

Change Summary

PSAO Data Submission Guide v2.1 and v3.0

The changes between version 2.1 and 3.0 of the PSAOs’ data submission guides (DSG) are indicated in red in the table below.

Type of change	Template	Version 2.0 (Current)	Version 3.0
Definition Update: Current year		“Current year” means the year 2020.	“Current year” means the year 2021 .
Definition Update: Prior year		“Prior Year” means calendar year 2019.	“Prior year” means calendar year 2020 .
Update: Submission Schedule			October 1, Annually - A pharmacy services administrative organization representing a pharmacy or pharmacy chain in Washington State must submit to the authority the data specified in RCW 43.71C.080 following the guidelines set forth in this data submission guide for calendar year 2021.
Update Field: Data Validation		Step 2 Program validation – An analyst will validate information submitted in ensure it meets program requirements. You will receive an approval email or a rejection email. This email will be sent to the email provided when you registered. If your report is rejected, you will need to resubmit within 10 days.	Step 2 Program validation – An analyst will validate information submitted in ensure it meets program requirements. You will receive an approval email or a rejection email. This email will be sent to the email provided when you registered. If your report is rejected, you will need to resubmit within 10 days. Please note that the program validation process can take approximately 90 days to complete before you receive a response from us.
Update Field: Corrective Submissions		Each submitted file undergoes technical and program validation to ensure that the data meets the requirements of RCW 43.71C and is compatible with HCAs reporting software. The technical validation process is automated and applied shortly after submission to ensure that the data meets all of the technical rules described in the Table Specifications. These primarily cover verification of data types (number vs. string) and formats (2021-01-01 vs. 01/01/2021). The program validation process is performed by program staff after technical validation and includes additional checks of the files to complete the data validation process. If you need help understanding your error log, the Data Submission FAQ clarifies the meaning of the error and provides guidance on	In the event that you find an error in your approved submission, you will need to fill out the Resubmission form which can be found on our website prior to resubmitting your report. You will need to let HCA know which report you will be resubmitting and the specific reasons why you request to resubmit. HCA will review your request and approve or deny your request within 5 business days. In the event your resubmission is rejected during technical or program validation, you would be subject to the 10-day limit for correcting rejected resubmissions.

		corrections, or you may submit your questions to HCADPTTechSupport@hca.wa.gov for assistance.	
Update Field: Nullable		All fields are required, unless otherwise indicated in the table specification. A field that is not required, will be indicated with the word “Nullable” in the specification. In those cases, you must leave that field blank. Do NOT provide the value as “NULL”, or otherwise provide a special indicator of a null value. In all other cases, providing a blank value will result in a rejection by the automated validation.	All fields are required, unless otherwise indicated in the table specification. A field that is not required, will be indicated with the word “Nullable” in the specification. In those cases, you may leave that field blank. Do NOT provide the value as “NULL”, or otherwise provide a special indicator of a null value. In all other cases, providing a blank value will result in a rejection by the automated validation.
Update: Table Specifications		<p>File naming schema: psao_pharmacy_contracted_rates_{YYYY}_{ID}_{YYYYMMDD}.csv</p> <p>Example: psao_pharmacy_contracted_rates__2020_S12345_20211201.csv (Please use the submission due date not the date the report was prepared)</p> <p>The submission of this report is due on December 1, 2021, and should include data effective for 2020.</p>	<ul style="list-style-type: none"> • where ID is the Washington DPT Number assigned to you by HCA during the registration process, • YYYY is the current reporting year, and • YYYYMMDD is a placeholder for the submission due date. <p>In the case of a resubmission after file rejection, please use the same value for YYYYMMDD as the file that was rejected. Do not replace “psao_pharmacy_contracted_rates” with your organizations name as this will result in your submission being rejected.</p> <p>File naming schema: psao_pharmacy_contracted_rates_{YYYY}_{ID}_{YYYYMMDD}.csv</p> <ul style="list-style-type: none"> • Example: psao_pharmacy_contracted_rates__2021_S12345_20221001.csv • Please use the submission due date not the date the report was prepared for YYYYMMDD <p>The submission of this report is due on October 1, 2022, and should include data effective for 2021.</p>
Update Field: Washington DPT Number	Pharmacy Contracted Rates	<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</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>

		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.	<table border="1"> <tr> <td>Entity Type</td> <td>Washington DPT Number</td> </tr> <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> </table>	Entity Type	Washington DPT Number	Carrier	C12345	Manufacturer	M12345	PSAO	S12345	PBM	P12345
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Update Field: Initial Fee		Name: Initial Fee Type: Numeric Format: 9999999999999999.99 Max Length: 17 digits Rule: greater than or equal to 0 Total dollar amount PSAO charges pharmacy to join the PSAO. NOTE: Do not include any special characters (\$) or commas.	Name: Initial Fee Type: Numeric Format: 9999999999999999.99 Max Length: 17 digits Rule: greater than or equal to 0 Total dollar amount the PSAO charges the pharmacy to join the PSAO. NOTE: Do not include any special characters (\$) or commas.										
Update Field: Credentialing Fees		Name: Credentialing Fees Type: Numeric Format: 9999999999999999.99 Max Length: 17 digits Rule: greater than or equal to 0 Total dollar amount PSAO charges pharmacy related to any credentialing. NOTE: Do not include any special characters (\$) or commas.	Name: Credentialing Fees Type: Numeric Format: 9999999999999999.99 Max Length: 17 digits Rule: greater than or equal to 0 Total dollar amount the PSAO charges the pharmacy related to any credentialing. NOTE: Do not include any special characters (\$) or commas.										
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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. 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. NOTE: The NDC field must be eleven digits long and maintain leading zeros.										

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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 border="1"> <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> NOTE: Special characters, hyphens, symbols, or slashes are allowed.	NDC	Drug Name	Drug Product Name	Label Name	0000000000	FLUOEXTINE	FLUOEXTINE HCL 20 MG TABLETS	FLUOEXTINE HCL
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<p>Update: Table Specifications</p>	<p>Pharmacy Year-Over-Year Rate Change</p>	<p>File naming schema: psao_pharmacy_yoy_rate_change_{YYYY}_{ID}_{YYYYMMDD}.csv</p> <p>Example:</p> <p>psao_pharmacy_yoy_rate_change_2020_S12345_20211201.csv (Please use the submission due date not the date the report was prepared)</p> <p>The submission of this report is due on December 1, 2021, and should include data effective for 2020.</p>	<ul style="list-style-type: none"> where ID is the Washington DPT Number assigned to you by HCA during the registration process , YYYY is the current reporting year, and YYYYMMDD is a placeholder for the submission due date. <p>In the case of a resubmission after file rejection, please use the same value for YYYYMMDD as the file that was rejected. Do not replace “psao_pharmacy_yoy_rate_change” with your organizations name, as this will result in your submission being rejected.</p> <p>File naming schema: psao_pharmacy_yoy_rate_change_{YYYY}_{ID}_{YYYYMMDD}.csv</p> <ul style="list-style-type: none"> Example: psao_pharmacy_yoy_rate_change_2021_S12345_20221001.csv Please use the submission due date not the date the report was prepared for YYYYMMDD <p>The submission of this report is due on October 1, 2022, and should include data effective for 2021.</p>										
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Update Field: Largest Increase Reimbursement Percent		<p>Name: Largest Increase in Reimbursement Rank Type: Numeric Format: 99 Max Length: 2 digits Rule: less than or equal to 25 Nullable</p> <p>Rank of top 25 drugs (Drug Name) by largest increase in reimbursement rate from the prior year to the current year. If not one of the top 25 drugs by drug name for this rank, then leave blank.</p>	<p>Name: Largest Increase Reimbursement Percent Type: Numeric Format: 99999.99 Max Length: 7 digits Nullable</p> <p>Largest increase in reimbursement rate (RR) expressed as a percent. The reimbursement rate as of December 31st of the current year, minus reimbursement rate as of December 31st of the prior year, divided by the reimbursement rate as of December 31st of the prior year, expressed as a percentage.</p> <p>For example, the $\left(\frac{RR \text{ December 31, 2020} - RR \text{ on December 31, 2019}}{RR \text{ on December 31, 2019}}\right)$, expressed as a percentage. If not one of the top 25 drugs by drug name for this rank, then leave blank.</p> $\left[\frac{(RR \text{ December 31, 2020} - RR \text{ December 31, 2019})}{RR \text{ December 31, 2019}} \right] \times 100$ <p>NOTE: Do not include any special characters (\$) or commas.</p>			
Add Field: Largest Decrease Reimbursement Percent		<p>Name: Largest Decrease Reimbursement Percent Type: Numeric Format: 99999.99 Max Length: 7 digits Nullable</p> <p>Largest decrease in reimbursement expressed as a percent. The reimbursement rate as of December 31st of the current year, minus reimbursement rate as of December 31st of the prior year, divided by the reimbursement rate as of December 31st of the prior year, expressed as a percentage.</p> <p>For example, the $\left(\frac{RR \text{ December 31, 2020} - RR \text{ on December 31, 2019}}{RR \text{ on December 31, 2019}}\right)$, expressed as a percentage. If not one of the top 25 drugs by drug name for this rank, then leave blank.</p> <p>NOTE: Do not include any special characters (\$) or commas.</p>	<p>Name: Largest Decrease Reimbursement Percent Type: Numeric Format: 99999.99 Max Length: 7 digits Nullable</p> <p>Largest decrease in reimbursement expressed as a percent. The reimbursement rate as of December 31st of the current year, minus reimbursement rate as of December 31st of the prior year, divided by the reimbursement rate as of December 31st of the prior year, expressed as a percentage.</p> <p>For example, the $\left(\frac{RR \text{ December 31, 2021} - RR \text{ on December 31, 2020}}{RR \text{ on December 31, 2020}}\right)$, expressed as a percentage. If not one of the top 25 drugs by drug name for this rank, then leave blank.</p> $\left[\frac{(RR \text{ December 31, 2021} - RR \text{ December 31, 2020})}{RR \text{ December 31, 2020}} \right] \times 100$ <p>NOTE: Do not include any special characters (\$) or commas.</p>			
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<p>Update Field: PBM IIN Number</p>		<p>Name: IIN Number Type: Numeric Format: 000000 Max Length: 6 digits</p> <p>Issuer Identification Number, used for adjudicating prescription drug claims as assigned by the PBM. Also called BIN number.</p>	<p>Name: PBM IIN Number Type: Numeric Format: 000000 Max Length: 6 digits</p> <p>Issuer Identification Number, used for adjudicating prescription drug claims as assigned by the PBM. Also called BIN number.</p>										
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<p>Update:</p> <p>PBM Year-Over-Year Rate Change</p>		<p>File naming schema:</p> <p>psao_pbm_yoy_rate_change_{YYYY}_{ID}_{YYYYMMDD}.csv</p> <p>Example: Example:</p> <p>psao_pbm_yoy_rate_change_2020_S12345_20211201.csv (Please use the submission due date not the date the report was prepared)</p> <p>The submission of this report is due on December 1, 2021, and should include data effective for 2020.</p>	<ul style="list-style-type: none"> where ID is the Washington DPT Number assigned to you by HCA during the registration process , YYYY is the current reporting year, and YYYYMMDD is a placeholder for the submission due date. <p>In the case of a resubmission after file rejection, please use the same value for YYYYMMDD as the file that was rejected. Do not replace "psao_pbm_yoy_rate_change" with your organizations name, as this will result in your submission being rejected.</p> <p>File naming schema:</p> <p>psao_pbm_yoy_rate_change_{YYYY}_{ID}_{YYYYMMDD}.csv</p> <ul style="list-style-type: none"> Example: Example: <p>psao_pbm_yoy_rate_change_2021_S12345_20221001.csv</p> <ul style="list-style-type: none"> Please use the submission due date not the date the report was prepared for YYYYMMDD <p>The submission of this report is due on October 1, 2022, and should include data effective for 2021.</p>										
<p>Delete Field:</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>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="954 1373 1414 1528"> <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>Update Field:</p> <p>Largest Increase Reimbursement Percent</p>		<p>Name: Largest Increase in Reimbursement Rank Type: Numeric Format: 99 Max Length: 2 digits Rule: less than or equal to 25 Nullable</p> <p>Rank of top 25 drugs (Drug Name) by largest increase in reimbursement rate from the prior year to the current year. If not one of the top 25 drugs by drug name for this rank, then leave blank.</p>	<p>Name: Largest Increase Reimbursement Percent Type: Numeric Format: 99999.99 Max Length: 7 digits Nullable</p> <p>Largest increase in reimbursement rate (RR) expressed as a percent. The reimbursement rate as of December 31st of the current year, minus reimbursement rate as of December 31st of the prior year, divided by the reimbursement rate as of December 31st of the prior year, expressed as a percentage.</p> <p>For example, the $\left(\frac{RR \text{ December 31, 2020} - RR \text{ December 31, 2019}}{RR \text{ December 31, 2019}}\right) \times 100$, expressed as a percentage. If not one of the top 25 drugs by drug name for this rank, then leave blank.</p> <p>NOTE: Do not include any special characters (\$) or commas.</p>								
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