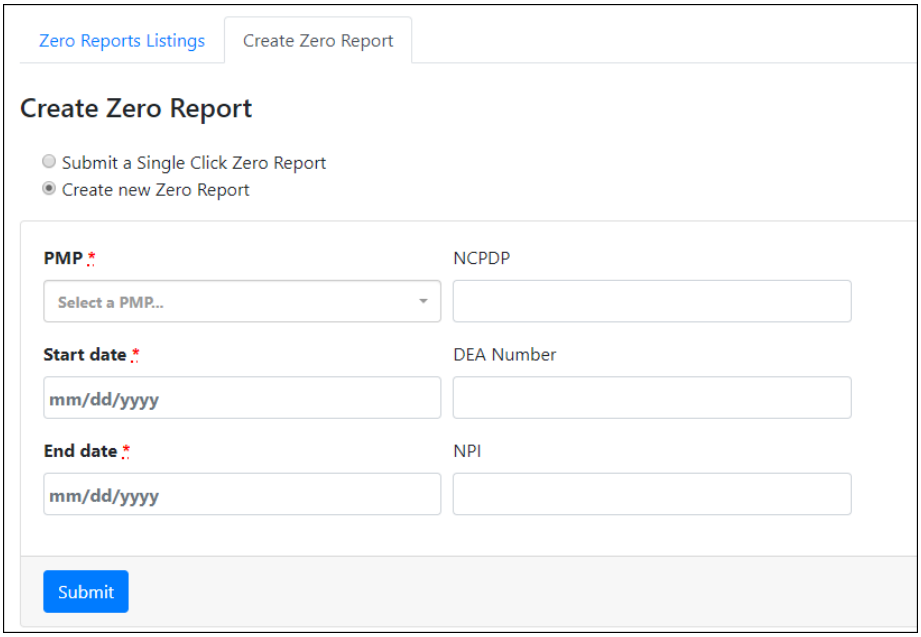
4. Click the **Create Zero Report** tab.

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

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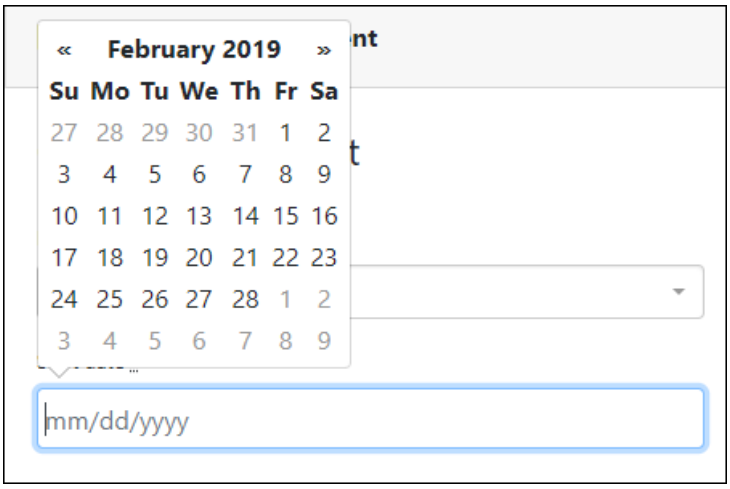

8. Enter your state license numbers, if required by your PMP.

   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.

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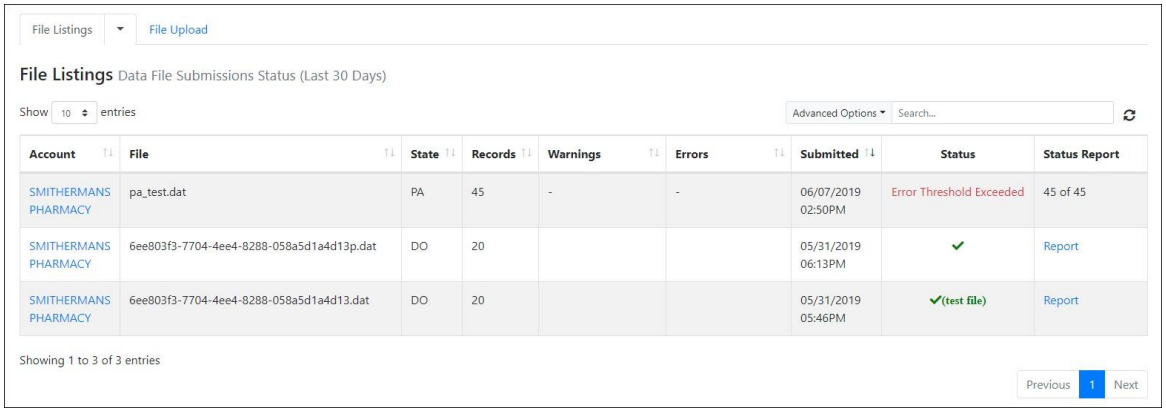
6 Data Compliance

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. Click **File Submissions** to access this page.



- The **Status** column, located at the end of each row, displays the file status.
- 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

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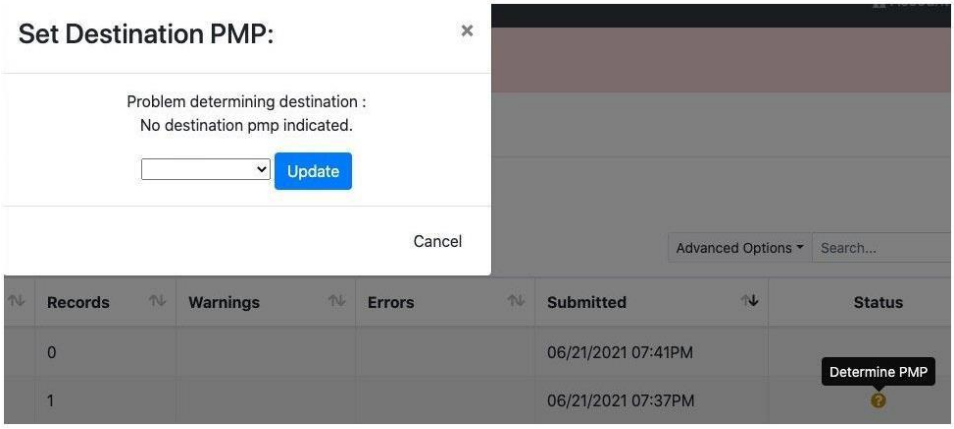
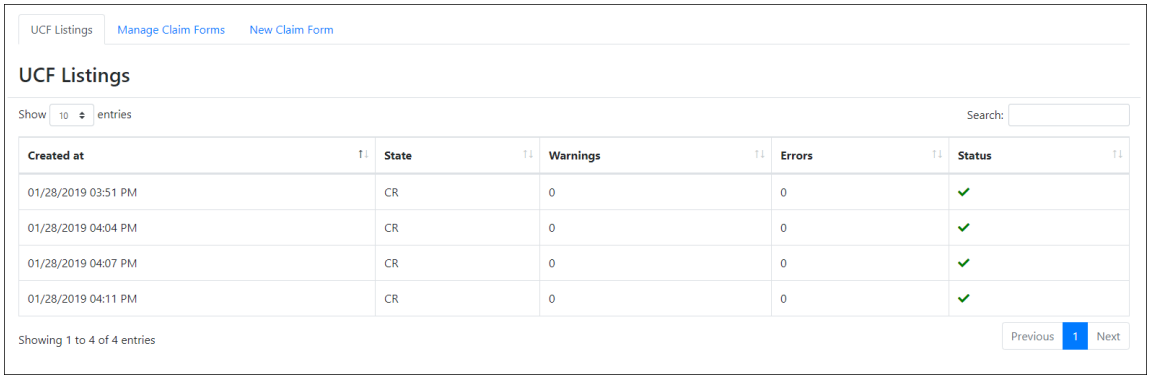
mouse over hint of "Determine PMP." Clicking the icon will prompt you to select a destination PMP to which the data file will be transferred.



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.



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

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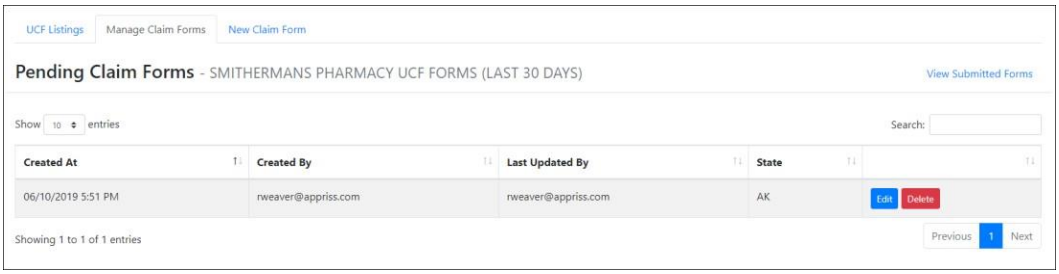
submit the record, you have 30 days to make updates to these records in Clearinghouse.

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

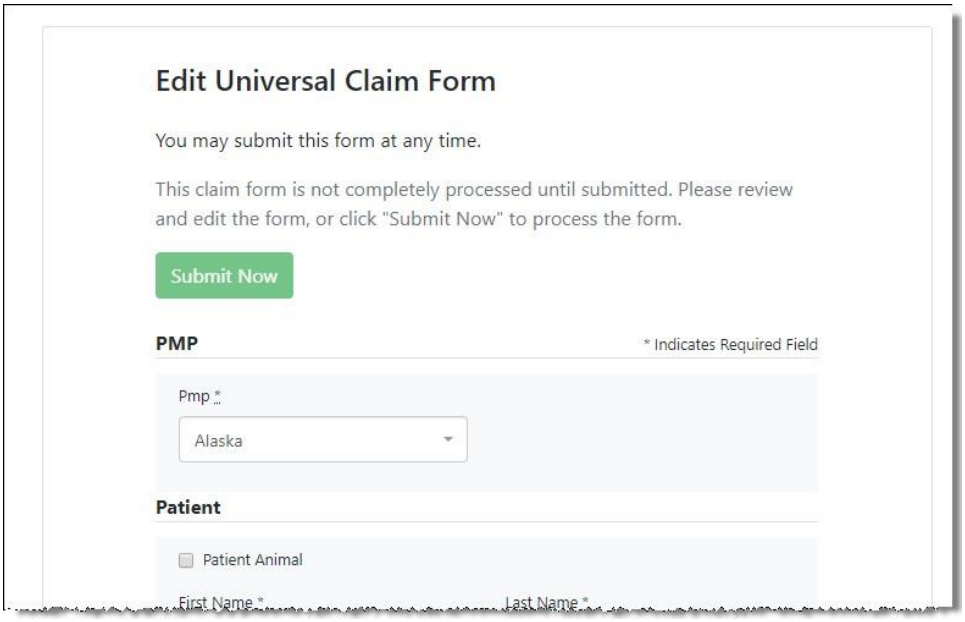
The **Pending Claim Forms** page is displayed.



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

Note: *If it has been longer than 30 days, the* ***Edit*** *option will not 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.

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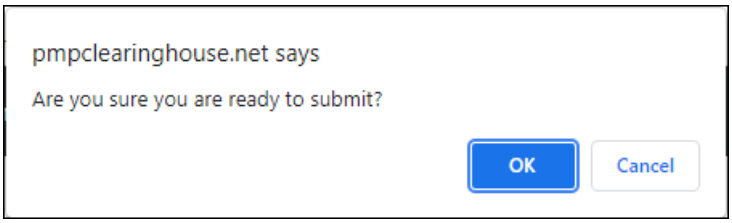
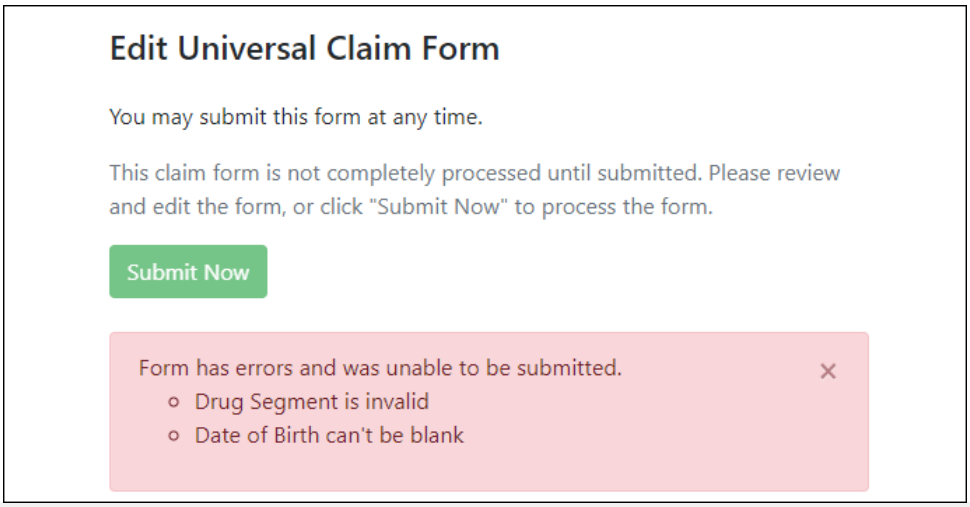
A message is displayed prompting you to confirm the data submission.



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.

Once your data has been successfully submitted, your report is listed on the UCF Listings page.

6.3 Error Correction Page

6.3.1 View Records with Errors

Errors are required to be corrected within 7 days of the notice of the error. 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**

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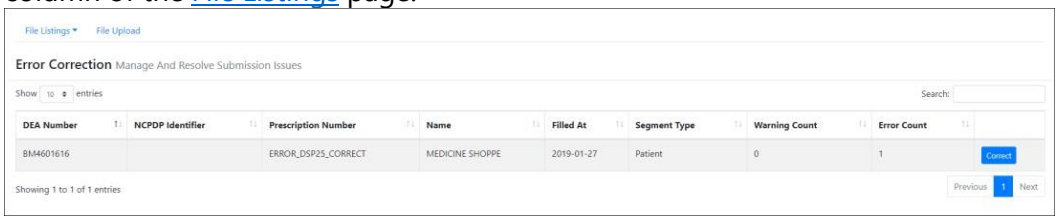
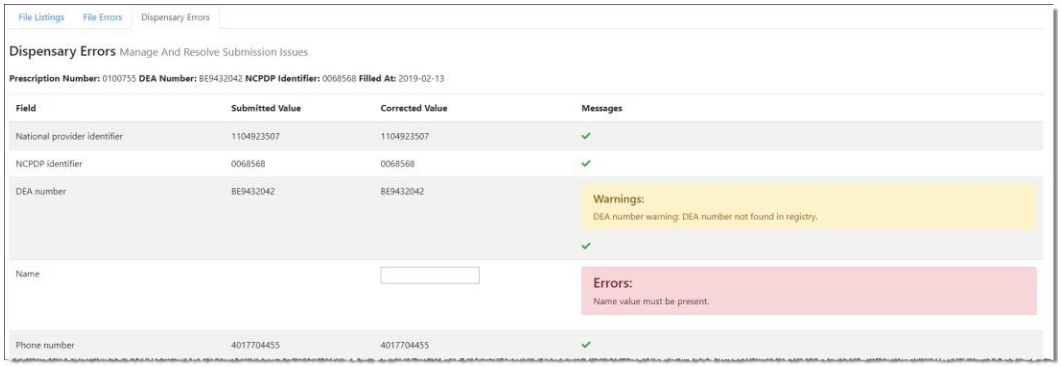
column of the File Listings page.



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 **Message** 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

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

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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: Mississippi 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

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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
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.*

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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 *Zero Report Confirmation* is provided below.

SUBJ: ASAP Zero Report: zero_reports_20220306KSMCPS.DAT

BODY:
Summary:
* File Name: zero_reports_20220306KSMCPS.DAT
* PMP Name: Mississippi
* Date Range: 2022-03-06 - 2022-03-06
* Submission Date: 2022-03-07
* ASAP Creation Date: 2022-03-07

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8 Managing Your Upload Account

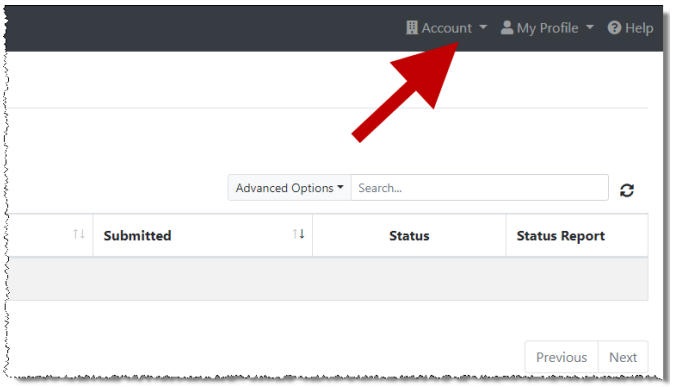
The **Account** menu option allows you to manage the information associated with your organization's upload account, including adding users, PMPs, and SFTP access to your account as well as editing your organization's account information.

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.

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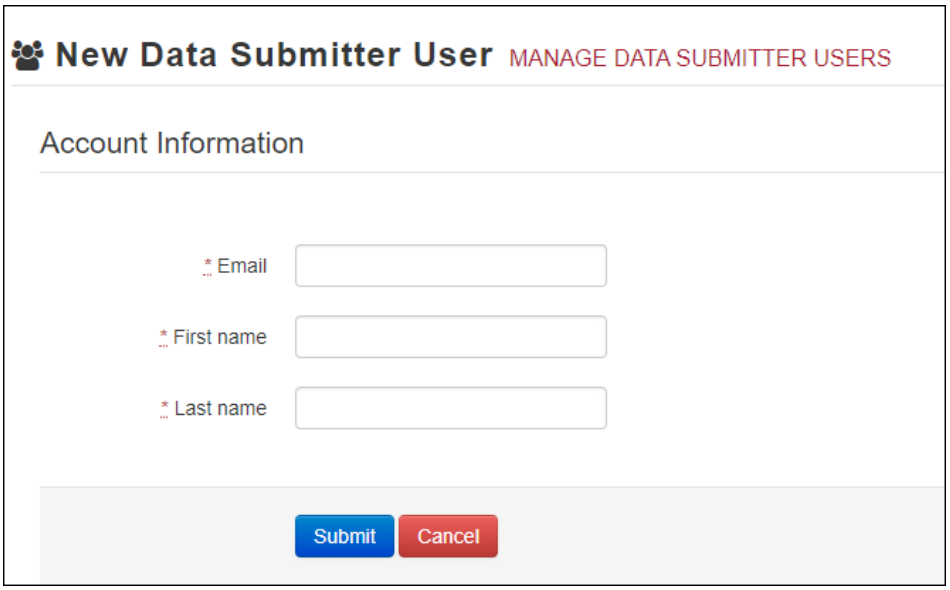
The New Data Submitter User page is displayed.



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

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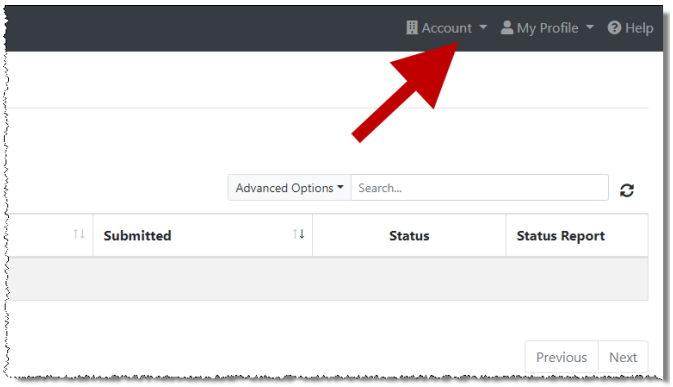
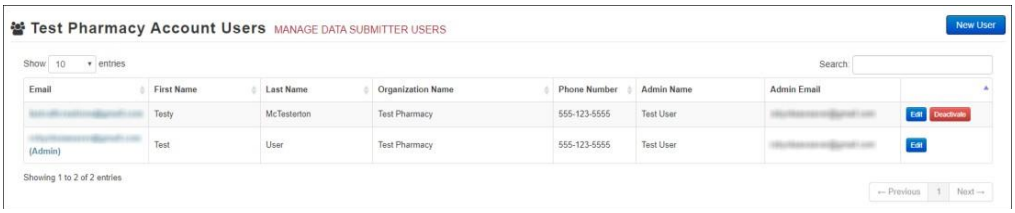
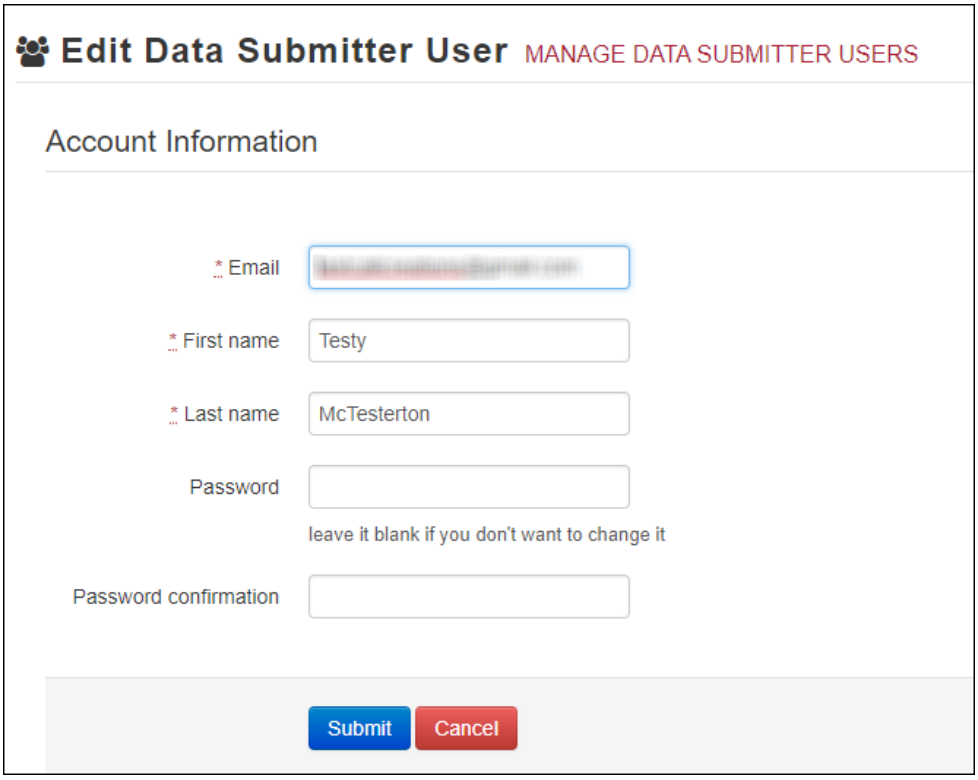


3. Select **Users** from the **Account** drop-down menu.
   The Account Users page is displayed.



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.

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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.*

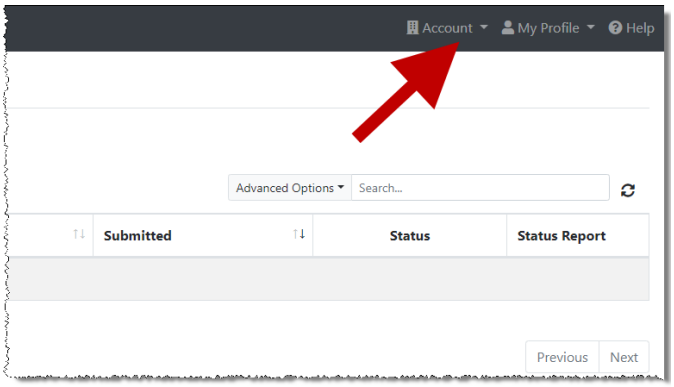
6. Click **Submit**.

   The password is changed.

8.2 Adding PMPs to Your Upload Account

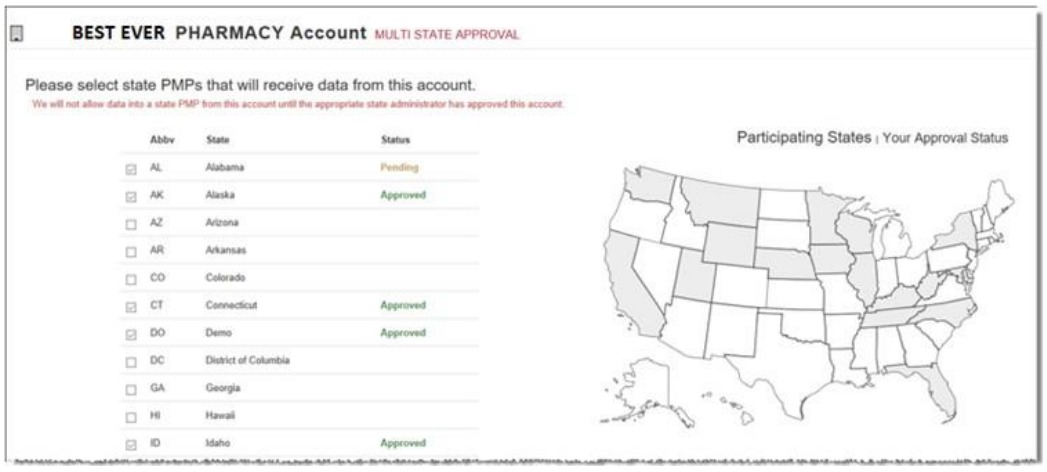
If your organization needs to submit data files to an additional PMP that uses PMP AWARxE, you can submit the request through PMP Clearinghouse.

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 states currently using the PMP AWARxE system as well as your data sharing status with each state.



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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.

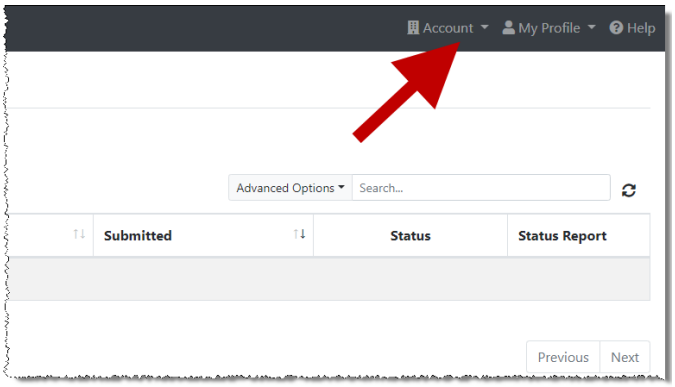
   Notes:

   - *If you are submitting data via SFTP, the file must be located in the proper subfolder 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

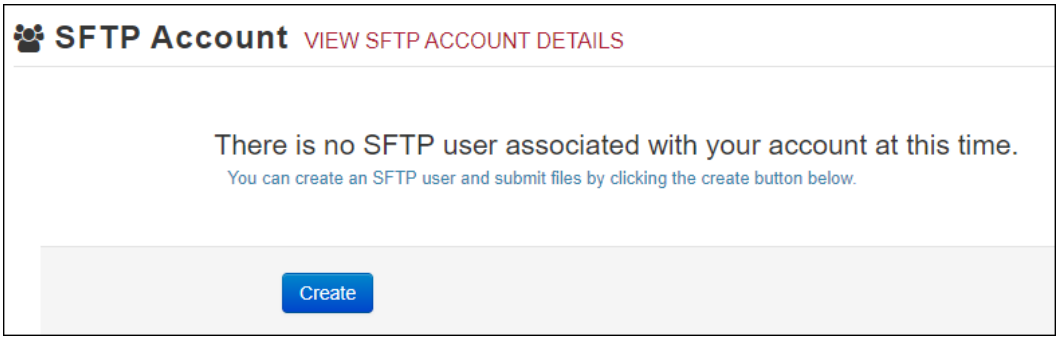
If a registered upload account did not request an SFTP account during the account creation process, you can request one at any time using the **Account** menu option.

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



3. Select **SFTP Details**.

   The SFTP Account page is displayed.



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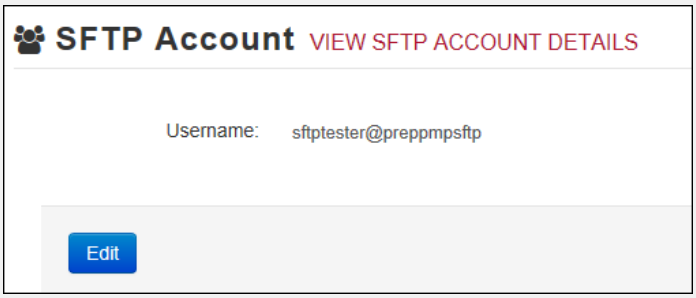
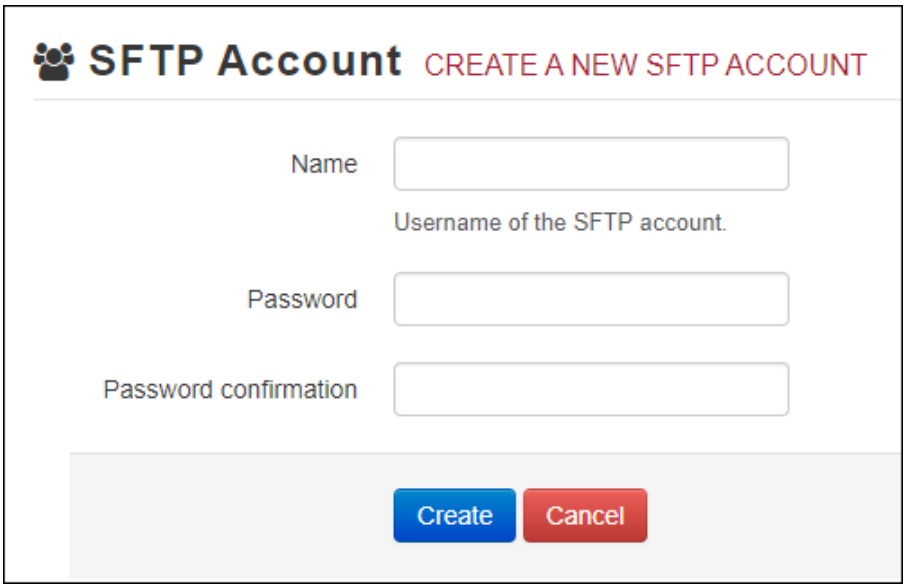
Note: *If an SFTP account already exists for the upload account, the username is displayed on the SFTP Account page.*



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*

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- *One (1) special character, such as !, @, #, $, etc.*

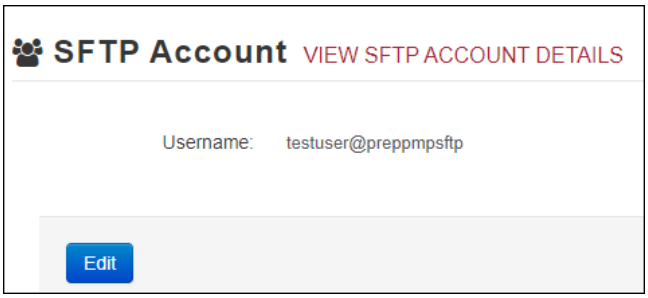
Once the account has been successfully created, this password will be input into the pharmacy software so that submissions can be automated.

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 sftp://sftp.pmpclearinghouse.net.*
- *Additional details on SFTP configuration can be found in Appendix C: SFTP Configuration.*

7. Click **Create**.

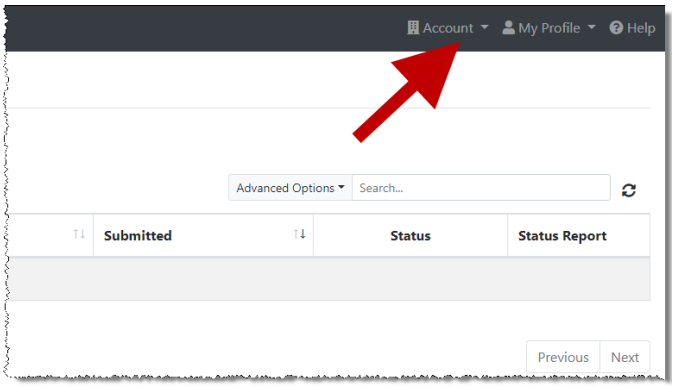
   The account is created, and the username is displayed.



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.

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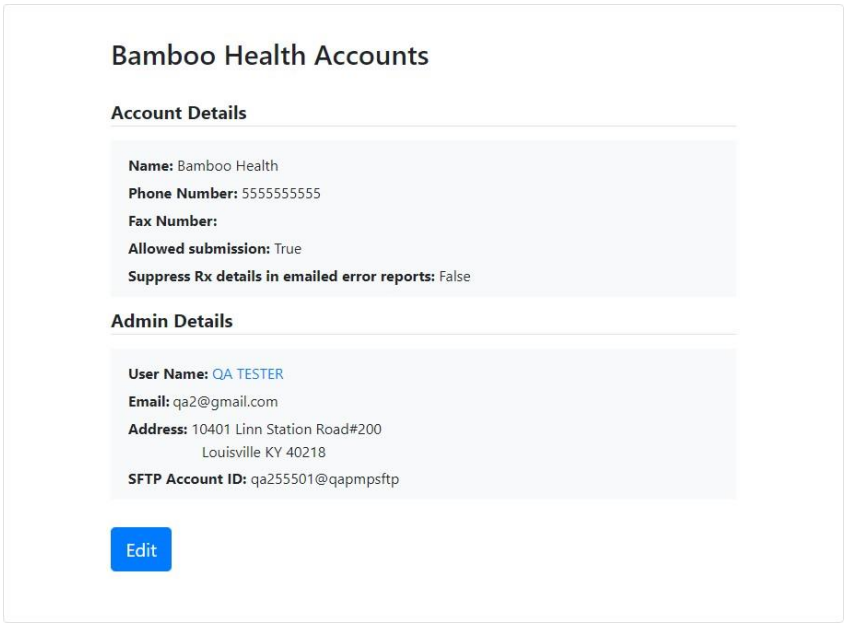
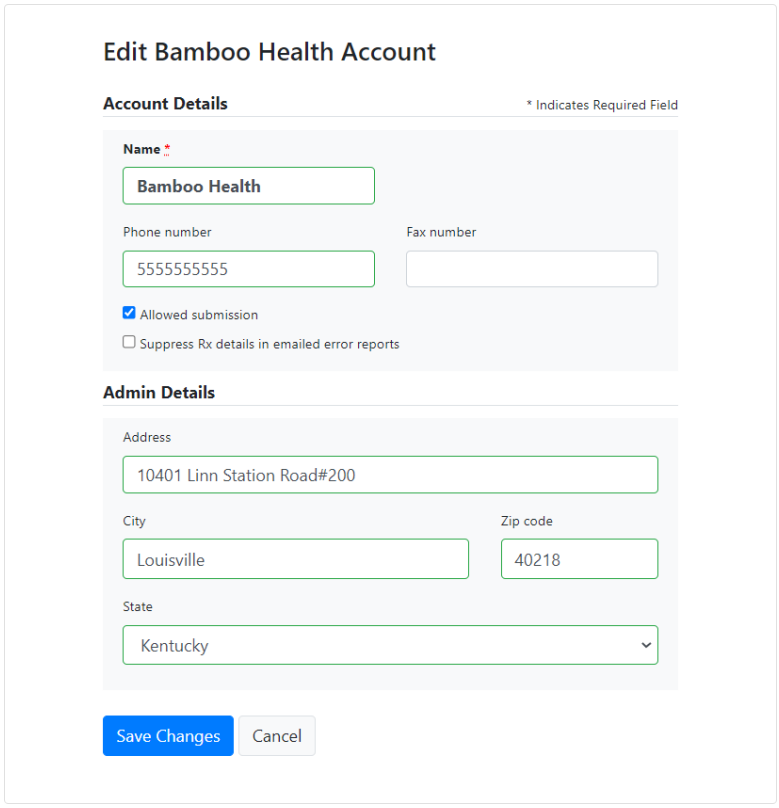


4. Click **Edit**.

   The Edit Account page is displayed.



5. Update the information as necessary, then click **Submit**.

   The account information is updated.

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9 Managing Your User Profile

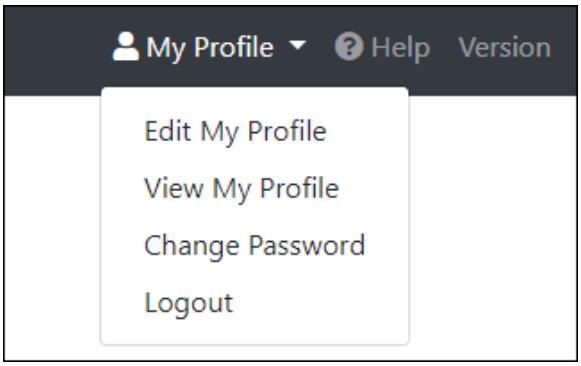
This chapter describes how to manage your individual user profile, including how to edit your profile and manage your password.

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.*

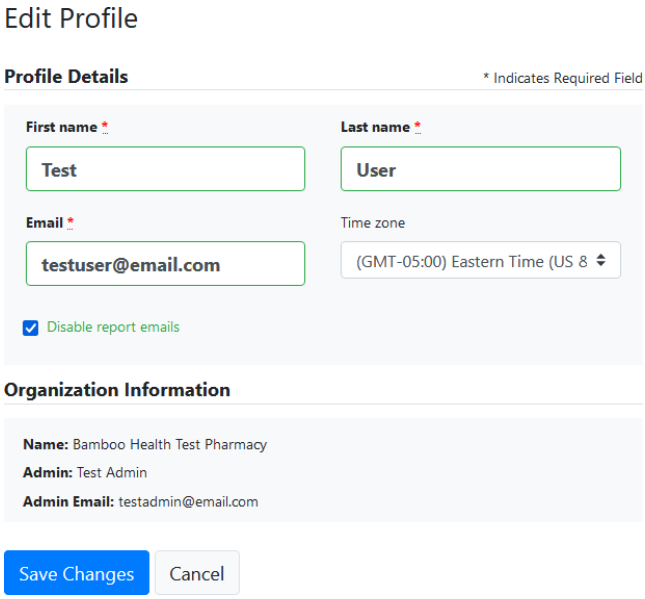
9.1 Editing Your Profile

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.*

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



3. Select **Edit My Profile**.



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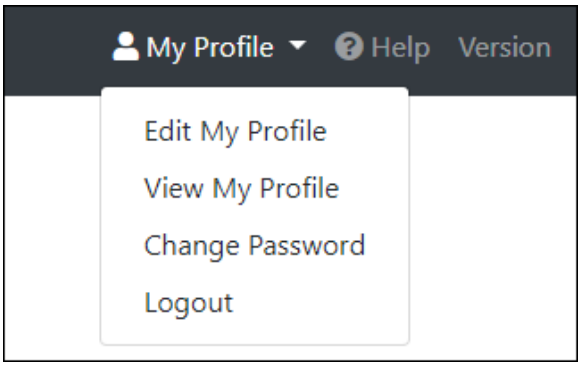
4. Update your information as necessary, then click **Submit**.
   Your changes are saved, and your updated profile is displayed.

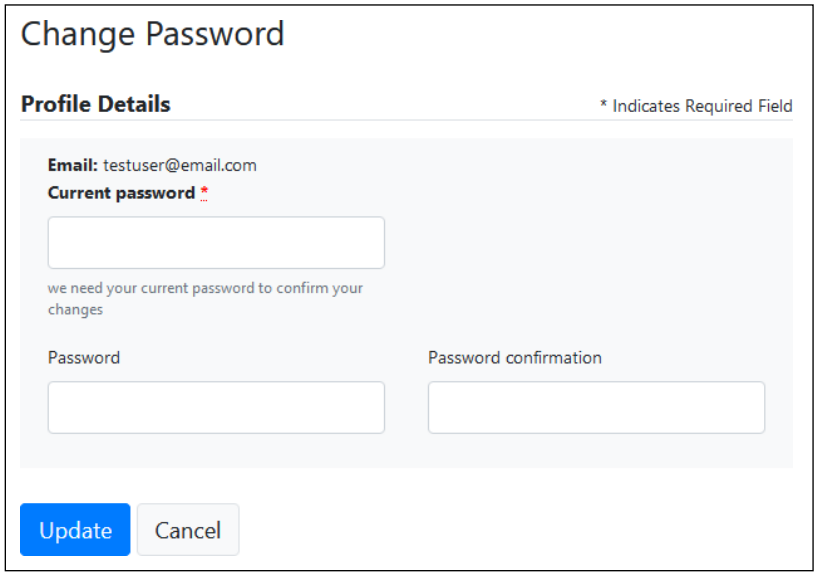
9.2 Changing Your Password

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*

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

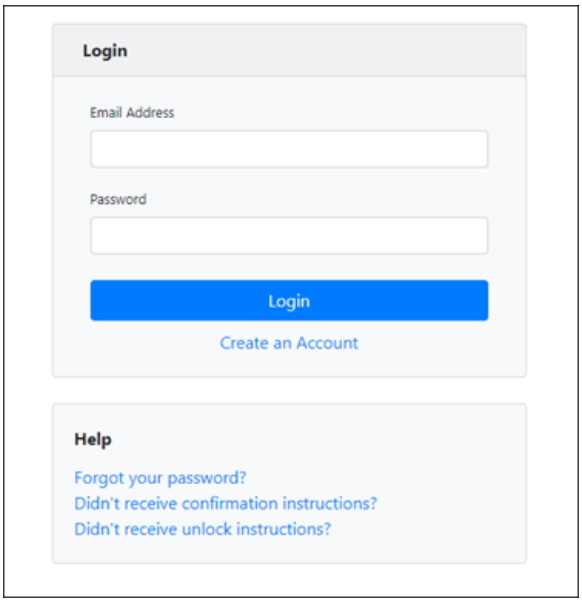
6. Click **Update**.

   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.

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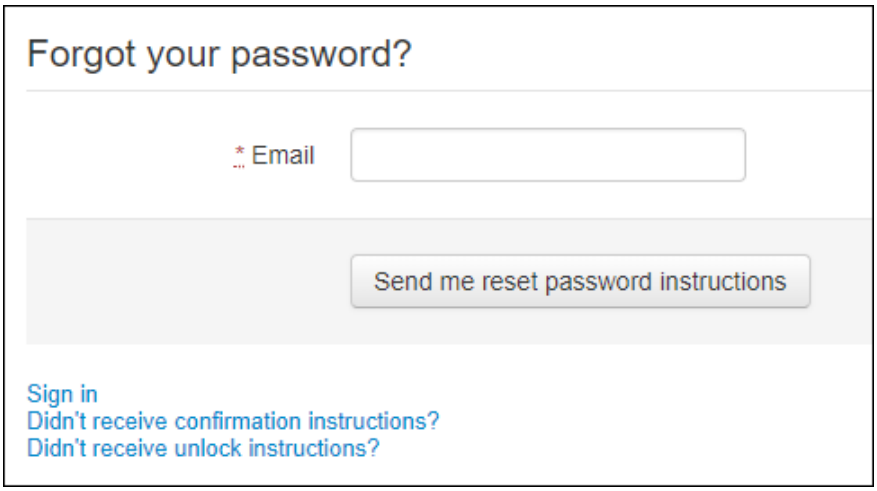
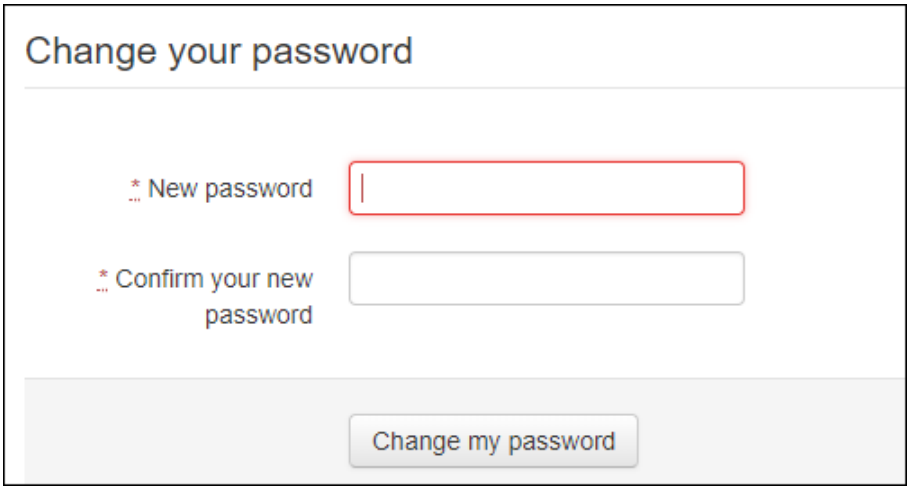


3. Enter the email address associated with your user account, then click **Send me reset password instructions**.
4. Once you receive the reset password email, click the **Change my password** link within the email.

   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.

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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 1-855-5MS-4PMP (1-855-567-4767);

  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. Be sure to specify you are a medical cannabis dispensary.

10.2 Administrative Assistance

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

Mississippi Prescription Monitoring Program
6360 I-55 North
Suite 400
Jackson, MS 39211

PMP: (601) 899-0138
Email: MSPMPASSIST@mbp.ms.gov

Website: https://pmp.mbp.ms.gov

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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		N/A	N/A; initial publication

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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 Mississippi 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 Mississippi
  - 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.*

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Segment	Element ID	Element Name	Requirement	Notes
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 = xx.x (4.2b)	Required	
	TH02	**Transaction Control Number** Sender assigned code uniquely identifying a transaction.	Required	
	TH03	**Transaction Type** Identifies the purpose of initiating the transaction. • 01 Send/Request Transaction • 04 Void (used to void a specific Rx in a real-time transmission or an entire batch that has been transmitted)	Not Required	
	TH04	**Response ID** Contains the Transaction Control Number of a transaction that initiated the transaction. Required in response transaction only.	Not Required	
	TH05	**Creation Date** Date the transaction was created. Format: CCYYMMDD.	Required	
	TH06	**Creation Time** Time the transaction was created. Format: HHMMSS or HHMM.	Required	
	TH07	**File Type** • P = Production • T = Test	Required	
	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.	Not Required	
	TH09	**Segment Terminator Character** This terminates the TH segment and sets the actual value of the data segment terminator for the entire transaction.	Required	

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Segment	Element ID	Element Name	Requirement	Notes
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)	Required	
	IS02	**Information Source Entity Name** Entity name of the Information Source.	Required	
	IS03	**Message** Free-form text message.	Not Required	
PHA: Pharmacy Header (required) Used to identify the Dispensary. **Note:** It is required that information be provided in at least one of the following fields: PHA01, PHA02, or PHA03. **MEDICAL CANNABIS DISPENSARIES WILL ONLY USE PHA04**				
	PHA01	**National Provider Identifier (NPI)** Identifier assigned to the dispensary by CMS.	Not Required	NEVER USE
	PHA02	**NCPDP/NABP Provider ID** Identifier assigned to pharmacy by the National Council for Prescription Drug Programs.	Not Required	NEVER USE
	PHA03	**DEA Number** Identifier assigned to the dispensary by the Drug Enforcement Administration.	Not Required	NEVER USE.
	PHA04	**Dispensary Name** Free-form name of the dispensary.	Required	This is the Dispensary name as it appears on the permit.
	PHA05	**Address Information – 1** Free-form text for address information.	Required	
	PHA06	**Address Information – 2** Free-form text for address information.	Not Required	
	PHA07	**City Address** Free-form text for city name.	Required	
	PHA08	**State Address** U.S. Postal Service state code or other regional jurisdiction code.	Required	
	PHA09	**ZIP Code Address** U.S. Postal Service ZIP Code.	Required	

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Segment	Element ID	Element Name	Requirement	Notes
	PHA10	**Phone Number** Complete phone number including area code. Do not include hyphens.	Not Required	
	PHA11	**Contact Name** Free-form name.	Not Required	
	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.	Not Required	
	PHA13	**Dispensary Permit/License Number** Identification assigned to the dispensary by the Licensing Board to be utilized for medical cannabis in this instance, leave PHA01 and PHA03 blank and insert the dispensary's Mississippi license number in PHA13.	Required	This will be the MC License number, example lic format DSPY123456
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.	Not Required	
	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	Not Required	
	PAT03	**ID of Patient** Identification number for the patient as indicated in PAT02. input the medical cannabis certification number ***Note:*** *This field can only be populated with code 09 or 10 when provided on the prescription.*	Required	medical cannabis certification number of the patient – do not make a dummy number

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Segment	Element ID	Element Name	Requirement	Notes
	PAT04	**ID Qualifier of Additional Patient Identifier** Code identifying the jurisdiction that issues the ID in PAT06.	Not Required	
	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 • 05 Passport ID • 06 Driver's License ID • 07 Social Security Number • 08 Tribal ID • 99 Other (agreed upon ID)	Not Required	
	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.	Not Required	
	PAT07	**Last Name** Patient's last name.	Required	
	PAT08	**First Name** Patient's first name.	Required	
	PAT09	**Middle Name** Patient's middle name or initial if available.	Not Required	
	PAT10	**Name Prefix** Patient's name prefix such as *Mr.* or *Dr.*, if available.	Not Required	
	PAT11	**Name Suffix** Patient's name suffix such as *Jr.* or *the III*, if available	Not Required	
	PAT12	**Address Information – 1** Free-form text for address information.	Required	
	PAT13	**Address Information – 2** Free-form text for additional address information.	Not Required	

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Segment	Element ID	Element Name	Requirement	Notes
	PAT14	**City Address** Free-form text for city name.	**Required**	
	PAT15	**State Address** U.S. Postal Service state code or other regional jurisdiction code.	**Required**	
	PAT16	**ZIP Code Address** U.S. Postal Service ZIP code. Do not include hyphens.	**Required**	
	PAT17	**Phone Number** Complete phone number including area code. Do not include hyphens.	**Required**	
	PAT18	**Date of Birth** Date patient was born. Format: CCYYMMDD	**Required**	
	PAT19	**Gender Code** Code indicating the sex of the patient. • F Female • M Male • U Unknown	**Required**	
	PAT20	**Species Code** Used if required by the PMP to differentiate a prescription for an individual from one prescribed for an animal. • 01 Human	**Required**	
	PAT21	**Patient Location Code** Code indicating where patient is located when receiving pharmacy services. • 03 Nursing Home • 04 Long-Term/Extended Care • 05 Rest Home • 07 Skilled-Care Facility • 11 Hospice • 99 Other	**Not Required**	.
	PAT22	**Country of Non-U.S. Resident** Used when the patient's address is a foreign country.	**Not Required**	

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Segment	Element ID	Element Name	Requirement	Notes
	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.	Not Required	
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 PDMPs 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.*	Required	
	DSP02	**Prescription Number** Serial number assigned to the prescription by the pharmacy.	Required	
	DSP03	**Date Written** Date the patient was certified for medical cannabis. Format: CCYYMMDD	Required	Date the patient was certified for medical cannabis.
	DSP04	**Refills Authorized**	Required	Always will be 0
	DSP05	**Date Filled** Date prescription was filled. Format: CCYYMMDD	Required	Day it was sold to patient.

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Segment	Element ID	Element Name	Requirement	Notes
	DSP06	**Fill Number** Number of the fill of the prescription.	Required	Always will be 00
	DSP07	**Product ID Qualifier** Used to identify the type of product ID contained in DSP08. • 01 NDC	Required	

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Segment	Element ID	Element Name	Requirement	Notes
	DSP08	Product ID Full 11 digit NDC number, created by adding a leading zero to the appropriate segment to result in a 5-4-2 formatted NDC number, without punctuation. The following are the only acceptable Medical Cannabis NDC numbers **67660000001** **Cannabis Flower (smoked)** **1 each = 1 MCEU** **67660000002** **Cannabis Concentrate (vape/tincture)** **1 each = 1 MCEU** **67660000003** **Cannabis Infused (edibles)** **1 each = 1 MCEU** **NON-EDIBLES ARE NO LONGER REORTED TO THE MSPMP**	Required	**SEE THE NDCS UNDER ELEMENT NAME**

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Segment	Element ID	Element Name	Requirement	Notes
	DSP09	**Quantity Dispensed** Number of metric units dispensed in metric decimal format. Example: 2.5 ** cannot report a half day supply**	Required	
	DSP10	**Days' Supply** Estimated number of days the medication will last.	Required	Per Law can not exceed 3 oz within 30 day supply.
	DSP11	**Drug Dosage Units Code** Identifies the unit of measure for the quantity dispensed in DSP09. • 01 Each ***always use 01***	Required	Per Law can not exceed 24 units in 30 days
	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	Not Required	
	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.*	Not Required	
	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.	Not Required	

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Segment	Element ID	Element Name	Requirement	Notes
	DSP15	**Pharmacist State License Number** This data element can be used to identify the pharmacist dispensing the medication. Assigned to the pharmacist by the Licensing Board.	Not Required	
	DSP16	**Classification Code for Payment Type** Code identifying the type of payment (i.e., how it was paid for). • 01 Private Pay	Required	
	DSP17	**Date Sold** Used to determine the date the prescription left the dispensaary, not the date it was filled, if the dates differ. Format: CCYYMMDD	Situational	Should be equivalent to purchase date
	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)	Not Required	
	DSP19	**RxNorm Code** Used for electronic prescriptions to capture the prescribed drug product identification.	Not Required	
	DSP20	**Electronic Prescription Reference Number** This field should be populated with the Initiator Reference Number from field UIB-030-01 in the SCRIPT transaction.	Not Required	
	DSP21	**Electronic Prescription Order Number** This field should be populated with the Initiator Control Reference from field UIH-030-01 in the SCRIPT standard.	Not Required	
	DSP22	**Quantity Prescribed** This field adds clarity to the value reported in DSP13, Partial Fill Indicator. ***Note:*** *ASAP 4.2B increases this field size to a maximum of 100 characters.*	Not Required	

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Segment	Element ID	Element Name	Requirement	Notes
	DSP23	**Rx SIG** This field captures the actual directions printed on the prescription vial label.	**Not Required**	
	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) ***Note:** Codes 03-11 can only be reported if the PMP has mandated that they be provided by the prescriber on the prescription.*	**Not Required**	
	DSP25	**Diagnosis Code** This field is used to report the ICD-10 code or CDT. If required by a PDMP, this field would be populated only when the ICD-10 or CDT code is included with the prescription. Exclude the decimal point when reporting this field.	**Not Required**	
PRE: Prescriber Information (required) Used to identify the prescriber of the prescription.				
	PRE01	**National Provider Identifier (NPI)** Identifier assigned to the prescriber by CMS.	**Not Required**	NEVER USE THIS FIELD

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Segment	Element ID	Element Name	Requirement	Notes
	PRE02	**DEA Number** Identifying number assigned to a prescriber or an institution by the Drug Enforcement Administration (DEA). ***Note:*** *This field is required when the prescription is for a DEA-defined medical cannabis.*	Not Required	NEVER USE THIS FIELD
	PRE03	**DEA Number Suffix** Identifying number assigned to a prescriber by an institution when the institution's number is used as the DEA number.	Not Required	NEVER USE THIS FIELD
	PRE04	**Prescriber License Number** Identification assigned to the prescriber by the Mississippi Department of Health ** when the patient is from out of state and holds a temporary card, use TEMP000000 for the provider state license number instead***	Required	This will be the Provider's MC License number. Never make a dummy number
	PRE05	**Last Name** Prescriber's last name.	Required	Must be present
	PRE06	**First Name** Prescriber's first name.	Required	Must be Present
	PRE07	**Middle Name** Prescriber's middle name or initial.	Not Required	
	PRE08	**Phone Number** Complete phone number including area code. Do not include hyphens.	Situational	
	PRE09	**XDEA Number** This field is in addition to Treatment Type in the DSP segment. This gives PDMPs the option to require the XDEA Number (NADEAN) in the PRE segment.	Not Required	
	PRE10	**Jurisdiction or State Issuing Prescriber License Number** Use this field to further identify the information provided in PRE04.	Not Required	
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.				

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Segment	Element ID	Element Name	Requirement	Notes
	CDI01	**Compound Drug Ingredient Sequence Number** First reportable ingredient is 1; each additional reportable ingredient is incremented by 1.	**Not Required**	
	CDI02	**Product ID Qualifier** Code to identify the type of product ID contained in CDI03. • 01 NDC	**Not Required**	
	CDI03	**Product ID** Full 11-digit NDC number, created by adding a leading zero to the appropriate segment to result in a 5-4-2 formatted NDC number, without punctuation.	**Not Required**	
	CDI04	**Compound Ingredient Quantity** Metric decimal quantity of the ingredient identified in CDI03. Example: 2.5	**Not Required**	
	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)	**Not Required**	
AIR: Additional Information Reporting (situational) Used when 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.	**Not Required**	
	AIR02	**State Issued Rx Serial Number** Number assigned to issued serialized prescription blank.	**Not Required**	
	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.	**Not Required**	

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Segment	Element ID	Element Name	Requirement	Notes
	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 • 04 Permanent Resident Card (Green Card) • 05 Passport ID • 06 Driver's License ID • 07 Social Security Number • 08 Tribal ID	Not Required	
	AIR05	**ID of Person Dropping Off or Picking Up Rx** ID number of patient or person picking up or dropping off the prescription.	Not Required	
	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	Not Required	
	AIR07	**Last Name of Person Dropping Off or Picking Up Rx** Last name of person picking up the prescription.	Not Required	
	AIR08	**First Name of Person Dropping Off or Picking Up Rx** First name of person picking up the prescription.	Not Required	
	AIR09	**Last Name or Initials of Pharmacist** Last name or initials of pharmacist dispensing the medication.	Not Required	
	AIR10	**First Name of Pharmacist** First name of pharmacist dispensing the medication.	Not Required	

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Segment	Element ID	Element Name	Requirement	Notes
	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	Not Required	
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.	Required	
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.	Required	
	TT02	**Segment Count** Total number of segments included in the transaction including the header and trailer segments.	Required	

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Appendix B: ASAP Zero Report Specifications

The following table contains the required definitions for submitting zero reports via SFTP or manual upload to the Mississippi 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	20220501	R
	TH06	223000	R
	TH07	P	R
	TH09	\\	R
IS: Information Source (required)			
	IS01	7705555555	R
	IS02	Dispensary NAME	R
	IS03	Date Range of Report #YYYYMMDD#-#YYYYMMDD#	R
PHA: Pharmacy Header (required)			
	PHA13	DSPY123456	R
PAT: Patient Information (required)			
	PAT07	REPORT	R
	PAT08	ZERO	R
DSP: Dispensing Record (required)			
	DSP05	20220501	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

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	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*DISPENCEARY NAME*#20220101#-#20220107#\
PHA*** DSPY123456\
PAT*******REPORT*ZERO**********\
DSP*****20220108******\
PRE*\
CDI*\
AIR*\
TP*7\
TT*123456*10\

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Appendix C: SFTP Configuration

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

Note: *Submitting data via SFTP requires that 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: sftp.pmpclearinghouse.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.**

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PMP Subfolders

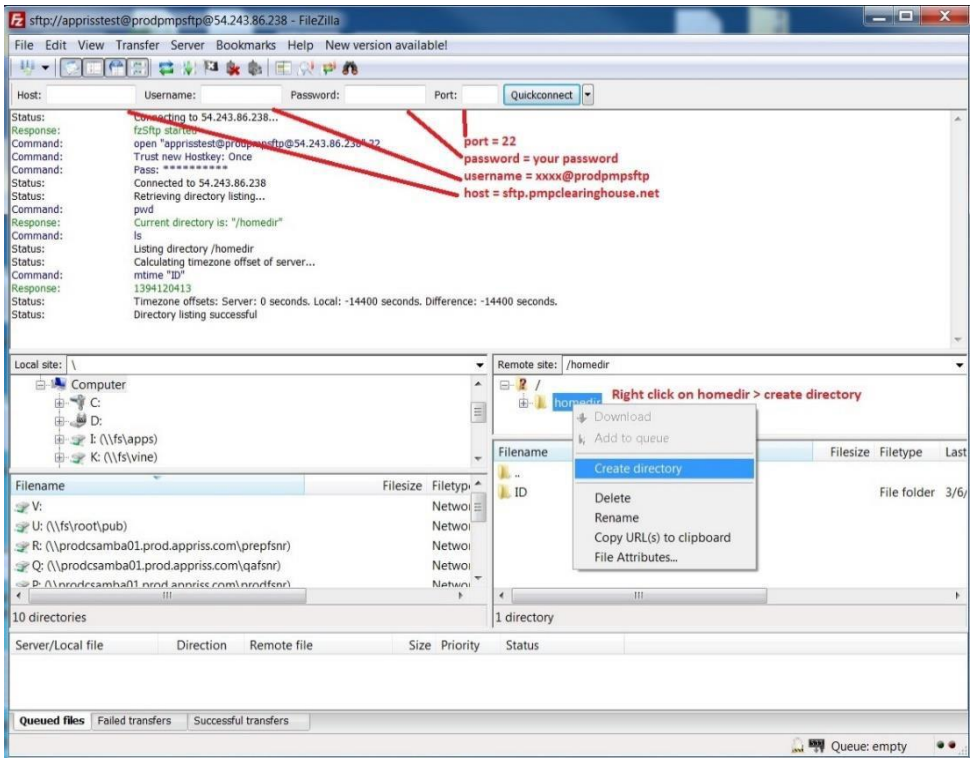
PMP Clearinghouse is the data repository for numerous PMPs. As such, data submitted via SFTP must be placed in the appropriate folder for the PMP for which you are submitting data so that it can be properly imported to that PMP. The creation of subfolders must be done outside of the PMP Clearinghouse 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**
   a. Log in to your SFTP account using command prompt.

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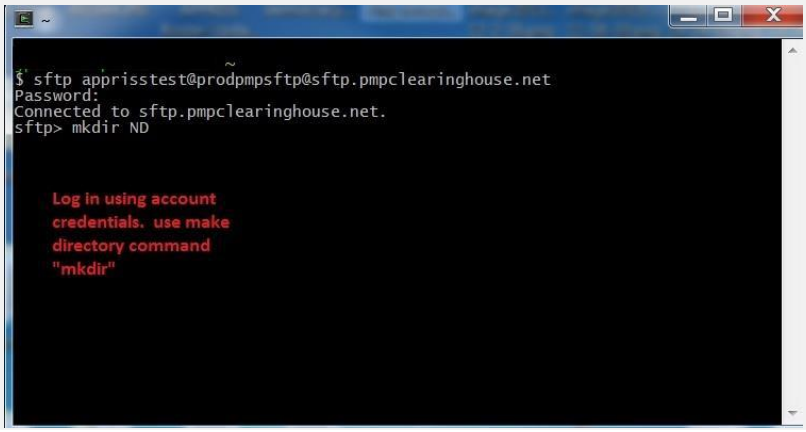
b. Type "**mkdir**" followed by a space and then the PMP abbreviation you are using (e.g., ***mkdir MS***).

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

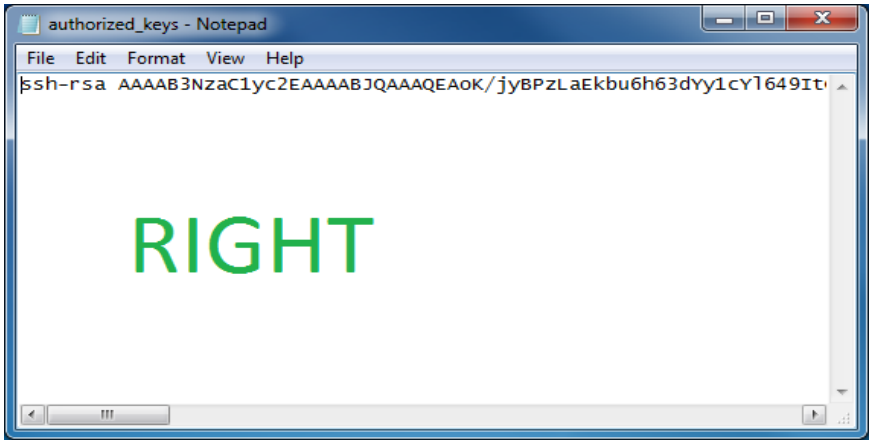


Public (SSH/RSA) Key Authentication

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.



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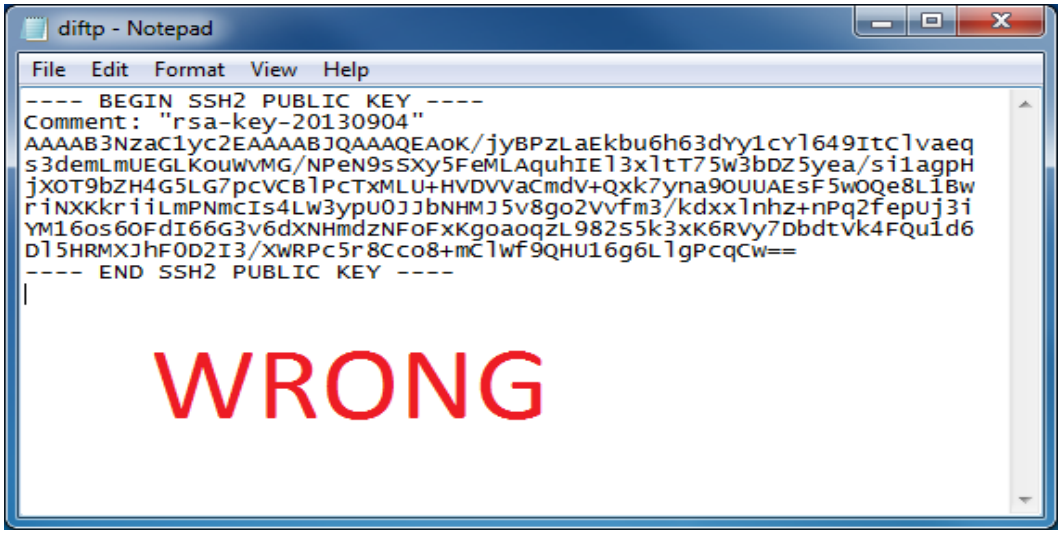
- **Incorrect Public Key Format:** If opened in a text editor, the key SHOULD NOT look like the screenshot below.



- 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.

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