Change Summary

Manufacturers Data Submission Guide v2.0 and v3.0

The changes between version 2.0 and 3.0 of the manufacturers' data submission guides (DSG) are indicated in red in the table below.

Type of change	Template	Version 2.0			Version 3.0		
Update: Submission Schedule		Report Type	Submission Due Date	Description	Report Type	Submission Due Date	Description
		New Covered Drugs and qualifying price increases	(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.	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.	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.
		New Drug Application (notice from FDA that drug will be reviewed by deadline)	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 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.	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

			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.

Update: Resubmissions		For example, if you submitted the file 'manufacturer_covered_drugs_2021_M12345_20210301.csv', and received a rejection, after making corrections you should resubmit the file 'manufacturer_covered_drugs_2021_M12345_20210301.csv' with the same name as it was originally submitted under, even if the date of resubmission is a different date.	For example, if you submitted the file 'manufacturer_covered_drugs_2023_M12345_20230301.csv', and received a rejection, after making corrections you should resubmit the file 'manufacturer_covered_drugs_2023_M12345_20230301.csv' with the same name as it was originally submitted under, even if the date of resubmission is a different date.
Change Table Name: Table Specifications	**Version 2.0** New Covered Drugs and Qualifying Price Increases **Version 3.0** 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_2021_M12345_20210301.csv or manufacturer_price_increase_2022_M12345_20220301.csv or manufacturer_price_increase_2023_M12345_20230301.csv .csv
Update Field: Washington DPT Number		Name: Washington DPT Number Type: String Max Length: 6 characters Format: ABCDE WA Drug Price Transparency (DPT) assigned unique submitter identifier upon registration with the Health Care Authority Drug Price Transparency program. 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.	Name: Washington DPT Number Type: String Max Length: 6 characters Format: ABCDE WA Drug Price Transparency (DPT) assigned unique submitter identifier upon registration with the Health Care Authority Drug Price Transparency program. 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. Example: | Entity Type	Washington DPT Number
---	---
Carrier	C12345
Manufacturer	M12345
PSAO	S12345
PBM	P12345	
Update Field: NDC		Name: NDC Type: Numeric Format: 00000000000 Max Length: 11 digits Min Length: 11 digits A three-segment code maintained by the Federal Food and Drug Administration that includes a labeler code, a product code, and a package code for a drug product (e.g., 12345678910) NOTE: The NDC field must be eleven digits long and maintain leading zeros.	Name: NDC Type: Numeric Format: 00000000000 Max Length: 11 digits Min Length: 11 digits A three-segment code maintained by the Federal Food and Drug Administration that includes a labeler code, a product code, and a package code for a drug product. Example: 00012345678 NOTE: The NDC field must be eleven digits long and maintain leading zeros.

09/01/2021

Update Field:			
Drug Name		Name: Drug name Type: String Max Length: 100 characters Format: ABCDE Name of the drug for the NDC reported. Only include ingredient name. 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. NOTE: Special characters, hyphens, symbols, or slashes are allowed.	Name Drug Name Type: String Max Length: 100 characters Format: ABCDE Name of the drug for the NDC reported. Only include ingredient name. 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. <table><tr><td>NDC</td><td>Drug Name</td><td>Drug Product Name</td><td>Label Name</td></tr><tr><td>00000000000</td><td>FLUOEXTINE</td><td>FLUOEXTINE HCL 20 MG TABLETS</td><td>FLUOEXTINE HCL</td></tr></table> NOTE: Special characters, hyphens, symbols, or slashes are allowed.
Update Field: **Drug Product Name**		Name: Drug Product Name Type: String Max Length: 100 characters Format: ABCDE Name of the drug for the NDC reported. Only include ingredient name. 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. NOTE: Special characters, hyphens, symbols, or slashes are allowed.	Name: Drug Product Name Type: String Max Length: 100 characters Format: ABCDE Name of the drug product for the NDC reported, to include ingredient name as reported in standardized drug databases. This name should include ingredient, salt form, dosage form, strength, and any other information specific to the NDC. For example, "fluoxetine HCL 20 mg tablets" is acceptable. <table><tr><td>NDC</td><td>Drug Name</td><td>Drug Product Name</td><td>Label Name</td></tr><tr><td>00000000000</td><td>FLUOEXTINE</td><td>FLUOEXTINE HCL 20 MG TABLETS</td><td>FLUOEXTINE HCL</td></tr></table>
Update Field: **Label Name**		Name: Label Name Type: String Max Length: 100 characters Format: ABCDE Proprietary or legal name as marketed by manufacturer. For example, "fluoxetine HCL", "fluoxetine DR" are acceptable.	Name: Label Name Type: String Max Length: 100 characters Format: ABCDE Proprietary or legal name as marketed by manufacturer. For example, "fluoxetine HCL", "fluoxetine DR" are acceptable. <table><tr><td>NDC</td><td>Drug Name</td><td>Drug Product Name</td><td>Label Name</td></tr><tr><td>00000000000</td><td>FLUOEXTINE</td><td>FLUOEXTINE HCL 20 MG TABLETS</td><td>FLUOEXTINE HCL</td></tr></table>
Update Field: **Qualifying Price Increase**		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).	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.
Update Field: **WAC – Current (Unit Price)**		Name: WAC – Current (Unit Price) Type: Numeric Format: 999999999.99999 Max Length: 14 digits Nullable	Name: WAC – Current 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. NOTE: Do not include the dollar sign or commas.	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. NOTE: Do not include the dollar sign or commas.
Update Field: WAC – Current (Package Price)		Name: WAC – Current (Package Price) Type: Numeric Format: 999999999.99999 Max Length: 14 digits Nullable The wholesale acquisition cost per package 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. NOTE: Do not include the dollar sign or commas.	Name: WAC – Current (Package Price) Type: Numeric Format: 999999999.99999 Max Length: 14 digits The wholesale acquisition cost per package 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. NOTE: Do not include the dollar sign or commas.
Add Field: New Manufacturer of Drug			Name: New Manufacturer of Drug Type: Choice Choices: Y, N Manufacturer must indicate "Yes" or "No" if they are a new manufacturer of the drug. Choice: Y – New manufacturer that has not sold this drug previously N – Existing manufacturer who has previously sold this drug
Add Field: Previous Manufacturer of Drug			Name: Previous Manufacturer of Drug Type: Choice Choices: Y, N Mark "Y" if the drug has been manufactured by the manufacturer for the previous 5 years. If "Y", the WAC for the previous 5 years must be reported. Mark "N" if the drug has been manufactured by the manufacturer for less than 5 years. The WAC for the previous 5 years is not required. Choice: Y – Have manufactured the drug for the previous 5 years N – Have not manufactured the drug for the previous 5 years
Update Field: WAC Increase (Unit Price)		Name: WAC Increase (Unit Price) Type: Numeric Format: 999999.99999 Max Length: 11 digits Rule: Required when "WAC Type" field is "Unit" or "Both", Nullable if WAC Type = "Package" or Nullable if new drug introduced to market Amount of wholesale acquisition cost increase per unit of measure for the drug product. Express this as a dollar amount up to 5 decimal places. If the covered drug report is for a new drug being introduced to the market, leave blank. NOTE: Do not include the dollar sign or commas.	Name: WAC - Increase (Unit Price) Type: Numeric Format: 999999.99999 Max Length: 11 digits Rule: Required when "WAC Type" field is "Unit" or "Both", Nullable if WAC Type = "Package" Amount of wholesale acquisition cost increase per unit of measure for the drug product. Express this as a dollar amount up to 5 decimal places. If the covered drug report is for a new drug being introduced to the market, leave blank. NOTE: Do not include the dollar sign or commas.
Update Field: WAC Increase (Package Price)		Name: WAC Increase (Package Price) Type: Numeric Format: 999999.99999 Max Length: 11 digits Rule: required if "WAC Type" field is "Package" or "Both" Nullable if WAC Type = "Unit" or Nullable if new drug introduced to market Amount of wholesale acquisition cost increase per package for the drug product. Express this as a dollar amount up to 5 decimal places. If the covered drug report is for a new drug being introduced to the market, leave blank.	Name: WAC Increase (Package Price) Type: Numeric Format: 999999.99999 Max Length: 11 digits Rule: required if "WAC Type" field is "Package" or "Both" Nullable if WAC Type = "Unit" Amount of wholesale acquisition cost increase per package for the drug product. Express this as a dollar amount up to 5 decimal places. If the covered drug report is for a new drug being introduced to the market, leave blank. NOTE: Do not include the dollar sign or commas.

		NOTE: Do not include the dollar sign or commas.	
Delete Field: WAC – New (Unit Price)			Delete
Delete Field: WAC – New (Package Price)			Delete
Delete Field: Existing Manufacturer Drug			Delete
Update Field: Financial Factors		Name: Financial Factors Type: String Max Length: 5000 characters Format: ABCDE A narrative description of the specific financial factors used to make the decision to set the WAC for a new Covered Drug or to increase the wholesale acquisition cost of an existing Covered Drug.	Name: Financial Factors Type: String Max Length: 5000 characters Format: ABCDE Rule: value is populated when column "Qualifying Price Increase" is equal to Y A narrative description of the specific financial factors used to make the decision to set the WAC for a new Covered Drug or to increase the wholesale acquisition cost of an existing Covered Drug.
Update Field: Non-Financial Factors		Name: Non-financial factors Type: String Max Length: 5000 characters Format: ABCDE A narrative description of the specific non-financial used to make the decision to set the WAC for a new Covered Drug or to increase the wholesale acquisition cost of an existing Covered.	Name: Non-financial factors Type: String Max Length: 5000 characters Format: ABCDE Rule: value is populated when column "Qualifying Price Increase" is equal to Y A narrative description of the specific non-financial used to make the decision to set the WAC for a new Covered Drug or to increase the wholesale acquisition cost of an existing Covered.
Update Field: WAC Market Entry Type		Name: WAC Market Entry Type Type: Choice Choice: Package, Unit or Both Manufacturer must indicate if reporting by package, unit price or both.	Name: WAC Market Entry Type Type: Choice Choice: Package, Unit or Both Manufacturer must indicate if reporting by package, unit price or both. Choice: Package Unit Both
Update Field: Reporting Period From		Name: Reporting Period To Type: Date Format: YYYY-MM-DD Min Year: 1900 Max Year: 2100 Nullable for new drug introduced to market The starting date of the period being used to report for annual manufacturing, marketing, and advertising costs. Report the most recent completed calendar year. For example, if the effective date of the WAC increase is January 1, 2022, through February 28, 2022, report calendar year 2020. If the effective date of the WAC increase is March 1, 2022, through December 31, 2022, report calendar year 2021.	Name: Reporting Period From Type: Date Format: YYYY-MM-DD Min Year: 1900 Max Year: 2100 The starting date of the period being used to report for annual manufacturing, marketing, and advertising costs. Report the most recent completed calendar year. For example, if the effective date of the WAC increase is January 1, 2023, through February 28, 2023, report calendar year 2021. If the effective date of the WAC increase is March 1, 2023, through December 31, 2023, report calendar year 2022.
Update Field: Reporting Period To		Name: Reporting Period To Type: Date Format: YYYY-MM-DD Min Year: 1900 Max Year: 2100 Nullable for new drug introduced to market The ending date of the period being used to report for annual manufacturing, marketing, and advertising costs. Report the most recent completed calendar year. For example, if the effective date of the WAC increase is January 1, 2022, through February 28, 2022, report calendar year 2020. If the	Name: Reporting Period From Type: Date Format: YYYY-MM-DD Min Year: 1900 Max Year: 2100 The ending date of the period being used to report for annual manufacturing, marketing, and advertising costs. Report the most recent completed calendar year. For example, if the effective date of the WAC increase is January 1, 2023, through February 28, 2023, report calendar year 2021. If the

		effective date of the WAC increase is March 1, 2022, through December 31, 2022, report calendar year 2021.	effective date of the WAC increase is March 1, 2023, through December 31, 2023, report calendar year 2022.
Update Field: Manufacturing Costs		Name: Manufacturing Costs Type: Numeric Format: 999999999999999.99 Max Length: 17 digits The total cost to produce the number of units manufactured in most recent completed calendar year prior to the WAC Effective Date. NOTE: Do not include the dollar sign or commas.	Name: Manufacturing Costs Type: Numeric Format: 999999999999999.99 Max Length: 17 digits The total cost to produce the number of units manufactured in most recent completed calendar year prior to the WAC Effective Date. For example, if the effective date of the WAC increase is January 1, 2023, through February 28, 2023, report calendar year 2021. If the effective date of the WAC increase is March 1, 2023, through December 31, 2023, report calendar year 2022, report the total cost to manufacture the drug product in calendar year 2022. For new to market covered drugs, fill with zeros. NOTE: Do not include the dollar sign or commas.
Update Field: Marketing and Advertising Costs		Name: Marketing and Advertising Costs Type: Numeric Format: 999999999999999.99 Max Length: 17 digits Nullable Amount spent on marketing and advertising, in the most recent completed calendar year prior to the WAC Effective Date, including but not limited to direct-to-consumer marketing (television, radio print, digital, etc.), salaries for sales representatives, salaries for medical liaisons, hosted CE events and provider education, and provider detailing. NOTE: Do not include the dollar sign or commas.	Name: Marketing and Advertising Costs Type: Numeric Format: 999999999999999.99 Max Length: 17 digits Nullable Amount spent on marketing and advertising, in the most recent completed calendar year prior to the WAC Effective Date, including but not limited to direct-to-consumer marketing (television, radio print, digital, etc.), salaries for sales representatives, salaries for medical liaisons, hosted CE events and provider education, and provider detailing. For example, if the effective date of the WAC increase is January 1, 2023, through February 28, 2023, report calendar year 2021. If the effective date of the WAC increase is March 1, 2023, through December 31, 2023, report calendar year 2022, report calendar year 2022. For new to market covered drugs, leave blank. NOTE: Do not include the dollar sign or commas.
Update Field: Previous Owner's Name		Name: Previous Owner's Name Type: String Max Length: 80 characters Format: ABCDE Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y Nullable The legal name of entity who sold the covered drug to the manufacturer.	Name: Previous Owner's Name Type: String Max Length: 80 characters Format: ABCDE Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y Nullable if Acquired from Previous Manufacturer is "N" The legal name of entity who sold the covered drug to the manufacturer.
Update Field: Previous Manufacturer ID		Name: Previous Manufacturer ID Type: Numeric Format: 00000 Max Length: 5 digits Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y Nullable If the drug product was purchased from another manufacturer, repackager, or private label distributor, the labeler code as assigned by Food and Drug Administration (FDA). If previous owner does not have a labeler ID fill with 5 zeros.	Name: Previous Manufacturer ID Type: Numeric Format: 00000 Max Length: 5 digits Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y Nullable if Acquired from Previous Manufacturer is "N" If the drug product was purchased from another manufacturer, repackager, or private label distributor, the labeler code as assigned by Food and Drug Administration (FDA). If previous owner does not have a labeler ID fill with 5 zeros.
Update Field: Previous NDC		Name: Previous NDC Type: Numeric Format: 00000000000 Max Length: 11 digits Min Length: 11 digits Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y	Name: Previous NDC Type: Numeric Format: 00000000000 Max Length: 11 digits Min Length: 11 digits Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y Nullable if Acquired from Previous Manufacturer is "N"

09/01/2021

Update Field:			
		Nullable The NDC that was used by the original or previous manufacturer. For new drug products that do not have a previous NDC fill with eleven zeros. NOTE: The NDC field must be eleven digits long and maintain leading zeros.	The NDC that was used by the original or previous manufacturer. For new drug products that do not have a previous NDC fill with eleven zeros. NOTE: The NDC field must be eleven digits long and maintain leading zeros.
Update Field: Purchase Price		Name: Purchase Price Type: Numeric Format: 999999999999999.99 Max Length: 17 digits Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y Nullable If the drug product was not developed by the manufacturer, the amount the manufacturer paid to acquire the drug. NOTE: Do not include the dollar sign or commas.	Name: Purchase Price Type: Numeric Format: 999999999999999.99 Max Length: 17 digits Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y Nullable if Acquired from Previous Manufacturer is "N" If the drug product was not developed by the manufacturer, the amount the manufacturer paid to acquire the drug. NOTE: Do not include the dollar sign or commas.
Update Field: Currency of Purchase		Name: Currency of Purchase Type: String Max Length: 50 characters Format: ABCDE Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y Nullable The country of acquisition and type currency used to acquire the drug e.g., USD, EUR, GBP, CAD, JPY, AUD, INR, CNY, MXN, etc.	Name: Currency of Purchase Type: String Max Length: 50 characters Format: ABCDE Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y Nullable if Acquired from Previous Manufacturer is "N" The country of acquisition and type currency used to acquire the drug e.g., USD, EUR, GBP, CAD, JPY, AUD, INR, CNY, MXN, etc.
Update Field: Acquisition Date		Name: Acquisition Date Type: Date Format: YYYY-MM-DD Min Year: 1900 Max Year: 2100 Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y Nullable If the drug product was not developed by the manufacturer, the date the manufacturer acquired the drug.	Name: Acquisition Date Type: Date Format: YYYY-MM-DD Min Year: 1900 Max Year: 2100 Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y Nullable if Acquired from Previous Manufacturer is "N" If the drug product was not developed by the manufacturer, the date the manufacturer acquired the drug.
Update Field: WAC Acquisition Type		Name: WAC - Acquisition Type Type: Choice Choice: Package, Unit or Both Manufacturer must indicate if reporting by package, unit, or both.	Name: WAC - Acquisition Type Type: Choice Choice: Package, Unit or Both Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y Nullable if Acquired from Previous Manufacturer is "N" Manufacturer must indicate if reporting by package, unit, or both. Choice: Package Unit Both
Update Field: WAC – Acquisition (Unit Price)		Name: WAC – Acquisition (Unit Price) Type: Numeric Format: 999999999.99999 Max Length: 14 digits Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y and WAC Acquisition Type indicates "Unit" or "Both" Nullable if WAC Acquisition Type = "Package" The wholesale acquisition cost per unit of measure for the drug product on the acquisition date. NOTE: Do not include the dollar sign or commas.	Name: WAC - Acquisition (Unit Price) Type: Numeric Format: 999999999.99999 Max Length: 14 digits Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y and WAC Acquisition Type indicates "Unit" or "Both" Nullable if WAC Acquisition Type = "Package" or Acquired from Previous Manufacturer is "N" The wholesale acquisition cost per unit of measure for the drug product on the acquisition date. NOTE: Do not include the dollar sign or commas.

09/01/2021

Update Field:			
WAC – Acquisition (Package Price)		Name: WAC – Acquisition (Package Price) Type: Numeric Format: 999999999.99999 Max Length: 14 digits Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y and WAC Acquisition Type indicates "Package" or "Both" Nullable if WAC Acquisition Type = "Unit" The wholesale acquisition cost per package for the drug product on the acquisition date. NOTE: Do not include the dollar sign or commas.	Name: WAC - Acquisition (Package Price) Type: Numeric Format: 999999999.99999 Max Length: 14 digits Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y and WAC Acquisition Type indicates "Package" or "Both" Nullable if WAC Acquisition Type = "Unit" or Acquired from Previous Manufacturer is "N" The wholesale acquisition cost per package for the drug product on the acquisition date. NOTE: Do not include the dollar sign or commas.
Update Field: WAC Prior to Acquisition Type		Name: WAC Prior to Acquisition Type Type: Choice Choice: Package, Unit or Both Manufacturer must indicate if reporting by package, unit, or both.	Name: WAC - Prior to Acquisition Type Type: Choice Choice: Package, Unit or Both Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y Nullable if Acquired from Previous Manufacturer is "N" Manufacturer must indicate if reporting by package, unit, or both. Choice: Package Unit Both
Update Field: WAC – Prior to Acquisition (Unit Price)		WAC - Prior to Acquisition (Unit Price) Type: Numeric Format: 999999999.99999 Max Length: 14 digits Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y and WAC Prior to Acquisition Type indicates "Unit" or "Both" Nullable if WAC Prior to Acquisition Type? = "Package" The wholesale acquisition cost per unit of measure for the drug product 12 months prior to the acquisition date. NOTE: Do not include the dollar sign or commas.	Name: WAC - Prior to Acquisition (Unit Price) Type: Numeric Format: 999999999.99999 Max Length: 14 digits Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y and WAC Prior to Acquisition Type indicates "Unit" or "Both" Nullable if WAC Prior to Acquisition Type = "Package" or Acquired from Previous Manufacturer is "N" The wholesale acquisition cost per unit of measure for the drug product 12 months prior to the acquisition date. NOTE: Do not include the dollar sign or commas.
Update Field: Unit of Measure – Prior to Acquisition		Name: Unit of Measure – Prior to Acquisition Type: Choice Choices: AHF, CAP, SUP, GM, ML, TAB, TDP, EA Rule: value is populated when column "WAC – Prior to Acquisition" is equal to any non-zero value Nullable Unit of Measure for WAC (prior to acquisition) defined as one of the following values: AHF: Anti-hemophilia factor CAP: Capsule SUP: Suppository GM: Gram ML: Milliliter TAB: Tablet TDP: Transdermal patch EA: Each	Name: Unit of Measure - Prior to Acquisition Type: Choice Choices: AHF, CAP, SUP, GM, ML, TAB, TDP, EA Rule: value is populated when column "WAC – Prior to Acquisition" is equal to any non-zero value Nullable or Acquired from Previous Manufacturer is "N" Unit of Measure for WAC (prior to acquisition) defined as one of the following values: AHF: Anti-hemophilia factor CAP: Capsule SUP: Suppository GM: Gram ML: Milliliter TAB: Tablet TDP: Transdermal patch EA: Each
Update Field: WAC – Prior to Acquisition (Package Price)		Name: WAC - Prior to Acquisition (Package Price) Type: Numeric Format: 999999999.99999 Max Length: 14 digits Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y and WAC Prior to Acquisition Type indicates "Package" or "Both" Nullable if WAC Prior to Acquisition Type? = "Unit" The wholesale acquisition cost per package for the drug product 12 months prior to the acquisition date. NOTE: Do not include the dollar sign or commas.	Name: WAC - Prior to Acquisition (Package Price) Type: Numeric Format: 999999999.99999 Max Length: 14 digits Rule: value is populated when column "Acquired from Previous Manufacturer" is equal to Y and WAC Prior to Acquisition Type indicates "Package" or "Both" Nullable if WAC Prior to Acquisition Type = "Unit" or Acquired from Previous Manufacturer is "N" The wholesale acquisition cost per package for the drug product 12 months prior to the acquisition date.

			NOTE: Do not include the dollar sign or commas.
Update Field: Rebates		Name: Rebates Type: Numeric Format: 999999999999999.99 Max Length: 17 digits Rule: greater than or equal to 0 Total amount of rebates paid out associated with the NDC in the calendar year prior to the WAC Effective Date. For example, if the effective date of the WAC increase is between and including January 1, 2022, through February 28, 2022, report calendar year 2020.If the WAC Effective Date is March 1, 2022, report the total amount of rebates paid to any entity in calendar year 2021. If no rebates were provided fill with zeros. NOTE: Do not include the dollar sign or commas.	Name: Rebates Type: Numeric Format: 999999999999999.99 Max Length: 17 digits Rule: greater than or equal to 0 Total amount of rebates paid out associated with the NDC in the calendar year prior to the WAC Effective Date. For example, if the effective date of the WAC increase is between and including January 1, 2022, through February 28, 2022, report calendar year 2020.If the WAC Effective Date is March 1, 2022, report the total amount of rebates paid to any entity in calendar year 2021. If no rebates were provided fill with zeros. NOTE: Do not include the dollar sign or commas.
Update Field: Cost Share Assistance		Name: Cost Share Assistance Type: Numeric Format: 999999999999999.99 Max Length: 17 digits Rule: greater than or equal to 0 Total amount of money paid toward lowering an insured individual's out of pocket expenditure for the drug product in the calendar year prior to the WAC Effective Date. For example, if the effective date of the WAC increase is between and including January 1, 2022, through February 28, 2022, report calendar year 2020. If the WAC Effective Date is March 1, 2022, report the total amount spent on cost share assistance in calendar year 2021. If no financial assistance was provided fill with zeros. NOTE: Do not include the dollar sign or commas.	Name: Cost Share Assistance Type: Numeric Format: 999999999999999.99 Max Length: 17 digits Rule: greater than or equal to 0 Total amount of money paid toward lowering an insured individual's out of pocket expenditure for the drug product in the calendar year prior to the WAC Effective Date. For example, if the effective date of the WAC increase is between and including January 1, 2022, through February 28, 2022, report calendar year 2020. If the WAC Effective Date is March 1, 2022, report the total amount spent on cost share assistance in calendar year 2021. If no financial assistance was provided fill with zeros. NOTE: Do not include the dollar sign or commas.
Update Field: Other Financial Assistance		Name: Other Financial Assistance Amount Type: Numeric Format: 999999999999999.99 Max Length: 17 digits Rule: greater than or equal to 0 Total amount of all other financial assistance paid out associated with the NDC in the calendar year prior to the WAC Effective Date. For example, if the effective date of the WAC increase is between and including January 1, 2022, through February 28, 2022, report calendar year 2020. I the WAC Effective Date is March 1, 2022, report the total amount of all other financial assistance paid to any entity in calendar year 2021. If no other financial assistance was provided fill with zeros. NOTE: Do not include the dollar sign or commas.	Name: Other Financial Assistance Amount Type: Numeric Format: 999999999999999.99 Max Length: 17 digits Rule: greater than or equal to 0 Total amount of all other financial assistance paid out associated with the NDC in the calendar year prior to the WAC Effective Date. For example, if the effective date of the WAC increase is between and including January 1, 2022, through February 28, 2022, report calendar year 2020. I the WAC Effective Date is March 1, 2022, report the total amount of all other financial assistance paid to any entity in calendar year 2021. If no other financial assistance was provided fill with zeros. NOTE: Do not include the dollar sign or commas.
New Table: Table Specifications	New Covered Drugs		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) For example: 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
Add Field: Washington DPT Number			Name: Washington DPT Number Type: String Max Length: 6 characters Format: ABCDE

			WA Drug Price Transparency (DPT) assigned unique submitter identifier upon registration with the Health Care Authority Drug Price Transparency program. 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. Example: **Entity Type** / **Washington DPT Number** Carrier / C12345 Manufacturer / M12345 PSAO / S12345 PBM / P12345
Add Field: Manufacturer Name			Name: Manufacturer Name Type: String Max Length: 80 characters Format: ABCDE Labeler name of entity who markets the drug. This entity has the corresponding Labeler Code in the following data field.
Add Field: NDC			Name: NDC Type: Numeric Format: 00000000000 Max Length: 11 digits Min Length: 11 digits A three-segment code maintained by the Federal Food and Drug Administration that includes a labeler code, a product code, and a package code for a drug product. Example: 00012345678 NOTE: The NDC field must be eleven digits long and maintain leading zeros.
Add Field: Drug Name			Name Drug Name Type: String Max Length: 100 characters Format: ABCDE Name of the drug for the NDC reported. Only include ingredient name. 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. NDC / Drug Name / Drug Product Name / Label Name 00000000000 / FLUOEXTINE / FLUOEXTINE HCL 20 MG TABLETS / FLUOEXTINE HCL NOTE: Special characters, hyphens, symbols, or slashes are allowed.
Add Field: Drug Product Name			Name: Drug Product Name Type: String Max Length: 100 characters Format: ABCDE Name of the drug product for the NDC reported, to include ingredient name as reported in standardized drug databases. This name should include ingredient, salt form, dosage form, strength, and any other information specific to the NDC.

			For example, "fluoxetine HCL 20 mg tablets" is acceptable.

NDC	Drug Name	Drug Product Name	Label Name
00000000000	FLUOEXTINE	FLUOEXTINE HCL 20 MG TABLETS	FLUOEXTINE HCL

Add Field: Label Name			Name: Label Name Type: String Max Length: 100 characters Format: ABCDE Proprietary or legal name as marketed by manufacturer. For example, "fluoxetine HCL", "fluoxetine DR" are acceptable.

NDC	Drug Name	Drug Product Name	Label Name
00000000000	FLUOEXTINE	FLUOEXTINE HCL 20 MG TABLETS	FLUOEXTINE HCL

Add Field: Drug Type			Name: Drug Type Type: Choice Choices: S, N, I Drug Type is one of following values: Single Source (S) – Drugs with an FDA New Drug Application (NDA), or biologics with a Biologics License Application (BLA), and for drugs, there are no generic alternatives available on the market. Non-Innovator Multiple-Source (N) – Drugs with an FDA Abbreviated New Drug Application (ANDA). Innovator Multiple-Source (I) – Drugs with an NDA and no longer have patent exclusivity.
Add Field: Unit of Measure			Name: Unit of Measure Type: Choice Choices: AHF, CAP, SUP, GM, ML, TAB, TDP, EA Unit of Measure for Wholesale Acquisition Cost (WAC) defined as one of the following values: AHF: Anti-hemophilia factor CAP: Capsule SUP: Suppository GM: Gram ML: Milliliter TAB: Tablet TDP: Transdermal patch EA: Each
Add Field: Day Supply			Name: Day Supply Type: Numeric Max Length: 100 characters Format: 999 Indicate estimated day supply in relation to package size. Example: Package size of 100 used once daily will equal a 100 Package supply of 100 used 5 x's a day will equal a 20.
Add Field: Package Size			Name: Package Size Type: Numeric Format: 999999999.99999 Max Length: 14 digits The package size identifies the number of billing units (as specified by the labeled quantity) in the package the pharmacist uses to dispense; for example, 100 tablets, 1000 capsules, or 20 ml vial. The package quantity complies with the National Council of Prescription Drug Programs (NCPDP) Billing Unit Standard.
Add Field: WAC – Effective Date			Name: WAC - Effective Date Type: Date Format: YYYY-MM-DD

09/01/2021

			Min Year: 1900 Max Year: 2100 Effective date of the wholesale acquisition cost increase for the drug product. If the covered drug report is for a new covered drug being introduced to the market, then this field should be the date the product will first be available.
Add Field: WAC – Type			Name: WAC - Type Type: Choice Choices: Package, Unit or Both Manufacturer must indicate if reporting by package, unit price or both. Package – Complete WAC Increase (Package Price) and WAC – New (Package Price) fields. Unit – Complete WAC Increase (Unit Price) and WAC – New (Unit Price) fields. Both – Complete WAC Increase (Package Price), WAC Increase (Unit Price), WAC - New (Package Price) and WAC – New (Unit Price).
Add Field: WAC – New (Unit Price)			Name: WAC - New (Unit Price) Type: Numeric Format: 999999999.99999 Max Length: 14 digits Rule: Required when "WAC Type" field is "Unit" or "Both" Nullable if WAC Type = "Package" The new wholesale acquisition cost (WAC) per unit of measure on the WAC effective date. If the covered drug report is for a new covered drug being introduced to the market, then this field should be the WAC on the date the product is first available. NOTE: Do not include the dollar sign or commas.
Add Field: WAC – New (Package Price)			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" The new wholesale acquisition cost (WAC) per package on the WAC effective date. If the covered drug report is for a new covered drug being introduced to the market, then this field should be the WAC on the date the product is first available. NOTE: Do not include the dollar sign or commas.
Add Field: Financial Factors			Name: Financial Factors Type: String Max Length: 5000 characters Format: ABCDE Rule: value is populated when column "Qualifying Price Increase" is equal to Y A narrative description of the specific financial factors used to make the decision to set the WAC for a new Covered Drug or to increase the wholesale acquisition cost of an existing Covered Drug.
Add Field: Non-financial Factors			Name: Non-financial Factors Type: String Max Length: 5000 characters Format: ABCDE Rule: value is populated when column "Qualifying Price Increase" is equal to Y A narrative description of the specific non-financial used to make the decision to set the WAC for a new Covered Drug or to increase the wholesale acquisition cost of an existing Covered.
Add Field: Patent Expiration Date			Name: Patent Expiration Date Type: Date Format: YYYY-MM-DD Min Year: 1900 Max Year: 2100 Rule: Must be populated if "Drug Type = S

			The date when all patents on the drug product will expire. Patents owned by the manufacturer (i.e., originator or the inventor). Blanks are acceptable if the drug type field is "N" or "I".
Add Field: Market Entry Date			Name: Market Entry Date Type: Date Format: YYYY-MM-DD Min Year: 1900 Max Year: 2100 The date the drug was Introduced to Market in Washington state.
Add Field: WAC - Market Entry Type			Name: WAC - Market Entry Type Type: Choice Choice: Package, Unit or Both Manufacturer must indicate if reporting by package, unit price or both. Choice: Package Unit Both
Add Field: General Comments			Name: General Comments Type: String Format: ABCDE Max Length: 5000 characters Nullable Any additional information you would like to submit or provide to explain your responses.
Update: Table Specifications	New Drug Application	File naming schema: manufacturer_new_drugs_{YYYY}_{ID}_{YYYYMMDD}.csv Example: manufacturer_new_drugs_2022__M12345_20210301.csv (Please use the submission due date, not the date the report was prepared) For a new drug application that occurred prior to the current calendar year the YYYY should be populated with the year the price increase took effect. For example: manufacturer_new_drugs_2019__M12345_20210301.csv or manufacturer_new_drugs_2020__M12345_20210301.csv or manufacturer_new_drugs_2021__M12345_20210301.csv Please see the **Error! Reference source not found.** for details regarding the timelines for submitting reports for covered drugs.	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) For example: manufacturer_new_drugs_2021_M12345_20210301.csv or manufacturer_new_drugs_2022_M12345_20220301.csv or manufacturer_new_drugs_2023_M12345_20230301.csv Please see the **Error! Reference source not found.** for details regarding the timelines for submitting reports for covered drugs.
Update Field: Washington DPT Number		Name: Washington DPT Number Type: String Max Length: 6 characters Format: ABCDE WA Drug Price Transparency (DPT) assigned unique submitter identifier upon registration with the Health Care Authority Drug Price Transparency program. 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.	Name: Washington DPT Number Type: String Max Length: 6 characters Format: ABCDE WA Drug Price Transparency (DPT) assigned unique submitter identifier upon registration with the Health Care Authority Drug Price Transparency program. 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. Example: | Entity Type	Washington DPT Number
---	---
Carrier	C12345
Manufacturer	M12345
PSAO	S12345
PBM	P12345	

Update Field: Drug Name		Name: Drug Name Type: String Max Length: 80 characters Format: ABCDE Name of the drug for the NDC reported. Only include ingredient name. 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. **NOTE: Special characters, hyphens, symbols, or slashes are allowed.**	Name: Drug Name Type: String Max Length: 100 characters Format: ABCDE Name of the drug for the NDC reported. Only include ingredient name. 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. (table below) NOTE: Special characters, hyphens, symbols, or slashes are allowed.
Update Field: Drug Product Name		Name: Drug Product Name Type: String Max Length: 100 characters Format: ABCDE Nullable Name of the drug product for the NDC reported, to include ingredient name as reported in standardized drug databases. This name should include ingredient, salt form, dosage form, strength, and any other information specific to the NDC. For example, "fluoxetine HCL 20 mg tablets" is acceptable.	Name: Drug Product Name Type: String Max Length: 100 characters Format: ABCDE Nullable Name of the drug product for the NDC reported, to include ingredient name as reported in standardized drug databases. This name should include ingredient, salt form, dosage form, strength, and any other information specific to the NDC. For example, "fluoxetine HCL 20 mg tablets" is acceptable. (table below)
Update Field: Label Name or Pipeline Drug Name		Name: Label Name or Pipeline Drug Name Type: String Max Length: 100 characters Format: ABCDE Nullable Proprietary or legal name as marketed by manufacturer. For example, "fluoxetine HCL", "fluoxetine DR" are acceptable. If not approved by the FDA, then enter the name of the Pipeline Drug. For example, "AAA600".	Name: Label Name or Pipeline Drug Name Type: String Max Length: 100 characters Format: ABCDE Nullable Proprietary or legal name as marketed by manufacturer. For example, "fluoxetine HCL", "fluoxetine DR" are acceptable. If not approved by the FDA, then enter the name of the Pipeline Drug. For example, "AAA600". (table below)

Drug Name (right column) table:

NDC	Drug Name	Drug Product Name	Label Name
00000000000	FLUOEXTINE	FLUOEXTINE HCL 20 MG TABLETS	FLUOEXTINE HCL

Drug Product Name (right column) table:

NDC	Drug Name	Drug Product Name	Label Name
00000000000	FLUOEXTINE	FLUOEXTINE HCL 20 MG TABLETS	FLUOEXTINE HCL

Label Name or Pipeline Drug Name (right column) table:

NDC	Drug Name	Drug Product Name	Label Name
00000000000	FLUOEXTINE	FLUOEXTINE HCL 20 MG TABLETS	FLUOEXTINE HCL