



Prescription Drug Data Submission Guide

**Version 03.1
08.08.2025**

Table of Contents

1	Overview	3
2	Legal Requirements	4
3	Data Collection and Reporting Requirements	4
4	File Format	4
4.1	<i>File Naming Conventions.....</i>	<i>4</i>
5	Submitter Account.....	4
5.1	<i>Creating an Account.....</i>	<i>5</i>
5.2	<i>Password Maintenance.....</i>	<i>6</i>
5.3	<i>Account Lockout.....</i>	<i>8</i>
5.4	<i>Update Profile Details</i>	<i>8</i>
5.5	<i>System Notifications</i>	<i>9</i>
6	Data Submission Methods.....	9
6.1	<i>Submission Method: Secure FTP Over SSH.....</i>	<i>9</i>
6.2	<i>Submission Method: SSL Website (RxGov Portal)</i>	<i>9</i>
6.3	<i>Submission Method: SSL Website (RxGov Portal)</i>	<i>11</i>
7	Validation Rules.....	15
7.1	<i>Errors and Warnings</i>	<i>16</i>
8	View and Review Submitted Reports.....	19
8.1	<i>View Submitted Reports.....</i>	<i>19</i>
8.2	<i>Revise a Record</i>	<i>21</i>
8.3	<i>Void a Record</i>	<i>22</i>
9	ASAP 4.2a File Specifications	22
10	Revision History.....	34

1 Overview

This specification covers the onboarding of pharmacies to Connie, Connecticut's statewide Health Information Exchange (HIE). Dispensers will submit controlled and noncontrolled prescription drug (non-CDS) dispense information to Connie using the American Society for Automation in Pharmacy (ASAP) format.

The guide will specify the data and prescription drug information that must be submitted by dispensers to Connie, the timeframe and frequency of data submission, the electronic reporting specifications, and the process for dispensers who are unable to submit data due to mechanical, electrical, or other technical failure.

Connie

Connie was established pursuant to CGS Sec. 17b-59d to empower consumers to make effective health care decisions, promote patient-centered care, improve the quality, safety, and value of health care, reduce waste and duplication of services, support clinical decision-making, keep confidential health information secure and make progress toward the state's public health goals. Connie operations commenced May 3, 2021.

Connie has contracted with Leap Orbit to develop a database to collect, and store dispense information. Leap Orbit's RxGov is a web-based program that records and tracks medication dispenses. RxGov is designed to be a comprehensive system which facilitates communication between multiple user groups to ensure patient confidentiality, data security, and the presentation of accurate information. The RxGov application operates in an online environment that does not require any special hardware or software. As part of the medication history hosting service, RxGov provides appropriate infrastructure to accept data supplied by dispensers.

Dispense data submitted to Leap Orbit will be shared with CRISP Shared Services, who administer the HIE technology platform utilized by Connie. Data will display in the Connie web-based portal and be made available to clinicians who have completed the required data use agreements and who have an active treatment relationship with a patient.

2 Legal Requirements

All pharmacies are required to register with Connie and complete the data sharing legal agreements. Pharmacies can register by going to Connie's website [Connect with Connie | Connie Website](#) and clicking "Begin Your Connection with Connie". Upon registration, the pharmacy will receive the associated legal agreements via Adobe Sign.

Production data should not be shared until legal agreements have been signed.

3 Data Collection and Reporting Requirements

Connie is requesting all dispensed medications, including controlled and non-controlled drugs. Please note- this file submission is in addition to, not in place of, your PMP file submission.

Connie recommends submitting a file daily but does not require a zero report on days with no dispenses. However, all dispensed data should be accounted for if a daily file is not sent.

Connie requests that all Connecticut pharmacy dispensed medications be reported regardless of patient location. There is no requirement for pharmacies outside of Connecticut to report on Connecticut patients.

Prescriptions for animals and mail order are not required but do not have to be removed if part of the pharmacies current data export.

All submitters are required to follow all state and federal laws with respect to data disclosure and consent.

Only non-PHI data is allowed in the RxGov test environment.

4 File Format

See section 9 ASAP 4.2a File Specifications

4.1 File Naming Conventions

Files for upload should be named in a unique fashion, with a prefix constructed from a Connie assigned unique ID followed by the date and a suffix of ".dat". An example file name would be "CT_SOURCE_YYYYMMDD.dat" where CT_SOURCE represents the unique ID assigned by Connie.

5 Submitter Account

The following sections describe RxGov's account creation, modification, account lockout, updates to profile details, and viewing of system notifications. Data submissions will remain to be a separate process than PDMP reporting, and all dispense information submitted to the PDMP should continue using the existing processes. Connie provides both a UAT and PROD environment and a separate submitter account is

required for each environment. Additionally, if a “T” is placed in the TH07 field of your ASAP file and submitted to Production, this would allow the file to be validated but it would be treated as a test file and not saved to the database.

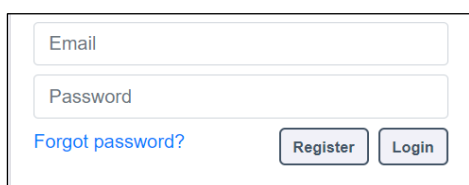
Chain pharmacy data may be submitted from a central office, and dispensers are encouraged to coordinate with their corporate or central office.

5.1 Creating an Account

This process needs to be completed for each environment. Complete the followings steps to create a new Submitter account:

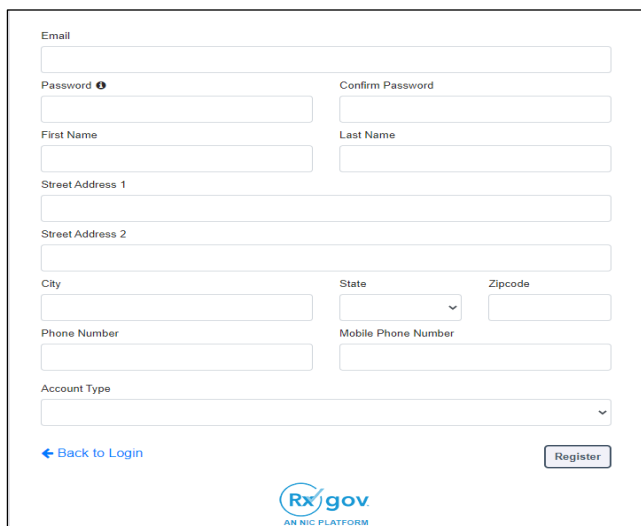
1. For UAT go to the RxGov homepage at connie-uat.rxgov.com

For PROD go to the RxGov homepage at connie.rxgov.com



A registration form with two input fields: "Email" and "Password". Below the "Password" field is a blue link that says "Forgot password?". To the right of the "Forgot password?" link are two buttons: "Register" and "Login".

2. On the RxGov homepage, click **Register**.



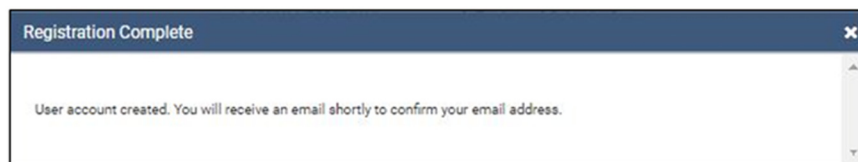
A detailed registration form with the following fields: "Email", "Password" (with a strength indicator), "Confirm Password", "First Name", "Last Name", "Street Address 1", "Street Address 2", "City", "State" (a dropdown menu), "Zipcode", "Phone Number", "Mobile Phone Number", and "Account Type" (a dropdown menu). At the bottom left is a blue link "← Back to Login" and at the bottom right is a "Register" button. The RxGov logo and "AN RIC PLATFORM" text are at the very bottom.

3. Enter the following information:
 - a. Email*: This email will become your username. Use the email that will be best for receiving error reports and correspondence.
 - b. Password*: Passwords must be at least 8 characters in length, contain uppercase and lowercase characters, and contain at least one special character and one digit.

- c. Confirm Password*
- d. First Name*
- e. Last Name*
- f. State*
- g. Phone Number*
- h. Address
- i. In the Account Type menu, select **Submitter***
- j. Submitter Name

*Fields marked with an asterisk indicate required fields when creating a Submitter account

- 4. Click Register.
- 5. View the displayed Registration Complete message and verify that a message was sent to the email address associated with the account.



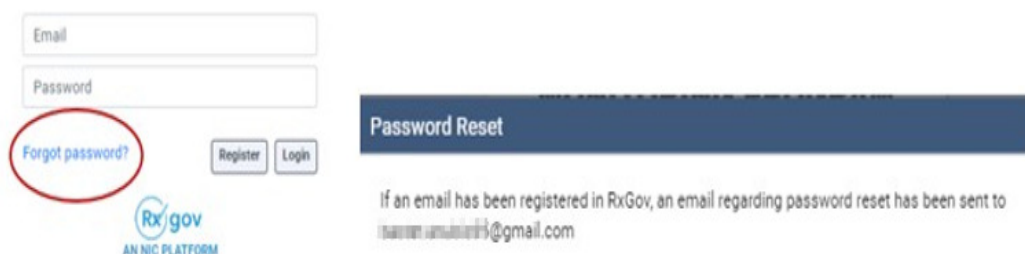
- 6. Click the link provided in the confirmation email to confirm the email address. If a confirmation message is not received, check the Spam folder in your email application. If the message is not found, contact your Admin to have the confirmation resent.
- 7. Wait for an RxGov Administrator to activate the account. Newly-created accounts must be activated by an RxGov Administrator before the user can proceed to log in.
- 8. After the RxGov Administrator activates the new account, you will receive another email letting you know that your account has been activated.
- 9. Once an Administrator has approved the account, open the RxGov URL and use the email address (username) and previously created password to log into RxGov.

5.2 Password Maintenance

In the event a dispenser forgets a password, complete the followings steps:

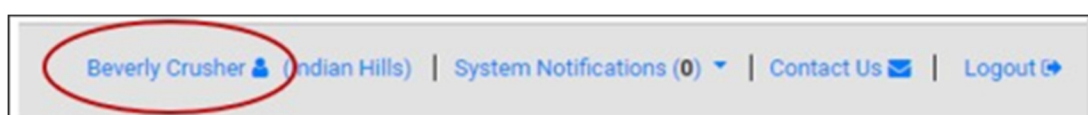
- 1. Log on to RxGov at connie.rxgov.com/login
- 2. Select Forgot password?

3. An email with a link to reset the password is sent to the email address associated with the account.

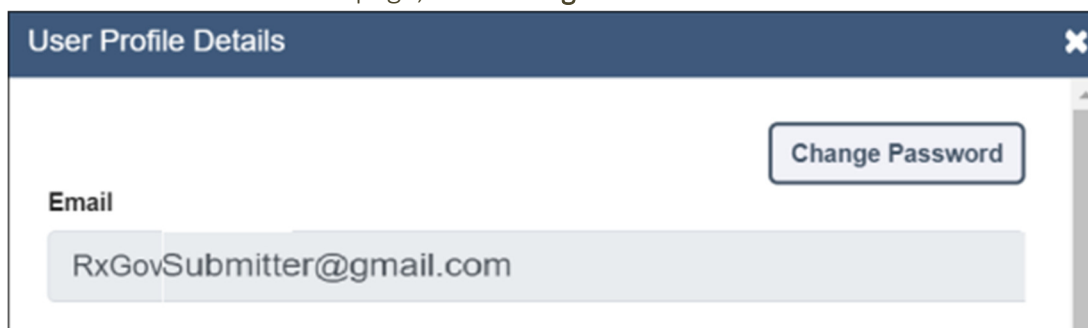


In the event a dispenser needs to change a password, complete the followings steps:

1. Log on to RxGov at connie.rxgov.com/login
2. On the top menu bar, select your username.



3. On the User Profile Details page, click **Change Password**.



4. Enter your current password in the **Current Password** field.
5. Enter your new password in the **New Password** field.
6. Enter your new password in the Confirm **New Password** field.

7. Click **Change Password**.



The screenshot shows a web form titled "User Profile Details" with a close button (X) in the top right corner. The form contains three text input fields labeled "Current Password", "New Password", and "Confirm New Password". A "Back" button is located in the top right area, and a "Change Password" button is at the bottom right.

5.3 Account Lockout

User accounts are locked out after five failed login attempts. The account remains locked for 30 minutes. After 30 minutes, the user can attempt to log in again. If needed, contact Support at rxgovsupport@leaporbit.com or 1-844-767-4767.

5.4 Update Profile Details

Complete the following steps to modify or update information in an existing account:

1. Log on to RxGov at connie.rxgov.com/login
2. On the top menu bar, click your username.
3. On the User Profile Details page, update any of the following information:
 - a. First Name
 - b. Last Name
 - c. Address
 - d. Phone Number
4. Click Save.

Complete the following steps to update the **Submitter Name**:

1. Log on to RxGov at connie.rxgov.com/login
2. On the top menu bar, click your username.
3. On the User Profile Details page, click **Change Identifier Fields**.

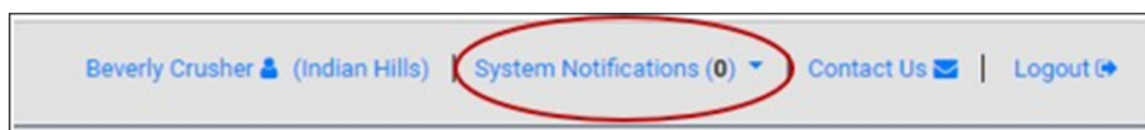
4. On the Create User Identifier Change Request Ticket page, provide an explanation for the change in the comment box.
5. Enter a new submitter name in the **Submitter Name** field.
6. Click **Submit**.

Note: This change initiates an approval request sent to an administrator and is not updated until the administrator completes the approval.

5.5 System Notifications

Notifications are set by System Administrators and contain information regarding updates, system outages, planned downtime, and other information relevant to the use of the system.

To view the notifications, Select **System Notifications** on the top menu bar.



6 Data Submission Methods

Dispensers may submit dispense information in RxGov using the following methods: Secure FTP Over SSH, Rx Gov website portal, and manual entry.

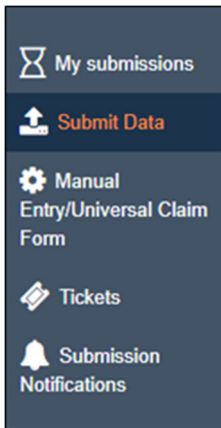
6.1 Submission Method: Secure FTP Over SSH

1. Prepare the data file for submission using the ASAP specifications described in Section 3.
2. Send the file to the appropriate SFTP URL and port.
 - a. UAT - sftp://sftp-us-uat.rxgov.com:17730
 - b. PROD - sftp://sftp-us.rxgov.com:17730
3. When prompted, enter your data submitter credentials (i.e. username and password).
4. Route the file to the Root Directory.
5. If desired, view the results of the submission in the administration section of RxGov.
6. Log off when the file submission is complete.

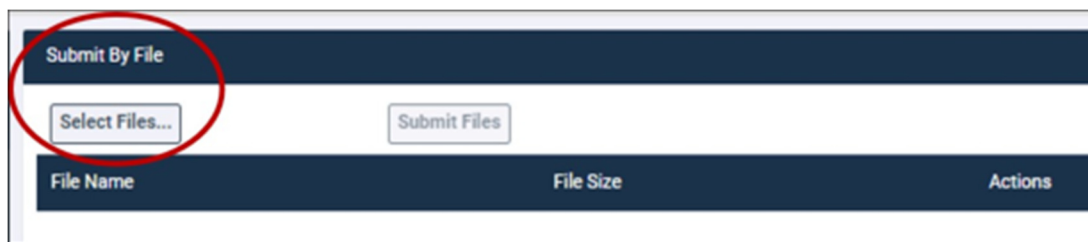
6.2 Submission Method: SSL Website (RxGov Portal)

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

1. Prepare the data file for submission using the ASAP specifications described in Section 3.
2. Log on to RxGov. <https://connie.rxgov.com>
3. On the left menu, click Submit Data.



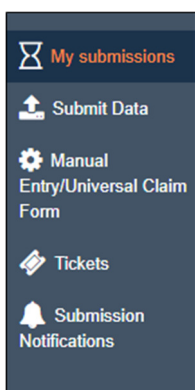
4. In the Submit By File section, click Select Files.



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



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

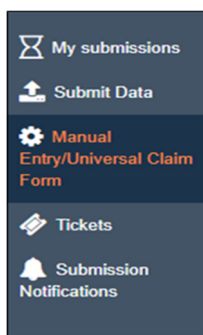


7. Log off when the file submission is complete.

6.3 Submission Method: SSL Website (RxGov Portal)

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

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



3. In the Pharmacy (Dispenser) Information section, enter the required information in the text fields (Required information is notated by red asterisks). Entering an identifier may auto-populate other fields.

My submissions

Submit Data

Manual Entry/Universal Claim Form

Tickets

Submission Notifications

Rx.gov

Pharmacy/Dispenser

Patient 1

Dispense 1

denotes required fields *

Pharmacy / Dispenser

To begin, please provide at least one of the following identifications for the Dispenser and the Dispenser information available will auto-fill the fields below. For the dispense of a controlled substance, DEA Number is required. *

Pharmacy Information

National Provider Identifier (NPI) [PHA01] * ex: 1234567890	DEA Number [PHA03] ex: ab1234567	NCPDP/NABP Provider ID [PHA02] ex: 1234567
Pharmacy Name [PHA04] * pharmacy name	Chain Site ID [PHA12] chain store number	Phone Number [PHA10] 10-digit number
Pharmacy Permit/License Number [PHA13] ex: a12345	Pharmacy Address - 1 [PHA05] * street address	
Contact Name for Pharmacy [PHA11] contact for pharmacy	Pharmacy Address - 2 [PHA06] suite, apartment, etc	
City [PHA07] * city	State [PHA08] * select state	Zip Code [PHA09] * zip code

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

Patient 1

Animal

Human

Non-U.S. Resident

Patient Information

Patient Name Prefix [PAT10] select prefix	Patient Last Name [PAT07] * last name	Patient First Name [PAT08] * first name	Patient Middle Name [PAT09] middle name	Patient Name Suffix [PAT11] select suffix
Date of Birth [PAT18] mm-dd-yyyy format	Gender [PAT19] * select gender	Patient Address - 1 [PAT12] * street address		Patient Address - 2 [PAT13] suite, apartment, etc
City [PAT14] * city	State [PAT15] * select state	Zip Code [PAT16] * zip code	Phone Number [PAT17] * 10-digit number	
Patient Location Code [PAT21] select id type				

Patient Identification

Identification Type [PAT02] *

select id type

+ Add Additional Id

In the Dispense section page, enter the required information in the text fields (required information is notated by red asterisks). Note that each prescription number [DSP02] much be unique, or it will overwrite the previous fill with that prescription number. Compound drug fields are available if required.

Dispense 1

Prescription Information

Reporting Status [DSP01] * New Record ▼	Prescription Number [DSP02] * prescription number	Date Written [DSP03] * 11-01-2023 ▼	Quantity Prescribed [DSP22] 0 or more	Refills Prescribed [DSP04] * 0 or more
Date Filled [DSP05] * 11-01-2023 ▼	Prescription Origin/Transmission Type [DSP12] Written Prescription ▼	Refill Number [DSP06] * refill number	Partial Fill Indicator [DSP13] partial fill indicato	Date Sold [DSP17] * 11-01-2023 ▼
Payment Type [DSP16] * Private Pay (Cash, Charge, Credit Card) ▼	Product ID Type [DSP07] * NDC ▼	Product ID [DSP08] * ex: 01234567890	Quantity Dispensed [DSP09] * 0 or more	Dose Unit [DSP11] * Each ▼
Days Supply [DSP10] * 0 or more	Treatment Type [DSP24] select treatment type ▼	Rx Sig [DSP23] directions on prescription label, will truncate after 200 characters		
Pharmacist Last Name [AIR09] last name	Pharmacist First Name [AIR10] first name	Diagnosis Code [DSP25] ex: a12-123-0		

- In the Rx Prescriber, Rx Serial Number and Non-Patient Rx Pick Up/Drop Off sections, enter the required information in the text fields as appropriate (required information is notated by red asterisks).

Rx Prescriber

You may enter a NPI or DEA Number for the Prescriber and the Prescriber information available will auto-fill the fields below. For the dispense of a controlled substance, DEA Number is required. *

Prescriber National Provider Identifier (NPI) [PRE01] * ex: 1234567890	Prescriber DEA Number [PRE02] ex: ab1234567	Prescriber DEA Number - Suffix [PRE03] ex: 123
Issuer of Prescriber License Number [PRE10] select issuer ▼	Prescriber State License Number [PRE04] ex: abc1234	Prescriber Last Name [PRE05] * last name
Prescriber First Name [PRE06] * first name	Prescriber Middle Name [PRE07] middle name	Prescriber Phone Number [PRE08] 10-digit number

Rx Serial Number

State Issuing Rx Serial Number [AIR01] select state ▼	Rx Serial Number [AIR02] ex: abc123456789
---	---

Non-Patient Rx Pick Up/Drop Off

Non-Patient Pick Up or Drop Off [AIR11] select action ▼	Non-Patient Identification Type [AIR04] select id type ▼
---	--

- Use the green + icons in the left-hand UCF navigation to add additional Dispensers, Patients and/or Dispenses as necessary.

My submissions

Submit Data

Manual Entry/Universal Claim Form

Tickets

Submission Notifications

Pharmacy/Dispenser

Patient 1

↳ **Dispense 1**

Pharmacy / Dispenser

denotes required fields *

To begin, please provide at least one of the following fields below. For the dispense of a controlled substance, DEA Number is required. *

National Provider Identifier (NPI) [PHA01] *
ex: 1234567890

Pharmacy Name [PHA04] *
pharmacy name

Contact Name for Pharmacy [PHA11]

- After all dispenses have been entered, click Submit UCF to submit the dispenses and return to the Submission History screen.
- If a manually-submitted report contains an error or needs to be voided, on the Submission History screen, click Manual Entry/Universal Claim Form and repeat the entire process.

*Note: On the Initial Dispense Screen, change the Reporting Status to either Revise for editing or Void, depending on the edit type.

7 Validation Rules

Data submitted may be accepted, flagged with a warning, or rejected due to errors. Section 3 lists required fields with an 'R' and provides additional detail on when 'warnings' and 'errors' are triggered. All required fields need to be reported for each dispense.

Dispensers are required to correct and resubmit the data no later than three (3) business days after receiving an 'error.' Dispenses that have an 'error' are rejected, meaning information submitted (for the individual dispense) will not be available for providers to view when querying a patient.

Dispensers are required to correct and resubmit the data no later than three (3) business days after receiving a 'warning.' Dispenses that have a 'warning' are not rejected, meaning information submitted will be available for providers to view when querying a patient.

It is imperative dispensers routinely address 'errors' and 'warnings' to ensure accurate and quality data. Some fields have additional validation rules or context. Those fields are marked with an 'R*.' The following provides additional rules or context for 'R*' fields.

- Dispenser Identifier:
 - Either DEA or NPI is required to identify the dispenser; when either number is entered it must be entered in a valid format; if number is submitted in a valid format but does not match to DEA or NPI file data will trigger an 'error'
- Prescriber Identifier:
 - If Species Code indicates the prescription is for a pet, and DEA is not available, the prescriber phone number should be included in the NPI field.
- Dispense information:
 - Product ID and Product ID qualifier are required fields and will trigger an 'error' if missing or entered in the incorrect format; a 'warning' will be produced if the Product ID does not match the FDA's National Drug Code* directory.
 - Compound drugs have a specific set of fields that are either required (R) or situational (S) if the dispense medication is a compound.
- Additional submission information, including minimum and maximum values are further defined by the reporting standard.

*FDA's National Drug Code (NDC) directory is a master drug database which provides descriptive drug information.

7.1 Errors and Warnings

Emails indicating the presence of an ‘error’ or ‘warning’ are emailed to the Submitter after submission, regardless of the submission method. Subsequent reminder emails will be sent regularly until the issues are addressed. The Submitter must log into the RxGov portal to review ‘errors’ and ‘warnings’. ‘Errors’ may be corrected within the RxGov My Submission page or corrected within the file by the Submitter or by the Submitter’s Uploader Vendor.

A notification email continues to be sent until the file is updated to a resolved status, either by resubmitting a fully validated file, correcting all errors in the RxGov My Submission page, or by marking the file as Resolved in the RxGov portal. Users can manually resolve files to update the file status.

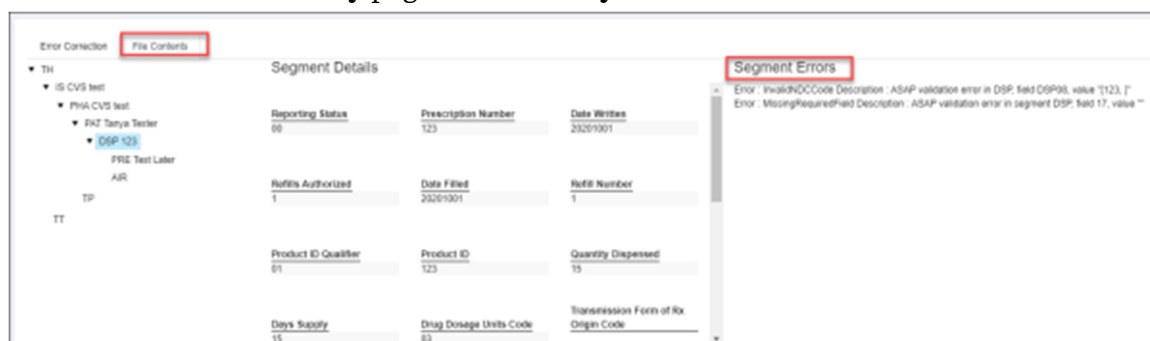
*Note: All ‘errors’ in the previously submitted file must be corrected before manually changing the file status to Resolved. If files are resolved manually without correcting the ‘error’ in the data, the dispenses containing ‘errors’ will not be loaded.

‘Errors’ and ‘warnings’ are displayed in the My Submission page in the My Submissions menu. If allowed, corrections can be made in the **Correction** text box under the **Error Correction** tab.



File Name	# of Records	# of Errors	# of Uncorrected Errors	# of Warnings
TanyaPrescriber_Test file_ZeroReportIncluded_NehilUAT1 xt	4	4	4	0

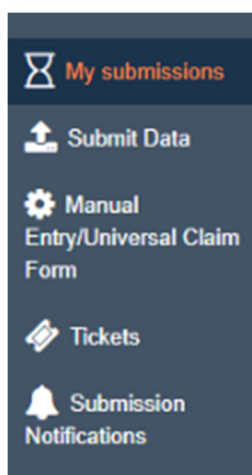
To view further details regarding the errors listed, view the **Segment Errors** section under the **File Contents** tab on the **Submission History** page under the **My Submissions** menu.



Segment Details			Segment Errors
Reporting Status	Prescription Number	Date Written	Error: InvalidDCCode Description: ASAP validation error in DSP; field DSP06, value '1123, ''
00	123	20201001	Error: MissingRequiredField Description: ASAP validation error in segment DSP; field 17, value ''
Refills Authorized	Date Filled	Refill Number	
1	20201001	1	
Product ID Qualifier	Product ID	Quantity Dispensed	
01	123	15	
Days Supply	Drug Dosage Units Code	Transmission Form of Rx Origin Code	
15	03		

Complete the following steps to manually resolve a submission file status.

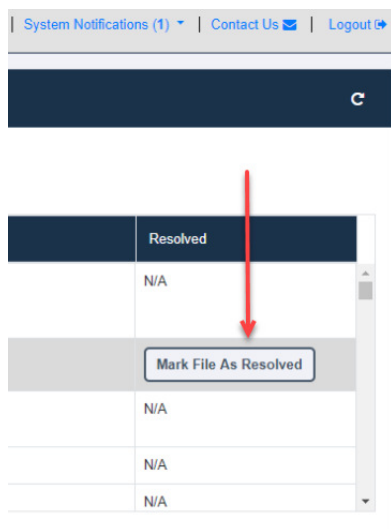
1. Log on to RxGov.
2. On the main dashboard, select My Submissions in the left menu.



3. On the Submission History page, use the Start Date and End Date calendar menus to select the dates for viewing data. Refine the search by selecting one or more of the following checkboxes:

*Note: After selections are made, the submission history search runs automatically.

- a. Only Show Files w/ Errors
 - b. Hide Resolved Files
 - c. Hide Files w/ Fatal Errors
4. In the Submission History section, select the Mark File as Resolved button in the corresponding row of an unresolved file.



5. Select one of the following options on the displayed confirmation window:
 - a. OK – Updates file unresolved status to “resolved” and provides a date and time stamp for the update.

b. Cancel – Confirmation window closes, and the file status remains unchanged.

In the My Submissions section, under the Error Correction tab, select the file to display the details of the error on the bottom half of the screen.

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

Error Correction | File Contents

Segment	Field	Error	Current Value	Correction
PAT	Phone Number	ExceededMaxFieldLength	71255505621	<input type="text"/>
DSP	Product ID	NDCNotFound	6050502510A	<input type="text"/>

Errors must be corrected. Warnings may be ignored

Submit Corrections

Error Correction | File Contents

Segment	Field	Error	Current Value	Correction
PAT	Phone Number	ExceededMaxFieldLength	71255505621	<input type="text"/>
DSP	Product ID	NDCNotFound	6050502510A	<input type="text"/>

Errors must be corrected. Warnings may be ignored

Submit Corrections

Dispense Context

PAT (Patient Information) ID Qualifier of Patient Identifier ID Qualifier ID of Patient

3 2345

ID Qualifier of Additional Patient Identifier Additional Patient ID Qualifier Additional ID

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

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

Error Correction | File Contents

Segment	Field	Error	Current Value	Correction
PAT	Phone Number	ExceededMaxFieldLength	71255505621	7125550562 ✓
DSP	Product ID	NDCNotFound	6050502510A	<input type="text"/>

3. When the error has been corrected, click Submit Corrections. A Success box is displayed. After the file has been corrected, the system creates a new file with the corrected information and resolves the file.

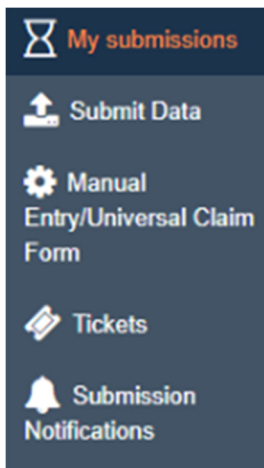
8 View and Review Submitted Reports

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


8.1 View Submitted Reports

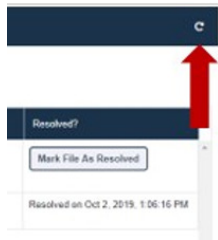
Submitted data can be viewed in the RxGov platform. Complete the following steps to view submitted reports in RxGov:

1. Log on to RxGov.
2. On the main dashboard, select My Submissions in the left menu.



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

Click the Refresh  icon to update the displayed data.



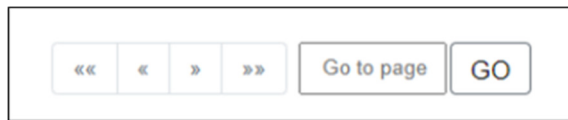
4. (Optional) Use the density controls to adjust displayed row formatting.



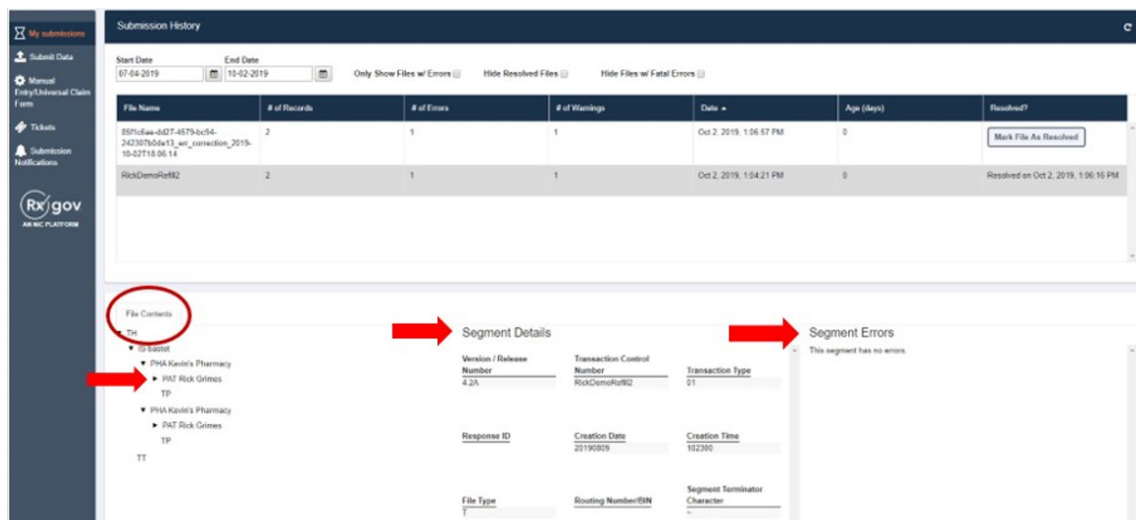
5. (Optional) Select the Rows per page drop-down menu to adjust the number of displayed rows.



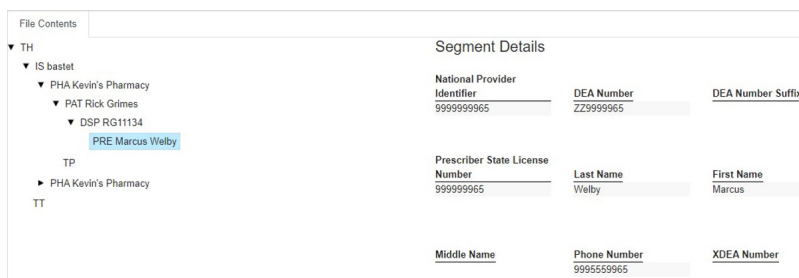
6. (Optional) Use the pagination controls to jump to the next page, previous page, the first page, the last page, or enter a specific page number in the Go to page field and click GO to immediately open the page desired.



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



9. View additional dispensing information in the Segment Details section and the Segment Errors section.
10. (Optional) Click the menu arrows in the File Content section to display further information.



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

8.2 Revise a Record

Complete the following steps to revise a record:

1. Create a record with the value 01 in the DSP01 field.
2. Populate the following fields with the same information originally submitted on the erroneous record:
 - *Note: If any of the fields referenced in step 2 are part of the correction, the record must first be voided using the steps provided in the Void a Record section, then the record must be resubmitted using the value 00 in the DSP01 field.

- a. PHA03 (Dispenser DEA number)
 - b. DSP02 (Prescription Number)
 - c. DSP05 (Date Filled)
3. Fill in all other data fields with the correct information. This information overrides the original data linked to the fields referenced in step 2.
4. Submit the record.

8.3 Void a Record

Complete the following steps to void a record:

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

9 ASAP 4.2a File 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) version 4.2a or 4.2b format.

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 (~).
Note: The Transaction Header is the only segment that has a Data Segment Terminator field built in.
- Segment Terminator – character used to mark the end of a segment, for example, the tilde (~).
- Field Usage
 - R = Required by Connie
 - N = Not required but accepted if submitted
 - S = Situational

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

Note: DSP23 – RX Sig is not required but preferred if available.

Element ID	Size	Element Name	Field Usage	Missing	Incorrect Format
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	AN4	Version/Release Number Code uniquely identifying the transaction. Format = x.x Valid codes are 4.2A, 4.2B, or 5.0	R	E	
TH02	AN40	Transaction Control Number Sender assigned code uniquely identifying a transaction.	R	E	
TH03	N2	Transaction Type Identifies the purpose of initiating the transaction. <ul style="list-style-type: none"> • 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. When 04 is used only, the TH Header Segment and the Transaction Trailer Segment are used) 	S		W
TH04	AN40	Response ID Contains the Transaction Control Number of a transaction that initiated the transaction. Required in response transaction only.	S		
TH05	DT8	Creation Date Date the transaction was created. Format: CCYYMMDD	R	E	
TH06	TM6	Creation Time Time the transaction was created. Format: HHMMSS or HHMM.	R	E	E
TH07	AN1	File Type <ul style="list-style-type: none"> • P = Production • T = Test 	R	E	W
TH08	N6	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.	S		
TH09	AN1	Segment Terminator Character This terminates the TH segment and sets the actual value of the data segment terminator for the entire transaction.	R	E	
IS: Information Source (required)					

Used to convey the name and identification numbers of the entity supplying the information.					
IS01	AN10	Unique Information Source ID Reference number or identification number. (Example: phone number)	R	E	
IS02	AN60	Information Source Entity Name Entity name of the Information Source	R	E	
IS03	AN60	Message Free-form text message.	N		
PHA: Pharmacy Header (required) Used to identify the pharmacy. Note: It is required that information be provided in at least one of these fields: PHA01 or PHA03					
PHA01	AN10	National Provider Identifier (NPI) Identifier assigned to the pharmacy by CMS	R*	E	E
PHA02	AN7	NCPDP/NABP Provider ID Identifier assigned to pharmacy by the National Council for Prescription Drug Programs.	S		
PHA03	AN9	DEA Number Identifier assigned to the pharmacy by the Drug Enforcement Administration.	R*	E	E
PHA04	AN60	Pharmacy Name Free-form name of the pharmacy.	R		
PHA05	AN55	Address Information – 1 Free-form text for address information.	R		
PHA06	AN55	Address Information – 2 Free-form text for address information.	N		
PHA07	AN35	City Address Free-form text for city name.	R		
PHA08	AN2	State Address U.S. Postal Service state or other regional jurisdiction code.	R		
PHA09	AN10	Zip Code Address U.S. Postal Service ZIP Code Do not include white spaces or special characters. Include hyphens in ZIP+4	R		
PHA10	AN10	Phone Number Complete phone number including area code. Do not include hyphens.	N	W	W
PHA11	AN30	Contact Name Free-form name.	N		
PHA12	AN10	Chain Site ID Store number assigned by the chain to the pharmacy location.	N		
PHA13	AN20	Pharmacy Permit/License Number	S		

		Identification assigned to the pharmacy by the Licensing Board.			
PAT: Patient Information (required) Used to report the patient's name and basic information as contained in the pharmacy record. Note: You may skip PHA05 through PHA09 for foreign addresses.					
PAT01	AN2	ID Qualifier of Patient Identifier Code identifying the jurisdiction that issues the ID in PAT03.	N		
PAT02	N2	ID Qualifier Code to identify the type of ID in PAT03. If PAT02 is used, PAT03 is required. <ul style="list-style-type: none"> • 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 • 99 Other (agreed upon ID) 	R*	E	W
PAT03	AN20	ID of Patient Identification number for the patient as indicated in PAT02. An example would be the driver's license number.	N		
PAT04	AN2	ID Qualifier of Additional Patient Identifier Code identifying the jurisdiction that issues the ID in PAT06.	N		
PAT05	N2	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. <ul style="list-style-type: none"> • 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) 	N		
PAT06	AN20	Additional ID Identification that might be required 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	AN50	Last Name Patient's last name.	R	E	

		If the prescription is for an animal, report the owner's last name (Human).			
PAT08	AN50	First Name Patient's first name if available. If the prescription is for an animal, report the owner's last name (Human).	R	E	
PAT09	AN30	Middle Name Patient's middle name or initial if available. It is recommended that a middle name or initial be included to help distinguish patients with the same name.	N		
PAT10	AN10	Name Prefix Patient's name prefix such as <i>Mr.</i> or <i>Dr.</i>	N		
PAT11	AN10	Name Suffix Patient's name suffix such as <i>Jr.</i> or <i>the III.</i>	N		
PAT12	AN55	Address Information – 1 Free-form text for address information.	R*		
PAT13	AN55	Address Information – 2 Free-form text for address information.	N		
PAT14	AN35	City Address Free-form text for city name.	R*		
PAT15	AN10	State Address U.S. Postal Service state or other regional jurisdiction code.	R*		
PAT16	AN10	Zip Code Address U.S. Postal Service ZIP Code Do not include white spaces or special characters. Include hypens in ZIP+4.	R*		
PAT17	AN10	Phone Number Complete phone number including area code. Note: Do not include hyphens in the number.	N		
PAT18	DT8	Date of Birth Date patient was born. If animal, use owner's Date of Birth. Format: CCYYMMDD	R	E	W
PAT19	AN1	Gender Code Code indicating the sex of the patient. • F - Female • M - Male • U – Unknown If the patient is an animal, please enter the owner's gender or "unknown".	R		
PAT20	N2	Species Code Used if required by the PMP to differentiate a prescription for an individual from one prescribed for an animal. • 01 Human	N		

		• 02 Veterinary Patient			
PAT21	N2	Patient Location Code Code indicating where patient is located when receiving pharmacy services. <ul style="list-style-type: none"> • 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 	R	E	W
PAT22	AN20	Country of Non-U.S. Resident Used when the patient's address is a foreign country and PAT12 through PAT16 are left blank. This is a freeform text field	S		
PAT23	AN30	Name of Animal Applicable only if PAT20 = 02 (veterinary patient), please submit the name of the animal	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	N2	Reporting Status DSP01 requires one of the following codes, and an empty or blank field no longer indicates a new prescription transaction: <ul style="list-style-type: none"> • 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	E	E
DSP02	AN25	Prescription Number Serial number assigned to the prescription by the pharmacy.	R	E	
DSP03	DT8	Date Written Date the prescription was written (authorized). Format: CCYYMMDD	R	E	W

DSP04	N2	Refills Authorized The number of refills authorized by the prescriber.	R	E	
DSP05	DT8	Date Filled Date the prescription was filled. Format: CCYYMMDD	R	E	W
DSP06	N2	Refill Number Number of the fill of the prescription. 0 indicates New Rx; 01-99 is the refill number.	R	E	W
DSP07	N2	Product ID Qualifier Used to identify the type of product ID contained in DSP08. <ul style="list-style-type: none"> • 01 NDC • 06 Compound 	R	E	E
DSP08	AN15	Product ID Full 11-digit NDC number, as indicated in DSP07, created by adding a leading zero to the appropriate segment to result in a 5-4-2 formatted NDC number, without punctuation. If compound is indicated in DSP07, use 99999 as the first 5 characters and the submitter's choice for the remaining 6 digits of the NDC number; the CDI segment then becomes required.	R	E	W
DSP09	D11	Quantity Dispensed Number of metric units dispensed in metric decimal format. Example: 2.5 Note: For compounds show the first quantity in CDI04.	R	E	W
DSP10	N3	10 Days' Supply Estimated number of days the medication will last. Warning if over 360, Error if response below 1	R	E	W/E
DSP11	N2	Drug Dosage Units Code Identifies the unit of measure for the quantity dispensed in DSP09. <ul style="list-style-type: none"> • 01 Each • 02 Milliliters (ml) • 03 Grams (gm) 	R	E	W
DSP12	N2	Transmission Form of Rx Origin Code Code indicating how the pharmacy received the prescription. <ul style="list-style-type: none"> • 01 Written Prescription • 02 Telephone Prescription • 03 Telephone Emergency Prescription • 04 Fax Prescription • 05 Electronic Prescription • 06 Transferred • 99 Other 	R	E	W
DSP13	N2	Partial Fill Indicator Used when the quantity in DSP 09 is less than the metric	N		

		<p>quantity per dispensing authorized by the prescriber. This dispensing activity is often referred to as a split filling.</p> <ul style="list-style-type: none"> • 00 Not a Partial Fill • 01 First Partial Fill <p>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.</p>			
DSP14	AN10	<p>Pharmacist National Provider Identifier (NPI)</p> <p>Identifier assigned to the pharmacist by CMS. This number can be used to identify the pharmacist dispensing the medication.</p>	N		
DSP15	AN10	<p>Pharmacist State License Number</p> <p>This data element can be used to identify the pharmacist dispensing the medication.</p> <p>Assigned to the pharmacist by the Licensing Board.</p>	N		
DSP16	N2	<p>Classification Code for Payment Type</p> <p>Code identifying the type of payment (i.e. how it was paid for)</p> <ul style="list-style-type: none"> • 01 Private Pay (cash, charge, credit card) • 02 Medicaid • 03 Medicare • 04 Commercial Insurance • 05 Military Installations and VA • 06 Workers' Compensation • 07 Indian Nations • 99 Other 	R	E	W
DSP17	DT8	<p>Date Sold</p> <p>This field is used to determine the date the prescription left the pharmacy, not the date it was filled.</p> <p>Format: YYYYMMDD</p>	N		
DSP18	N2	<p>RxNorm Code Qualifier</p> <p>RxNorm Code that is populated in the DrugDBCodeQualifier (DRU-010-09) field in the SCRIPT transaction.</p> <ul style="list-style-type: none"> • 01 Semantic Clinical Drug (SCD) • 02 Semantic Branded Drug (SBD) • 03 Generic Package (GPCK) • 04 Branded Package (BPCK) 	N		W
DSP19	AN15	<p>RxNorm Code</p> <p>Used for electronic prescriptions to capture the prescribed drug product identification.</p>	N	W	
DSP20	AN35	<p>Electronic Prescription Reference Number</p> <p>This field should be populated with the MessageID in XML in the SCRIPT transaction.</p>	N		
DSP21	AN35	Electronic Prescription Order Number	N		

		This field will be populated with PrescriberOrderNumber in XML in the SCRIPT standard.			
DSP22	N15	Quantity Prescribed This field adds clarity to the value reported in DSP13, Partial Fill Indicator.	R*		
DSP23	AN200	Rx Sig This field captures the actual directions printed on the prescription vial label.	N		
DSP24	N2	Treatment Type This field indicates that the prescription was for opioid dependency treatment when Code 02 is used. 01 = Not used for opioid dependency treatment 02 = Used for opioid dependency treatment	N		
DSP25	AN7	Diagnosis Code This field is used to report the ICD-10 code.	N		
PRE: Prescriber Information (required) Used to identify the prescriber of the prescription. Note: One of the following fields must be populated: PRE01 or PRE02					
PRE01	AN10	National Provider Identifier (NPI) Identifier assigned to the prescriber by CMS. Must be populated with the NPI for a non-controlled drug prescriber if a DEA # is not provided in PRE02. If the prescriber's DEA is provided in PRE02, this field can be left blank.	R*		
PRE02	AN9	DEA Number Identifying number assigned to a prescriber or an institution by the Drug Enforcement Administration (DEA). Must be populated. Must be populated with the DEA number if the reported medication is a controlled substance.	R*		
PRE03	AN7	DEA Number Suffix Identifying number assigned to a prescriber by an institution when the institution's number is used as the DEA number.	S		W
PRE04	AN15	Prescriber State License Number Identification assigned to the prescriber by the Licensing Board. To be utilized for non-controlled substances (e.g., gabapentin, Insulin) only when the prescriber does not have an NPI number or DEA number (e.g., veterinarians). In this instance, leave PRE01 and PRE02 blank and insert the prescriber's Connecticut state license number in PRE04. Note: Use your full state license number formatted as issued ex: 1.038562; 47.00000000; 23.000000	S		
PRE05	AN50	Last Name Prescriber's last name.	R	E	

PRE06	AN50	First Name Prescriber's first name.	R	E	
PRE07	AN30	Middle Name Prescriber's middle name or initial.	N		
PRE08	AN10	Phone Number Complete phone number including area code. Do not include hyphens.	N		
PRE09	AN9	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.	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 begin with 99999.					
CDI01	N2	Compound Drug Ingredient Sequence Number First reportable ingredient is 1; each additional reportable ingredient is incremented by 1.	R*	E	
CDI02	N2	Product ID Qualifier Code to identify the type of product ID contained in CDI03. • 01 NDC	R*	E	E
CDI03	AN15	Product ID Full 11-digit NDC number, created by adding a leading zero to result in a 5-4-2 formatted NDC number, as indicated in CDI02, without punctuation.	R*	E	
CDI04	D11	Compound Ingredient Quantity Metric decimal quantity of the ingredient identified in CDI03. Example: 2.5	R*	E	
CDI05	N2	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)	R*	E	W
AIR: Additional Information Reporting (situational) Used when 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	AN2	State Issuing Rx Serial Number USPS code of state or other regional jurisdiction that issued serialized prescription blank. This is required if AIR02 is used.	N		
AIR02	AN20	State Issued Rx Serial Number Number assigned to issued serialized prescription blank.	N		
AIR03	AN2	Issuing Jurisdiction Code identifying the jurisdiction that issues the ID in AIR04. Required if the value in AIR04 is 02 or 06.	N		
AIR04	N2	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. <ul style="list-style-type: none"> • 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 • 99 Other (agreed upon ID) 	N		W
AIR05	AN20	ID of Person Dropping Off or Picking Up Rx ID number of patient or person picking up or dropping off the prescription.	N		
AIR06	N2	Relationship of Person Dropping Off or Picking Up Rx Code indicating the relationship of the person. <ul style="list-style-type: none"> • 01 Patient • 02 Parent/Legal Guardian • 03 Spouse • 04 Caregiver • 99 Other 	N		W
AIR07	AN50	Last Name of Person Dropping Off or Picking Up Rx Last name of person picking up the prescription.	N		
AIR08	AN50	First Name of Person Dropping Off or Picking Up Rx First name of person picking up the prescription.	N		
AIR09	AN50	Last Name or Initials of Pharmacist Last name or initials of pharmacist dispensing the medication.	N		
AIR10	AN50	First Name of Pharmacist First name of pharmacist dispensing the medication.	N		
AIR11	N2	Dropping Off/Picking Up Identifier Qualifier Additional qualifier for the ID contained in AIR05 <ul style="list-style-type: none"> • 01 Person Dropping Off • 02 Person Picking Up • 03 Unknown/Not Applicable 	N		W

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 identify 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		

10 Revision History

Date	Version	Author	Comments
1/30/2024	1.0	Connie	Create initial document.
2/13/2024	1.1	Connie	Updated to include RxGov requirements and information.
4/18/2024	2.0	Connie	Finalized RxGov integration details.
5/6/2024	2.1	Connie	Added Section 2 - Data Collection and Reporting Requirements.
7/10/2024	2.2	Connie	Updated section 2 to provide SFTP URLs for UAT and Prod.
5/21/2025	2.3	Connie	Updated section 3 File naming convention
5/27/2025	3	Connie	Added section 2 Legal requirements
8/08/2025	3.1	Connie	Update to section 3 – Data Collection and Reporting Requirements