

How to PREPARED BY:
Nebraska Department of Health and Human Services
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NEBRASKA
PDMP
Submitter
User Guide



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Purpose

The "Nebraska PDMP Data Submitter Registration and Implementation Guide" serves as a comprehensive and systematic resource facilitating the implementation and training process for data submitters. It offers detailed instructions and essential information to aid dispensers in fulfilling their reporting obligations for the Nebraska Prescription Drug Monitoring Program (PDMP).

This document is primarily intended for various entities, including licensed pharmacies, dispensers, pharmacy technical support groups, and dispensing software vendors. It applies to those engaged in the dispensation of prescription drugs within the state of Nebraska or to addresses within the state's jurisdiction.

Program Overview

The Nebraska Prescription Drug Monitoring Program operates under the authority of Nebraska Revised Statutes §§ 71-2454 through 71-2455. Its primary objectives are preventing the misuse of prescribed controlled substances, monitoring patient medication care and treatment, providing information to improve patient health and safety, and ensuring that the State of Nebraska remains on the cutting edge of medical information technology.

Through the Population Health Information Act (Nebraska Revised Statutes §§ 81-6,123 through 81-6,128), the Health Information Technology (HIT) Board has been granted authority to establish criteria for the PDMP's data collection. The HIT Board has approved the PDMP to collect data according to the ASAP 5.0 release and as published in this Submitter User Guide.

Jointly administered by the Nebraska Department of Health and Human Services (DHHS) and CyncHealth, the Nebraska PDMP offers medication query functionality accessible to all prescribers and dispensers in the state at no cost to providers.

Notably, patients do not have the option to opt out of Nebraska PDMP data reporting, which ensures the maintenance of a comprehensive medication data set specific to Nebraska. The information can be accessed via a dedicated application tile on the CyncHealth Okta Landing Page using multi-factor authentication, through integration within a healthcare entity's electronic health record or pharmacy software system, or through the Health Information Exchange Clinical Viewer.

In compliance with the Health Information Portability and Accountability Act (HIPAA), all parties involved in submitting or receiving information from the Nebraska PDMP must implement appropriate privacy protections to safeguard sensitive health information.

About RxGov

RxGov is an advanced software solution developed by Leap Orbit aimed at recording and monitoring prescription dispenses, encompassing both controlled and non-controlled prescriptions. The use of controlled substances (CS) carries the potential for misuse or abuse, posing a public safety concern. To address this issue, every state has implemented a Prescription Drug Monitoring Program (PDMP) with the primary objective of curbing the improper use of controlled substance prescriptions. RxGov serves as a pivotal tool for PDMPs in overseeing the prescribing and dispensing activities of controlled substances within their respective states.

Focusing on providing a comprehensive system, RxGov facilitates seamless communication between various user groups, ensuring strict adherence to patient confidentiality, data security, and the dissemination of precise information. Its web-based application design eliminates the need for

specialized hardware or software, affording users the convenience of accessing their accounts from any location with internet connectivity. This user-friendly approach enhances accessibility and promotes efficient utilization of the software's functionalities.

How Does RxGov Work?

RxGov operates as a universal point of contact throughout the entire prescription dispensing process, streamlining critical interactions between various stakeholders.

When a patient seeks medical attention, and a healthcare provider contemplates prescribing a controlled substance, the provider can access the PDMP directly through the website or integrate it into their Electronic Health Records (EHR) system, which may be available to the healthcare clinic or organization or pharmacy. This access empowers the provider to better assess the benefits and risks associated with controlled substance medications while identifying potential harmful drug interactions. This proactive measure enhances patient safety and informed decision-making.

Before dispensing a prescribed controlled substance, the dispenser also has the option to review the PDMP. This step helps to ensure that the patient does not exhibit any indications of potential misuse or abuse of the prescribed medication, promoting responsible prescription management.

By actively submitting data for a dispenser or group of dispensers, a data submitter plays a vital role in maintaining the currency and accuracy of the RxGov database. This upkeep ensures that the data made available to healthcare providers and dispensers is reliable and up to date, fostering a more efficient, trusted, and reliable prescription monitoring process.

Data Collection and Reporting Requirements

Reporting Expectations

- Submission of ALL prescription drugs dispensed (both controlled and non-controlled substances), except for prescription drugs dispensed for non-human patients in which the dispenser must submit controlled substances CII-CV only.
- To fulfill the PDMP data collection requirement, dispensers are required to electronically report data on prescription drugs dispensed to a patient (human or non-human) in the state or to an address in the state.
 - *Dispenser* includes the following license types:
 - Community Pharmacy License
 - Mail Service Pharmacy Permit
 - Dispensing Practitioner Pharmacy License
 - Delegated Dispensing Permit
 - Remote Dispensing Pharmacy
 - Ophthalmic Mail-Order Provider
 - Long-Term Care Automated Pharmacy
 - Certain specified entities and types of drug delivery/dispensing are exempt from reporting. For more information, see *Reporting Exemptions* below.
- Dispensers are required to provide data at least daily in the nationally accepted standardized format or to provide zero reports if no medications were dispensed that met the required criteria for that day.
 - Data is encouraged to be provided as close to real-time as possible.
 - Data fields listed as Optional are encouraged to be reported whenever possible.
- In the event the records provided by a dispenser are not in the correct format, unreadable, or damaged, RxGov will not load the record and shall report the error to the applicable submitter for correction.

As part of the medication history hosting service, RxGov provides the appropriate infrastructure to accept data supplied by dispensers as required by Nebraska Revised Statutes §§ 71-2454 through 71-2455.

- If you are a *chain pharmacy*, your data may be submitted from your central office. Please verify this with your corporate or central office.
- *If you are an independent pharmacy or dispensing practitioner who works with a pharmacy or practice management system vendor*, please forward the reporting requirements to your software vendor.
- System changes may be necessary to create the data file in the correct format, and they may be able to submit the data on your behalf. If not, follow the instructions provided in the *Data Submission* chapter to submit the data.
- *If you are a dispenser that submits its own data*, follow the instructions provided in the *Data Submission* chapter to submit the data.

Reporting Exemptions

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

- The delivery of a prescription drug for immediate use for purposes of inpatient hospital care or emergency department care.
- The administration of a prescription drug by an authorized person upon the lawful order of a

prescriber.

- A wholesale distributor of a prescription drug monitored by the prescription drug monitoring system.
- The dispensing to a nonhuman patient of a prescription drug that is not a controlled substance listed in Schedule II, Schedule III, Schedule IV, or Schedule V of Neb. Rev. Stat. § 28-405.
- Licensed dispensers that do not dispense any prescription drugs.
- Licensed dispensers do not currently dispense any prescription drugs to a resident of Nebraska.

If a pharmacy or other dispenser meets one of the exemptions as identified according to Neb. Rev. Stat. § 71-2454 (14)(d) above, you may complete the *Exemption Information Form* located at <https://dhhs.ne.gov/Pages/PDMP-Enhancements.aspx> or <https://cynchealth.my.site.com/s/pdmp/pdmp-exemption-request>.

Registration Requirement

All individuals or entities that are not exempt from the PDMP reporting requirement must comply by submitting data to the Nebraska PDMP. To initiate the data submission process, the concerned individual or entity is required to complete the registration procedure via the RxGov web portal. For further details and instructions on how to create an account, please refer to the section titled "Creating Your Account" below.

This requirement is separate from any duty for a pharmacist or prescriber to register for clinical user access to PDMP data.

In general, the registration requirement applies to holders of a:

- Community Pharmacy License
- Mail Order Pharmacy Permit
- Dispensing Practitioner Pharmacy License
- Delegated Dispensing Pharmacy Permit
- Remote Dispensing Pharmacy
- Ophthalmic Mail-Order Provider
- Long-Term Care Automated Pharmacy

Reporting Methods and Data Standard

The Nebraska PDMP requires that all reports be submitted according to the American Society for Automation in Pharmacy (ASAP) Standard for Prescription Monitoring Programs v5.0. Detailed specifications for ASAP v5.0 are listed in *Appendix A: ASAP 5.0 Specifications*.

Guidelines for Zero Reporting

- If a dispenser has no dispensing transactions to report for the day, the dispenser is required to submit a zero report, as described in the *Zero Reports* topic in this guide.
- If a dispenser reporting by manual prescription entry has no dispensing transactions to report for the day, a zero report can be submitted under the **Submit Data** tab.

Submitter Account Management

Creating Your Account

To submit data, you will first need to create a *Submitter* account. If you have already created your account, proceed to the appropriate section of this document that outlines the steps you must follow to submit your data.

Steps to Create a New Account

1. Go to RxGov at: <https://nepdmp.rxgov.com>.
2. On the RxGov home page, click *Register*.
3. Enter the following required information:
 - a. E-mail
 - i. This e-mail will become your username.
 - ii. Use the e-mail that will be best for receiving error reports and correspondence.
 - b. Password
 - c. First name of the primary contact
 - d. Last name of the primary contact
 - e. State
 - f. Phone number of the primary contact or pharmacy
 - g. Pharmacy Name (as Submitter Name)
4. You are not required to enter any additional information, but you are encouraged to enter as much of the following information as possible:
 - a. Street address
 - b. City
 - c. Zip code
5. In the *Account Type* menu, select **Submitter**.
6. Enter your *Submitter Name*—should be the pharmacy name or facility name.
7. Click *Register*.
8. You will receive an email sent to the account email with a link to activate the account.

- a. If you do not receive an email within eight hours, please reach out to CyncHealth support at Support@CyncHealth.org OR 402-506-9900 opt. 1.
9. After review by a CyncHealth Nebraska PDMP administrator, you will receive an email at your submitted email address notifying you that your account is now activated.

Modifying Your Account

Forgot Your Password

1. Go to RxGov at: <https://nepdmp.rxgov.com>.
2. Select *Forgot password?*
3. An email will be sent to the email on file with a link to reset the password.

DRUG
OVERDOSE
PREVENTION
PRESCRIPTION DRUG
MONITORING PROGRAM

NEBRASKA
Good Life. Great Mission.
DEPT. OF HEALTH AND HUMAN SERVICES

Cync
Health

Email

Password

Forgot password?

Register Login

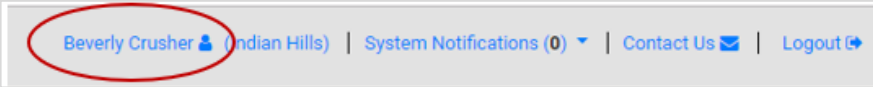
Rx.gov
AN IIC PLATFORM

Password Reset

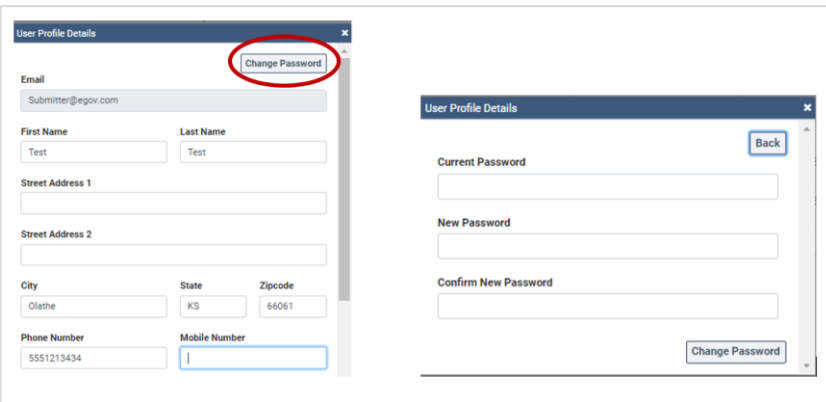
If an email has been registered in RxGov, an email regarding password reset has been sent to youraccountemail@email.org

Change Your Password

1. Log on to RxGov at: <https://nepdmp.rxgov.com>.
2. On the top menu bar, select your username.
3. On the *User Profile Details* window, click *Change Password*.



4. Type your current password in the *Current Password* box.
5. Type your new password in the *New Password* box.
6. Type your new password in the *Confirm New Password* box.
7. Select *Change Password*.



Account Lockout

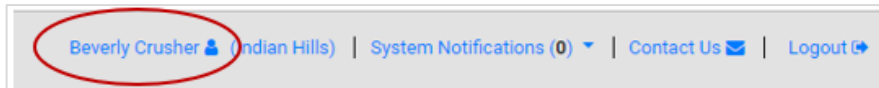
User accounts will be locked out after five failed login attempts. The account will remain locked out for 30 minutes, at which time you can try again. If needed, contact Support@CyncHealth.org or 402-506-9900 opt. 1 for PDMP support from CyncHealth.

Update Profile Details



To change any user information:

1. Log on to RxGov at: <https://nepdmp.rxgov.com>.
2. On the top menu bar, select your username.
3. On the *User Profile Details* window, update information in the proper fields as needed.



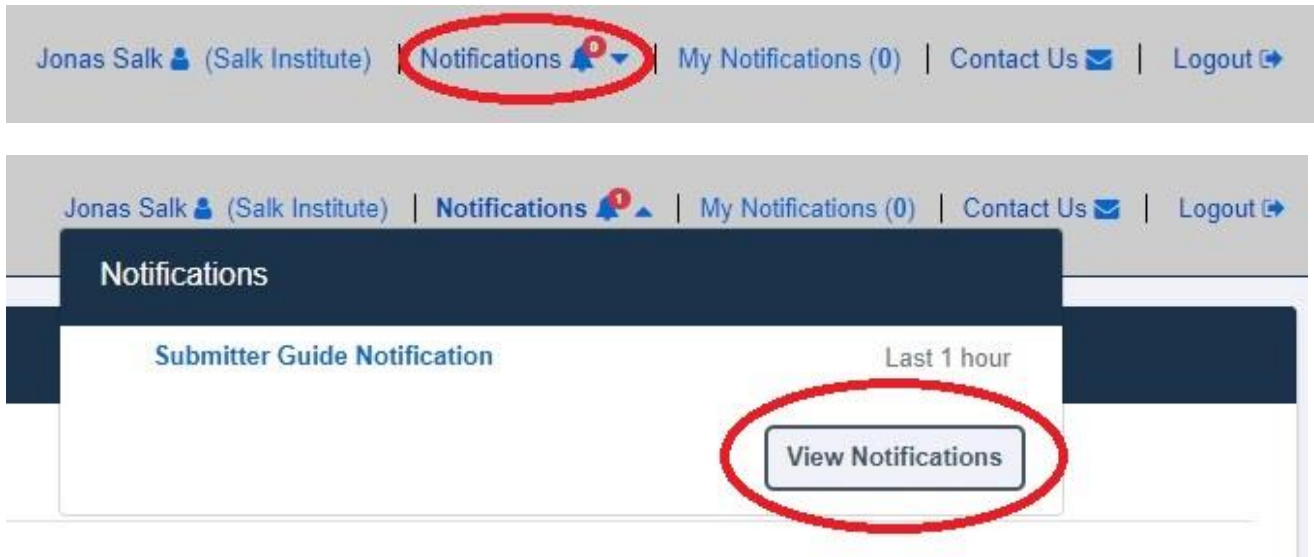
4. Select *Change Identifier Fields* to change any fields locked out.
 - a. Make the appropriate changes in the *Create User Identifier Change Request Ticket window*.
 - b. Any changes here require a reason to be submitted with the change.
 - c. Select the *Submit* button.
6. Select the *Save* button.

OR contact Support@CyncHealth.org or 402-506-9900 opt. 1 for PDMP support from CyncHealth.

Viewing System Notifications

System notifications, set by the PDMP administrator, are visible to all selected users and usually contain information about updates, system outages, or planned downtime. They can also contain information relevant to using the system.

System notifications can be viewed by selecting *Notifications* on the top menu bar. A drop-down of system notifications will appear. Click on the *View Notifications* button to read the specific notification.



Data Delivery Methods

Notes About NDC Numbers

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

The following table shows common formats on packaging and the appropriate way to convert to the 11-digit format needed for reporting. The correctly formatted entry is listed below. An additional “0” is added, bolded, and underlined in the following example to provide clarity on the proper submission value. Hyphens are provided to demonstrate the various formatting examples for the NDC **but should not be transmitted in ASAP format.**

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

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

Submission Method #1: Secure FTP Over SSH with Stat Command Enabled

There are many free software products that support Secure FTP (sFTP). Neither Nebraska DHHS, CyncHealth, nor the PDMP Vendor (Leap Orbit/RxGov) can direct or support your installation of operating system software for Secure FTP.

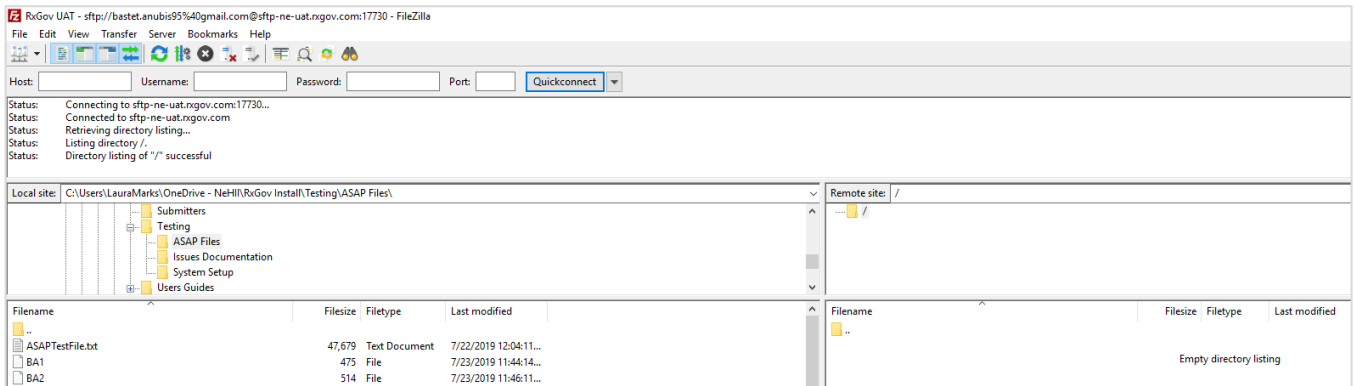
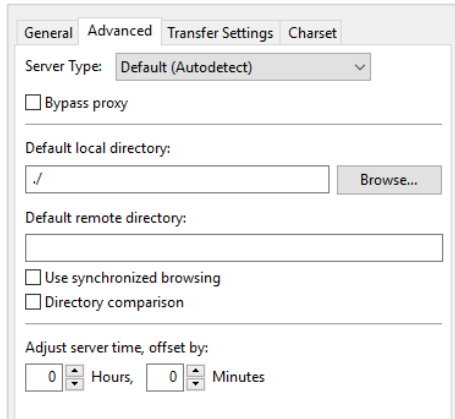
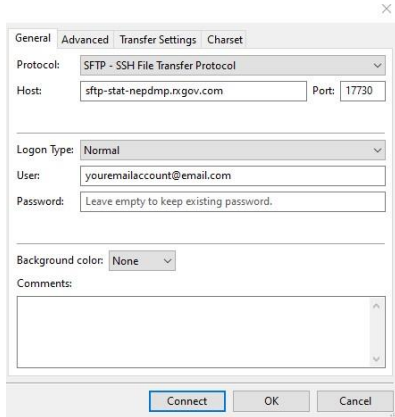
After creating your RxGov submitter account, a PDMP administrator will activate it. You will receive your credentials via email 24-48 hours after your account has been activated in RxGov.

Some pharmacy vendors require a specific set of commands enabled for copying files over FTP. Please check with your pharmacy software vendor or IT support contact to determine if your system requires **Stat Command**. The easiest indication that you might need to utilize Stat Command would be the identification of errors after you upload the files about viewing / setting / altering the attributes of the file.

Once the software is set up, follow the steps below to submit files to RxGov:

1. Prepare the data file for submission using the ASAP specifications described in *Appendix A: ASAP 5.0 Specifications*.
2. SFTP the file to: `sftp://sftp-stat-nepdmp.rxgov.com`
 - a. Port: 17730
3. When prompted, type your data submitter credentials (i.e., username and password).
4. Place the file in the default login directory. (Default directory should be the "/Upload" folder)
5. If desired, you may view the results of the submission in the *My Submissions* section of RxGov.
6. Log off when the file submission is complete.

FileZilla Example Entry (Stat Command) FileZilla - Example



WinSCP Example Entry Stat Command

Session

File protocol:

Host name: Port number:

User name: Password:

ASAP Files - RxGov UAT - WinSCP

Local Mark Files Commands Session Options Remote Help

Synchronize Queue Transfer Settings Default

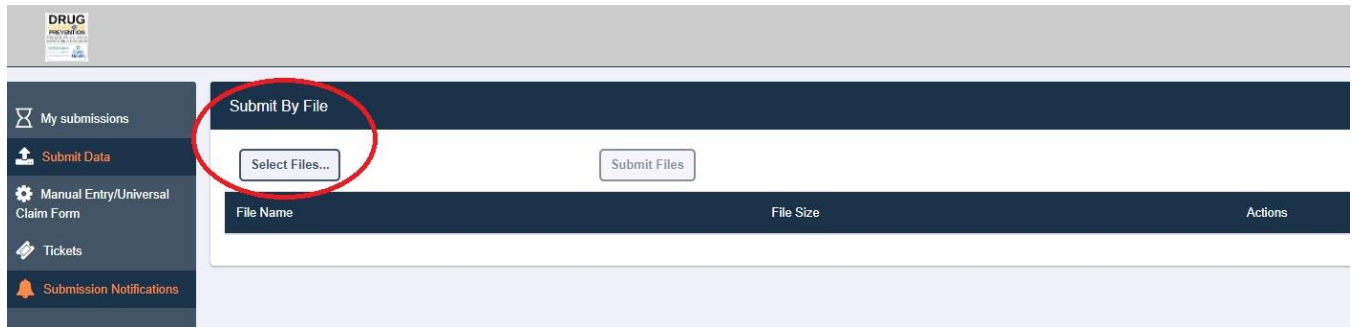
RxGov UAT x New Session

C: OS / <root>

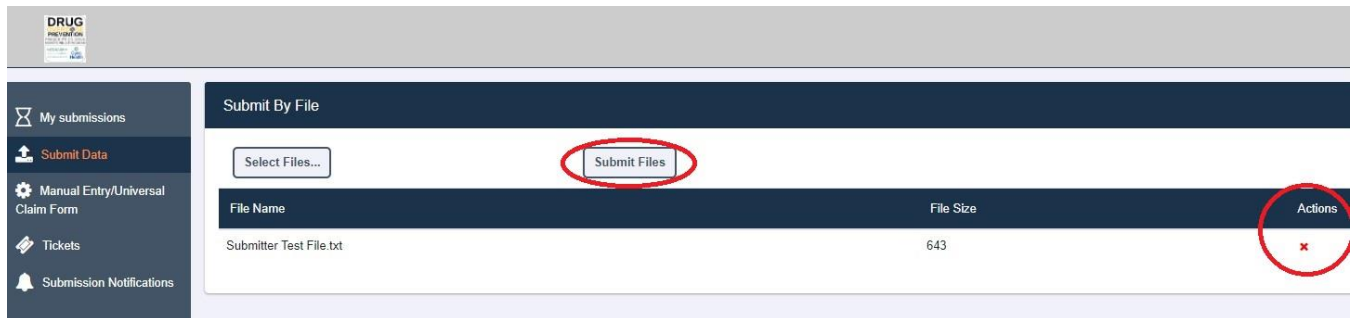
Name	Size	Type	Changed
ASAPTestFile.txt	47 KB	Text Document	7/22/2019 1
BA1	1 KB	File	7/23/2019 1
BA2	1 KB	File	7/23/2019 1

Submission Method #2: SSL Website (RxGov Portal)

1. Prepare the data file for submission using the ASAP specifications described in *Appendix A: ASAP 5.0 Specifications*.
2. Log on to RxGov at: <https://nepdmp.rxgov.com>.
3. On the left menu, click *Submit Data*.
4. In the *Submit By File* section, click *Select Files*.



5. Select the file on your computer and click *Open*.
 - a. If a selected file was picked by mistake, select the red x in the *Actions* column to remove it.
 - b. When all desired files are listed, click *Submit Files*.



6. If desired, view the results of the submission in *My Submissions*.
7. Log off when the file submission is complete.

Submission Method #3: Manual Prescription Entry

1. Navigate to your Nebraska PDMP Submitter account by logging into the web portal at: <https://nepdmp.rxgov.com/login>
2. Once you are logged into your account, select **Manual Entry/Universal Claim Form** on the menu on the left side of the screen.

The screenshot shows the web portal interface. On the left is a dark sidebar with navigation options: 'My submissions', 'Submit Data', 'Manual Entry/Universal Claim Form' (highlighted with a red box), 'Tickets', and 'Submission Notifications'. The 'Rx.gov' logo is at the bottom of the sidebar. The main content area is titled 'Submission History' and features two date filters: 'Start Date' (06-07-2023) and 'End Date' (09-07-2023). Below the filters is a table with the following data:

File Name	# of Records
UniversalForm_20230907T150949	1
UniversalForm_20230906T213344	1
zero_report__20230906-02-51.txt	1
5f16d62e-4c9a-486e-aff8-cd5289dcab7d_err_correction_2023-08-29T18:10:48	6
c19556ec-75e3-4f2b-8c12-3602d9fa04ff_err_correction_2023-08-29T18:09:25	1

3. Fields with a red asterisk (*) are required to be populated.

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

Pharmacy Information

National Provider Identifier (NPI) [PHA01] * ex: 1234567890	DEA Number [PHA03] ex: ab1234567	
Pharmacy Name [PHA04] * pharmacy name	Chain Site ID [PHA12] chain store number	Phone Number [P] 10-digit number
Contact Name for Pharmacy [PHA11] contact for pharmacy	Pharmacy Address - 1 [PHA05] * street address	
City [PHA07] * city	State [PHA08] * select state	Zip Code [PHA09] zip code

4. Pharmacy (Dispenser) information fields will display first.
- a. After you enter a valid DEA or NPI number, most of the fields for the pharmacy should automatically populate.
 - b. The required fields include:
 - i. NPI-National Provider Identifier
 - ii. Pharmacy Name
 - iii. Pharmacy Address -1
 - iv. City
 - v. State
 - vi. Zip Code
 - c. Non-required fields can be populated if the information is available.

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

5. Patient information fields will be displayed below the Pharmacy (Dispenser) fields.
- a. The Animal/Human toggle should be automatically set depending on your account type.
 - i. Submitters – Human
 - ii. Veterinarian, Veterinarian Delegate, Vet Submitter- Animal



- b. The toggle defaults to U.S. Resident but can be changed to Non-U.S. Resident if needed.



- c. The required fields include:
 - i. Patient Last Name
 - ii. Patient First Name
 - iii. Date of Birth (entered in the yyyyymmdd format)
 - iv. Gender
 - v. Patient Address
 - vi. City
 - vii. State
 - viii. Zip Code
 - ix. Phone Number (do not use a hyphen (-) when entering phone numbers)
 - x. Identification type
 - xi. One of the following:
 - 1. ID Number
 - 2. Passport ID Number
 - 3. Patient Driver's License Number
 - 4. Social Security Number

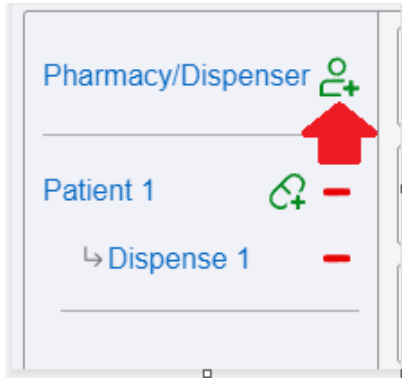
Patient Name Prefix [PAT10] select prefix	Patient Last Name [PAT07] * last name	Patient First Name [PAT08] * first name	Patient Middle Name [PAT09] middle name	Patient Name Suffix [PAT11] select suffix
Date of Birth [PAT18] * yyyyymmdd format	Gender [PAT19] * select gender	Patient Address - 1 [PAT12] * 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				

- d. You can add an additional ID by clicking on the button with the green text labeled “Add Additional Id.”

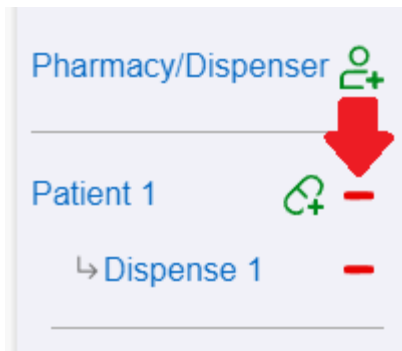
Patient Identification			
Identification Type [PAT02] * Passport ID	Issuing Country [PAT01] country name	Passport Id Number [PAT03] * passport number	

- e. Non-required fields can be populated if the information is available.

- f. You can add an additional Patient by clicking on the green patient button on the left side of the screen beside *Pharmacy/Dispenser*.



- i. Repeat steps a – e for each patient added.
- g. You can remove a patient by clicking the red dash on the left side of the screen next to the appropriate patient.



6. Dispense fields will be below the patient information.
- a. The required fields include:
 - i. Reporting Status
 - ii. Prescription Number
 - iii. Date Written
 - iv. Refills Prescribed
 - v. Date Filled
 - vi. Refill Number
 - vii. Date Sold
 - viii. Payment Type
 - ix. Product ID Type
 - x. Product ID
 - xi. Quantity Dispensed
 - xii. Dose Unit
 - xiii. Day Supply
 - xiv. Discount Card

b. Non-required fields can be populated if the information is available.

Reporting Status [DSP01] * New Record	Prescription Number [DSP02] * prescription number	Date Written [DSP03] * 09-07-2023	Quantity Prescribed [DSP22] 0 or more	Refills Prescribed [DSP04] * 0 or more
Date Filled [DSP05] * 09-07-2023	Prescription Origin/Transmission Type [DSP12] Written Prescription	Refill Number [DSP06] * refill number	Partial Fill Indicator [DSP13] partial fill indicator	Date Sold [DSP17] * 09-07-2023
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		

c. If *Product ID Type* is populated as compound, additional fields will be displayed and required.

i. The required fields include:

1. Product ID Type
2. Product ID
3. Quantity Dispensed
4. Dose Unit

ii. Non-required fields can be populated if the information is available.

iii. Additional ingredients can be added by pressing the “+ Add” button.

Compound Drug Information

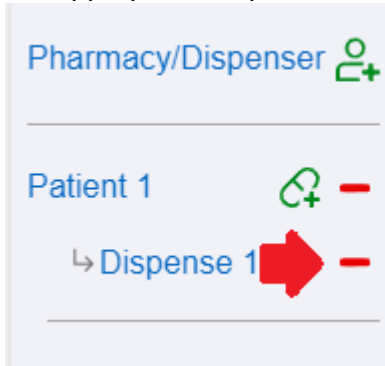
Sequence Number [CDI01] 1	Product ID Type [CDI02] * NDC	Product ID [CDI03] * 12345678901	Quantity Dispensed [CDI04] * 30	Dose Unit [CDI05] * Milliliters (ml)	➡ + Add
------------------------------	----------------------------------	-------------------------------------	------------------------------------	---	---------

d. You can add an additional dispense by clicking on the green capsule button on the left side of the screen beside the appropriate *Patient*.



i. Repeat steps a – c for each dispense added.

- e. You can remove a dispense by clicking the red dash on the left side of the screen next to the appropriate dispense.



- 7. Prescriber fields are below the dispensing information.
 - a. After you enter a valid DEA or NPI number, many of the fields for the prescriber should automatically populate.
 - b. The required fields include:
 - i. NPI-National Provider Identifier
 - ii. Prescriber Last Name
 - iii. Prescriber First Name
 - c. Non-required fields can be populated if the information is available.

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] * <small>ex: 1234567890</small>	Prescriber DEA Number [PRE02] <small>ex: ab1234567</small>	Prescriber DEA Number - Suffix [PRE03] <small>ex: 123</small>
Issuer of Prescriber License Number [PRE10] <small>select issuer</small>	Prescriber State License Number [PRE04] <small>ex: abc1234</small>	Prescriber Last Name [PRE05] * <small>last name</small>
Prescriber First Name [PRE06] * <small>first name</small>	Prescriber Middle Name [PRE07] <small>middle name</small>	Prescriber Phone Number [PRE08] <small>10-digit number</small>

- 8. Additional optional fields are displayed below the prescriber fields.

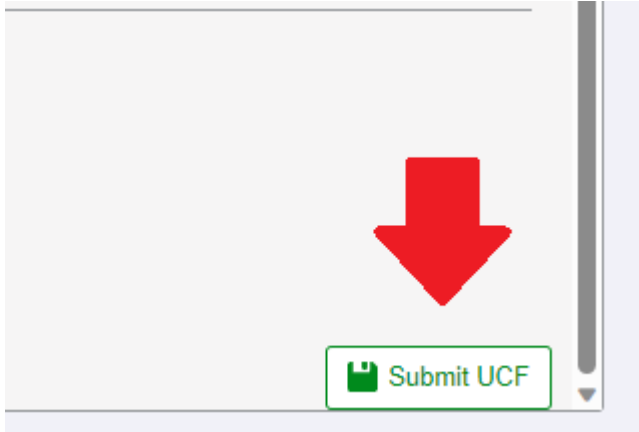
Rx Serial Number

State Issuing Rx Serial Number [AIR01] <small>select state</small>	Rx Serial Number [AIR02] <small>ex: abc123456789</small>
---	---

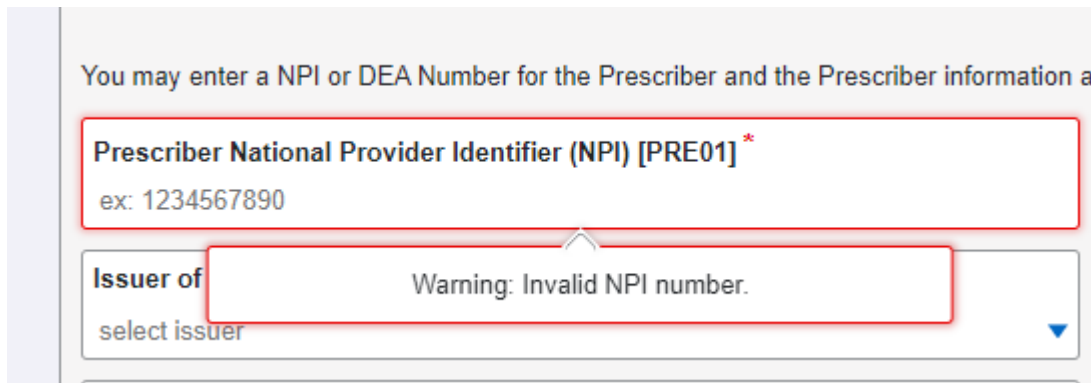
Non-Patient Rx Pick Up/Drop Off

Non-Patient Pick Up or Drop Off [AIR11] <small>select action</small>	Non-Patient Identification Type [AIR04] <small>select id type</small>
---	--

9. When finished entering information, select the green “Submit UCF” button on the of the screen.



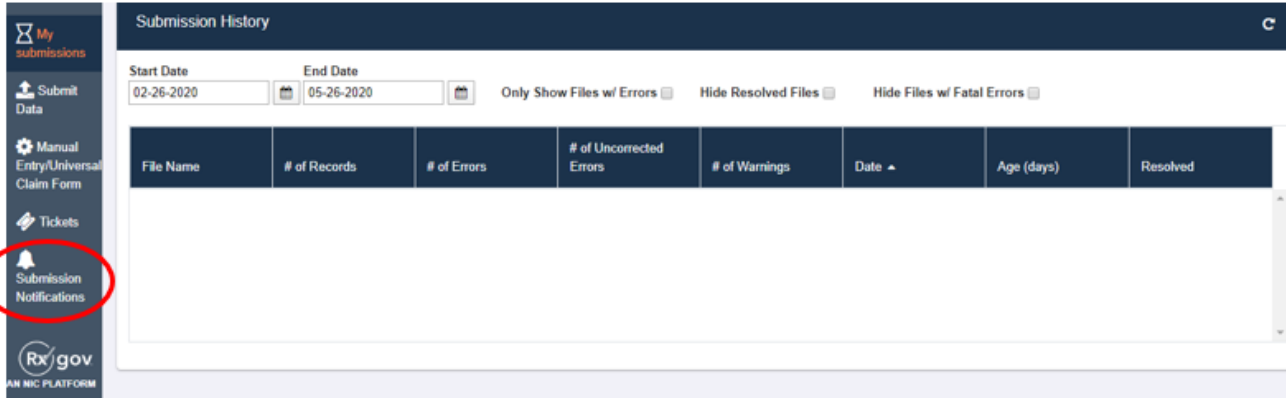
- a. If any information that is required and not populated or populated incorrectly, you will get a notification, and the appropriate fields will be outlined in red along with a message to explain the error.



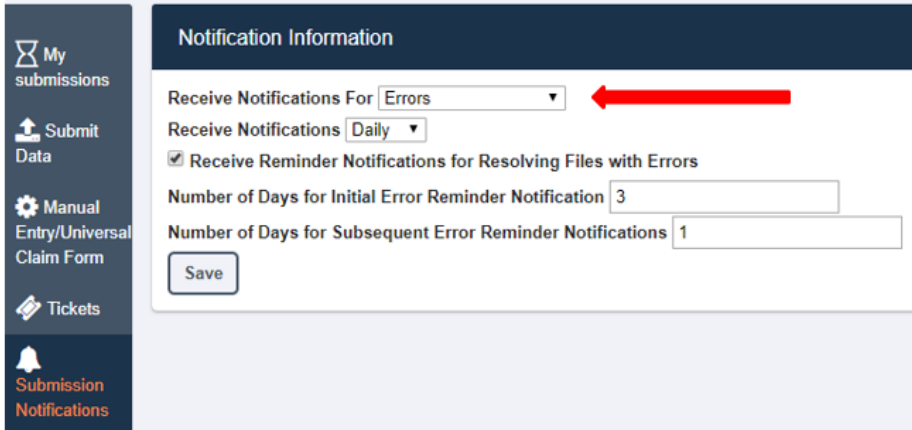
Submitted Reports and Edit Definitions

Notifications

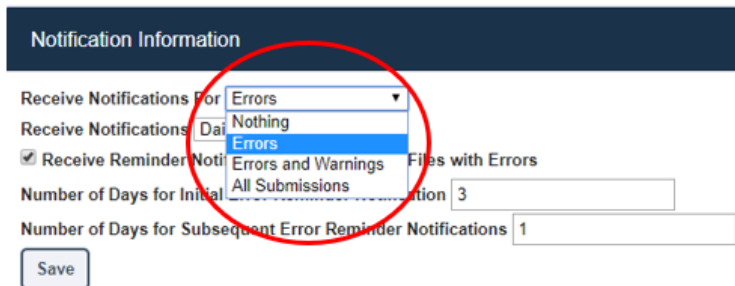
Every submitter can choose to have RxGov notify them via email regarding their submissions and errors. The submitter can alter how they receive these notifications in RxGov.



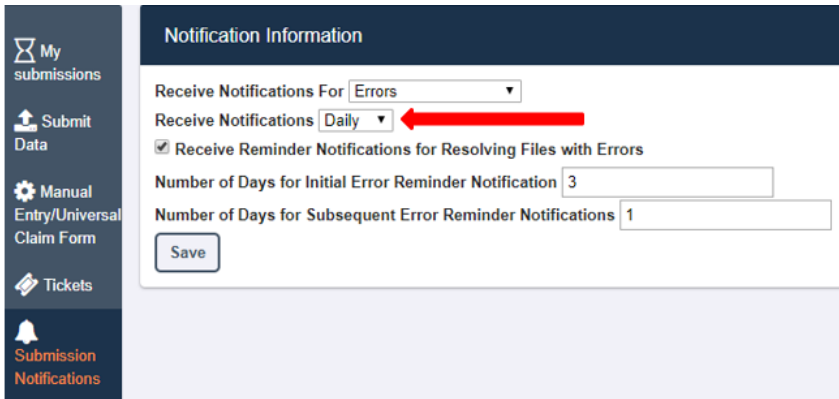
Click **Submissions Notifications**.



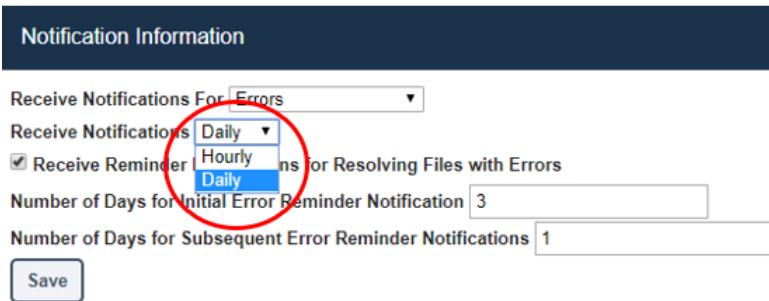
Receive Notification For can be set for Errors, Errors and Warnings or All Submissions by clicking the down arrow (caret).



Error notifications will only be sent if the file submitted contains an error. Error and Warning notifications will only be sent if the file contains either an error or a warning. All Submissions will send a notification each time a file is sent into the PDMP.



Receive Notification can be set for Daily or Hourly by clicking the down arrow (caret).

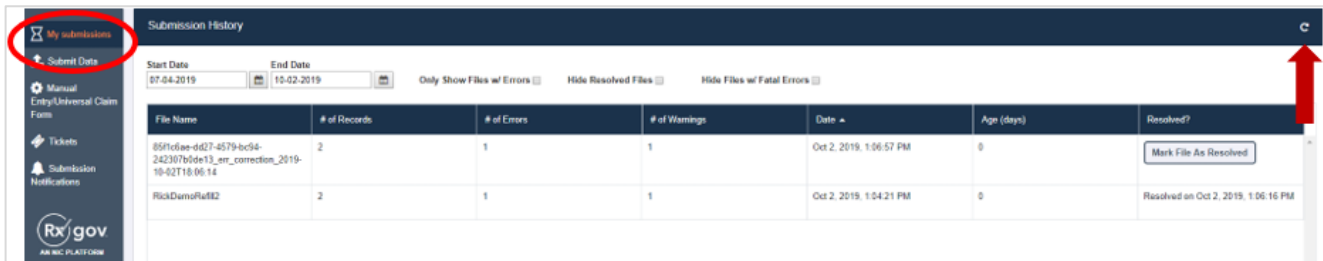


Number of Days for Initial Error Reminder Notifications and for Subsequent Error Reminder Notifications can be configured as well.

Save all changes before exiting the **Notification Information** tab by clicking the **Save** button.

View Submitted Reports

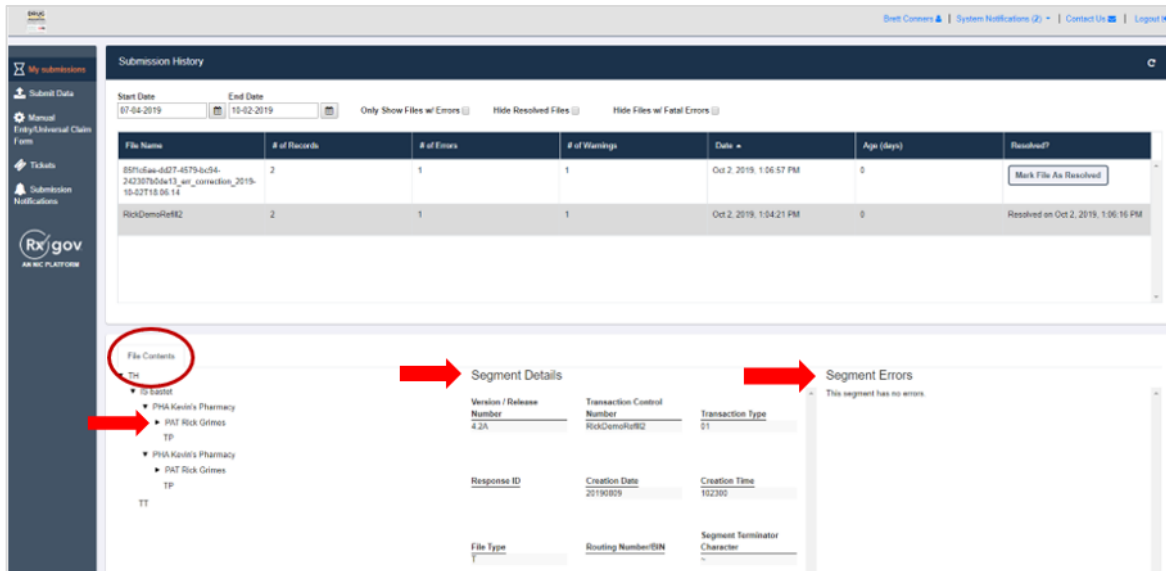
Submitted data can be viewed in the RxGov platform. The submitter will only be able to view records submitted via the account username.



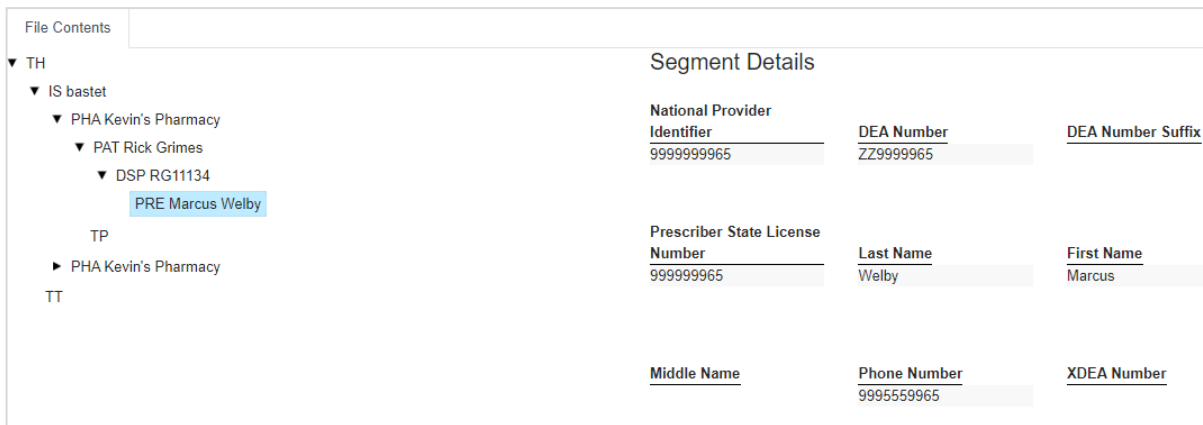
1. Log on to RxGov at: <https://nepdmp.rxgov.com>
2. Click *My Submissions* in the left menu.
3. On the *Submission History* page, use the *Start Date* and *End Date* boxes to select the dates for

viewing data. The search can be narrowed by selecting one or more of the following boxes:

- a. Only Show Files w/ Errors
 - b. Hide Resolved Files
 - c. Hide Files w/ Fatal Errors
4. When selections have been made, the submission history search will run automatically. The displayed data can also be updated by clicking the refresh icon at the top right of the page.
 5. To view submitted data, click the line containing the data to view.



6. The *File Contents* section contains information on all submitted patients. You can view details on a patient by clicking the expand arrow next to the patient's name.
7. Additional dispensing information is displayed in the *Segment Details* section and errors are displayed in the *Segment Errors* section.
8. The *File Contents* section can be drilled down further by clicking on the arrows.

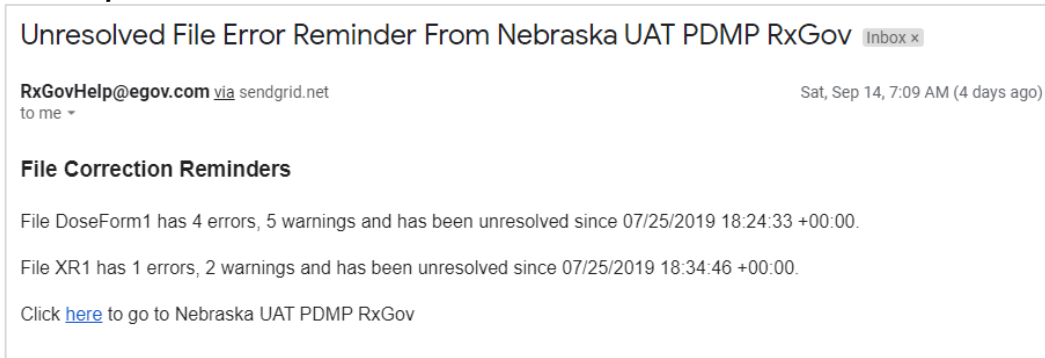


- a. Patient information is displayed in the *Segment Details* section when the PAT line is highlighted.
- b. Prescription information is displayed in the *Segment Details* section when the DSP line is highlighted.
- c. Prescriber information is displayed in the *Segment Details* section when the PRE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

Error Correction

When an uploaded file contains an error, RxGov will alert the submitter. Depending on the setup of the submitter’s **Notifications**, the submitter will receive an email from the system either hourly or daily. The Submitter can also view errors in the **My Submissions** tab of RxGov.

Sample email:



There are three error types: *Error*, *Warning* and *Fatal Error*.

- a. *Errors* are defined as simple data errors that may be corrected inside the submission file through RxGov or corrected in the ASAP file and resent. If the errors are not corrected, the data will not become part of the PDMP.
- b. *Warnings* are defined as simple data errors that can be corrected inside the submission file through RxGov but are not required to proceed. If the warnings are not corrected, data will still become part of the PDMP.
- c. *Fatal Errors* are defined as errors that cannot be corrected in the submission file through RxGov. The file must be corrected by the Submitter or Submitter’s Vendor and resubmitted to RxGov.

Example of what a fatal error(s) looks like.

Error Correction
File Contents

This file contains errors or warnings which cannot be corrected online. Please resubmit a corrected file. See below for a list of these errors. ⓘ

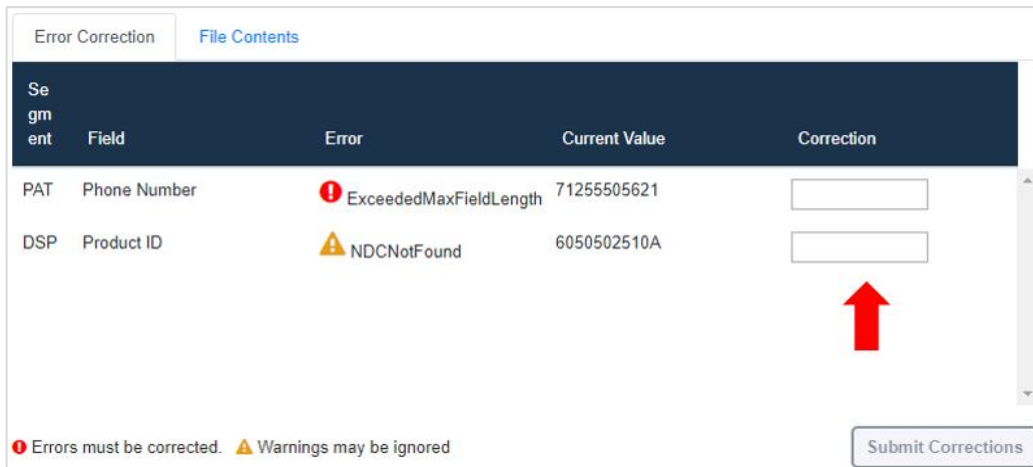
Segment	Error
IS	Segment type IS has 4 fields; it cannot have more than 3
CDI	Segment type CDI has 6 fields; it cannot have more than 5
CDI	Segment type CDI has 6 fields; it cannot have more than 5
CDI	Segment type CDI has 6 fields; it cannot have more than 5
CDI	Segment type CDI has 6 fields; it cannot have more than 5

Data Submitters can correct most ASAP file submission errors through the My Submissions screen in RxGov. Errors can also be corrected within the ASAP file and resubmitted to RxGov electronically.

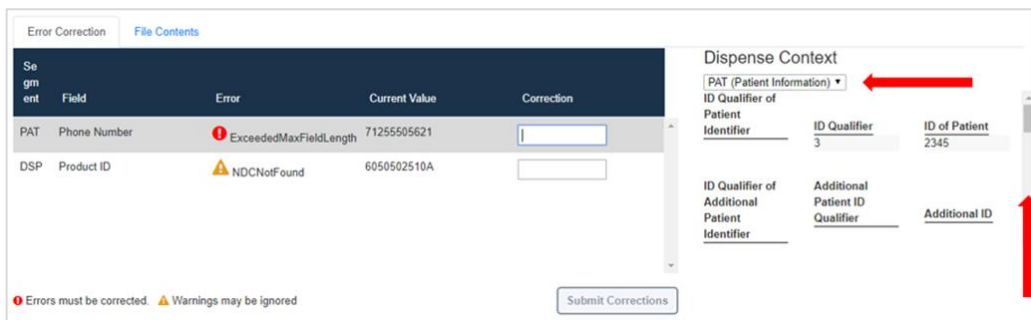
To review the details of a file’s errors, review the file in the RxGov platform under *My Submissions* as described in *View Submitted Reports* or click the email link provided in the RxGov email alert.



1. To select a file within *My Submissions*, click anywhere on the line of the file and the details of the error will display on the bottom half of the screen. The ASAP 5.0 Data Segment and Field names are shown in the first two columns followed by the specific Error and the Current Value contained in the submitted ASAP file. The last column contains a field for Correction entry.



2. When the *Correction* box is clicked on, more information will appear in the *Dispense Context* (on the right of the screen). The drop box contains options for searching through the submitted prescription.
 - a. Another option to view the content is to scroll down the right side of the *Dispense Context* screen.



3. Enter the correct information into the *Correction* box.
 - a. Note that *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 will appear in

the correction column (incorrect information will result in a red x). Click anywhere outside of the box or tab away and the *Submit Corrections* will highlight.

- b. Please refer below to the ASAP 5.0 Field guide for more information regarding what is being requested.

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

4. Click the *Submit Corrections* box and a *Success* box will appear.
5. When the file has been corrected, the system will create a new file with the corrected information and change the information under the **Resolved** column for the original file to "*Resolved on <Date & Time>*".

File Name	# of Records
33484e31-e8eb-41ac-a7c1-48cebc4a88fb_err_correction_2019-09-18T21:57:04	5

Resolved on Mar 14, 2022, 2:24:19 PM

6. In times when the system fails to recognize a file correction, there is a manual resolution option.
 - a. This button can be found in the **Resolved** column and is titled "*Mark File As Resolved.*"
 - b. Please note that once a file has been marked as resolved, that action cannot be reversed.
 - c. Also be aware that if there are dispenses within the file that have unresolved errors, but the "*Mark File as Resolved*" function is used, the dispense with the error will not be incorporated into the PDMP and will not be part of the patient's medication list.

File Name	# of Records	# of Errors	# of Uncorrected Errors	# of Warnings	Date	Age (days)	Resolved
LockhartRinoa_speciescode011.txt	1	1	1	0	Sep 28, 2020, 1:00:03 PM	2	<input type="button" value="Mark File As Resolved"/>
TrepeQuistis_Driverslicense.txt	1	0	0	0	Sep 22, 2020, 10:41:24 AM	8	N/A
TrepeQuistis_Driverslicense.txt	1	1	1	0	Sep 22, 2020, 10:40:37 AM	8	<input type="button" value="Mark File As Resolved"/>
LockhartStanley_speciescode02.txt	1	0	0	0	Sep 21, 2020, 2:25:24 PM	9	N/A
LockhartRinoa_speciescode011.txt	1	0	0	0	Sep 21, 2020, 2:25:24 PM	9	N/A

Zero Reports

This function allows data submitters to easily submit zero reports. Zero report information is displayed on the *Submission History* page with other submitted data for a selected time.

Submission of Zero Report

1. Log on to RxGov at: <https://nepdmp.rxgov.com>.
2. Click *Submit Data* from the left menu.
3. Enter the date.
4. Enter either the *NPI (preferred)* or *DEA*.
5. Enter NCPDP/NABP Provider ID if desired.
6. Click *Submit*.

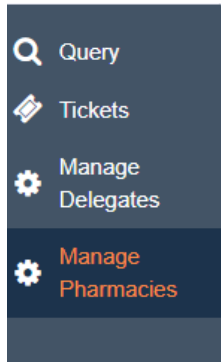
Viewing Previously Entered Zero Reports

File Name	# of Records	# of Errors	# of Uncorrected Errors	# of Warnings	Date	Age (days)	Received
zero_report_20220118-07-02.txt	1	0	0	0	01/18/2022 01:43 PM (CST)	0	N/A

1. Log on to RxGov at: <https://nepdmp.rxgov.com>.
2. Click *My Submissions* in the left menu.
3. On the *Submission History* page, use the *Start Date* and *End Date* boxes to select the dates for which you want to view data.
4. Zero reports and full data upload files are displayed in the same list within *My Submissions*.
5. To easily find zero reports, sort by file name and scroll through the alphabetical list until you reach the *zero-report* section.

Submitter Delegate Feature

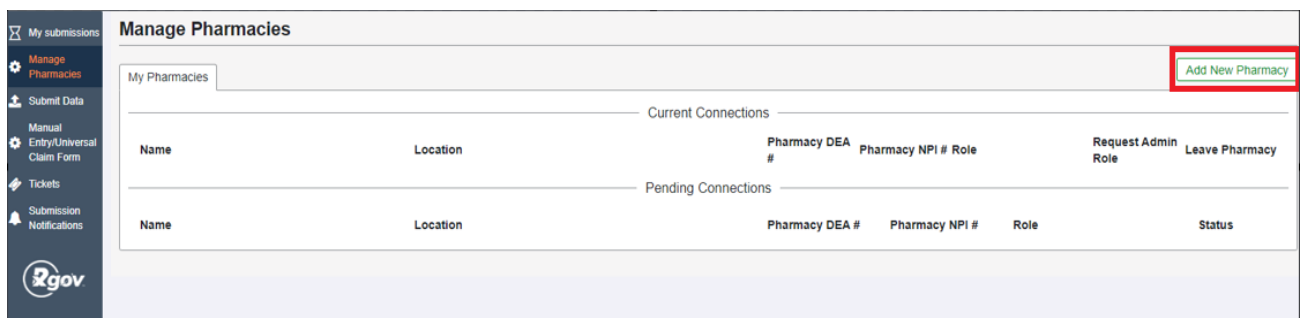
RxGov now supports the ability for Submitters to delegate reporting responsibilities to other individuals. A submitter account is assigned the *Store Admin* role by default which gives the account special privileges. The *Store Admin* designation allows a submitter to approve or deny requests by other individuals to become either *Submitter Delegates* or *Store Admins*. Users with the role types of Submitter, Submitting Prescriber, Dispenser, Dispenser Delegate, and Submitting Dispenser will have the ability to be granted the *Store Admin* or *Submitter Delegate* privileges. These roles will also have the “Manage Pharmacies” option on their main menu.



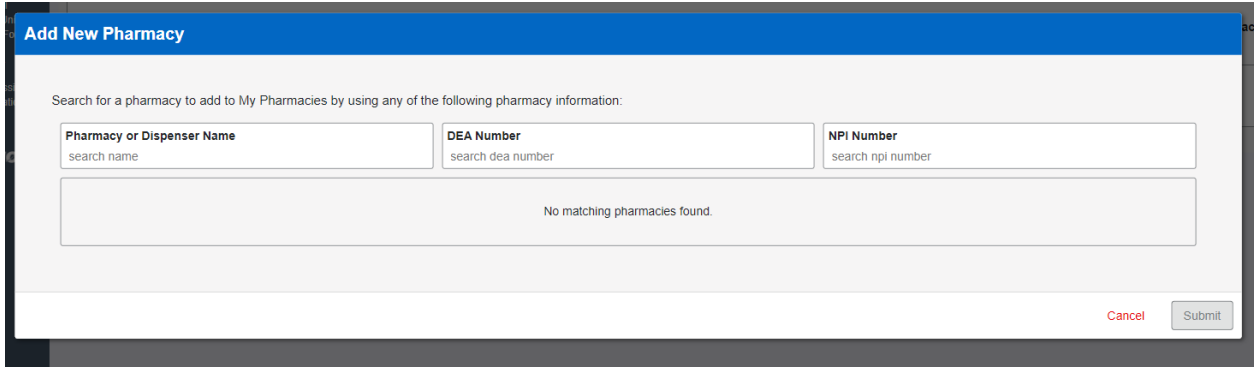
- Store Admins- Can approve or deny requests for others to become *Store Admins* or *Submitter Delegates*. Can also correct errors on previously submitted dispenses.
- Submitter Delegates- Can only correct errors on previously submitted dispenses.

How to establish a connection as a Submitter Delegate

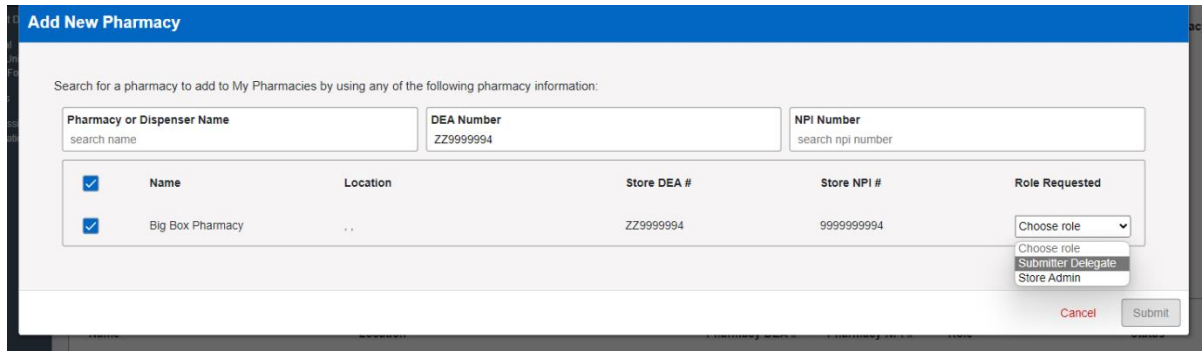
1. Log on to RxGov at: <https://nepdmp.rxgov.com>.
2. Click on the *Manage Pharmacies* link to view the “My Pharmacies” tab.
 - a. Click on the green *Add New Pharmacy* button to begin the request.
 - b. If you are using recently created Submitter account, your pharmacy will automatically be connected to your account.



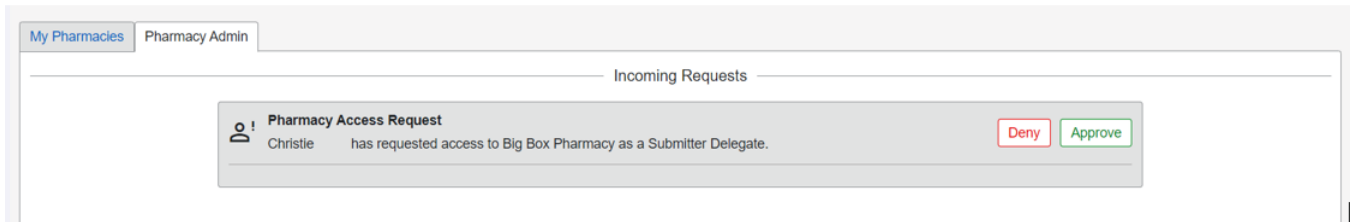
3. You will see an “Add New Pharmacy” window appear.



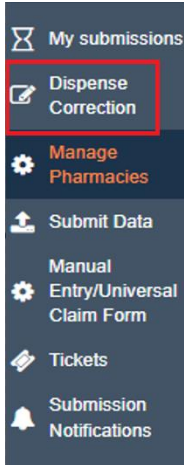
4. Pharmacies may be searched by name, DEA number, or NPI Number. (Names are case sensitive, so if you are unable to locate the pharmacy by name please use the DEA or NPI number).
5. Choose the pharmacy by checking the box to the left of the pharmacy name.
 - a. Select either *Submitter Delegate* or *Store Admin* as a requested role. Press the “Submit” button.



6. Pending requests will appear on the Pharmacy Admin tab.

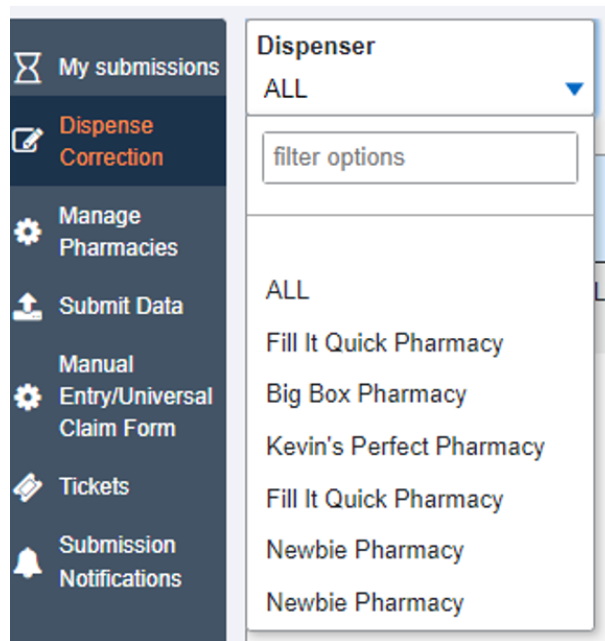


7. Once approved by the *Store Admin*, the “Dispense Correction” menu item will appear on the main menu and you will gain access to the dispense errors and warnings for that pharmacy.



How to correct errors as a Submitter Delegate

1. Log on to RxGov at: <https://nepdmp.rxgov.com>.
2. Click on the “Dispense Correction” link in the main menu.
 - a. The screen will default to showing errors and warnings for all pharmacies you are a submitter delegate for.
 - i. This can be filtered in the “Dispenser” drop-down menu.



3. You will see a list of submissions from the submitter account associated with the pharmacy. This list also shows the number of errors associated with a submission in red font and the number of warnings in yellow font.
 - a. If a submission has no errors or warnings, the “Dispenses” button will be grayed out. Only submissions with errors or warnings will allow you to open them.

File Name	Submitter	Submission Date	Dispenses With Errors / Warnings	
Oliver Ambulatory MPE 05072022.txt	Christie Rx MD	05/07/2024 07:42 AM (3 days ago)	0 / 0	Dispenses
Damon MyChart 05072024 Lot of errors multiple pharmcaies.txt	Christie Rx MD	05/07/2024 07:42 AM (3 days ago)	4 / 0	Dispenses
Peg Carter 042924.txt	Christie's Drug	04/29/2024 02:33 PM (11 days ago)	0 / 0	Dispenses
Virginia Sparks suboxone 0402 test.txt	Christie's Drug	04/29/2024 11:16 AM (11 days ago)	0 / 0	Dispenses
Virginia Sparks suboxone 04052022.txt	Christie's Drug	04/29/2024 11:10 AM (11 days ago)	0 / 4	Dispenses
Peggy Carter suboxone 0401 and 0416.txt	Christie's Drug	04/29/2024 11:08 AM (11 days ago)	0 / 0	Dispenses
william taylor suboxone 0417 and 0423.txt	Christie's Drug	04/29/2024 11:08 AM (11 days ago)	0 / 0	Dispenses
william taylor suboxone 0401 and 0416.txt	Christie's Drug	04/29/2024 11:08 AM (11 days ago)	0 / 0	Dispenses

- Clicking on the “Dispenses” button will display each dispense with an error or warning individually, allowing you to correct them one at a time. This allows errors to be corrected as time allows instead of requiring all errors to be resolved at once.

#	ID	Dispenser	Pharmacy ID #s	Rx Info	Errors / Warnings	
1	9757	Big Box Pharmacy	NPI: 9999999994 DEA: ZZ99999994	Rx: 55 Refills: 00	1 / 0	Correct
2	9758	Fill It Quick Pharmacy	NPI: 9999999932 DEA: BC99911111	Rx: 347 Refills: 00	1 / 0	Correct
3	9759	Kevin's Perfect Pharmacy	NPI: 9999999992 DEA: ZZ99999992	Rx: 5289 Refills: 00	1 / 0	Correct

Dispense 9757
 Dispenser: Big Box Pharmacy
 Submitted Date: 05/07/2024 07:42 AM

Errors Remaining: 1
Warnings Remaining: 0

Show Only Errors

DSP09 - Quantity Dispensed	Amended Value enter corrected value	Segment: DSP. Error Type: MissingRequiredField. Description: ASAP validation error in segment DSP, field 9, value ""
----------------------------	--	--

- After correcting the error or warning associated with a dispense, press the green “Submit Corrections” button.

Assistance and Support

If you have questions regarding the Nebraska PDMP, please email Support@CyncHealth.org or call 402-506-9900 opt. 1.

Document Information

Version History

The *Version History* records the publication history of this document.

Publication Date	Version Number	Comments
07/09/2019	1.0	Initial publication
08/26/2020	1.1	Revised publication
10/10/2019	1.2	Revised publication
02/13/2020	1.2.3	Revised publication
06/01/2020	1.3	Revised publication
09/11/2020	1.3.1	Revised publication
02/04/2022	1.4	Revised publication
06/01/2022	1.4.1	Revised publication
12/08/2022	1.5	Revised publication
10/18/2023	2.0	Revised publication for ASAP 5.0
01/08/2024	2.1	Revised publication
02/27/2024	2.2	Revised publication
02/18/2025	2.3	Revised publication
04/12/2025	2.4	Revised publication
06/18/2025	2.5	Revised publication

Table 1 – Document Version History

Change Log

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

	Chapter/Section	Change
1.0	N/A	N/A
1.0	Data Delivery Methods	Changed Port# and updated screenshots.
1.1	Appendix A	Corrected field attributes of Prescriber Phone Number (PRE08) to coincide with ASAP 4.2A specifications of N10
1.2.3	Error Correct	Additional details added to section
1.3	Submitted Reports and Edit Definitions/Appendix A	Added Notification Configuration and ASAP segment chart
1.3.1	Appendix A	Changed DSP17 to mandatory; Error Correction section, added "Mark as Resolved."
1.4	Re-write / Update	Updated all data to current information and screenshots.
1.4.1	Readability updates	
1.5	Data Delivery Methods	Removed Submission Method #1 and updated remaining Submission methods
2.0	ASAP 5.0 Update	Changed from ASAP v4.2A to 5.0, updated language, updated instructions for Submission Method #3
2.1	Data Type Revision	Removed data type value from ASAP 5.0 specifications
2.2	Updated Examples	Updated the ASAP submission examples.
2.3	Submitter Delegate added and Appendix A Revisions	Added Submitter Delegate section and updated Appendix A.
2.4	Manual entry and Appendix A Revisions	Updated required field in manual entry section and added the 02/21/25 AIR changes from ASAP to Appendix A
2.5	Reporting Exemption	Update the new PDMP links.

Table 2 – Document Change Log

Appendix A: ASAP 5.0 Specifications

The following information contains the definitions for the specific contents required for uploading records (reporting) in the American Society for Automation in Pharmacy (ASAP) 5.0 format to comply with the Nebraska PDMP requirements.

Data Type Notation Matrix

Data Type Notation	Data Type	Character Set / Format
AN	Alphanumeric	Upper- and lower-case alphabets: A to Z, a to z Numbers: 0 to 9 Printable characters: ~`!@#\$%^&*()-_ =+{}[]\ ';:"<>,.?/
DT	Date	Format: CCYYMMDD <ul style="list-style-type: none"> • CC represents century • YY represents year • MM represents month • DD represents Day
TM	Time	Format: HHMMSS or HHMM or HHMMSSZ in 24-hour clock system (military format) <ul style="list-style-type: none"> • HH represents hour • MM represents minutes • SS represents seconds • Z represents UTC time (Zulu time)
N	Numeric	Used for a whole number, decimals not allowed
D	Decimal	Used for metric decimal. If a whole number used, decimals are not allowed.

File Naming Convention

- File name must be unique per uploader.
- *File ID* is assigned by the submitter/dispenser system to uniquely identify the uploaded file.
- *Date Timestamp* is the date and time of the file submission in this format: CCYYMMDDHHMMS (example: 20170102160000)

Data (Field) Elements within File

- **Segment Identifier** – Indicates the beginning of a new segment (e.g., PHA). These identifiers are defined by the ASAP standard. Segments must be in the specified order for the file to process appropriately.
- **Data (Field) Delimiter** – Character used to separate data elements (fields) within a segment (i.e., an asterisk (*)), and is the third ASCII code / character in the file.
 - Each field should “open” with the Data / Field delimiter.
 - Each blank field should contain a single asterisk.
 - If the last field in the segment is blank, it should be “opened” and then the segment closed. (e.g., *~).

- **Segment Terminator** – Character used to mark the end of a segment (e.g., the tilde (~)).
 - Field TH09 in the *Transaction Header* segment identifies the ASCII code / character used to terminate each segment. Since TH09 also signifies the end of the segment, it should contain the code/character twice (i.e., two tildes ~~).
- **Segment Terminators and Data (Field) Delimiters** are not specified in the ASAP standard and are open to the appropriate ASCII code or a wide selection of ASCII characters. The caret is used to denote an escape character and should not be used as a data delimiter or segment terminator. We recommend using characters not commonly used in the data (*, |, \, /, ~, etc.) to minimize issues with file ingestion.
- **Escape Character** – In the event that a data (field) element delimiter or segment terminator is used in the data submitted an escape character is available to prevent errors. The escape character for the ASAP standard is the caret (^).
 - If an asterisk is used as a data (field) element delimiter, and also the data in a field, like the SIG (directions for use) an escape character should be inserted prior to each instance of character not intended to signify the start of a new field. See below:

Take 1 tablet by mouth twice daily. **^^^***Check Pulse Prior to Administration**^^^***

- **5.0 vs 4.2 / 4.2A / 4.2B Segment/Field Count**

Segment	5.0 Field Count (Preferred)	4.2B Field Count	4.2A Field Count	4.2 Field Count
TH	9	9	9	9
IS	5	3	3	3
PHA	15	13	13	12
PAT	29	23	23	23
DSP	36	25	25	21
PRE	15	10	9	8
CDI	6	5	5	5
AIR	32	11	11	11
TP	1	1	1	1
TT	2	2	2	2

Field Usage

- R = Required by ASAP
- RR = Required by the Nebraska PDMP
- O = Optional but recommended to be reported by Nebraska
- S = Situational (the situation for use is contingent on a linked field being required)
- Fields **highlighted in blue** are part of the ASAP 5.0 release.
- Both “R” and “RR” fields must be reported.
- Segments can end at the last required field, but an ideal file would keep these fields in place.
- It is recommended to report all available fields, whether Required or Optional.

Note: For more information regarding ASAP 5.0 specifications, please reference the American Society for Automation in Pharmacy (ASAP) at www.asapnet.org for the full *Implementation Guide for the ASAP Standard for Prescription-Monitoring Programs*.

Field	Field Name	Description	Field Usage
TH: Transaction Header: Required segment; used to indicate the start of a transaction. It also assigns the data element separator, segment terminator, and control number.			
TH01	Version/Release Number	Code uniquely identifying the transaction. Value = 5.0	R
TH02	Transaction Control Number	Sender assigned code uniquely identifying a transaction	R
TH03	Transaction Type	Identifies the purpose of initiating the transaction. 01 = Send/Request Transaction 02 = Acknowledgement (in Response only) 03 = Error Receiving (in Response only) 04 = Void (Used to void a specific Rx in a real-time transmission or an entire batch. TH02 should match the file to be voided.)	R
TH04	Response ID	Transaction Control Number for response transaction.	S
TH05	Creation Date	Date the transaction was created: CCYYMMDD	R
TH06	Creation Time	Time the transaction was created: HHMMSS or HHMM or HHMMSSz	R
TH07	File Type	Code specifying the type of transaction. P = Production; T = Test	R
TH08	Routing Number/BIN	Can be used for real-time transmissions that use intermediary or network switch to indicate state to route transaction to	O
TH09	Segment Terminator Character	This terminates the TH segment and sets the actual value of the data segment terminator for the entire transaction	R

IS: Information Source: Required segment; used to convey the name and identification numbers of the entity supplying the information.			
IS01	Unique Information Source ID	Reference number or identification number. NPI is the preferred value for Nebraska in this field	R
IS02	Information Source Entity Name	Entity name of the Information Source.	R
IS03	Message	Freeform text message	O
IS04	Pharmacy Dispensing Software Vendor	Name of the software vendor the pharmacy uses.	RR
IS05	Phone Number of Software Vendor	Complete phone number including area code. Exclude hyphens.	RR
PHA: Pharmacy Header: Required segment; used to identify the pharmacy.			
PHA01	National Provider Identifier (NPI)	Identifier assigned to the pharmacy by CMS	RR
PHA02	NCPDP Provider ID	Identifier assigned to the pharmacy by the National Council for Prescription Drug Programs.	O
PHA03	DEA Number	Identifier assigned to the pharmacy by the Drug Enforcement Administration. <u>Required</u> if any prescriptions are controlled substances	O
PHA04	Pharmacy or Dispensing Prescriber Name	Name of the Pharmacy or Dispensing Prescriber.	RR
PHA05	Address Information - 1	Free-Form Address information	RR
PHA06	Address Information - 2	Free-Form Address information	O
PHA07	City Address	City name	RR
PHA08	State Address	US Postal Service state code	RR
PHA09	Zip Code	US Postal Zip Code	RR
PHA10	Phone Number	Complete Phone number including area code. Exclude hyphens.	O
PHA11	Contact name	Contact person name.	O
PHA12	Chain Site ID	Store number assigned by the chain to the pharmacy location.	O
PHA13	Pharmacy Permit/License #	Use to help identify sending pharmacy	O
PHA14	Pharmacy/ Dispenser Type	01 = Independent Pharmacy 02 = Chain Pharmacy 03 = Long-term Care Pharmacy 04 = Hospital Pharmacy 05 = Opioid Treatment Program 06 = Cannabis Dispensary 07 = Veterinary/ Vet Patient Only Dispenser 08 = Dispensing Prescriber 09 = Specialty Pharmacy 10 = Federal 11 = Tribal 99 = Other	O
PHA15	Mail Order Pharmacy	01 = Yes 02 = No	O

PAT: Patient Information: Required segment; 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. (i.e., NE for Nebraska) If populated, PAT02 and PAT03 are required.	O
PAT02	ID Qualifier	Code to identify the type of ID in PAT03. 01 = Military ID 02 = State Issued ID 03 = Unique System ID 04 = Permanent Resident Card 05 = Passport ID 06 = Driver's License ID 07 = Social Security Number 08 = Tribal ID 09 = Vendor Specific (such as Bamboo Health, Experian, LexisNexis) 10 = Veterinary Patient Microchip Number 11 = Medicaid Recipient ID Number 99 = Other (agreed upon ID)	RR
PAT03	ID of Patient	Identification number for the patient as indicated in PAT02.	RR
PAT04	ID Qualifier of Additional Patient Identifier	Code identifying the jurisdiction that issues the ID in PAT06. See Appendix A for list for jurisdictions.	S
PAT05	Additional Patient ID Qualifier	Code to identify the type of ID in PAT06. If PAT05 is used, PAT06 is required. See PAT02 for list of codes.	S
PAT06	Additional ID	Identification number for the patient as indicated in PAT05.	S
PAT07	Last Name	Patient's complete legal last name as listed on a government-issued identification. No special characters other than a hyphen or apostrophe.	R
PAT08	First Name	Patient's complete legal first name as listed on a government-issued identification. No special characters other than a hyphen or apostrophe.	R
PAT09	Middle Name	Patient's Middle Name.	O
PAT10	Name Prefix	Patient's name prefix such as Mr. or Dr.	O
PAT11	Name Suffix	Patient's name suffix such as Jr. or the III.	O
PAT12	Address Information - 1	Address Line 1 of the Patient.	R
PAT13	Address Information - 2	Address Line 2 of the Patient.	O
PAT14	City Address	City of the Patient.	R
PAT15	State Address	Jurisdiction/state and possession abbreviation as described in United States Postal Service Publication 28-Postal Addressing Standards, or the most recently published version of the ONC Project US@ Technical Specification for Patient Addresses.	R

PAT16	Zip Code	US Postal Zip Code of the Patient. Populate with zeros ('00000') if patient address is outside the U.S.	R
PAT17	Phone Number	Complete Phone number including Area Code. Exclude Hyphens. Note: Phone number is required, if available	RR
PAT18	Date of Birth	Date of Birth of the Patient: CCYYMMDD	R
PAT19	Gender	F = Female M = Male N = Non-Binary X = Unspecified/Other U = Unknown/Undisclosed	RR
PAT20	Species Code	01 = Human 02 = Veterinary Patient	RR
PAT21	Patient Location Code	Code indicating where patient is located when receiving pharmacy services. 01 = Home 02 = Intermediary Care 03 = Nursing Home 04 = Long-Term/Extended Care 05 = Rest Home 06 = Boarding Home 07 = Skilled-Care Facility 08 = Sub-Acute Care Facility 09 = Acute-Care Facility 10 = Outpatient 11 = Hospice 12 = Homeless/Unhoused 13 = Transient Care 98 = Unknown 99 = Other	O
PAT22	Country of Non-U.S. Resident	If Patient's address is in foreign country leave PAT12-PAT16 blank and free-text address here.	O
PAT23	Name of Animal	Required if PAT20 = "02" Veterinary Patient.	S
PAT24	Patient Preferred or Alias Last Name	May be used for a preferred name, previous name, nickname, alias, or name used on insurance card if different.	O
PAT25	Patient Preferred or Alias First Name	May be used for a preferred name, previous name, nickname, alias, or name used on insurance card if different.	O
PAT26	Patient Race Category	01 = American Indian or Alaskan Native 02 = Asian 03 = Black or African American 04 = Native Hawaiian or Other Pacific Islander 05 = White	O

		06 = Multiracial 99 = Other/Unknown	
PAT27	Patient Ethnicity	01 = Hispanic or Latino 02 = Not Hispanic or Latino 99 = Undisclosed/Unknown	O
PAT28	Veterinary Species Code	01 = Cat/Feline 02 = Dog/Canine 03 = Small Animal (Hamster, Rabbit, Other Rodent) 04 = Reptile 05 = Bird 06 = Livestock, Large Animal 99 = Other	O
PAT29	Animal Location Code	01 = Home 02 = Animal Shelter 03 = Foster 04 = Farm 05 = Zoo 06 = Circus/Traveling Show 99 = Other	O
DSP: Dispensing Record: Required segment; used to identify the basic components of a dispensing of a given prescription order including the date and quantity.			
DSP01	Reporting Status	Value: 00 = New Record; 01 = Revise; 02 = Void	R
DSP02	Prescription Number	Serial number assigned to the prescription by the pharmacy.	R
DSP03	Date Written	Date the prescription written (authorized): CCYYMMDD	R
DSP04	Refills Authorized	Number of prescriber-authorized refills	R
DSP05	Date Filled	Date prescription was prepared: CCYYMMDD	R
DSP06	Fill Number	Number of the fill of the prescription. 0 = original dispensing; refills = 01-9999	R
DSP07	Product ID Qualifier	Type of product ID contained in DSP08. 01 = NDC 02 = UPC 03 = HRI 04 = UPN 05 = DIN 06 = Compound (CDI segment required if used) 07 = Cannabis	R

DSP08	Product ID	Full identification including leading zeros without punctuation.	R
		NDC must be 11-digits	
		If the product is a compound, populate with 99999999999	
DSP09	Quantity Dispensed	Number of metric units dispensed. The format allows for 5 digits to the left and right of the decimal (i.e., 99999.99999)	R
DSP10	Days' Supply	The calculated number of days the medication will cover.	R
DSP11	Drug Dosage Units Code	Identifies the unit of measure for the quantity dispensed in DSP09.	RR
		01 = Each (used to report solid dosage units or indivisible package)	
		02 = Milliliters (ml) (adjust liters to the decimal milliliter equivalent)	
		03 = Grams (gm) (adjust milligrams to the decimal gram equivalent)	
DSP12	Transmission Form of Rx Origin Code	Code indicating how the pharmacy received the prescription.	O
		01 = Written Prescription	
		02 = Telephone Prescription	
		03 = Telephone Emergency Prescription	
		04 = Fax Prescription	
		05 = Electronic Prescription	
		06 = Transferred/Forwarded Rx	
07 = Order (Administered at Prescriber Location)			
08 = Dispensed from Prescriber Location			
09 = Standing Order/Protocol			
99 = Other			
DSP13	Partial Fill Indicator	Used when the quantity in DSP09 is less than the metric quantity per dispensing authorized by the prescriber. 00 = Not a partial fill, 01 = First partial fill For additional fills per prescription, increment by 1 so the second partial fill would be reported as 02, up to a maximum of 99.	O
DSP14	Pharmacist National Provider Identifier (NPI)	Identifier assigned to the pharmacist/dispenser by CMS. This number can be used to identify the pharmacist dispensing the medication.	O
DSP15	Pharmacist State License Number	Assigned to the pharmacist/dispenser by the State Licensing Board. This data element can be used to identify the pharmacist dispensing the medication.	O

DSP16	Classification Code for Payment Type	Code identifying the type of payment. 01 = Private Pay (Cash, Charge, Credit Card) 02 = Medicaid 03 = Medicare 04 = Commercial Insurance 05 = Military Installations and VA 06 = Workers' Compensation 07 = Indian Nations 99 = Other	RR
DSP17	Date Sold	Date prescription left the pharmacy	RR
DSP18	RxNorm Product Qualifier	RxNorm value sent in the electronic prescription transmitted to the pharmacy. 01 = Semantic Clinical Drug (SCD) 02 = Semantic Branded Drug (SBD) 03 = Generic Package (GPCK) 04 = Branded Package (BPCK)	O
DSP19	RxNorm Code	Used for electronic prescriptions to capture the prescribed drug product identification.	O
DSP20	Electronic Prescription Reference Number	Transaction Message ID value sent from field UIH-030-01 in the SCRIPT standard in the electronic prescription transmitted to the pharmacy.	O
DSP21	Electronic Prescription Order Number	Prescriber Order Number value sent in the electronic prescription transmitted to the pharmacy.	O
DSP22	Quantity Prescribed	Used to add clarity to the value reported in DSP13	O
DSP23	Rx Sig	The actual directions printed on prescription label. If greater than 200 characters, will truncate.	O
DSP24	Opioid Treatment Type	Indications for use 01 = Not used for opioid dependency treatment 02 = Used for opioid dependency treatment 03 = Pain associated with active/aftercare cancer treatment 04 = Palliative Care in conjunction with a serious illness 05 = End-of-Life and Hospice Care 06 = Pregnant individual with pre-existing Rx for opioids 07 = Acute pain with pre-existing opioid for Chronic pain 08 = Active taper of opioid 09 = Patient under Pain Management Contract 10 = Acute Opioid Therapy 11 = Chronic Opioid Therapy 99 = Other	O
DSP25	Diagnosis Code	ICD-10 Code; Exclude decimal point	O

DSP26	Time Written	Time the prescription was authorized: HHMMSS or HHMM or HHMMSSz	O
DSP27	Time Filled	Time the prescription was prepared: HHMMSS or HHMM or HHMMSSz	O
DSP28	Time Sold	Time the prescription was sold: HHMMSS or HHMM or HHMMSSz	O
DSP29	Total Quantity Remaining on Prescription	Identifies the quantity remaining on the prescription	O
DSP30	Total Quantity Remaining Drug Dosage Units Code	Identifies the unit of measure for the quantity dispensed in DSP09. 01 = Each (used to report solid dosage units or indivisible package) 02 = Milliliters (ml) (adjust liters to the decimal milliliter equivalent) 03 = Grams (gm) (adjust milligrams to the decimal gram equivalent)	O
DSP31	Discount Card	Must be populated if DSP16 is 01 (Private Pay) or 04 (Commercial Insurance). 01 = Yes 02 = No	S
DSP32	Classification Code for Additional Payment Type	Code identifying the type of payment. 01 = Private Pay (Cash, Charge, Credit Card) 02 = Medicaid 03 = Medicare 04 = Commercial Insurance 05 = Military Installations and VA 06 = Workers' Compensation 07 = Indian Nations 99 = Other	O
DSP33	Discount Card for Additional Payment Type	Must be populated if DSP32 is 01 (Private Pay) or 04 (Commercial Insurance). 01 = Yes 02 = No	S
DSP34	DEA Schedule/State Designation	State or Federal control level or other reporting designation. 01 = Cannabis and Cannabis Extract 02 = State or DEA Schedule 2 03 = State or DEA Schedule 3 04 = State or DEA Schedule 4 05 = State or DEA Schedule 5 06 = State Designated Other Controlled Substance or Drug of Concern 07 = CBD 99 = Legend or Non-controlled Substances	O
DSP35	Last Name or Initials of Pharmacist Filling the Prescription	Last name or initials of the pharmacist dispensing the medication.	O

DSP36	First Name of Pharmacist Filling the Prescription	First name of the pharmacist dispensing the medication.	O
PRE: Prescriber Information: Required segment; used to identify the prescriber of the prescription.			
PRE01	National Provider Identifier (NPI)	Must be populated with the NPI. If the provider does not have an NPI, it is recommended to populate PRE01 with the 10-digit Prescriber Phone Number (PRE08).	RR
PRE02	DEA Number	Must be populated with the DEA if the reported medication is a controlled substance.	S
PRE03	DEA Number Suffix	Identifying number assigned to a prescriber by an institution when the Institution's DEA number is used.	O
PRE04	Prescriber State License Number	Identification assigned to the Prescriber by the State Licensing Board.	O
PRE05	Last Name	Prescriber's Last name.	RR
PRE06	First Name	Prescriber's First name.	RR
PRE07	Middle Name	Prescriber's Middle name or initial.	O
PRE08	Phone Number	Prescriber's primary phone number; include area code; Exclude hyphens	O
PRE09	XDEA Number	This field has been decommissioned. Include field but leave field empty.	
PRE10	Jurisdiction or State Issuing Prescriber License Number	Jurisdiction or state of PRE04. Required if PRE04 is populated.	S
PRE11	Prescriber Address Information – 1	Freetext for address information.	O
PRE12	Prescriber Address Information - 2	Freetext for address information.	O
PRE13	Prescriber City Address	Freetext for address information.	O
PRE14	Prescriber State Address	Two-letter jurisdiction/state and possession abbreviation as described in United States Postal Service Publication 28-Postal Addressing Standards or the most recently published version of the ONC Project US@ Technical Specification for Patient Addresses.	O
PRE15	Zip Code Address	United States Postal Service ZIP Code or ZIP+4	O

CDI: Compound Drug Ingredient Detail: *Use of this segment is situational; however, it is required when medication dispensed is a compound			
CDI01	Compound Drug Ingredient Sequence Number	The first reportable ingredient is 1. Each additional reportable ingredient is incremented by 1.	R*
CDI02	Product ID Qualifier	Code to identify the type of product ID contained in CDI03. 01 = NDC 02 = UPC 03 = HRI 04 = UPN 05 = DIN	R*
CDI03	Product ID	Product identifier. If the ingredient does not have an NDC, the recommended entry is 888888888888	R*
CDI04	Component Ingredient Quantity	Metric decimal quantity of the ingredient identified in CDI03. The format allows for 5 digits to the left and right of the decimal (i.e., 99999.99999)	R*
CDI05	Compound Drug Dosage Units Code	Identifies the unit of measure for the quantity dispensed in CDI04. 01 = Each (used to report solid dosage units or indivisible package) 02 = Milliliters (ml) (for liters adjust to the decimal milliliter equivalent) 03 = Grams (gm) (for milligrams adjust to the decimal gram equivalent)	RR*
CDI06	DEA Schedule/State Designation of Each Ingredient	State or Federal control Level or other reporting designation. 01 = Cannabis and Cannabis Extract 02 = State or DEA Schedule 2 03 = State or DEA Schedule 3 04 = State or DEA Schedule 4 05 = State or DEA Schedule 5 06 = State Designated Other Controlled Substance or Drug of Concern 07 = CBD 99 = Legend or Non-controlled Substances	O

AIR: Additional Information Reporting			
Use of this segment is optional. However, if this segment is used, at least one of the data elements (fields) will be required.			
AIR01	Jurisdiction Issuing Rx Serial Number	State issuing serialized prescription blank	O
AIR02	Jurisdiction-Issued Rx Serial Number	Number assigned to state-issued serialized prescription blank.	O
AIR03	Jurisdiction Issuing ID of Person Picking Up Rx	Code identifying the jurisdiction that issued the ID contained in AIR05.	O
AIR04	ID Qualifier of Person Picking Up Rx	Code indicating the type of ID in AIR05 if required by the PMP. Required if AIR03 is used. 01 = Military ID 02 = State Issued ID 03 = Unique System ID 04 = Permanent Resident Card 05 = Passport ID 06 = Driver's License ID 07 = Social Security Number 08 = Tribal ID 09 = Vendor Specific (such as Bamboo Health, Experian, LexisNexis) 10 = Veterinary Patient Microchip Number 11 = Medicaid Recipient ID Number 99 = Other (agreed upon ID)	S
AIR05	ID of Person Picking Up Rx	ID number of the person picking up the prescription.	S
AIR06	Relationship of Person Picking Up Rx	Code indicating the relationship to the person picking up Rx. 01 = Patient 02 = Parent/Legal Guardian 03 = Spouse 04 = Caregiver 99 = Other	O
AIR07	Last Name of Person Picking Up Rx	Last name of the person picking up Rx.	O
AIR08	First Name of Person Picking Up Rx	First name of the person picking up Rx.	O
AIR09	Last Name or Initials of Pharmacist	This field is decommissioned. Include field but leave field empty.	
AIR10	First Name of Pharmacist	This field is decommissioned. Include field but leave field empty.	
AIR11	Dropping Off/Picking Up Identifier Qualifier	This field is decommissioned. Include field but leave field empty.	
AIR12	Date of Birth of Person Picking Up Rx	CCYYMMDD	O
AIR13	Address Information – 1 of Person Picking Up Rx	Address of the person picking up the prescription.	O

AIR14	Address Information – 2 of Person Picking Up Rx	Additional address information of the person picking up the prescription.	O
AIR15	Person Picking Up City Address	Information should be reported according to United States Postal Service Publication 28-Postal Addressing Standards or the most recently published version of the ONC Project US@ Technical Specification for Patient Addresses.	O
AIR16	Person Picking Up State Address	Jurisdiction/state and possession abbreviation as described in United States Postal Service Publication 28-Postal Addressing Standards or the most recently published version of the ONC Project US@ Technical Specification for Patient Addresses.	O
AIR17	Person Picking Up Zip Code Address	United States Postal Service ZIP Code or ZIP+4	O
AIR18	Phone Number of Person Picking Up Rx		O
AIR19	Picking Up Method of Delivery	01 = Person Picked Up 02 = Mailed/Shipped	O
AIR20	Jurisdiction Issuing ID of Person Dropping Off Rx	Code identifying the jurisdiction that issues the ID contained in AIR22.	O
AIR21	ID Qualifier of Person Dropping Off Rx	Code indicating the type of ID in AIR05 if required by the PMP. Required if AIR20 is used. 01 = Military ID 02 = State Issued ID 03 = Unique System ID 04 = Permanent Resident Card 05 = Passport ID 06 = Driver's License ID 07 = Social Security Number 08 = Tribal ID 09 = Vendor Specific (Such as Bamboo Health, Experian, LexisNexis) 10 = Veterinary Patient Microchip Number 11 = Medicaid Recipient ID Number 99 = Other (agreed upon ID)	S
AIR22	ID of Person Dropping Off Rx	Identification number for the person dropping off the prescription as indicated in AIR 21.	S
AIR23	Relationship of Person Dropping Off Rx	01 = Patient 02 = Parent/Legal Guardian 03 = Spouse 04 = Caregiver 99 = Other	O
AIR24	Last Name of Person Dropping Off Rx		O
AIR25	First Name of Person Dropping Off Rx		O

AIR26	Date of Birth of Person Dropping Off Rx		O
AIR27	Address Information – 1 of Person Dropping Off Rx		O
AIR28	Address Information – 2 of Person Dropping Off Rx		O
AIR29	Person Dropping Off City Address		O
AIR30	Person Dropping Off State Address		O
AIR31	Person Dropping Off ZIP Code		O
AIR32	Phone Number of Person Dropping Off Rx		O
TP: Pharmacy Trailer: Required segment; used to identify the end of data for a given pharmacy and provide the count of the total number of detail segments reported for the pharmacy, including the PHA and TP segment.			
TP01	Detail Segment Count	Number of detail segments included for the pharmacy including the pharmacy header (PHA) and the pharmacy trailer (TP) segments.	R
TT: Transaction Trailer: Required segment; used to indicate the end of the transaction and provide the count of the total number of segments included in the transaction.			
TT01	Transaction Control Number	Unique identifying control number assigned by the originator of the transaction. Must match the number in TH02.	R
TT02	Segment Count	Total number of segments included in the transaction including the header and trailer segments	R

Appendix B: Sample ASAP File

Below are sample files to give an idea of how the files should look. They are formatted for easy reading and are not required to be formatted for submission. The system will be able to read the file as one long string, as long as the Data / Field and Segment delimiters are in place and the file has the required fields in place.

The base structure of the file is:

TH <File specific Header Information>
 IS <Source specific information>
 PHA <Pharmacy specific information>
 PAT <Patient information>
 DSP <Dispense related information>
 PRE <Prescriber Information>
 CDI <Compound information for prescription>
 AIR <Additional information for specific prescription>
 TP <Pharmacy Termination Segment>
 TT <File Termination Segment>

For ease with multiple dispenses for a single patient, the information can be looped (DSP / PRE / CDI / AIR) under the same PAT segment.

Single Report / Pharmacy

TH*5.0*TestFile20240119*01**20240119*085400*T**~
 IS*9999999994*CyncHealth Test**Example Vendor*4021231234~
 PHA*9876543210*9876543*FA9999999*CyncHealth Test Pharmacy*987654321 Any Street**Any
 City*NE*98765*4025599992*Test Pharmacist****02~
 PAT**06*N9999999*NE***Patient*Test****987654 N Test Avenue**Test
 City*NE*98765*1111111111*19850315*M*01*****~
 DSP*00*JW11115*20240119*999*20240119*03*01*42543070001*15*5*01*05*00*1234567893*NE999
 9*01*20240119*01****15*Take 3 tablets by mouth daily*****082100***01*****~
 PRE*1234567890*AS1234567***Prescriber*Test**8001234567**NE*****~
 TP*5~
 TT*TestFile20240119*8~

Single Report / Multiple pharmacies

TH*5.0*Sample Test File*01**20240118*0800*P**~
IS*95838411*CYNCTEST**Pharmacy Vendor*800112222~
PHA*999999997*9999997*ZZ9999997*zzTest Pharmacy 1*1234 Main St**Omaha*NE*68111-1234*4025556666*Test Pharmacist 1**PRD*01*02~
PAT*NE*06*HC651808****ZZZTESTPT*Sample****2320 TestingPatient Road**North Platte*NE*69101*4025551212*20010203*M*01*****Sam*99*02**~
DSP*00*824611*20240115*00*20240115*00*06*9999999999*180*30*01*05*00***01*20240115***Fe ntanyl 1600 mcg Troche***Dissolve 1 or 2 troche(s) under the tongue every 4 hours*****02*****Joe~
PRE*9999991827*ZZ9991827**NE2320*zzPrescriber*Sample**9991112320**NE*****~
CDI*1*01*00406921630*180*01*~
CDI*2*03*38779056708*0.9*03*~
CDI*3*03*Medisca2378-1*180*03*~
PAT*NE*06*HC651808****ZZZTESTPT*Sample****2320 TestingPatient Road**North Platte*NE*69101*4025551212*20010203*M*01*****Sam*99*02**~
DSP*00*824712*20240115*00*20240115*00*06*9999999999*180*30*01*05*00***01*20240115***Fe ntanyl 1600 mcg Troche***Dissolve 1 or 2 troche(s) under the tongue every 4 hours*****02*****Joe~
PRE*9999991827*ZZ9991827**NE2320*zzPrescriber*Sample**9991112320**NE*****~
CDI*1*01*00406921630*180*01*~
CDI*2*03*38779056708*0.9*03*~
CDI*3*03*Medisca2378-1*180*03*~
TP*14~
PHA*999999998*9999998*ZZ9999998*Kevin's Pharmacy*322 E 22nd Street**Fremont*NE*68025*4025559997*Test Pharmacist****~
PAT*NE*06*HC651808****ZZZTESTPT*Sample****2320 TestingPatient Road**North Platte*NE*69101*4025551212*20010203*M*01*****Sam*99*02**~
DSP*00*795011*20240116*32*20240116*00*06*9999999999*30*4*02*05*00***01*20240116***ABH Gel***Apply 1ml topically every 2 hours as needed*****02*****Joe~
PRE*9999991827*ZZ9991827**NE2320*zzPrescriber*Sample**9991112320**NE*****~
CDI*1*01*00591024105*30*01*~
CDI*2*01*00904530660*15*03*~
CDI*3*01*00378031410*1.8*03*~
CDI*4*01*62991156705*60*02*~
PAT*NE*06*HC651808****ZZZTESTPT*Sample****2320 TestingPatient Road**North Platte*NE*69101*4025551212*20010203*M*01*****Sam*99*02**~
DSP*00*7950*20240116*32*20240116*01*06*9999999999*30*4*02*05*00***01*20240116***ABH Gel***Apply 1ml topically every 2 hours as needed*****02*****~
PRE*9999991827*ZZ9991827**NE2320*zzPrescriber*Sample**9991112320**NE*****~
CDI*1*01*00591024105*30*01*~
CDI*2*01*00904530660*15*03*~
CDI*3*01*00378031410*1.8*03*~
CDI*4*01*62991156705*60*02*~
TP*16~
TT*Sample Test File*33~

Appendix C: Zero-Report Specifications

The following information contains the definitions for the specific contents required of uploading zero reports in the American Society for Automation in Pharmacy (ASAP) 5.0 format to comply with the Nebraska PDMP requirements.

The zero-report specification is a complete transaction that includes the information that would normally be sent with a batch, but of the required detail segments only the patient's first name, last name and date filled fields are populated. The values populating these fields are:

- First name = Zero
- Last name = Report
- Date filled = Date report sent

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

Sample Zero-Report (one file, multiple pharmacies)

```

TH*5.0*ZeroReport_Example*01**20240113*102300*T**~
IS*68001*CyncHealth Test**Sample Vendor*8002221111~
PHA*9876543210*9876543*FA9999999* CyncHealth Test Pharmacy*987654321 A Street**Any
City*NE*98765*9995556543*Test Pharmacist****~
PAT*****Report*Zero*****~
DSP*****20240112*****~
PRE**~
TP*5~
PHA*9876543211*9876542*FA9999997*CyncHealth Test2 Pharmacy*987654321 B Street**The
City*NE*98766*9995556548*Test2 Pharmacist*~
PAT*****Report*Zero*****~
DSP*****20240113*****~
PRE**~
TP*5~
PHA*0123456789*3456789*FA9999998* CyncHealth Test3 Pharmacy*987654321 C Street**Other
City*NE*98767*9995556789*Test3 Pharmacist*~
PAT*****Report*Zero~
DSP*****20240114~
PRE*****~
TP*5~
TT*ZeroReport_Example*18~

```