

# Change Summary

## Manufacturers Data Submission Guide v3.0 and v4.0

The changes between version 3.0 and 4.0 of the manufacturers' data submission guides (DSG) are indicated in red in the table below.

Type of change	Template	Version 3.0			Version 4.0		
Update:  Submission Schedule		Report Type	Submission Due Date	Description	Report Type	Submission Due Date	Description
		Covered Drugs with a qualifying price increase	(a)Sixty days in advance of a qualifying prices increase for a covered drug marketed in Washington State; or  Within thirty days of a new covered drug's introduction to market in Washington State.	A covered manufacturer must submit to the authority all data specified in RCW 43.71C.050 and 43.71C.070, following the guidelines set forth in this data submission guide, for each newly marketed covered drug or a covered drug that had a qualifying price increase on or after October 16, 2020, as follows: (a) Sixty days in advance of a qualifying prices increase for a covered drug marketed in Washington State; or (b) Within thirty days of a new covered drug's introduction to market in Washington State.	Price Increase  (Covered Drugs with a qualifying price increase)	(a)Sixty days in advance of a qualifying prices increase for a covered drug marketed in Washington State .	A covered manufacturer must submit to the authority all data specified in RCW 43.71C.050 and 43.71C.070, following the guidelines set forth in this data submission guide, for each newly marketed covered drug or a covered drug that had a qualifying price increase on or after October 16, 2020, as follows: (a) Sixty days in advance of a qualifying prices increase for a covered drug marketed in Washington State; or (b) Within thirty days of a new covered drug's introduction to market in Washington State.
		New Covered Drugs	(b)Within thirty days of a new covered drug's introduction to market in Washington State.	A covered manufacturer must submit to the authority all data specified in RCW 43.71C.050 and 43.71C.070, following the guidelines set forth in this data submission guide, for each newly marketed covered drug or a covered drug that had a qualifying price increase on or after October 16, 2020, as follows: (a) Sixty days in advance of a qualifying prices increase for a covered drug marketed in Washington State; or (b) Within thirty days of a new covered drug's introduction to market in Washington State.	New Covered Drugs	(b)Within thirty days of a new covered drug's introduction to market in Washington State.	A covered manufacturer must submit to the authority all data specified in RCW 43.71C.050 and 43.71C.070, following the guidelines set forth in this data submission guide, for each newly marketed covered drug or a covered drug that had a qualifying price increase on or after October 16, 2020, as follows: (a) Sixty days in advance of a qualifying prices increase for a covered drug marketed in Washington State; or (b) Within thirty days of a new covered drug's introduction to market in Washington State.
		New Drug Application  (notice from FDA that drug	Within sixty calendar days of the manufacturer	A manufacturer must submit to the authority all data specified in RCW 43.71C.060(1), following the guidelines set in the authority's applicable data	New Drug Application  (notice from FDA that drug will be	Within sixty calendar days of the manufacturer receiving the FDA approval date.	A manufacturer must submit to the authority all data specified in RCW 43.71C.060(1), following the guidelines set in the authority's applicable data submission guide for all new

		will be reviewed by deadline)	receiving the FDA approval date.	submission guide for all new drug applications or biologic license applications for pipeline drugs submitted on or after October 16, 2020, within sixty calendar days of the manufacturer receiving the FDA approval date.	reviewed by deadline)	drug applications or biologic license applications for pipeline drugs submitted on or after October 16, 2020, within sixty calendar days of the manufacturer receiving the FDA approval date.
<b>New Field:</b> Template Formatting					<p>**Do not replace “manufacturer” with your organization’s name, this will result in your submission being rejected.</p> <p>**Do not use commas in Column B – Manufacturer Name.</p> <p>** Do not use trademark symbol anywhere in template.</p> <p>** Do not use a hard return (enter key) in any field.</p>	
<b>Change Table Name:</b> Table Specifications	Price Increase (Covered Drugs with a Qualifying Price Increase)	File naming schema: manufacturer_covered_drugs_{YYYY}_{ID}_{YYYYMMDD}.csv Example: manufacturer_covered_drugs_2022_M12345_20210301.csv (Please use the submission due date, not the date the report was prepared)	For a price increase that occurred prior to the current calendar year the YYYY should be populated with the year the price increase took effect.  For example:  manufacturer_covered_drugs_2019__M12345_20210301.csv or manufacturer_covered_drugs_2020__M12345_20210301.csv or manufacturer_covered_drugs_2021__M12345_20210301.csv	File naming schema: manufacturer_price_increase_{YYYY}_{ID}_{YYYYMMDD}.csv Example: manufacturer_price_increase_2023_M12345_20230301.csv (Please use the submission due date, not the date the report was prepared)	For example: manufacturer_price_increase_2023_M12345_20230301.csv or manufacturer_price_increase_2024_M12345_20240301.csv or	
<b>Update Field:</b> Day Supply		Name: Day Supply Type: Numeric Max Length: 100 characters Format: 99999		Name: Day Supply Type: Numeric Max Length: 100 characters Format: 99999		
<b>Update Field:</b> Qualifying Price Increase		Name: Qualifying Price Increase Type: Choice Choices: Y, N Name: Qualifying Price Increase Type: Choice Choices: Y, N  Indicator for qualifying price increase. Manufacturer must use this field as 'yes' or 'no' to indicate if the drug meets the criteria of a qualifying price increase as defined in RCW 43.71C.010(8).  If you are looking to report for a new covered drug use the New Covered Drug report.		Name: Qualifying Price Increase Type: Choice Choices: Y, N Name: Qualifying Price Increase Type: Choice Choices: Y, N  Indicator for qualifying price increase. Manufacturer must use this field as 'yes' or 'no' to indicate if the drug meets the criteria of a qualifying price increase as defined in RCW 43.71C.010(8).		
<b>Update Field:</b> WAC – Current (Unit Price)		Name: WAC - Current (Unit Price) Type: Numeric Format: 999999999.99999 Max Length: 14 digits  The wholesale acquisition cost per unit of measure on the date of the submission (60 days prior to the effective date of the WAC increase). If the covered drug report is for a drug being introduced to the market, then leave blank.  <b>NOTE: Do not include the dollar sign or commas.</b>		Name: WAC - Current (Unit Price) Type: Numeric Format: 999999999.99999 Max Length: 14 digits  The wholesale acquisition cost per unit of measure on the date of the submission (60 days prior to the effective date of the WAC increase).  <b>NOTE: Do not include the dollar sign or commas.</b>		

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<p><b>Update Field:</b></p> <p>WAC – New (Unit Price)</p>		<p>Name: WAC – New (Unit Price)  Type: Numeric  Format: 999999999.99999  Max Length: 14 digits  Rule: Required when “WAC Type” field is “Unit” or “Both”</p>	<p>The new wholesale acquisition cost (WAC) per package on the WAC effective date.</p> <p><b>NOTE: Do not include the dollar sign or commas.</b></p>
<p><b>Update Field:</b></p> <p>WAC – New (Package Price)</p>		<p>Name: WAC – New (Package Price)  Type: Numeric  Format: 999999999.99999  Max Length: 14 digits  Rule: Required when “WAC Type” field is “Package” or “Both”  Nullable if WAC Type = “Unit”</p>	<p>The new wholesale acquisition cost (WAC) per package on the WAC effective date.</p> <p><b>NOTE: Do not include the dollar sign or commas.</b></p>
<p><b>New Table:</b>  Table Specifications</p>	<p>New Covered Drugs</p>	<p>File naming schema:  manufacturer_new_covered_drugs_{YYYY}_{ID}_{YYYYMMDD}.csv  Example:  manufacturer_new_covered_drugs_2023_M12345_20230301.csv  (Please use the submission due date, not the date the report was prepared)</p> <p>For example:</p> <p>manufacturer_new_covered_drugs_2021_M12345_20210301.csv or  manufacturer_new_covered_drugs_2022_M12345_20220301.csv or  manufacturer_new_covered_drugs_2023_M12345_20230301.csv</p>	<p>File naming schema:  manufacturer_new_covered_drugs_{YYYY}_{ID}_{YYYYMMDD}.csv  Example:  manufacturer_new_covered_drugs_2023_M12345_20230301.csv  (Please use the submission due date, not the date the report was prepared)</p> <p>For example:</p> <p>manufacturer_new_covered_drugs_2023_M12345_20210301.csv or  manufacturer_new_covered_drugs_2042_M12345_20220301.csv or</p>
<p><b>Update:</b>  Table Specifications</p>	<p>New Drug Application</p>	<p>File naming schema:  manufacturer_new_drugs_{YYYY}_{ID}_{YYYYMMDD}.csv  Example: manufacturer_new_drugs_2023_M12345_20230301.csv  (Please use the submission due date, not the date the report was prepared)</p> <p>For example:</p> <p>manufacturer_new_drugs_2021_M12345_20210301.csv or  manufacturer_new_drugs_2022_M12345_20220301.csv or  manufacturer_new_drugs_2023_M12345_20230301.csv</p>	<p>File naming schema:  manufacturer_new_drugs_{YYYY}_{ID}_{YYYYMMDD}.csv  Example: manufacturer_new_drugs_2023_M12345_20230301.csv  (Please use the submission due date, not the date the report was prepared)</p> <p>For example:</p> <p>manufacturer_new_drugs_2023_M12345_20210301.csv or  manufacturer_new_drugs_2024_M12345_20220301.csv or</p>

<p><b>Update Field:</b></p> <p>Washington DPT Number</p>		<p>Name: Washington DPT Number Type: String Max Length: 6 characters Format: ABCDE</p> <p>WA Drug Price Transparency (DPT) assigned unique submitter identifier upon registration with the Health Care Authority Drug Price Transparency program.</p> <p>This number is unique to you and follows a format of either CXXXXX, MXXXXX, SXXXXX or PXXXXX where C, M, S and P indicate whether you are a carrier, manufacturer, PSAO or PBM. The X's are numeric digits e.g. 12345.</p>	<p>Name: Washington DPT Number Type: String Max Length: 6 characters Format: ABCDE</p> <p>WA Drug Price Transparency (DPT) assigned unique submitter identifier upon registration with the Health Care Authority Drug Price Transparency program.</p> <p>This number is unique to you and follows a format of either CXXXXX, MXXXXX, SXXXXX or PXXXXX where C, M, S and P indicate whether you are a carrier, manufacturer, PSAO or PBM. The X's are numeric digits e.g. 12345.</p> <p>Example:</p> <table border="1" data-bbox="1073 573 1617 709"> <thead> <tr> <th>Entity Type</th> <th>Washington DPT Number</th> </tr> </thead> <tbody> <tr> <td>Carrier</td> <td>C12345</td> </tr> <tr> <td>Manufacturer</td> <td>M12345</td> </tr> <tr> <td>PSAO</td> <td>S12345</td> </tr> <tr> <td>PBM</td> <td>P12345</td> </tr> </tbody> </table>	Entity Type	Washington DPT Number	Carrier	C12345	Manufacturer	M12345	PSAO	S12345	PBM	P12345
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<p><b>Update Field:</b></p> <p>Drug Name</p>		<p>Name: Drug Name Type: String Max Length: 80 characters Format: ABCDE</p> <p>Name of the drug for the NDC reported. Only include ingredient name.</p> <p>For example, if the NDC has a Drug Product Name of "fluoxetine HCL 20 mg tablets", then this field should be reported as "fluoxetine". All drug product names with "fluoxetine" in its name should be reported as a single Drug Name in this field. Combination drug product names should be reported individually as its own Drug Name instead of by each ingredient.</p> <p><b>NOTE: Special characters, hyphens, symbols, or slashes are allowed.</b></p>	<p>Name: Drug Name Type: String Max Length: 100 characters Format: ABCDE</p> <p>Name of the drug for the NDC reported. Only include ingredient name.</p> <p>For example, if the NDC has a Drug Product Name of "fluoxetine HCL 20 mg tablets", then this field should be reported as "fluoxetine". All drug product names with "fluoxetine" in its name should be reported as a single Drug Name in this field. Combination drug product names should be reported individually as its own Drug Name instead of by each ingredient.</p> <table border="1" data-bbox="1073 1119 1617 1251"> <thead> <tr> <th>NDC</th> <th>Drug Name</th> <th>Drug Product Name</th> <th>Label Name</th> </tr> </thead> <tbody> <tr> <td>0000000000</td> <td>FLUOEXTINE</td> <td>FLUOEXTINE HCL 20 MG TABLETS</td> <td>FLUOEXTINE HCL</td> </tr> </tbody> </table> <p>NOTE: Special characters, hyphens, symbols, or slashes are allowed.</p>	NDC	Drug Name	Drug Product Name	Label Name	0000000000	FLUOEXTINE	FLUOEXTINE HCL 20 MG TABLETS	FLUOEXTINE HCL		
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		<p>Proprietary or legal name as marketed by manufacturer. For example, "fluoxetine HCL", "fluoxetine DR" are acceptable.</p> <p>If not approved by the FDA, then enter the name of the Pipeline Drug.</p> <p>For example, "AAA600".</p>	<p>Proprietary or legal name as marketed by manufacturer. For example, "fluoxetine HCL", "fluoxetine DR" are acceptable.</p> <p>If not approved by the FDA, then enter the name of the Pipeline Drug.</p> <p>For example, "AAA600".</p> <table border="1" data-bbox="1076 380 1620 495"> <thead> <tr> <th data-bbox="1076 380 1219 422">NDC</th> <th data-bbox="1219 380 1354 422">Drug Name</th> <th data-bbox="1354 380 1487 422">Drug Product Name</th> <th data-bbox="1487 380 1620 422">Label Name</th> </tr> </thead> <tbody> <tr> <td data-bbox="1076 422 1219 495">0000000000</td> <td data-bbox="1219 422 1354 495">FLUOEXTINE</td> <td data-bbox="1354 422 1487 495">FLUOEXTINE HCL 20 MG TABLETS</td> <td data-bbox="1487 422 1620 495">FLUOEXTINE HCL</td> </tr> </tbody> </table>	NDC	Drug Name	Drug Product Name	Label Name	0000000000	FLUOEXTINE	FLUOEXTINE HCL 20 MG TABLETS	FLUOEXTINE HCL
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