surescripts

Medication History for Populations (Panel) Flat File

surescripts

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1. Medication History for Populations (Panel) Flat File Overview

Product Overview

The Medication History for Populations Panel Management solution is designed to help health systems, hospitals, and accountable care organizations (ACO) manage cost-effective care for patient populations outside of the patient visit by providing a comprehensive medication history of both Pharmacy Benefit Manager (PBM) claim data and pharmacy dispensed fill data that can be used to calculate medication adherence scores, stratify risk, and identify gaps in care for more careful monitoring of higher risk groups.

> **Note:** Throughout the remainder of the guide the “Medication History for Populations Panel” product will be referred to as “Panel”.

About This Guide

This guide is designed to assist customers in developing software to deliver historical claim data from PBMs/payers and pharmacy fill data for customer-defined populations to ACOs, healthcare entities, and third-party vendors for analysis.

The intended audience is customers responsible for developing system interfaces for these electronic messages.

Document References

Please refer to the following documents when reading this guide:

Surescripts provided materials
Connectivity and Authentication Guide
Medication History for Populations (Prescription Notifications) Implementation Guide

2. Product Integration & Production

Integration Process

When a customer begins integrating a Surescripts product into their application(s), they will be provided access to all the Surescripts documentation pertaining to the product being implemented. In addition, customers will be provided access to the staging environment to design, develop and test the product integration within their application.

> **Note:** The time frame of the project can vary depending on the customer's resource allocation for the project.

Meeting Requirements

During Integration, customers will ensure their system has met all product requirements. The Certification Testing will focus on message format, application workflow and display in accordance with Surescripts documentation and the associated Application Certification Requirements (ACRs). Upon successful completion of certification and, when applicable, other pre-production network requirements (e.g., Identity Proofing, Attestations, DEA audit), customers will be enabled in production.

For requirements, consider the following:

- Surescripts ACRs are required to be met to achieve production status on the Surescripts network and will be enforced as part of certification.
- To ensure high-quality transactions, Surescripts applies additional business rules above and beyond the NCPDP schema defined requirements that will cause a message to be successful or rejected.
- Surescripts test cases do not cover all possible scenarios in production. Customers are responsible for testing any other applicable scenarios specific to their production environment.
- In accordance with the customer's legal agreement with Surescripts, each customer is responsible for ensuring compliance with all applicable laws including, but not limited to, local and state laws/regulations where doing business.

Surescripts Terminology Usage

Requirements that are enforced as part of the production code are denoted as "must" and will have to be met to successfully complete validation. "Should" is used for guidance or best practices. See the following chart for terminology usage in this implementation guide.

Term	Term usage
must	Requirements that are enforced as part of the production code.
should	Used for guidance and best practices. Best practices can also be found in Best Practice sections. Customers are encouraged, but not required, to meet best practices to be certified on the Surescripts network.

Transition to Production

Once certification and the contract are complete and approved by the Surescripts Certification Review Board, the customer is ready to move into production. Surescripts will configure the production connection and validate successful operations with the customer. Prior to the transition to production, Surescripts Account Management will work with the customer and internal Surescripts teams to discuss the following:

- Production support contacts (Escalation Matrix)
- Support process and training
- Support hours

Secure FTP

Contact your Surescripts resource for Secure FTP requirements.

Communication Rules

Please refer to the Connectivity and Authentication Guide for details regarding communication and security protocol requirements as well as references to all links and IP addresses associated with Surescripts services. For the network to be reliable, there are communication rules to which all customers must adhere.

UTC Time Format

By using Coordinated Universal Time (UTC), the receiver of a message will know the time regardless of their time zone. For example: If a message was sent from Boston at 5:30PM EDT (Eastern Daylight Time), the time would be sent as 21:30 UTC time. If this message was received in Chicago CDT (Central Daylight Time), the 21:30 UTC could be converted to the local CDT time of 4:30PM. Refer to **http://en.wikipedia.org/wiki/Coordinated_Universal_Time**, or **http://www.w3.org/XML/** for more information. UTC time must be synchronized with NIST (National Institute of Standards and Technology) and the difference must be less than one minute. Drift of no more than one minute will be acceptable.

When sending only a Date (not Date and Time), it should be sent in your local time zone, and the receiver should interpret it in their local time. Neither party should attempt to convert the Date to UTC.

All standard programming languages should have a function for generating a date in the UTC time zone or displaying a date in the local time zone. The format of the date/time fields in the XML schema must use the xsd:dateTime format. Examples of that format are: CCYY-MM-DDTHH:MM:SS.FZ, where the UTC time zone may be specified as Z, + 00:00, or - 00:00. For example, 2013-01-01T16:09:04.5Z, or 2013-01-01T16:09:04.5-00:00, or 2013-01-01T16:09:04.5+00:00, where 16:09:04.5Z would be 16 hours, 09 minutes, 04 seconds, 5 fractional seconds. UTC time is denoted by either the “Z” in the first example or the “-00:00” in the second example, or the “+00:00” in the third example. The fractional seconds is not required. Refer to xsd:dateTime for more information.

For simple date fields that do not include the time portion, the format is: CCYY-MM-DD.

Character Set

The character set contains ASCII values 32 – 126, which includes:	
Symbols	! " # $ % & ' ( ) * + , - . / : ; < = > ? @ [\ ] ^ _ ` { | } ~
Numerals	Ø to 9
Letters, upper and lower case	A to Z, a to z

Unprintable characters, such as control characters, are not used within the field sets. Defined unprintable characters are used as delimiters.

Compliance

Surescripts goal is efficiency and consistency across the network so all customers can meet the highest measures of patient safety, end-to-end reliability, and quality. To ensure that customers comply with and adhere to the approved certification requirements, Surescripts:

- Monitors customers in production to ensure all network customers remain in compliance with certification requirements and contractual terms.
- Initiates a remediation process for identified compliance issues.

To ensure network and patient safety, customer agrees to notify Surescripts of any modifications through use of the Surescripts recertification form. Upon receipt of this form, changes will be reviewed, and a determination made as to what (if any) level of certification may be required before being placed into production.

When changes are made to a customer's implementation, the customer should advise their account manager. The customer will be given a recertification guide to provide details regarding the changes made. Upon receipt of the completed document, the details will be reviewed, and a determination will be made as to what (if any) level of recertification is necessary.

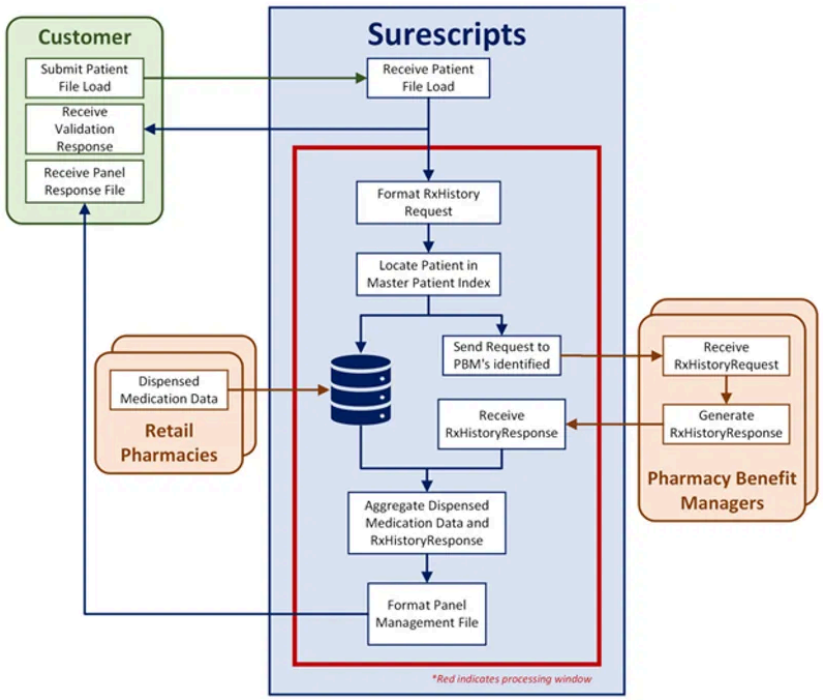
As a reminder, Surescripts conducts certification with customers to ensure the application adheres to network requirements. Surescripts will enforce mandatory fields as required by the Standards body and Surescripts guide requirements. To maximize interoperability, customers are recommended to support optional fields that have been created to address gaps in discrete data needs and the many solutions that are in place for the benefit of the receiver. Surescripts encourages, but does not guarantee, the use of optional discrete fields to support end user workflows.

This guide is intended for certification on our network only and is not intended to ensure compliance with state and federal law. In accordance with the customer's legal agreement with Surescripts, each customer is responsible for conducting its own due diligence to ensure compliance with all applicable laws and requirements, including, but not limited to, local and state laws and regulations in which the customer's application is deployed and used.

3. Process Overview

Process Flow

The graphic below depicts the process flow between customers in this process.



The following steps depict the process flow:

1. The customer generates and posts the Patient File Load (onto the SFTP site) that identifies which patients they want to enroll for Medication History for Populations.

   Patients enrolled for Medication History for Populations Panel Management are enrolled for a one-time medication history response.

   Note: If a patient does not grant access to their data, then the customer is responsible for excluding the patient from the Patient File Load.

2. Surescripts validates the submitted file and generates and posts a Validation Response File in the SFTP folder for retrieval. This response notifies the customer that the Patient File was received. The response file also provides details into any errors that were encountered during the input panel validation. The Panel user should plan to resubmit the records with errors after correcting the error. For example, a record rejected due to invalid zip code format.

   Note: To avoid a duplicative response charge, please ensure you are only resubmitting those records with errors. Do not correct the errors and resubmit the full file (i.e. if you submit a request with 100 patients and 25 errors were returned, the correction file should only contain 25 revised records).

3. Surescripts locates patients using the Master Patient Index (MPI). For patients found:
   - The medication history request is routed to the appropriate PBM/payer for processing. This data will contain any claim on file for medications where the pharmacy benefit may be used and may be reversed if the medication is returned to stock.

    - The medication history request also calls on our dispensed medication fill database, which is updated regularly by pharmacies connected to Surescripts. This data will contain records for dispensed medications and includes both cash and coupon pay

4. Surescripts retrieves and aggregates available Dispensed Fill Data and claims Medication History data for all successfully loaded patients listed on the Patient File.
5. Surescripts generates and posts the Panel History File for the customer to access in the SFTP folder.
6. The customer retrieves Flat Format Panel History File from the SFTP folder.

Patient File Load

The Medication History for Populations Patient File Load process via the SFTP folder is used by customers to enroll patients.

> **Note:** Please make sure to contact your Surescripts resource to assure you have met the requirements described in this section.

Name	Description
Timing	Panel user will determine the timing of sending the file to Surescripts.
SFTP Folder	**File locations:** • Incoming files location – **/to_surescripts** (Permission: upload) • Outgoing files location – **/from_surescripts** (Permission: download, delete)
SFTP Tips	• Clients will post files to the 'to_surescripts' folder. • Clients have download, delete rights on the 'from_surescripts' folder. This folder contains the Surescripts response files. Clients could remove files permanently; else, the Surescripts system will automatically purge files that are older than 14 days.

File Validation

Surescripts will ensure that customers are in compliance with the file specifications outlined in this Guide during Integration Testing and will continue to enforce once in production.

At a minimum, Surescripts validations include:

- The sender identification and authentication
- The recipient identification
- Syntax of the message, including field lengths, data types, and code values
- Surescripts business rules

Patient File Load Details

Patient File Naming

The following topics describe the required naming convention

Patient File Load Naming

The File Load naming convention is: *<CustomerName>*_PMA_*<YYYYMMDD-XX>.<CompressionFormat>*. Surescripts recommends compressing the file prior to transmitting it to Surescripts. The current zip protocols that are supported are gzip, bzip2 and zip.

Example: **ACOCompany_PMA_20201204-01.gz**

Patient Response File Naming

The naming convention is <*InputFileName sans extension*>.<*sstimestamp*>.<*sstimestamp*>.rsp.

Example: **ACOCompany_PMA_20201204-01.20201204012025.20201204012025.rsp**

Patient File Load Format

The Patient File Load format will be pipe-delimited (hex7c). Each field is delimited by the pipe character (|). If a pipe-character (hex7c) is used in field data, it must be escaped with \F\. For example, Main | Street would be listed as Main \F\ Street. Each line is to be separated by a new line (hex0A) character.

For detailed field information, refer to the **Request File Elements** and **Patient File Load Examples** sections. You may also refer to **File Load Validation and Error Code Details** for more information.

> **Note:** If mandatory fields are not included, the Patient File Load and/or patient record will not pass validation, and the patient will not be loaded or monitored. All conditional fields must be accounted for, either with data, or a placeholder delimiter.

Patient Response File Format

Each Patient Response File will contain an overall file load status code, including description, within the header record. This code indicates if the file loaded with either partial or full success (i.e., patients were loaded from the file), and/or if errors were encountered.

In addition, there will be a record containing an error code and description for every error found in the file. These records will include the line number of the incoming file that had the related error. Line number starts with 1 for the header record and is incremented by 1 for every record in the incoming file.

Line number 1 will indicate an error on the incoming file header. Line numbers 2 - n will indicate errors on subsequent records in the incoming file. There may be multiple records listing an error code and description for the same line number from the incoming file.

The Patient Response File format is pipe-delimited (hex7c). Each field is delimited by the pipe character (|). If a pipe-character (hex7c) is used in field data, it will be escaped with \F\. For example, Main | Street will be listed as Main \F\ Street. Each line will be separated by a new line (Hex 0A) character.

For detailed field information, refer to the **Response File Elements** and **Patient File Load Examples** sections. You may also refer to **File Load Validation and Error Code Details** for more information.

Patient File Load Maintenance

Enrolled Patients across Panel Management and Prescription Notifications are designated through the use of PatientHashID, which is generated from the following fields submitted in the enrollment request:

- Patient First Name
- Patient Last Name
- Date of Birth

- Patient ID
- NPI (for treatment based use case only)

A patient is counted once as an enrolled for each unique combination of these fields. A change to any of these fields in a subsequent file, without prior unenrollment, will result in a new unique record being counted. For more information on unenrollment, see Deleting a Previously Enrolled Patient below.

Prescription Notifications Recipient and Patient Identity

Prescription Notifications uses the following to identify a notification recipient and each patient that recipient has enrolled.

Intended Recipient of a Notification

- Sender ID
- NPI

Patient the Recipient is Monitoring

- Assigning Authority
- Patient ID

> **Note:** Sender ID is from the file header (HDR) record. The rest of the fields are from the patient detail record.

Updating a Previously Enrolled Patient

To change data for a patient, submit the patient in a patient file using the updated information for the patient. Updates can be made to any data in the patient details other than Patient Name, Patient Date of Birth, NPI, Assigning Authority, and Patient ID.

Updates can include:

- Change of patient demographics (address fields and gender)
- Adding / removing Notifications Requested for this Patient
- Changes to the End Monitoring Date

Deleting a Previously Enrolled Patient

It is not possible to delete an enrolled patient; however, customers can stop receiving notifications for a patient. This is accomplished by updating the **End Monitoring Date** of the patient to a desired future date. Once the update is processed by Surescripts and the date is reached, no notifications will be generated for the patient.

Enrolling or Adding a New Patient or Notification Recipient

Please consider the following when enrolling or adding a new patient or notification recipient:

- New patients (Assigning Authority plus Patient ID) received in a patient file load will be validated and loaded.
- New recipients (Sender ID, NPI) with associated patient detail (PMA) records will be validated and loaded.
- A new recipient for a patient already monitored by a different recipient will be validated and loaded independently from the original recipient record. Surescripts considers the combination of Sender ID, NPI, Assigning Authority, and Patient ID to be the unique keys to a record being monitored for notifications.

4. File Overview

> **Note:** Refer to the **Panel History Flat File Examples** section of this guide to view its code structure.

HDR (Header)

Surescripts uses an overall file header for each file, and every file contains a set of DTL (Detail) Records.

For details, refer to **Record Header Elements**.

DTL (Detail)

The DTL record returns both the claim information for outpatient prescriptions where the pharmacy benefit was used, and the dispensed retail medication data (including cash and coupon pay) from the PBM/payers and pharmacies connected to Surescripts.

Up to 600 medications are returned within the dates requested within the last 12 months.

Surescripts uses message header for all messages. For Panel, a message header is included in each patient's DTL Record.

> **Note:** Each MessageID can only contain the data for 300 medications, therefore, a second MessageID will be generated for the remaining medications when applicable.

Data Deduplication and Augmentation Information

Data deduplication and augmentation are optional features and require no configuration or certification by the provider vendor. The customer may opt-in to one or both features.

- **Data deduplication**: Surescripts removes duplicate medication history dispense data across data sources. A duplicate medication record is defined as the same medication for the same patient, written by the same provider, dispensed on the same day at the same pharmacy.
- **Data augmentation**: Surescripts adds data to missing fields from data suppliers. For example, by adding address or phone in the Pharmacy or Prescriber segment.

> Notes:
>
> - Surescripts offers two options for deduplication and augmentation: Basic and Premium. For more information, contact your account manager.
> - Surescripts will never over-write or replace existing data from data suppliers.
> - Logic used to identify duplicates and data fields augmented is subject to change. Please work with a Surescripts Account Manager or Integration resource for more information.

For details refer to **Record Detail Elements**.

TRL (Trailer)

Surescripts uses an overall file trailer for each file, which provides detailed summary information.

For details refer to **Record Trailer Elements**.

File Naming and Formats

The Flat File naming convention is: <PatientPopulationIdentifier from the Panel Management Load Delimited File><Surescripts' assigned ID>_<yyyyMMddHHmmss>.gz

Example Flat File name:

ACO132PatientPopulationA12345_20141204012025.gz

5. Record Element Detail Tables

This section defines the record-level element detail tables for the Medication History for Populations (Panel) flat file exchange. These tables specify each field's position, name, data type, requirement designation, and expected values. The element details are organized into two areas:

- **Request File Elements** defines the elements for files submitted to Surescripts, including the Request Header (HDR), Request Details (DTL), and Request Trailer (TRL) records.
- **Response File Elements** defines the elements for files returned by Surescripts, including the Validation Response Header (SDH), Details (SDT), and Trailer (STR) records, as well as the Panel Management Response Header (HDR), Details (DTL), and Trailer (TRL) records.

Refer to the table below for requirement designations (mandatory, conditional, optional) used throughout the other tables in this section.

Requirement Designation for Element Attributes:

Code	Description
mandatory	The element must be used per the specification (e.g., XML schema validation).
conditional	The element is to be used per the conditions specified.
optional	Some fields do not have specific conditions. Data should be sent if available.

> **Note:** This guide includes data elements only where Surescripts has specific requirements or further explains the field usage.

5.1. Request File Elements

Request Header (HDR) Elements

> **Note:** Certain errors pertaining the Record Type and Transmission File Type fields could result the file not being processed, which would cause the response file to not be generated, preventing the visibility of resulting errors.

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
0	Record Type	an3	mandatory	Assigns the following string of data to its desired action.	Value: HDR
1	Version	an3..5	mandatory	Indicates the version of Medication History for Populations.	Value: 3.0
2	Sender ID	an15	mandatory	A unique identification number assigned by Surescripts indicating the sender of the file.	Example: P00000000023456
3	Sender Password	an15	mandatory	The password to be utilized by the customer to access the Surescripts system.	Example: M94WJ7CW6H
4	Receiver ID	an1...15	mandatory	A unique identification number assigned by Surescriptsindicating the receiver of the file. **Note:** S00000000000006 has been deprecated for Patient File Load.	The following IDs are used for Medication History for Populations (Panel and Prescription Notifications): • S00000000000003 (Medication History for Populations) • S00000000000005 (Medication History for Populations for Health Plans)
5	Transmission Control Number	an1..10	mandatory	A unique identifier defined by the sender used to map the Patient File Load to the Patient Response file. This field can contain numerical or alphabetical characters and must be unique to each file transmission.	Example: 1234567891
6	Transmission Date	Format: CCYYMMDD	mandatory	The date the file was transmitted to Surescripts.	
7	Transmission Time	Format: HHMMSSDD	mandatory	The time the file was transmitted to Surescripts.	

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
8	Transmission File Type	an1..4	mandatory	Identifier indicating the type of Patient Load File which can accept patient enrollment based on the RecordType value in the detail information.	Value: PMA
9	No longer in use, field present but will remain null				
10	Extract Date	Format: YYYYMMDD	mandatory	The date the file was created (extracted) from the source.	Example: 20240603
11	Usage Indicator	an1	mandatory	Indicates the environment where the transaction will take place.	Values: • T = Test • P = Production
12	Patient Population ID	an1..64	mandatory	A value assigned to a population by the customer that is provided in the patient file load. This field can contain numerical or alphabetical characters.	Example: HighRisk
13	No longer in use, field present but will remain null				
14	Look Back Period in Months	n1...3	conditional	Configurable field specifying the number of months to look back from the request date. If left blank, the field defaults to 12 months.	Example: 12
15	Data Source Type	an3	conditional	Field specifying the desired data sources (Claims and Dispensed Fills) to include in the response file. If left null, the default value is set to 0.	Values: • FIL - Only Dispensed Fill data • CLM - Only Claim data • NULL - Claim and Dispensed Fill data
16	Request Start Date	Format: CCYYMMDD	conditional	The beginning date (UTC) for the desired history. May be left empty or customized to pull data a maximum of 12 months. The default value is set to 12 months from submission if left null.	Example: 20240531

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
17	Request End Date	Format: CCYYMMDD	conditional	The end date (UTC) for the desired history. The default value is set to submission date if left null. Cannot contain a future date.	Example: 20241201

Request Details (DTL) Elements

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
0	Record Type	an3	mandatory	Assigns the following string of data to its desired action. **Note**: Patient file loads with PAT or PNM record types cannot be combined with UNR record types.	Values: • PAT – Prescription Notifications and Panel enrollment • PNM – Panel Management enrollment • PMA – Prescription Notification enrollment
1	Record Sequence Number	n1...10	mandatory	Unique number for the detail record in the received file where the first record begins with "1" and each subsequent record is incrementally increased by 1 as the file is processed.	Examples: • 1 • 2 • 3
2	Assigning authority	an1...64	mandatory	ID for the organization/system that assigned the related patient ID	Example: 1.3.44444.666.3.2.1
3	Patient ID	an1...35	mandatory	The patient specific unique identifier provided by the panel user.	Example: 593431
4	Last Name	an2...35	mandatory	The last name of the patient. This field must contain more than 2 characters.	Example: WAYNE
5	First Name	an2...35	mandatory	The first name of the patient. This field must contain more than 2 characters.	Example: TOM
6	Middle Name	an2...35	conditional	The middle name of the patient. Sent to aid in patient matching.	Example: J
7	Prefix	an1...10	conditional	The prefix for the patient. Sent to aid in patient matching.	Example: Mr.
8	Suffix	an1...20	conditional	The suffix for the patient. Sent to aid in patient matching.	Example: II
9	Address Line 1	an1...55	conditional	First line of the patient address without any C/O type information. Sent to aid in patient matching.	Example: 123 Street Avenue
10	Address Line 2	an1...55	conditional	Second line of the patient address without any C/O type information. Sent to aid in patient matching.	Example: Unit #41
11	City Name	an2...30	conditional	Patient city name. Sent to aid in patient matching.	Example: Jacksonville

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
12	State	an2...55	conditional	State in which the patient resides. Only United States addresses are supported. **Note**: Both state abbreviations and full state names are supported.	Examples: • Colorado • CO
13	Zip Code	an5..10	mandatory	Patient Zip or zip code must consist of five digits, an optional hyphen (-), and up to four additional digits. The first five characters must only consist of numbers.	Examples: • 55123 • 97116-2245 • 200607011
14	Date of Birth	Format: CCYYMMDD	mandatory	The date of birth for the patient.	
15	Administrative Gender	an8	mandatory	The gender as reported by the patient.	Values: • M – Male • F – Female • N – non-binary • U – Unknown
16	NPI	n10	mandatory (Medication History for Populations - S00000000000003) conditional (Medication History for Populations for Health Plans - S00000000000005)	Individual or Organizational National Provider Identification (NPI) of the requester of the Medication History that is validated by Surescripts against the National Provider Identification file to verify that it exists. **Note**: A test NPI can be used in staging, as no NPPES validation is used during the testing process.	Example: 1234567893
17	End Monitoring Date	Format: CCYYMMDD	conditional	For PAT record types this field indicates the date in which the customer desires the patient be removed from monitoring in Prescription Notifications. If no end date is desired, leave this field empty. **Note**: *The End Monitoring Date must be set beyond the current date*. Prescription Notifications cannot be stopped retroactively.	

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
18	Notifications Requested for this Patient	an1..1000	conditional	For the PAT file type, this field allows for the customization of which notifications the customer would like to receive for the specific patient. If this patient is to be monitored for a list of notifications that is shorter than the contracted list, include individual notifications requested in a comma separated list. Field is case insensitive. **Recommendations:** Leave this field empty to make it easy for contracting new notification types in the future without need for a Patient File Load reload. If enrolling for specific notification types using this field, you must also include PMAInfo in order to receive informational notifications (e.g., patient is not found).	Values: • PMANewRx • PMARefill • PMANewPrescriber • PMAControlledSubstance • PMANoRefillsRemaining • PMARefillNotPickedUp • PMACashPayRx • PMAMonitoredMedRx
19	Patient Primary Telephone	n10	conditional	Patient's primary telephone number.	Example: 5555551234

Request Trailer (TRL) Elements

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
0	Record Type	an3	mandatory	Assigns the following string of data to its desired action.	Value: TRL
1	Total Records	n1..10	mandatory	Summary of the total detail records submitted in the file.	Examples: • 1 • 2

Detailed Information for Unenrollment

This is an optional record and should only be used for mass unenrollment purposes.

Field	Field Name	Type	Code	Description	Example
0	Record Type	an 3	mandatory	Identifies record type. **Value**: • UNR = Unenroll patients **Note:** Patient file loads with this record type cannot be combined with PAT, PNM, or PMA record types.	UNR
1	Record Sequence Number	n1..10	mandatory	Number for this detail row in the file.	1
2	Product	an 3	mandatory	Product Type. Allowed value is PMA.	PMA
3	End Monitoring Date	dt 8	mandatory	This is the date when *all* patients who are currently being monitored will be unenrolled from Prescription Notifications (Panel does not apply). This date must be set in the future from current date. Please be aware that specific patients cannot be unenrolled using this process.	20231231

5.2. Response File Elements

Validation Response Header (SDH) Elements

Field	Field Name	Code	Comments	Field Values/Examples
0	Record Type	an3	mandatory	A single response that signifies the header row of the file Value: SHD
1	Version	n3...5	mandatory	Indicates the version of Medication History for Populations. Value: 3.0
2	Receiver ID	an3..30	mandatory	A unique identification number assigned by Surescripts indicating the receiver of the file. Example: P00000000012345
3	Sender ID	an3..30	mandatory	A unique identification number assigned by Surescriptsindicating the receiver of the file. **Note:** S00000000000006 has been deprecated for Patient File Load. The following IDs are used for Medication History for Populations (Panel and Prescription Notifications): • S00000000000003 (Medication History for Populations) • S00000000000005 (Medication History for Populations for Health Plans)
4	Transaction Control Number	an1..36	mandatory	A unique identifier defined by the sender used to map the Patient File Load to the Patient Response file. This field will be a GUID in the response from Surescripts. Example: ec622dd2-dab7-4945-bc2f-a9c0a78c64dd
5	Transaction Date	Format: CCYYMMDD	mandatory	The date the file was transmitted to the customer. Example: 20241022 would represent October 22, 2024
6	Transaction Time	Format: HHMMSSDD	mandatory	The time the file was transmitted to customer, Example: 14354587 would represent 14:35:45 and 87 hundredths of a second
7	Transaction File Type	an3	mandatory	Identifier indicating the type of Patient Load File which can accept patient enrollment based on the RecordType value in the detail information. Value: PMA
8	Transmission Control Number Originating	an1..10	mandatory	Value that echo's the Transmission Control Number sent in the patient file transmitted to Surescripts. Example: 1234567891
9	Transmission Date- Originating	Format:	mandatory	Date Original Incoming File was created. Example: 20241022 would represent October 22, 2024

Field	Field Name	Code	Comments	Field Values/Examples
		CCYYMMDD		
10	Transmission Time- Originating	Format: HHMMSSDD	mandatory	Time Original Incoming File was created. Example: 14354587 would represent 14:35:45 and 87 hundredths of a second
11	File Type	an1	mandatory	Indicates the environment where the transaction was routed. Values: • T – Test • P – Production
12	Load Status	an2	mandatory	Codified value within the header response explaining the status of the file load. **Note**: If there is more than one error at the file level, there will be additional errors in detail records with a sequence of 1, null patient ID, and the header response code in the error code field. Values: • 01 – File loaded correctly. • 02 – File loaded with errors and/or warnings. • 03 – Failed to load file. No data was processed.
13	Load Status Description	an1..250	mandatory	Description of the status of the file load Values: • File loaded correctly. • File loaded with errors and/or warnings. • Failed to load file. No data was processed.

Validation Response Details (SDT) Elements

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
0	Record Type	an3	mandatory	A value that signifies a validation error in the details row of the file.	Value: SDT
1	Record Sequence Number	n1...10	mandatory	Unique number for the detail record in the validation response file where the first record begins with "1" and each subsequent record is incrementally increased by 1 as the file is processed.	Examples: • 1 • 2 • 3
2	Source Record Sequence Number	n1...10	conditional	Record Sequence Number from the detail row on the request file. This is the value assigned by the sender of the file.	Examples: • 1 • 2 • 3
3	Assigning Authority	n1...64	conditional	ID from the request file for the organization/system that assigned the related patient ID.	Example: 1.3.44444.666.3.2.1
4	Patient ID	an1..35	conditional	The patient specific unique identifier provided by the panel user in the request file.	Example: 593431
5	Error Type	an1	mandatory	A single letter categorizing the severity of an error. Categories include: • Warning (W) – Does not fail file or row. • Error (E) – Fails the associated row, row is not processed. • Fatal (F) – Fails entire file, nothing is processed.	Values: • W • E • F
6	Error Code	an10	mandatory	Codified value indicating the error found on this record.	
7	Error Description	an1..250	conditional	Text describing the error found in this record.	

Validation Response Trailer (STR) Elements

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
0	Record Type	an3	mandatory	A single response that signifies the trailer (summary) row of the file.	Value: STR
1	Processed Record Count	n1...10	mandatory	Count of detail patient records processed in file. **Note:** Error Record Count + Loaded Record Count = Processed Record Count	Example: 100
2	Error Record Count	n1...10	conditional	Count of detail patient records that contained an error and did not load.	Example: 3
3	Loaded Record Count	n1...10	conditional	Count of detail patient records that were loaded for enrollment.	Example: 97
4	Total Error Count	n1...10	conditional	Number of errors listed in the Patient Response File. **Note:** A single input record could have one or more errors listed in the response file. Total Error Count will be > or = Error Record Count	Example: 7

Panel Management Response Header (HDR) Elements

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
0	Record Type	an3	mandatory	Value signifying that the following string is a part of the header.	Value: HDR
1	Version	an1...5	mandatory	Indicates the version of Medication History for Populations.	Value: 3.0
2	Receiver ID	an15	mandatory	A unique identification number assigned by Surescripts indicating the receiver of the file.	Example: P00000000023456
3	Sender ID	an15	mandatory	A unique identification number assigned by Surescriptsindicating the receiver of the file. **Note:** S00000000000006 has been deprecated for Patient File Load.	The following IDs are used for Medication History for Populations (Panel and Prescription Notifications): • S00000000000003 (Medication History for Populations) • S00000000000005 (Medication History for Populations for Health Plans)
4	Patient Population ID	an1..35	mandatory	A value assigned to a population by the customer provided in the patient file load.	Example: HighRisk
5	Transmission Control Number	an1..36	mandatory	A unique identifier defined by the sender used to map the Patient File Load to the Patient Response file. This field can contain numerical or alphabetical characters and must be unique to each file transmission.	1234567891
6	Sent Time	Format: CCYYMMDDTHHMMSS	mandatory	Identifies the time the response is sent to the sFTP.	For example, if the sent time is October 22, 2024, at 14:35:45, it would be written as: 20241022T143545.

Panel Management Response Details (DTL) Elements

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
0	Record Type	an3	mandatory	Signifies that the following string of data is a detail record.	Value: DTL
1	Record Sequence Number	n1...10	mandatory	Unique number for the detail record in the received file where the first record begins with "1" and each subsequent record is incrementally increased by 1 as the file is processed.	Examples: • 1 • 2 • 3
2	MessageID	an1..35	mandatory	Unique Message ID for the RxHistoryResponse. Used as a reference for troubleshooting the medication history transaction.	Example: 12345678:12345543:1234567603128
3	Sent Time	Format CCYYMMDDTHHMMSSNNZ	mandatory	Time that the file was generated by Surescripts	Examples: 2024-02-06T05:08:05 2024-07-14T13:13:09.679Z
4	Status	an1..35	mandatory	Approval response from data suppliers.	Value: Approved
5	Note	an..210	optional	Details added to the record to relay specific information.	Values: • Although a patient was found, no medications were returned from partners. • Not all medication history sources were accessible at this time. • A processing error occurred. • No medication history was returned. • Although a patient record was found, no medications were available. • Patient not found.
Requesting Prescriber Details					
6	Prescriber NPI	an10	manda	The organizational or individual National Provider Identification (NPI) number of the prescriber/provider	Example: 1234567891

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
			tory	associated to the patient included in the file load from Panel user that is validated against the NPPES registry and mapped to the outgoing medication history request to data suppliers.	
7	Prescriber Name	an1..35	mandatory	The organization name or prescriber last name of NPI included in the file load.	Example: HEALTH AND HOSPITALS CORP
Patient Details					
8	Patient ID	an1..35	mandatory	The patient specific unique identifier provided by the panel user.	Example: 593431
9	Patient Last Name	an2..35	mandatory	The last name of the patient. This field must contain more than 2 characters.	Example: WAYNE
10	Patient First Name	an2..35	mandatory	The first name of the patient. This field must contain more than 2 characters.	Example: TOM
11	Patient Date of Birth	Format: CCYYMMDD	mandatory	The date of birth for the patient.	Example: 19841024
12	Patient Administrative Gender	an1	mandatory	The gender as reported by the patient.	Values: • M - Male • F – Female • N – non-binary • U – Unknown
13	Patient Zip Code	an1..15	mandatory	The patients 5- or 9-digit zip code without punctuation	Examples: 60459 604591258
Request Details					
14	Start Date	Format:	manda	The beginning date for the desired history defined in the Patient File Load header.	20240817

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
		CCYYMMDD	tory		
15	End Date	Format: CCYYMMDD	mandatory	The end date for the desired history defined in the Patient File Load header (e.g., today's date).	20240818
16	Consent	an1	mandatory	When marked 'Y' consent has been given by the patient for the customer to receive their medication history.	Value: Y - Yes
Medication Details					
17	Drug Description	an1..105	optional	Standardized drug name including strength and form from a Surescripts approved drug compendium.	Example: ATORVASTATIN 10MG TABLETS
18	Product Code	an..35	optional	Value used in conjunction with Product Code Qualifier to identify the product dispensed.	Example: 55111012105
19	Product Code Qualifier	an..5	optional	Codified value used to indicate the type of data submitted in the product code.	Values: • ND - Code designating the use of the National Drug Code (NDC), which identifies the labeler/manufacturer, product, and package size of the drug. • DI - Code designating the use of a Unique Device Identifier (UDI) which identifies the specific version or model of a device and the labeler of that device. • UP - Code designating the use of the universal product code (UPC) defining then manufacturer and specific description of the product.
20	Strength Value	an..70	optional	The strength and strength unit of measure associated with the prescribed product.	Example: 100 MG
21	Drug Database	an..35	optiona	Value used in conjunction with Drug Database Code Qualifier relaying the drug concept.	Example: 58160034100320

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
	Code		I		
22	Drug Database Code Qualifier	an..5	optional	Codified value used to indicate the code set used to provide the Drug DB Code.	Values: • SCD – Code designating the use of RxNorm semantic clinical drug, representing the ingredient plus strength and dose form. • BD - Code designating the use of semantic branded drug, representing the ingredient, strength, and dose form plus the branded name. • BPCK - Code designating the use of RxNorm branded package, representing the branded drug delivery device. • GPCK - Code designating the use of RxNorm generic package, representing the generic drug delivery device.
23	No longer in use, field present but will remain null.				
24	No longer in use, field present but will remain null.				
25	Strength Form Code	an..15	optional	Codified value that qualifies the form of the dispensed product. Codes can be found at: https://evs.nci.nih.gov/ftp1/NCPDP/About.html	Example: C42946
26	Strength Unit of Measure	an..15	optional	Codified value representing the measurable unit in which the strength is measured. Codes can be found at: https://evs.nci.nih.gov/ftp1/NCPDP/About.html	Example: C28253
27	DEA Schedule	an..15	optiona	Codified value designating the substance schedule as defined by the Drug Enforcement Administration (DEA).	Values: • C38046 – Unspecified

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
			l		• C48672 – Schedule I • C48675 – Schedule II • C48676 – Schedule III • C48677 – Schedule IV • C48679 – Schedule V
28	Quantity Dispensed	an..15	optional	The total quantity of a single prescription filled e.g. the count of tablets or number of grams.	Example: 90
29	Code List Qualifier	an..15	optional	Codified value qualifying the quantity	Values: • 38 = Original Qty • 40 = Remaining Qty • 87 = Quantity Received • QS = Quantity Sufficient** • **(Long-Term Care only)
30	Unit Source Code	an..15	optional	AC Code identifying the source organization.	Value: AC = Potency Unit Code
31	Quantity Unit of Measure	an..15	optional	Codified value that represents the measurable unit in which the quantity to dispense is counted (e.g. tablets, capsules, milliliters, etc.). Codes can be found at: https://evs.nci.nih.gov/ftp1/NCPDP/About.html	Example: C48480
32	Days Supply	an..35	optional	Estimated number of days the prescription will last	Example: 90
33	Directions	an..1000	optional	SigText contains completely free text directions with no corresponding codified content.	Example: TAKE 1 TABLET BY MOUTH DAILY
34	Refills Remaining	an..35	optional	The number of refills remaining in the prescription.	Example: 3
35	No longer in use, field present but will remain null.				

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
36	Substitutions	an..15	optional	Code indicating the prescriber's instructions regarding generic or interchangeable biosimilar substitution:	Values: • 0 = No product selection indicated • 1 = Substitution not allowed by prescriber
37	Date Written	Format: CCYYMMDD	optional	Date or date and time the prescription was issued.	
38	Last Filled Date	Format: CCYYMMDD	optional	Date or date and time of the most recent fill.	
39	Sold Date	Format: CCYYMMDD	optional	Sold Date is also referred to as Date Picked Up. This is the date that the prescription was picked up at the pharmacy/delivered to the patient.	
40	No longer in use, field present but will remain null.				
41	Prior Authorization Number	an..35	optional	Prior Authorization number assigned by PBM/payer.	Example: 1469123
Dispensing Pharmacy Details					
42	NCPDP ID	an..35	optional	The unique NCPDP-assigned national provider identification number that identifies the pharmacy where the prescription was dispensed.	Example: 1469123
43	Pharmacy NPI	an..35	optional	The organizational National Provider Identification (NPI) number of the pharmacy that has dispensed the prescription.	Example: 1265666666
44	Store Number	an..70	optional	The name of the pharmacy where the medication was dispensed to the patient.	Example: Walgreens
45	Pharmacy Address line 1	an..35	optional	Address line 1 of the dispensing pharmacy.	Example: 1525 N Main Pkwy

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
46	Pharmacy Address Line 2	an..35	optional	Address line 2 of the dispensing pharmacy.	Example: Unit A
47	Pharmacy City	an..40	optional	The city where the dispensing pharmacy is located.	Example: Bloomington
48	Pharmacy State	an..15	optional	The State where the dispensing pharmacy is located.	Example: IL
49	Pharmacy Zip Code	an..15	optional	The postal code where the dispensing pharmacy is located.	Example: 60459 604591258
50	Pharmacy Phone Number	an..80	optional	The phone number of the dispensing pharmacy.	Example: 5555555555
51	Pharmacy Fax Number	an..80	optional	The fax number of the dispensing pharmacy.	Example: 7777777777
Prescriber Details					
52	Prescriber NPI	an..35	optional	Individual or Organizational National Provider Identification (NPI) of provider responsible for the prescription.	Example: 1234567891
53	Prescriber DEA Number	an..35	optional	The Drug Enforcement Administration (DEA) assigned number of the provider prescribing controlled pharmaceutical prescriptions.	Example: FG1211119
54	Prescriber State License Number	an..35	optional	The number assigned and required by a State Board or other State/Territory regulatory agency that uniquely identifies the licensed individual responsible for the prescription.	Example: 201106119
55	Prescriber Last Name	an..35	optional	The last name of the prescriber responsible for the prescription.	Example: BERGER
56	Prescriber Middle Name	an..35	optional	Middle name of the prescriber responsible for the prescription.	Example: JAMES
57	Prescriber First Name	an..35	optional	First name of the prescriber responsible for the prescription.	Example: ROBERT

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
58	Prescriber Prefix	an..10	optional	Name prefix of the prescriber responsible for the prescription.	Example: Dr.
59	Prescriber Suffix	an..10	optional	Name suffix of the prescriber responsible for the prescription.	Example: II
60	Prescriber Address line 1	an..40	optional	Address line 1 of the prescriber responsible for the prescription.	Example: 1234 WESTAVE
61	Prescriber Address line 2	an..40	optional	Address line 2 of the prescriber responsible for the prescription.	Example: STE E
62	Prescriber City	an..15	optional	The city where the prescriber responsible for the prescription is located.	Example: CHICAGO
63	Prescriber State	an..15	optional	The state where the prescriber responsible for the prescription is located.	Example: IL
64	Prescriber Zip Code	an..15	optional	The zip code where the prescriber responsible for the prescription is located.	Examples: 60459 604591258
65	No longer in use, field present but will remain null.				
66	Prescriber Phone Number	an1..80	optional	Ten-digit phone number of the prescriber responsible for the prescription without punctuation.	Example: 5555555555
67	Prescriber Fax Number	an1..80	optional	Ten-digit fax number of the prescriber responsible for the prescription without punctuation.	Example: 7777777777
Data Source Details					
68	History Source Qualifier	an..3	optional	Indicates the data source type of the medication record.	Values: • Payer = PBM/Payer Claims data • Pharmacy = Pharmacy dispensed fill

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
69	Fill Number	n..2	optional	The code indicating whether the prescription is an original or a refill.	Values: • 00 = Initial fill • 01= First refill • 02 = Second refill, etc. • Allowed values 00 thru 99
70	Prescription Number	an..35	optional	Prescription Number assigned to medication history record.	Example: 1515320
71	Source Description	an..35	optional	Name of dispensing Pharmacy or PBM/Payer providing the medication record.	Example: Walgreens
72	Reference ID Value	an..35	optional	For pharmacy dispensed fill records (P2) this field will contain the NCPDP ID. For claims records (PY) this field will contain the Payer Participant ID.	P2 Examples: • 4222154 • PY Example: • P00000000012345
73	Reference ID Qualifier	an..2	optional	Codified value indicating that the Reference ID Value is representative of the NCPDP ID.	Value: D3
74	Electronic RX Reference Number	an1..35	conditional	Electronic Prescription Reference Number assigned by the pharmacy system. Used to provide an audit trail for electronic prescriptions.	Example: 3971342601962144678
75	Electronic Prescription Order Number	an1..35	conditional	This is the Prescription Order Number on the NewRx created by the prescribing system. When this field is populated, the Electronic Rx Ref Number must also be populated.	Example: 3558474261
76	Patient Primary Phone Number	n10	conditional	Phone number of the patient.	Example: 9995551212
77	PlanCode	n2	conditional	Codified value indicating the type of payment plan utilized by the patient.	Type of payment plan. Values: • 01 = Private Pay • 02 = Medicaid • 03 = Medicare • 04 = Commercial PBM Insurance • 05 = Major Medical

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
					• 06 = Workers' Compensation
78	PaymentCode	n2	conditional	Codified value indicating the type of payment received for the prescription fill as recorded by a state Prescription Drug Monitoring Program (PDMP).	Values: • 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
79	BIN	n1..6	conditional	Plan network ID used to identify how a prescription drug will be reimbursed (plan information).	Example: 020107
80	PCN	an1..10	conditional	Plan network ID used to route pharmacy reimbursements (plan information).	Example: 01410000
81	GroupID	an1..35	conditional	ID assigned to the cardholder group or employer group.	Example: RX1011
82	Cardholder Number	an1..35	conditional	Insurance ID assigned to the cardholder or identification number used by the plan.	Example: John H. Doe
83	SexAssignedAtBirth	an1	optional	The label assigned at birth based on medical factors, including hormones, chromosomes and physical characteristics.	Values: • M – Male • F – Female • U – Unknown • I – Intersex
84	DiagnosisDetails	an0..15	optional	Code identifying the diagnosis of the patient.	Example: E109

Field	Field Name	Data Type	Code	Comments	Field Values/Examples
85	NDC	an40	optional	Unique 10-digit number that identifies the medication based on manufacturer, product, and package size.	Example: 6539285415
86	*Expandable fields for future flat file updates.*			Over time, Surescripts will continue to add new values to the end of the record. It is important that the software consuming this file is designed to ignore new values until they are ready to be imported. This will allow the additional fields to be included at your convenience. As fields are added, this implementation guide will be updated to provide all of the necessary details for consuming the newly available records.	

Panel Management Response Trailer (TRL) Elements

Field	Field Name	Type	Code	Description	Example
0	Record Type	an3	mandatory	Signifies that the following string of data is part of the trailer (summary) record.	TRL
1	Processed Record Count	n1..10	mandatory	Count of detail records (rows) in the response file.	100
2	Medication Count	n1..10	conditional	Total count of medications returned.	1000
3	Meds From PBM Count	n1..10	conditional	Total count of medications from PBM (claims).	200
4	Meds From Pharmacy Count	n1..10	conditional	Total count of medications from Pharmacy.	800
5	Patient found	n1..10	conditional	Total count of patients found (hit rate).	90
6	Some Drugs Returned	n1..10	conditional	Total Count of Note = "Not all medication history sources were accessible at this time.	2
7	No Meds Available	n1..10	conditional	Total count of Note = "Although a patient record was found, no medications were available."	2
8	Patient Not Found	n1..10	conditional	Total Count of Note = "Patient Not Found."	5
9	Processing Error	n1..10	conditional	Total count of Note = "A processing error occurred. No medication history was returned."	2
10	More than 300 Meds Returned	n1..10	conditional	Count of patients with more than 300 medications returned.	2

6. Patient File Load Examples

The following flat files examples are provided in this section:

Patient File Enrollment Load Example

The following is an example of a Patient File Load that was successfully processed.

HDR|3.0|T00000000012345|PASSWORD|S00000000000003|TRS8804|20181217|00110102|PMA|U|20181217|T|HIGHRISK||12||20240101|20241231

PMA|1|72.7.2.7272510|58861323 |Jones|Robert|Jonathan|Mr.|II|123 Street Avenue|Unit#41|Jacksonville|CO|55123|20060701|M|1234567893|20231231|PMANewRx,PMARefill

PNM|2|72.7.2.7272510|6756367|Crandall|Max||MR||382 115th Road SE||Comal|SC|29929|19521101|M|199999999|20180908|

PNM|3|72.7.2.7272510|56800669|Mann|Adam||Dr.||1926 800th ST||Collingsworth|NE|68178|19700515|M|199999999|20180908|

PAT|4|72.7.2.7272510|43726207|Bell|Catherine|Marcia|||6245 572nd Street||Gholson|WY|82010|19800527|F|199999999|20180908|

PAT|5|72.7.2.7272510|27335157|Rogers|Steven|||PHD|3539 Salmon Lane E||Williamson|ND|58102|19541109|M|199999999|20180908|

PMA|6|72.7.2.7272510|96067214|Flash|Dale|||MD|8896 Arthur Lane||Pleasanton|GU|96919|19540707|M|199999999|20180908|

PMA|7|72.7.2.7272510|58861323|Kelley|Carrie||||1879 Madison ST||Yorktown|PR|00601|20100301|F|199999999|20180908|

PMA|8|72.7.2.7272510|75519315|Kyle|Selina||||2048 642nd Avenue NE||Schleicher|OH|44322|19690326|F|199999999|20180908|

PMA|9|72.7.2.7272510|90718490|Scott|Allan|||II|7017 Walleye AVE||Randall|MD|21401|20020409|M|199999999|20180908|

PMA|10|72.7.2.7272510|80289001|Grayson|Dick|Robin|||5946 90th Lane NW||North Cleveland|OR|97420|20081203|M|199999999|20180908|

TRL|10

Patient File Unenrollment Load Example

The following is an example of a UNR Patient File Load that was successfully processed.

HDR|3.0|T00000004654294|PASSWORD94|S00000000000003|Trnsm030|20170307|10110102|PMA|U|20170228|T|PAT||

UNR|1|PMA|20210901

TRL|1

Patient Response File Example

The following is an example of a Patient Response File that is sent from Surescripts to the customer.

SHD|3.0|T00000000012345|S00000000000003|27cbc136-16c1-489e-84c8-f1e56cd22e9d|20181217|07024411|PMA|TRS8804|20181217|00110102|T|01|File Loaded Correctly.

STR|10|0|10|0

Patient File Load Error Examples

Header Information – Invalid Participant ID

Patient File Load

The Patient File Load example below contains an error in the header. In this example no records were loaded. The error has been color-coded as follows:

- **Invalid Sender ID, does not match the Customer ID**
- **Invalid Participant Password (Customer Password)**

Example:

HDR|3.0|T00000000099999|**PASSING**|S00000000000003|TRS8804|20181217|00110102|PMA|U|20181217|T|HIGHRISK||

PMA|1|72.7.2.7272510|57919598|Austin|Steve||MR||1152 Winding LN||Trinidad|NJ|07101|20021103|M|199999999|20180908|

PNM|2|72.7.2.7272510|6756367|Crandall|Max||MR||382 115th Road SE||Comal|SC|29929|19521101|M|199999999|20180908|

TRL|2

Patient Response File

The Patient Response File example below shows an example of an error that will be sent in response to a Patient File Load that includes errors in the header (e.g., Invalid Participant ID, Invalid Participant Password).

Example:

SHD|3.0|T00000000099999|S00000000000003|bda2d0fb-f3d2-4d6b-be58-46a2d5255dfb|20181218|23020861|PMA|TRS8804|20181217|00110102|T|03|Invalid HDR and / or TRL. File not loaded.

SDT|1||||E|118The Sender Password provided in the fileload is different than the password provided in the customer activation form.

SDT|1||||E|116|The Sender ID T00000000012345 provided in the header does not match the customer ID T00000000099999 in the activation form.

SDT|2|1|72.7.2.7272510|57919598|E|101|No valid contract for record type PMA exists.

SDT|3|2|72.7.2.7272510|6756367|E|101|No valid contract for record type PNM exists.

STR|2|2|0|4

Detail Information Patient File – File Loaded with Error

Patient File Load

In the Patient File Load example below, record #2 did not include the birthdate column, which is a required field. The data in the error has been color-coded as follows:

Record 2 is missing the Date of Birth

Example:

HDR|3.0|T00000000012345|PASSWORD|S00000000000003|TRS8804|20181217|00110102|PMA|U|20181217|T|HIGHRISK||

PMA|1|72.7.2.7272510|57919598|Austin|Steve||MR||1152 Winding LN||Trinidad|NJ|07101|20021103|M|199999999|20180908|

PNM|2|72.7.2.7272510|6756367|Crandall|Max||MR||382 115th Road SE||Comal|SC|29929||M|199999999|20180908|

TRL|2

Patient Response File

The Patient Response File example below shows an example of an error that will be sent in response to a Patient File Load that did not include a required field (e.g., Date of Birth).

Example:

SHD|3.0|T00000000012345|S00000000000003|8cb0906a-330d-4bc2-83b4-0459ae87bb46|20181217|09030947|PMA|TRS8804|20181217|00110102|T|02|File loaded with errors.

SDT|3|2|72.7.2.7272510|6756367|E|107|Required column birthDate missing.

STR|2|1|1|1

Detail Information Patient File – Multiple Errors

Patient File Load

The Patient File Load example below contains multiple errors in the Detail Information Patient File.

The errors have been color-coded as follows:

- **Record 1 has an invalid NPI**
- **Record 2 is missing the NPI**
- **Record 3 has an invalid end monitoring date**
- **Record 4 has an invalid name character count**
- **Record 5 is missing the Patient Id**

Example:

HDR|3.0|T00000000012345|PASSWORD|S00000000000003|TRS8804|20181217|00110102|PMA|U|20181217|T|HIGHRISK||12||20240101|20241231

PMA|1|72.7.2.7272510|57919598|Austin|Steve||MR||1152 Winding LN||Trinidad|NJ|07101|20021103|M|**9999999999**|20180908|PMAControlledSubstance,PMANewPrescriber

PNM|2|72.7.2.7272510|6756367|Crandall|Max||MR||382 115th Road SE||Comal|SC|29929|19521101|M||20180908|

PNM|3|72.7.2.7272510|80289003|Valdez|J|Pickle|||2590 388th LN||West Orange|AR|72944|20120316|M|1932400116|**202108254**|

PMA|4|72.7.2.7272510|75519318|Va|J|P|||2590 388th LN||West Orange|AR|72944|20120316|M|1932400116|20211899|

PMA|5|72.7.2.7272510||Rogers|Steven|||PHD|3539 Salmon Lane E||Williamson|ND|58102|19541109|M|199999999|20180908|

PMA|6|72.7.2.7272510|96067214|Flash|Dale|||MD|8896 Arthur Lane||Pleasanton|GU|96919|19540707|M|199999999|20180908|

PMA|7|72.7.2.7272510|58861323|Kelley|Carrie||||1879 Madison ST||Yorktown|PR|00601|20100301|F|199999999|20180908|

PMA|8|72.7.2.7272510|75519315|Kyle|Selina||||2048 642nd Avenue NE||Schleicher|OH|44322|19690326|F|199999999|20180908|

PMA|9|72.7.2.7272510|90718490|Scott|Allan|||II|7017 Walleye AVE||Randall|MD|21401|20020409|M|199999999|20180908|

PMA|10|72.7.2.7272510|80289001|Grayson|Dick|Robin|||5946 90th Lane NW||North Cleveland|OR|97420|20081203|M|199999999|20180908|

TRL|10

Patient Response File

The Patient Response File example below shows an example of an error that will be sent in response to a Patient File Load that contains multiple errors.

Example:

SHD|3.0|T00000000012345|S00000000000003|e61d1e43-a6c2-42e4-a7d8-36c99f7ff9bc|20181219|01022815|PMA|TRS8804|20181217|00110102|T|02|File loaded with errors.

SDT|2|1|72.7.2.7272510|57919598|E|109|Invalid NPI value: 9999999999.

SDT|3|2|72.7.2.7272510|6756367|E|107|Required column npi missing.

SDT|4|3|72.7.2.7272510|56800669|E|110|Invalid format for date field End Monitoring Date Expected: 8 digits in the CCYYMMDD format. Actual: 20210825.

SDT|5|4|72.7.2.7272510|43726207|E|127|Two of a person's names (Last Name, First Name, Middle Name) must have 2 or more characters.

SDT|6|5|72.7.2.7272510||E|107|Required column patientId missing.

STR|10|5|5|5

surescripts

7. Panel History Flat File Examples

The following flat files examples are provided in this section:

HDR (Header) Example

The following fields are used in the HDR (Header) example:

Record Type | Version | Sender ID | Sender Password | Receiver iD | Transmission Control Number | Transmission Date | Transmission Time | Transmission File Type | Field not in use | Extract Date | Usage indicator | Patient Population ID | Field not in use | Look Back Period in Months | Data Source Type | Request Start Date | Request End Date

HDR (Header) Example

```
HDR|3.0|D00000000112201|PASSWORD01|S00000000000003|UPMLDbRbwc|20241210|08544974|PMA|  |20241210|T|HighRisk|  |12|FIL|20240603|202412
```

DTL (Detail) Examples

The following fields are applicable for the examples in this section:

Detail Record Type | RecordSequenceNumber | MessageID | SentTime | Status | Note | Prescriber NPI | Prescriber Name | PatientID | Patient Last Name | Patient First Name | Patient Date of Birth | Patient Gender | Patient Postal Code | Effective Date | Expiration Date | Consent | DrugDescription | Product Code | Product Code Qualifier | Strength | Drug DB Coded | Drug DB Code Qualifier | Form Code | Form Source Code | Strength Source Code | Strength Code | DEA Schedule | QuantityDispensed | CodeListQualifier | Unit Source Code | PotencyUnitCode | DaysSupply | Directions | RefillsValue | RefillsQualifier | Substitutions | WrittenDate | LastFilledDate | SoldDate | PriorAuthQualifier | PriorAuthValue | NCPDPID | NPI | StoreName | StoreAddress line 1 | StoreAddress line 2 | City | State | Zip | PharmacyPhone | PharmacyFaxNumber | NPI | DEA | State License Number | Prescriber Last Name | PrescriberMiddleName | Prescriber First Name | PrescriberNamePrefix | PrescriberNameSuffix | Prescriber Address line 1 | Prescriber Address line 2 | City | State | Zip | PlaceLocation Qualifier | PrescriberPhone | PrescriberFax Number | History Source Qualifier | History Source Fill Number | Prescription Number | Source Description | Reference ID Value | Reference ID Qualifier | Electronic Rx Ref Number | Electronic Prescription Order Number | PatientPrimaryPhoneNumber | PlanCode | PaymentCode | BIN | PCN | GroupID | CardholderNumber | SexAssignedAtBirth | DiagnosisDetails | NDC

From Pharmacy Feed

From Pharmacy Feed

```
DTL|24|12345678:12345543:1234567603128|2020-08-22T22:00:04.361Z|Approved||1234567899|HEALTH AND HOSPITAL CORP|593431|RON|SHAN|8765
DTL|28|12345678:12345543:1234567603128|2020-08-22T22:00:04.361Z|Approved||1234567899|HEALTH AND HOSPITAL CORP|593431|RON|SHAN|8765
```

From PBM/Payer Care Feed

From Pharmacy Feed

```
DTL|1|12345678:12345543:1234567603128|2020-08-22T22:00:04.09Z|Approved||1234567899|HEALTH AND HOSPITAL CORP|12355|AMANDA|DIRP A|19
DTL|2|12345678:12345543:1234567603128|2020-08-22T22:00:04.09Z|Approved||1234567899|HEALTH AND HOSPITAL CORP|12355|AMANDA|DIRP A|19
```

Patient Not Found

Patient Not Found

```
DTL|1|3112345678:12345543:1234567603128|2020-08-22T22:00:03.191Z|Approved|Patient Not Found.|1234567899|HEALTH AND HOSPITAL CORP|1
```

Approved with Notes

Approved with Notes

```
DTL|30|12345678:12345543:1234567603128|2020-08-22T22:00:03.896Z|Approved|Although a patient record was found, no medications were
DTL|2818|14290519:14484513:1598647191736|2020-08-28T20:40:02.472Z|Approved|A processing error occurred. No medication history was
DTL|39447|14290483:14484513:1598647136790|2020-08-28T20:38:57.492Z|Approved|Patient Not Found.|1561111189|HEALTH HOLDINGS, LLC|5-1
DTL|320|14290491:14484513:1598647137743|2020-08-28T20:39:06.637Z|Approved|Not all medication history sources were accessible at th
```

Patients with More than 300 Medications

The first 300 medications of a patient will have the same MessageID and the additional medications will be in a different MessageID.

Patients with More than 300 Medications

```
DTL|300|14290489:14484513:1598647137503|2020-08-28T20:38:59.429Z|Approved||1561111189|HEALTH HOLDINGS, LLC|6-1a|Addington|Winston|
DTL|301|14290489:14484513:1598647181195|2020-08-28T20:39:42.396Z|Approved||1561111189|HEALTH HOLDINGS, LLC|6-1a|Addington|Winston|
```

TRL (Trailer) Example

The following fields are used in the TRL (Trailer) example:

Record Type | Processed Record Count | Medication Count | MedsFromPBM Count (PY) | MedsFromPharmacy Count (P2) | Patient found | SomeDrugsReturned | No Meds Available | Patient Not Found Processing Error | MoreThan300Meds

TRL (Trailer) Example

```
TRL|39455|39430|21956|17474|123|39|0|1|24|0
```

8. DTL (Detail) Record Notes

Note: The events shown in the table below will not cause an Error to be sent to the customer, but instead will return a note.

Event	Response Segment	Additional Elements	Comments
All medications found.	Approved		Successful processing, all available medications have been returned.
No errors occurred and there are no medications to return.	Approved	Note = "Although patient was found, no medications were returned from partners."	Successful processing, no medications were available.
An error occurred while processing the request but some medications were returned.	Approved	Note = "Not all medication history sources were accessible at this time."	Not all available results may be present in this report. Not all information sources were accessible at this time.
A system error occurred while processing the request and no medications were returned.	Approved	Note = "A processing error occurred. No medication history was returned."	An error occurred while processing the report. No medication history was returned. Examples of errors include, but are not limited to: • Error response • Timeout from a data source • Surescripts Internal error
An error occurred while processing the request and no medications were returned.	Approved	Note = "Although a patient record was found, no medications were available."	Not all available medications may be returned in this report.
Search at Surescripts yielded no patients.	Approved	Note = "Patient not found."	Patient is not found in the Surescripts Master Patient Index (MPI). This can result from a patient not having picked-up a medication within the last 12 months or Surescripts not having rights to the data.

9. File Load Validation and Error Code Details

Error Type Descriptions

Error Type	Description
Warning	Does not fail file or row.
Error	Fails row error it is associated with.
Fatal	Fails entire file load, nothing is processed.

Patient File Load Validations and Errors

Load Status	Type	Description
01	N/A	File loaded correctly.
02	Warning	File loaded with errors and/or warnings.
03	Fatal	Failed to load file. No data was processed.

Patient Response File Errors

Code	Type	Description	Comment
100	Warning	Record count in the trailer does not match the actual number of records in file. Actual: <recordCount> Expected: <trailerCount>.	Make sure number of rows in file matched what was reported in the trailer.
101	Fatal	No valid contracts exist. Customer is missing contract for <recordTypeCode (PNM, PMA, PAT)>.	
103	Error	Trailer Not Present.	
104	Error	Incorrect number of fields for row type <rowType>. Expected: <expectednNumber>, Actual: <actualNumber>.	**Example:** SDT|1242||||E|104|Incorrect number of columns for row type PNM. Expected: 19, Actual: 20.
105	Error	Rows exist after trailer.	
106	Error	Multiple Header rows encountered.	
107	Error	Required field <fieldName> is missing.	
108	Error	Maximum length for field <fieldName> exceeded. Maximum Length: <maximumNumber>, Actual Length: <actualNumber>.	
109	Error	Invalid NPI value: <NPI>.	
110	Error	Invalid format for [time, date] field <fieldName>. Expected: <expectedNumber> digits in the <expectedLayout> format. Actual: <actualNumber>.	Used on date/time checks. **Example:** Invalid format for date field Date of Birth Expected: 8 digits in the CCYYMMDD format. Actual: 01/15/98.
113	Error	Expected value for field <fieldName> not found. Expected: <expectednNumber>. Actual: <actualNumber>.	Transmission action and FileSchedule are both conditional, as a result the file will not fail if this does not exist. For example, receiverId must be S00000000000003.
114	Error	Incorrect length for field <fieldName>. Expected Length: <expectednNumber>, Actual Length: <acutalNumber>.	Used for NPI
115	Error	Date for field <fieldName> must be in the past. Actual Date: <date from file>.	Used for DateOfBirth validation. **Note:** This field takes the time into consideration when that field is included.
116	Error	The Sender ID <senderID> provided in the header does not match the Customer ID <userID> in the activation form.	

Code	Type	Description	Comment
117	Error	Field <fieldName> must contain ASCII characters between 32 and 126. Invalid characters found: <actual>.	The actual value <actual> will display the Unicode escaped response (U+hex: \u0020) showing the character detected. **Example:** Field State must contain ASCII characters between 32 and 126. Invalid characters found: \u0BAF\u0BBE
118	Error	The Sender Password provided in the fileload is different than the password provided in the customer activation form.	
119	Error	The notification type(s) provided <requestedNotificationTypes> are not in your list of contracted notification type(s) <validNotificationTypes>.	A list of alerts was included on the patient record, but none of them were contracted. The patient was not loaded.
122	Warning	You have specified prescription notification type for a panel-only patient. Your specified notification types of <requestedNotificationTypes> will be ignored.	
123	Error	Value provided <actual> is not in range. Must be between <min> and <max>.	**Example:** Value provided 13 is not in range. Must be between 1 and 12.
124	Error	The NPI provided is valid but the NPPES registration is missing the provider first or last name which prevents processing this row. The NPPES registry will need to be updated.	Data mapping issue. If this error appears, Contact Surescripts support with error code and description to resolve.
125	Error	The NPI provided is valid but the NPPES registration is missing the facility name which prevents processing this row. The NPPES registry will need to be updated.	Data mapping issue. If this error appears, Contact Surescripts support with error code and description to resolve.
126	Error	Field <fieldName> does not meet minimum length. Must be at least <min> characters. Actual: <actual>.	
127	Error	Two of a person's names (Last Name, First Name, Middle Name) must have 2 or more characters.	
128	Error	Field end monitoring date must be a date in the future or empty. Actual: <actual>.	
129	Fatal	The file <currentFilename> was not loaded. A file <previousFilename> with the same detail information was processed on <YYYY-MM-DD HH:MM:SS,SSS>.	Duplicate Panel File. To resolve this error, make changes to the details in the file that you are loading, change the lookback period, or wait at least 24 hours to reload it.
131	Fatal	The UNR record type is not allowed in the same file with [PMA, PAT, PNM] record types.	
132	Error	Field Postal Code must consist of 5 digits, an optional hyphen (-), and up to 4 additional digits. Actual value: <passedInZipCode>.	

Code	Type	Description	Comment
133	Error	Value for field <fieldName> must be a positive integer. Actual: <actual>.	
134	Warning	Blank row ignored on line number %s	
135	Error	RequestRangeStart must be earlier than RequestRangeEnd.	
136	Error	Date range cannot be more than %s months.	
137	Error	Invalid Phone number.	
138	Fatal	Med history health plan participant must be configured with flat file output.	
139	Fatal	Med history health plan participant must be configured with version Mhv4.	

Applicable Header Row Error Codes

The following table lists the possible error codes that could occur for each field.

Please be aware that over time, Surescripts may continue to modify, add, or remove applicable field error code listings. As error information is updated, the table below is subject to change, and this implementation guide will be revised to provide all of the necessary details for displaying accurate error information within a timely manner.

> **Note:** All header errors are fatal and will fail the entire file load.

Field #	Field Name	Possible Error Code(s)
0	Record Type	113
1	Version	113 117
2	Sender ID	114 116 117 118
3	Sender Password	114 117 118
4	Receiver ID	113 114 117
5	Transmission Control Number	107 108 117
6	Transmission Date	107 110 117
7	Transmission Time	107 110 117
8	Transmission File Type	N/A
9	Transmission Action	113 117
10	Extract Date	107 110 117
11	Usage Indicator	113 117
12	Patient Population ID	107 108 117
13	File Schedule	108 113 117
14	Look Back Period in Months	117 123

Applicable Enrollment Detail Row Error Codes

The following table lists the possible error codes that could occur for each field.

Please be aware that over time, Surescripts may continue to modify, add, or remove applicable field error code listings. As error information is updated, the table below is subject to change, and this implementation guide will be revised to provide all of the necessary details for displaying accurate error information within a timely manner.

Field #	Field Name	Possible Error Code(s)
0	Record Type	101 113
1	Record Sequence Number	107 108 117 133
2	Assigning Authority	107 108 117
3	Patient ID	107 108 117
4	Last Name	107 108 117 127
5	First Name	107 108 117 127
6	Middle Name	108 117 127
7	Prefix	108 117
8	Suffix	108 117
9	Address Line 1	108 117
10	Address Line 2	108 117
11	City Name	108 117 126
12	State	117 118
13	Postal Code	107 117 132

Field #	Field Name	Possible Error Code(s)
14	Date of Birth	107 110 115 117
15	Gender	113 117
16	NPI	107 109 114 117 124 125
17	End Monitoring Date	110 128
18	Notification Requested for This Patient	108 119 122

Applicable Unenrollment Detail Row Error Codes

The following table lists the possible error codes that could occur for each field.

Please be aware that over time, Surescripts may continue to modify, add, or remove applicable field error code listings. As error information is updated, the table below is subject to change, and this implementation guide will be revised to provide all of the necessary details for displaying accurate error information within a timely manner.

Field #	Field Name	Possible Error Code(s)
0	Record Type	113
1	Record Sequence Number	N/A
2	Product	113
3	End Monitoring Date	107 128

Applicable Trailer Row Error Codes

The following table lists the possible error codes that could occur for each field.

Please be aware that over time, Surescripts may continue to modify, add, or remove applicable field error code listings. As error information is updated, the table below is subject to change, and this implementation guide will be revised to provide all of the necessary details for displaying accurate error information within a timely manner.

> **Note:** All footer errors are warnings.

Field #	Field Name	Possible Error Code(s)
0	Record Type	113
1	Total Records	100 107 129

10. Disclaimers

Guide Disclaimer

In the event that the Participant chooses to make any software changes based upon recommendations in this guide, the Participant acknowledges and agrees that Surescripts Network shall bear no responsibility or liability for the Participant's changes or any effects thereof. The Participant shall also be required to transition to the new guide at such time as said guide is published, which may involve different or additional parameters than are published in this guide.

Examples Disclaimer

Examples provided throughout this guide are not intended to be all-inclusive. This pertains to example workflows, element-specific (field) examples, or message examples. Participants should not restrict coding to the examples used herein.

When developing, this guide should be used along with additional documentation referenced and applicable customary coding standards.

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11. Document Change Log

2026-08-17

Section Title	Change Description

Process Overview	• Added a new **Patient File Load Maintenance** section describing how enrolled patients are uniquely identified using the **PatientHashID**, generated from Patient First Name, Patient Last Name, Date of Birth, Patient ID, and NPI.
	• Within **Patient File Load Maintenance** section, the following subtopics were also added:
	  ◦ **Prescription Notifications Recipient and Patient Identity**
	  ◦ **Updating a Previously Enrolled Patient**
	  ◦ **Enrolling or Adding a New Patient or Notification Recipient**
	  ◦ **Deleting a Previously Enrolled Patient**

2026-08-06

Section Title	Change Description
N/A	N/A - Developer Portal - initial release