



# **KASPER Controlled Substance Reporting Guide**

**Cabinet for Health and Family Services  
Office of Inspector General**

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## Document Purpose

One of the largest threats to patient safety in the Commonwealth of Kentucky is the misuse, abuse and diversion of controlled pharmaceutical substances. The Kentucky All Schedule Prescription Electronic Reporting System (KASPER) is Kentucky's Prescription Drug Monitoring Program. KASPER is housed in the Office of Inspector General in the Cabinet for Health and Family Services (CHFS). KASPER is intended as a tool to help health care providers identify patients at risk of a substance use disorder, and to assist authorized law enforcement and regulatory agencies with drug investigations. Kentucky statutes and regulations require the reporting to KASPER of Schedule II through V controlled substance medications administered or dispensed in Kentucky.

This guide provides information on the following:

- Kentucky statutes and regulations requiring reporting to KASPER
- Establishing a KASPER uploader account
- Data reporting guidelines and transmission methods for KASPER
- Preparing and transmitting data
- Using the web-based prescription data entry form
- Upload reports
- Error thresholds and tolerances
- Error correction requirements
- KASPER contact information

This guide should be used by all practitioners and dispensers who are required to report administered or dispensed controlled substance data to KASPER.

Kentucky Revised Statute 218A.202

(<https://apps.legislature.ky.gov/law/statutes/statute.aspx?id=46716>) and Kentucky

Administrative Regulation 902 KAR 55:110

(<https://apps.legislature.ky.gov/law/kar/902/055/110.pdf>) establish the legal requirements for reporting Schedule II through V controlled substances to CHFS.

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# 1 Registration and Reporting Requirements

## 1.1 Registration Requirements

- All dispensers licensed by the Kentucky Board of Pharmacy that possess a DEA license **must** register as KASPER data reporters.
- Practitioners who administer or dispense controlled substances **must** register as KASPER data reporters.
- Practitioners who **never** administer or dispense controlled substances are **not** required to register as KASPER data reporters.
- Veterinarians are **not** required to register or report controlled substance dispensing to KASPER.

## 1.2 Uploader Account Security

- Each individual who will upload data, either through file upload or the prescription data entry form, must obtain his or her own uploader account, and agree not to share login credentials with others.

## 1.3 Reporting Requirements

- Reporting is required for any practitioner or pharmacy that administers or dispenses a Schedule II – V controlled substance to a human patient.
- Dispensers and practitioners are required to report dispensed or administered controlled substance data no later than the close of business on the business day immediately following the dispensing or administration.
- Kentucky does not require zero reports. Reporting is only required when a controlled substance has been administered or dispensed as defined in KRS 218A.202 and 902 KAR 55:110.

## 1.4 Data Reporting Exceptions

The following are the only exceptions to the data reporting requirement:

- A drug administered directly to a patient in a hospital, a resident of a healthcare facility licensed under KRS Chapter 216B, a resident of a child-caring facility as defined by KRS 199.011, or an individual in a jail, correctional facility, or juvenile detention facility.
- A Schedule III through Schedule V controlled substance dispensed by a facility licensed by the cabinet provided that the quantity dispensed is limited to an amount adequate to treat the patient for a maximum of forty-eight (48) hours and is not dispensed by the emergency department of a hospital.
- A drug administered or dispensed to a research subject enrolled in a research protocol approved by an institutional review board that has an active federalwide assurance number from the United States Department of Health and Human Services, Office for Human Research Protections where the research involves single, double, or triple blind drug administration or is additionally covered by a certificate of confidentiality from the National Institutes of Health.

## ***1.5 Reporting Non-Compliance***

- Under KRS 218A.202, intentional failure by a dispenser to transmit data to the KASPER program as required shall be a Class B misdemeanor for the first offense, and a Class A misdemeanor for each subsequent offense.

## ***1.6 Data Reporting Waivers***

- Dispensers with a DEA license who certify that they do not dispense any controlled substances in Kentucky must register as a KASPER data reporter. However, once registered CHFS can provide a reporting waiver email. Dispensers can request a reporting waiver by contacting KASPER staff at [eKASPER.Admin@ky.gov](mailto:eKASPER.Admin@ky.gov).



## 2 Account Registration and Management

### 2.1 Creating an Uploader Account

#### 2.1.1 Creating a Kentucky Online Gateway Account

1. In your browser, go to <https://ekasperupload.chfs.ky.gov/GetStarted.aspx> to access the KASPER Data Reporting website for account registration.



Welcome to the KASPER Data Reporting website.

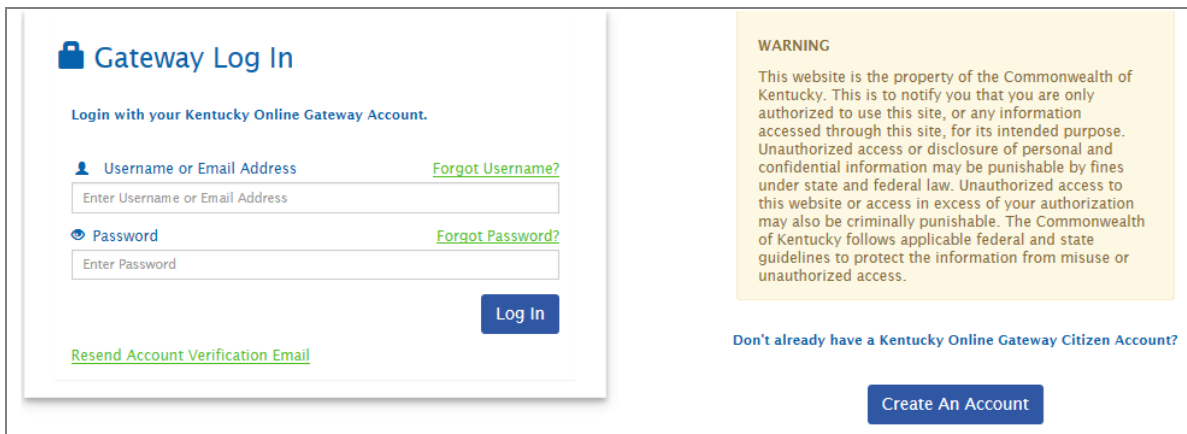
Accessing the KASPER Prescription Upload Program requires registration with a Kentucky Online Gateway account. Click the **Get Started** button below, and then:

- If you do **not** have a Kentucky Online Gateway account and need to create one, click the **Create Account** button on the right, and follow the prompts.
- If you already have a Kentucky Online Gateway account, enter your username and password on the left and click the **Log In** button to log into that account, and follow the prompts.

Afterwards, you will need to provide some additional registration information for the KASPER Prescription Upload Program.

**Get Started**

2. Click on **Get Started**, which will take you to the Kentucky Online Gateway page.



**Gateway Log In**

Login with your Kentucky Online Gateway Account.

**Username or Email Address** [Forgot Username?](#)  
Enter Username or Email Address

**Password** [Forgot Password?](#)  
Enter Password

**Log In**

[Resend Account Verification Email](#)

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[Don't already have a Kentucky Online Gateway Citizen Account?](#)

**Create An Account**

3. When you get here:
  - a. If you already have a Kentucky Online Gateway account, enter your Username and Password on the left and click **Log In**, then skip to Step 9.
  - b. If you do not already have a Kentucky Online Gateway account, click the **Create An Account** button to begin creating your Kentucky Online Gateway account.

### Please complete your Kentucky Online Gateway Profile

Please fill out the form below and click Submit when finished.  
All fields with \* are required.

* First Name	Middle Name	* Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
* Username	Mobile Phone	
<input type="text"/>	<input type="text"/>	
* Password	* Verify Password	
<input type="text"/>	<input type="text"/>	
* E-Mail Address	* Verify E-Mail Address	
<input type="text"/>	<input type="text"/>	
Street Address 1	Street Address 2	
<input type="text"/>	<input type="text"/>	
City	State	Zip Code
<input type="text"/>	Kentucky <input type="text"/>	<input type="text"/>
Language Preference		
English <input type="text"/>		
Question	Question	
In what city were you born? (Enter full name of city only) <input type="text"/>	What was your high school mascot? <input type="text"/>	
* Answer	* Answer	
<input type="text"/>	<input type="text"/>	

- Complete all required fields (marked with a \*) and any optional fields you wish to complete, then click **Submit**.

### Please complete your Kentucky Online Gateway Profile

Your account has been requested and is pending email verification. Please check your email and click on the link provided to verify your account.

[If no email was received click here.](#)

- Log in to the email account which you provided, and look for an email from Kentucky Online Gateway. The subject should include the words “Account verification”. In the email there should be a link to click on to verify your Kentucky Online Gateway account.

6. A new tab or window should open in your browser, asking you to provide the answers to the security questions you specified earlier when setting up the account. Enter the answers and click **Verify Account**.

7. Click on [Continue to Logon](#) to proceed.

8. Back on the **Gateway Log In** screen, on the left, enter the username and password that were established earlier when setting up the account, and click **Log In**.

The roles you have requested require the following credential details to complete the request. Click Next when finished.

Required Credentials

KASPER Prescription Upload Program Dispenser DEA Credential

1 Please enter a Dispenser DEA for which you will be reporting

2 Please enter the associated zip code for this DEA

**Next** ▶

- On the **New Account Registration** screen, enter the **DEA number** of any dispenser or dispensing practitioner (if you report for many, just choose one) for whom you will be reporting data, as well as the **ZIP Code** associated with that dispenser, and then click **Next**.

*Note: The ZIP code entered must match the ZIP code listed for that DEA number in the Drug Enforcement Administration database, or the system will provide an error message indicating an Invalid DEA/ZIP Code.*

Access Request For russ1 test1 ( russ1.test1 )

Confirm Request

Requested Application	Requested Role	Requested Action
KASPER Prescription Upload Program	Uploader	Add to Role

**Submit Request**

- Click on the **Submit Request** button. You will then be taken to the KASPER Prescription Upload Program to complete the registration process.

### 2.1.2 Prescription Upload Program Registration

Once your Kentucky Online Gateway account registration is complete, you must also register with the KASPER Prescription Upload Program. This is a one-time-only registration.

**Primary Reporting Contact Information**

**This is the point of contact who should receive upload reports.**

\* First Name  \* Last Name

\* Address

\* City  \* State  \* ZIP Code

\* Phone  \* Default Upload Method

\* Organization Name

\* Email

Additional Emails

Email Address	Remove
<input type="text"/>	Remove

1. Take the following steps under **Primary Reporting Contact Information**:
  - a. Complete all required fields (marked with a \*) in the **Primary Contact Information** area of the form. This contact is the person who will receive upload report notification emails, and will be the primary contact for the KASPER Team. Some fields which you already entered for the Kentucky Online Gateway account may already be filled in here.
  - b. For the **Default Upload Method**, select either *Data Entry*, *File Upload* or *Secure FTP* to set your primary reporting method. Each time you log in, the system will automatically take you to the appropriate web page for the default reporting method you select to save you time. You can always access other upload methods via the navigation menu.
  - c. The optional **Additional Emails** area allows you to provide up to 5 additional email addresses of people who will also receive upload report notifications.

**Secondary Reporting Contact Information (optional)**

First Name  Last Name

Address

ZIP Code  City  State

Phone

Email Address

2. Optionally, you may provide a **Secondary Contact**. This individual will only be contacted by the KASPER Team in the event that the primary contact is unavailable, and will

receive no notification emails (unless their email address is also included in the **Additional Emails** section above).

Request FTP Account

If you plan to report data using a secure FTP connection, then you must activate your FTP account now by clicking on 'Activate FTP Account' and providing a password.

3. If you plan to submit data files via secure FTP, then you should activate your FTP account by clicking on **Activate FTP Account**, which will change the contents of that section of the form. If you do not plan to submit via FTP, you can safely ignore this section and skip to Step 5.

Request FTP Account

If you plan to report data using a secure FTP connection, then you must activate your FTP account now by clicking on 'Activate FTP Account' and providing a password.

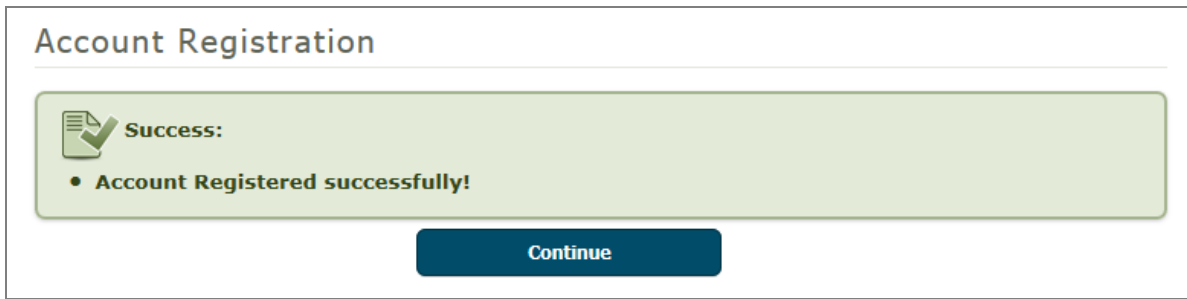
- Passwords must be at least twelve (12) characters long.
- Passwords must not contain dictionary words or be one of the last 24 passwords.
- Passwords must contain at least one upper case letter, one lower case letter, one number, and one special character (\*, &, !, ^, #, \$, %, or @).
- Password and Re-enter password must match.

Password

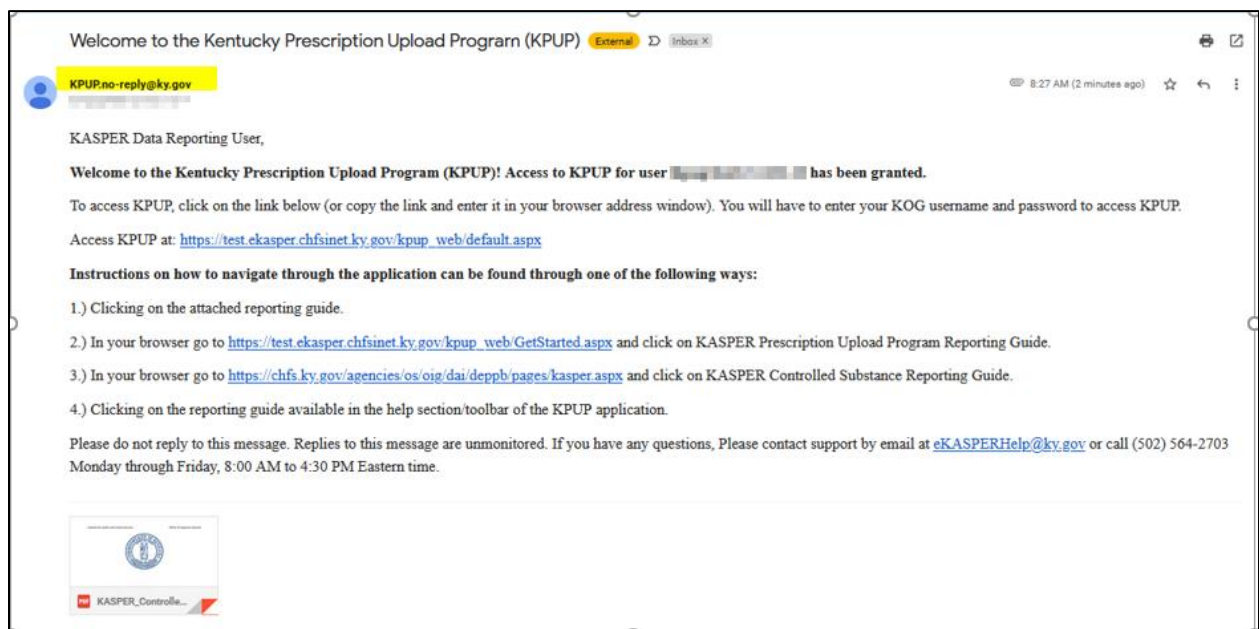
Re-enter Password

4. To complete FTP account activation, create a password and enter it in both fields. Your password *does not expire* once set, and must meet these requirements:
- a. Is at least 12 characters long
  - b. Contains at least one upper case letter, one lower case letter, one number and one special character (\*, &, !, ^, #, \$ or %)
  - c. Does not contain any dictionary words
  - d. Is different from your previous 24 passwords

5. When all required actions are completed, click **Finish**.



6. You are now registered and ready to upload prescription data to KASPER. If you activated your FTP Account, your FTP account name will also be provided here, and can also always be found later under your **Account Profile**. Click **Continue** to go to your default upload method.



7. You will now receive a welcome email from [KPUP.no-reply@ky.gov](mailto:KPUP.no-reply@ky.gov) along with an attachment of KASPER Controlled Substance Reporting Guide.

## 2.2 Login Procedure

### 2.2.1 Logging Into an Existing Account

Once you have completed registration, you can log in to upload data by following these steps.

1. In your browser, go to <https://ekasperupload.chfs.ky.gov/Default.aspx> to access the KASPER Data Reporting website. You should immediately be redirected to the Kentucky Online Gateway login page.

**Important:** Do not go to the **Get Started** page you used for registration.

**Gateway Log In**

Login with your Kentucky Online Gateway Account.

**Username or Email Address** [Forgot Username?](#)

Enter Username or Email Address

**Password** [Forgot Password?](#)

Enter Password

**Log In**

[Resend Account Verification Email](#)

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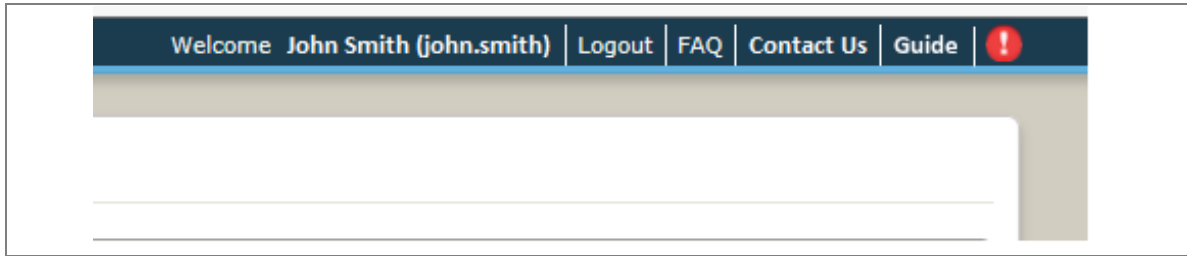
[Don't already have a Kentucky Online Gateway Citizen Account?](#)

**Create An Account**

2. On the left side, enter the Gateway account name and the password you created during registration, and click **Log In**.
3. Once authenticated, you will be taken back to the KASPER Data Reporting webpage and should arrive at either the **File Upload** screen or the **Prescription Data Entry Form** screen, depending on the preference you set during registration. If you chose *Secure FTP* as your default upload method, you will be taken to your account profile page, since FTP is a separate protocol not done through the web page. Be sure to note your FTP account name which will be displayed at the bottom of that page.



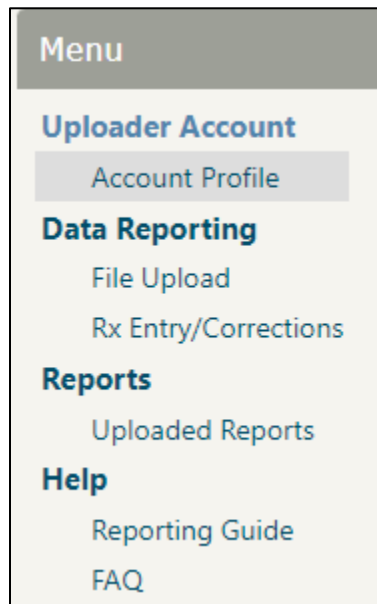
## 2.2.2 Status Toolbar



- Once logged in, you will see a toolbar in the upper right of the web page. You can use the toolbar to verify which account you are logged into, as well as log out of the system, view the FAQ, contact the KASPER Team, or get the latest version of the reporting guide (this document).
- If you see an alert icon at the right end of the toolbar, you can click it to bring up any messages from the KASPER Team which may be advising you of upcoming scheduled downtime or other system messages.

## 2.2.3 Navigation Menu

Once logged in, you will see the navigation menu on the left side of the screen. Use this to easily and quickly access any part of the KASPER Data Reporting website needed.



1. **Account Profile** will allow you to edit your account settings, such as contact information.
2. **File Upload** is where you can upload a data file for processing.
3. **Rx Entry/Corrections** is a way to report prescription data by entering the data through a web page.
4. **Uploaded Reports** will allow you to search for your uploaded data files regardless of how you submitted them, and access the upload (error) reports associated with each file.
5. **Reporting Guide** provides information on how to establish an uploader account, reporting guidelines, data transmission methods, uploaded reports, etc.
6. **FAQ** provides a list of Kentucky Controlled Substance Reporting Program frequently asked questions

## 2.2.4 Forgotten Username or Password

If you forget your Kentucky Online Gateway username or password, take these steps:

1. In your browser, go to <https://ekasperupload.chfs.ky.gov/Default.aspx> to access the KASPER Data Reporting website. You should immediately be redirected to the Kentucky Online Gateway login page.

**Gateway Log In**

Login with your Kentucky Online Gateway Account.

**Username or Email Address** [Forgot Username?](#)  
Enter Username or Email Address

**Password** [Forgot Password?](#)  
Enter Password

[Resend Account Verification Email](#)

**Log In**

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[Don't already have a Kentucky Online Gateway Citizen Account?](#)

**Create An Account**

2. Click on [Forgot Username?](#) Or [Forgot Password?](#) to get help with these issues.

## 2.3 Editing Your Account Profile

1. At any time while logged in to the Data Reporting Website, click on **Account Profile** on the left navigation menu.

**Primary Reporting Contact Information**

**This is the point of contact who should receive upload reports.**

\* First Name  \* Last Name

\* Address

\* City  \* State  \* ZIP Code

\* Phone  \* Default Upload Method

\* Organization Name

\* Email

Additional Emails

Email Address	Remove
jane.smith@yahoo.com	<a href="#">Remove</a>
paul.smith@gmail.com	<a href="#">Remove</a>
<input type="text"/>	<input type="button" value="Add Email Address"/>

2. Under **Primary Reporting Contact Information**, review the information and make any changes necessary.
  - a. You can manage the **Additional Emails** section by entering a new address in the text box and clicking **Add Email Address** to add that email address to the list.
  - b. You can remove any address in the list by clicking the **Remove** link for that address.

**Secondary Reporting Contact Information (optional)**

**This is an alternate KASPER can contact if the primary contact is unavailable. The secondary contact will not receive upload reports, unless included in the additional e-mails list.**

First Name  Last Name

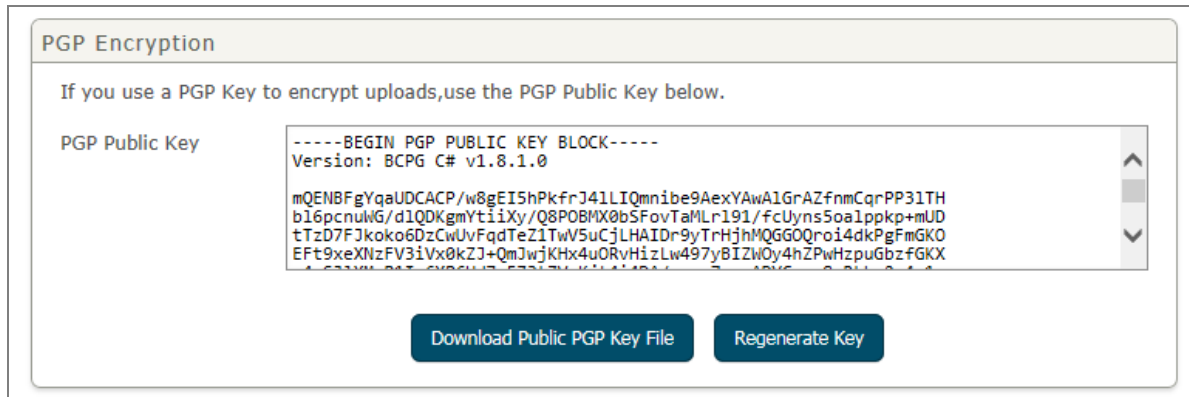
Address

City  State  ZIP Code

Phone

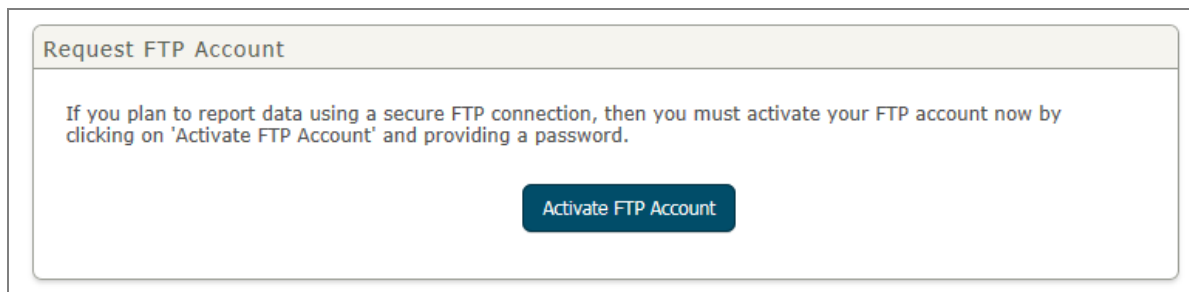
Email Address

- Under **Secondary Reporting Contact Information**, review and update any of this optional information.



The screenshot shows a form section titled "PGP Encryption". Below the title, there is a text box containing the following text: "If you use a PGP Key to encrypt uploads, use the PGP Public Key below." Below this text is a text area labeled "PGP Public Key" containing a long alphanumeric string representing a PGP public key. The string starts with "-----BEGIN PGP PUBLIC KEY BLOCK-----" and ends with "-----". Below the text area are two buttons: "Download Public PGP Key File" and "Regenerate Key".

- If you intend to encrypt uploaded data files, you will need the PGP Public Key found in this section.
  - Click **Download Public PGP Key File** to download the key file, to import into your PGP Keyring.
  - Click on **Regenerate Key** only if your key security has been compromised and you need a new one. Note that once the key is changed, all future uploads must be encrypted with the new key, or else KASPER will be unable to decrypt your files. Furthermore, any file already uploaded with the old key but not yet successfully processed by KASPER will have to be uploaded again after being encrypted with the new key.
  - For more information, see **Using OpenPGP Encryption** elsewhere in this document. If you do not encrypt your files or aren't sure what this is, you can safely ignore this section.



The screenshot shows a form section titled "Request FTP Account". Below the title, there is a text box containing the following text: "If you plan to report data using a secure FTP connection, then you must activate your FTP account now by clicking on 'Activate FTP Account' and providing a password." Below the text box is a button labeled "Activate FTP Account".

- If you have not activated your FTP account and need to do so now, click on **Activate FTP Account**, which will change the contents of that section of the form.

FTP Account

**If you plan to report data using a secure FTP connection, then you must activate your FTP account now by clicking on 'Activate FTP Account' and providing a password.**

- Passwords must be at least twelve (12) characters long.
- Passwords must not contain dictionary words or be one of the last 24 passwords.
- Passwords must contain at least one upper case letter, one lower case letter, one number, and one special character (\*, &, !, ^, #, \$, %, or @).
- Password and Re-enter password must match.

[Deactivate FTP Account](#)

FTP Account Name

Password

Re-enter Password

6. To complete FTP account activation, create a password and enter it in both fields. Your password must meet the requirements displayed on the screen.

FTP Account

**Your FTP account is active. To change your password, enter a new password in both boxes below and click Save.**

- Passwords must be at least twelve (12) characters long.
- Passwords must not contain dictionary words or be one of the last 24 passwords.
- Passwords must contain at least one upper case letter, one lower case letter, one number, and one special character (\*, &, !, ^, #, \$, %, or @).
- Password and Re-enter password must match.

[Deactivate FTP Account](#)

FTP Account Name

Password

Re-enter Password

7. If your FTP account is already active:
- a. You will see your FTP account name here. **You must use this account name and your current password to connect to the FTP server to upload files.**
  - b. If you need to change your password, enter a new one in both fields, adhering to the password complexity rules displayed on the screen, then click **Save** below.
  - c. Click on **Deactivate FTP Account** if you no longer will use FTP to upload files. Note that if you do this, you will no longer be able to log in to the FTP server.

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## 3 Data Reporting

Data can be reported by several different methods.

- A data file can be created and uploaded using either SFTP in your FTP client program, or through the **KASPER Data Reporting** website.
- Low volume reporting and record revisions can be entered using the **Prescription Data Entry Form** on the KASPER Data Reporting website.

### 3.1 Data File Upload

#### 3.1.1 Data File Format

Data files to be uploaded must observe these requirements, which have not changed from the previous implementation:

- The filename is expected to be the date of upload in YYYYMMDD format, with no spaces, and a .dat extension if unencrypted; if encrypted with your **PGP Public Key**, the file should have a .pgp or .gpg extension, depending on your encryption software.
- Multiple file uploads per day require a suffix such as “\_1”, “\_2”, etc. to distinguish the different files uploaded on that day.
- The data in the file must adhere strictly to the ASAP 4.2B data standard. Refer to Section 3.3 Required Data Elements, as well as the [ASAP 4.2B Standard](#) documentation, for full details on data structure and content.

##### 3.1.1.1 Using OpenPGP Encryption

You may encrypt the file using OpenPGP if you choose, which will help secure the file once it resides on the FTP Server.

1. To find your **PGP Public Key**, log in to the KASPER Data Reporting website and find it under your **Account Profile**.
2. Download the key file, then import the PGP public key into your PGP key ring.
3. Encrypt the file using the PGP software of your choice. The file should have a .pgp or .gpg file extension.

##### 3.1.1.2 Using ZIP File Compression

- A single .dat file may be archived in a .zip archive and given the same name as the .dat file, to reduce file size and transfer time.
- Do not put more than one data file inside a given .zip file. If you have multiple .dat files to upload, archive them individually into separate .zip files.
- PGP encryption also compresses your .dat file, so there is no reason to archive your .pgp or .gpg file into a .zip file; just upload the encrypted .pgp or .gpg file.

#### 3.1.2 File Upload Via FTPS (using SSL)

You can submit a data file via our secure FTP server. Note that unsecure FTP connections are **not** supported.

1. Prepare the file as described above.

2. Make sure you have activated your FTP account. If you did not do so during account registration, you can do so at any time on your **Account Profile** page.
3. In your FTP client, go to <ftp.ky.gov>.
  - a. If you need to use a full connection URL, use <ftps://ftp.ky.gov> since our server uses SSL.
  - b. If your FTP client requires a port, use the default FTPS port **21**.

*Note: Do **not** go to <https://ftp.ky.gov/> in a web browser, as **Prescription Upload Program** user accounts are not authorized to use that interface, and you will be unable to log in there. You must use an FTP client and the secure FTP protocol.*

4. Enter your FTP account login information to authenticate to the secure FTP server. Your FTP account name can be found on your **Account Profile** page.
5. Upload the data file.

*Important: Our FTP server may also use ports 3000-3003 for data transfer, so open those in your firewall if necessary.*

6. Log off when file upload is complete.

### 3.1.3 File Upload Via SFTP (using SSH)

Authenticating using SSH is not enabled on FTP accounts by default. If you require an SSH connection and have an SSH Public Key to provide to KASPER, then please contact the KASPER Help Desk and tell them you need to have SSH enabled and they will put you in touch with the right person.

### 3.1.4 File Upload Via Secure Website

Files may be uploaded for processing through our secure web portal.

1. Log in to the KASPER Data Reporting website as directed under Logging Into an Existing Account.
2. Select **File Upload** from the navigation menu under **Data Reporting**. You should already start there if you configured your **Default Upload Method** to *File Upload*.

#### File Upload

Note: This web portal allows you to upload a batch data file. If you need guidance on how to prepare this file for upload, or how to upload using FTP, consult the [KASPER Controlled Substance Reporting Guide](#)

File Upload

File to Upload



3. Click the **Browse** button and locate the data file (either a .dat, .pgp, .gpg or .zip file) to be uploaded on your local file system.
4. Click **Upload** to upload the file to the KASPER server.



5. You will see the above message when the upload is complete, and will receive an email message from KASPER when the upload report is available.

## ***3.2 Prescription Data Entry Form***

The **Prescription Data Entry Form** allows you to enter individual prescription records one at a time to build a small batch of records, and then submit it to KASPER. It is not intended for moderate to high volume reporting, due to its manual nature.

### **3.2.1 Form Layout**

The form itself is large and has several sections. The image below shows all sections, and indicates which ones are covered by each step below to assist you in learning how to use it.

Prescription Data Entry Form

**Dispenser Information**

\* DEA #  [Verify DEA](#) [Clear Dispenser Info](#)

Name

Address

City  State  ZIP Code

**Patient Information**

\* ID Type:  \* ID  [Clear Patient Info](#)

\* Last Name

\* First Name

\* Date Birth:    [Add Birth](#)

\* Address

\* City  \* State  \* ZIP Code

**Prescription Information**

Action Type:

\* Prescriber DEA #  [Verify DEA](#)

\* Rx #  [Add Rx](#)

\* Date Filled:  [Add Date](#) \* Date Written:  [Add Date](#)

\* Days Supply:  \* Refill #:  \* Refills Authorized:

**Controlled Substance Information**

\* NDC #  [Verify NDC](#)

\* Metric Quantity:  \* Package Units:  [Add](#)

[Add Prescription to Batch List](#)

**Batch List**

DEA	Prescribe/Rx #	Fill	Action	Edit	Remove
<a href="#">Upload All Prescriptions in Batch List</a>					

### 3.2.2 Step One: Login

Log in to the KASPER Data Reporting website as directed under Logging Into an Existing Account.

- Select **Rx Data Entry Form** under **Data Reporting** from the navigation menu. You should already start there if you configured your **Default Upload Method** to *Data Entry*.

### 3.2.3 Step Two: Enter Dispenser Information

Dispenser Information

* DEA #	<input type="text" value="AA9999999"/>		<a href="#" style="background-color: #0056b3; color: white; padding: 5px 10px; border-radius: 3px;">Clear Dispenser Info</a>
Name	<input type="text"/>		
Address	<input type="text"/>		
City	<input type="text"/>	State	<input type="text"/>
		ZIP Code	<input type="text"/>

- In the **Dispenser Information** section, enter the DEA number of the dispensing entity or practitioner and then click elsewhere or hit the Tab key. The system will look up the rest of the information and fill it in for you. Multiple address lines in the DEA record will be combined into the address value shown here.
- This is a required field; the DEA **must** be known to the system in order to proceed.
- You can click **Clear Dispenser Info** at any time to clear the section.

**Note:** The name and address information comes directly from the DEA. If any of this information is incorrect, it must be addressed and corrected with the DEA, and **not** with the KASPER team.

### 3.2.4 Step Three: Enter Patient Information

Patient Information

* ID Type	<input type="text" value="Social Security Number"/>	* ID	<input type="text"/>	<a href="#" style="background-color: #0056b3; color: white; padding: 5px 10px; border-radius: 3px;">Clear Patient Info</a>
* Last Name	<input type="text"/>			
* First Name	<input type="text"/>		Middle (or M.I.)	<input type="text"/>
* Date Birth	<input type="text" value="MM/DD/YYYY"/>		* Gender	<input type="text" value="Select One"/>
* Address	<input type="text"/>			
* City	<input type="text"/>	* State	<input type="text" value="KY"/>	* ZIP Code
			<input type="text" value="99999"/>	

- In the **Patient Information** section, complete all fields for the patient who received the prescription.

**Note:** The **Middle (or M.I.)** field may be left blank if the middle name or initial is unknown, or the patient has no middle name.

- For the **ID** field, enter the patient's Social Security Number (SSN).
  - If the patient does not have a **SSN**, change the **ID Type** dropdown to *Driver's License Number* and enter a valid driver's license number for the **ID** instead.
  - If the patient does not have a SSN or driver's license, enter 000000000 (nine zeroes) for the **SSN**.

*Note: Kentucky regulation 902 KAR 55:110 Section 5 requires that a patient disclose their SSN to the dispenser for purposes of reporting to KASPER. Only if the patient does not have a SSN may a driver's license or zeros be reported.*

- You can click **Clear Patient Info** at any time to clear the section.



### 3.2.5 Step Four: Enter Prescription Information

Prescription Information - New/Revise/Void

\* Record Type  Choose an action type of New/Revise/Void

\* Prescriber DEA #

\* Rx #  \* Payment Type

\* Date Filled   \* Date Written  

\* Days Supply  \* Refill #  \* Refills Authorized

\* Partial Fill Indicator

\* Transmission Form of Rx Origin Code

Electronic Prescription Reference Number

Electronic Prescription Order Number

- Use the **Record Type** to indicate whether the prescription is a new record, a revision to an existing record, or an existing record which you wish to void.
- Date Filled** and **Date Written** must be later than the patient's date of birth.
- Enter the **Prescriber DEA** number and then click elsewhere or hit the Tab key. The system will attempt to look up the name of the prescriber and display it besides the DEA. This helps you to be sure you've entered the DEA number correctly.

*Note: The prescriber name comes directly from the DEA. If it is incorrect, it must be addressed and corrected with the DEA, and **not** with the KASPER team.*

***IMPORTANT:** Do not submit a DEA number beginning with 'X', also known as a data waiver DEA number. These numbers will be rejected by the system. You must provide a standard DEA number for the prescriber.*

- Use the **Partial Fill Indicator** to indicate whether the prescription is a partial fill or not, **00** indicates not a partial fill and **01-99** when it is a partial fill.
- Transmission form of Rx origin code** indicates how the pharmacy received the prescription, make a selection from the list of options defined in the dropdown.
- Complete the rest of the required information about the prescription.

### 3.2.6 Step Five: Enter Controlled Substance Information

For each prescription, choose either the *Controlled Substance* or the *Compounded Controlled Substance* tab, depending on whether or not the prescription is compounded. The *Instructions* tab has a summary of the instructions found here for easy reference.

#### 3.2.6.1 NDC Number Formatting

Records **must** be submitted using the correct 11-digit National Drug Code (NDC) number. The actual 11 digit NDC number includes three segments in a 5-4-2 format: 99999-9999-99. Some drugs may show a 10-digit Health Related Item (HRI) code or Universal Product Code. Converting a 10-digit code to the correct 11-digit NDC format may require including a leading zero in one of the segments. The following table provides examples for converting a 10 digit NDC code to the 11-digit code based on the placement of the leading zero in the proper segment.

*Note: The hyphens are shown below only to illustrate the segment format examples. Do not use hyphens when entering the NDC Number in the Data Entry Form.*

	10 Digit Format on Product	10 Digit Format Example	Correct 11 Digit NDC Format	Correct 11 Digit Format Showing Insertion of Leading Zero
<b>NDC Format on Product</b>				
	4-4-2	9999-9999-99	5-4-2	09999-9999-99
	5-3-2	99999-999-99	5-4-2	99999-0999-99
	5-4-1	99999-9999-9	5-4-2	99999-9999-09
<b>HRI Format on Product</b>				
	4-6	9999-999999	5-4-2	09999-9999-99
	5-5	99999-99999	5-4-2	99999-0999-99
<b>UPC Format on Product</b>				
	5-5	99999-99999	5-4-2	99999-0999-99

An even more thorough **NDC Information Sheet** is available [here](#).

#### 3.2.6.2 Non-compounded Prescriptions

For typical prescriptions which are not compounded, use this tab to report the controlled substance ingredient in the prescription.

Controlled Substance
Compounded Controlled Substance
Instructions

\* NDC #

\* Metric Quantity

\* Dosage Units

- Enter the NDC number and click elsewhere, or hit the Tab key. The system will attempt to look up the name of the drug and add it to the right of the NDC number. This helps you to be sure you've entered the NDC number correctly.

**Note:** If you feel there is a problem with the displayed drug name, please contact KASPER Program Support.

- Provide the **Metric Quantity**, then select the applicable **Drug Dosage Units**.

### 3.2.6.3 Compounded Prescriptions

Use this tab for compounded prescriptions **only**. Also, you only need to report here those ingredients in the compound **which are controlled substances**.

Controlled Substance
Compounded Controlled Substance
Instructions

Use this form only if this Rx has been compounded and contains one or more controlled substances. Enter data only for the controlled substance component(s) of the compound drug.

\* NDC #

\* Metric Quantity

\* Dosage Units

**Ingredient List**

NDC #	DrugName	Metric Qty	Dosage Units	Remove
59011041510	OXYCONTIN	20.0	Each	<a href="#" style="color: blue; text-decoration: underline;">Remove</a>

- Add all **reportable** ingredients to the list by following the steps below. Ingredients which are not controlled (i.e. not required to be reported) should not be added.
- Enter the **NDC Number** and **Metric Quantity**, then select the applicable **Dosage Units**.
- Click **Add Ingredient** to add that ingredient to the table. The *Drug Name* is looked up automatically based on the NDC you provide.

**Note:** If you feel there is a problem with the displayed drug name, please contact KASPER Program Support.

- You can click [Remove](#) to remove that ingredient from the table.

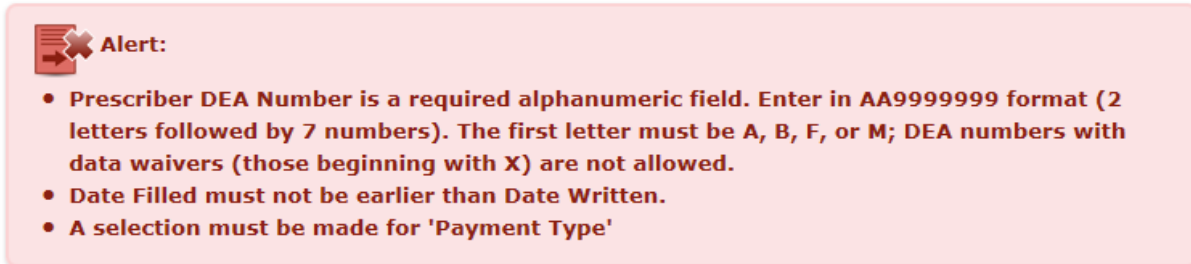
### 3.2.6.4 Add Prescription To Batch List

- When each prescription's information is complete, click **Add Prescription To Batch List** to add it to the list.
- Use the **Clear Dispenser Info** and **Clear Patient Info** buttons in the first two sections as needed when you switch to different dispensers and patients.

- Repeat the process to construct a full list of all prescriptions to be reported.

### 3.2.6.5 Validation Error Messages

Whenever you click **Add Prescription To Batch List**, the system will validate all of the values you have entered. If you make any errors filling out the form, those errors will usually be listed in a red box at the top of the page (some appear embedded in the form in yellow boxes; see the next section). An example:

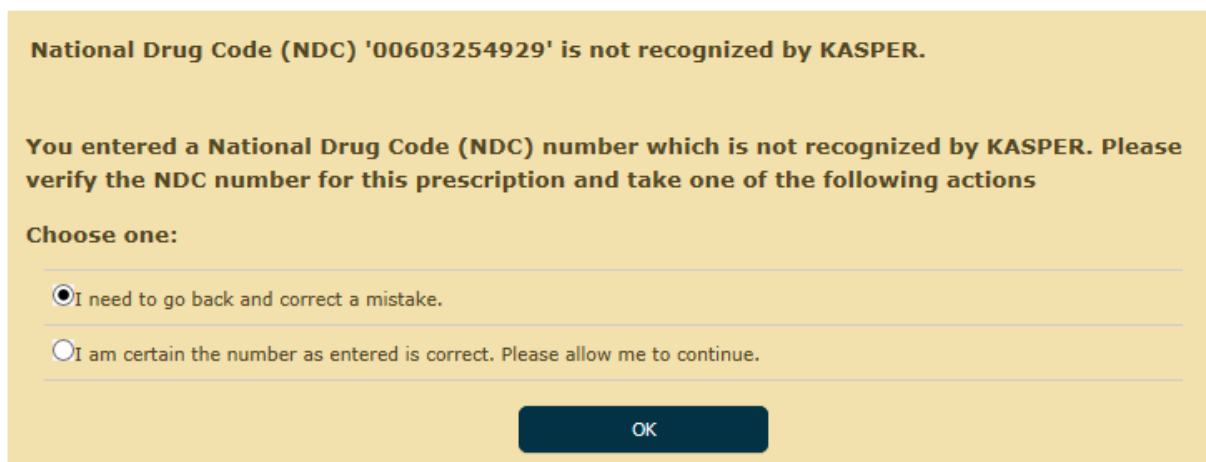


**Alert:**

- **Prescriber DEA Number is a required alphanumeric field. Enter in AA99999999 format (2 letters followed by 7 numbers). The first letter must be A, B, F, or M; DEA numbers with data waivers (those beginning with X) are not allowed.**
- **Date Filled must not be earlier than Date Written.**
- **A selection must be made for 'Payment Type'**

### 3.2.6.6 Other Error Messages

Depending on the data you enter and records which already exist in the system, there may be conflicts which alert you to errors in the data you entered, or require you to clarify your intentions. Below are some of the error messages which you may encounter when trying to **Add Prescription To Batch List**, and how to act on them.



**National Drug Code (NDC) '00603254929' is not recognized by KASPER.**

**You entered a National Drug Code (NDC) number which is not recognized by KASPER. Please verify the NDC number for this prescription and take one of the following actions**

**Choose one:**

I need to go back and correct a mistake.

I am certain the number as entered is correct. Please allow me to continue.

**OK**

- If you enter an NDC number for a controlled substance which KASPER does not recognize, you will see this message.
- Double check the number you entered and make certain it is a valid NDC number. If you made a mistake, select the first option and click **OK** to return to the form and edit the NDC value. If you are certain it is valid, select the second option and click **OK**, and the NDC value will be accepted as entered.

**Prescriber DEA # Not Found. Please enter 2 letters followed by 7 numbers (AA9999999). The first letter must be A, B, F, or M; DEA numbers with data waivers (those beginning with X) are not allowed.**

**You entered a Prescriber DEA number which is not recognized by KASPER.**

**Please verify the Prescriber DEA number for this prescription and take one of the following actions**

**Choose one:**

I need to go back and correct a mistake.

I am certain the number as entered is correct. Please allow me to continue.

**OK**

- If you enter Prescriber DEA number which KASPER does not recognize, you will see this message.

*Note: This applies only to prescriber DEA numbers; dispenser DEA numbers must be known to KASPER.*

- Double check the number you entered and make certain it is the correct DEA number. If you made a mistake, select the first option and click **OK** to return to the form and edit the DEA value. If you are certain it is valid, select the second option and click **OK**, and the DEA value will be accepted as entered.

**Duplicate Record!**

**You selected a Reporting Status of New Record but a record already exists which matches the data you supplied:**

Patient	SSN	DOB	Dispenser DEA	Prescriber DEA
Roger Smith	402569873	12/22/1949	BC8802426	AA2695522

Rx #	NDC	Date Filled	Date Written	Qty	Days
D443535	59011041510	09/01/2016	8/15/2016	1	30

**Choose one:**

I need to go back and correct a mistake.

I am submitting a revision to the existing record.

I want to void the existing record.

**OK**



- If you select **New Record** but enter information all of which matches an existing record, you will see this message.
- If the conflict was caused due to entering erroneous information, select the first option and click **OK** to return to the form and make corrections.
- If you intended to *revise* the existing record but simply forgot to select *Revise Record* for the **Action Type**, then select the second option and click **OK**, and that change will be made automatically and the record added to the **Batch List** as a *Revise Record* action.
- If you intended to *void* the existing record but simply forgot to select *Void Record* for the **Action Type**, then select the third option and click **OK**, and that change will be made automatically and the record added to the **Batch List** as a *Void Record* action.

**Record Not Found!**

You selected a Reporting Status of Void but no record exists which matches the data you supplied:

Patient	SSN	DOB	Dispenser DEA	Prescriber DEA
Roger Smith	402569873	12/22/1949	BC8802426	AA2695522

Rx #	NDC	Date Filled	Date Written	Qty	Days
D443535	00603254928	09/01/2016	8/15/2016	1	30

**Choose one:**

I need to go back and correct a mistake.

I am sure the data entered is correct. Please add it to the list and attempt to process this void record. I understand that if any data is incorrect, I will not be notified of the failed void.

**OK**

- If you select *Void Record* but the information fail to match an existing record, you will see this message.
- If the issue was caused due to entering erroneous information, select the first option and click **OK** to return to the form and make corrections.
- If you intended to submit a new record but mistakenly selected *Void Record* for the **Action Type**, then select the second option and click **OK**, and that change will be made automatically and the record added to the **Batch List** as a *New Record* action.

### 3.2.7 Step Six: Review the Batch List and Upload the Data

Batch List

Prescription Information	Edit	Remove
<b>Patient:</b> Roger Smith	<a href="#">Edit</a>	<a href="#">Remove</a>
<b>RxNum:</b> D443535 <b>Date Written:</b> 08/15/2016 <b>Date Filled:</b> 09/01/2016		
<b>DEA #:</b> BC8802426 <b>Prescriber:</b> BETTY AUSTIN		
<b>Drug:</b> OXYCONTIN <b>Reporting Status:</b> New		
<b>Quantity:</b> 1 <b>Units:</b> Each <b>Days Supply:</b> 30		
<b>Patient:</b> Roger Smith	<a href="#">Edit</a>	<a href="#">Remove</a>
<b>RxNum:</b> D443535 <b>Date Written:</b> 08/15/2016 <b>Date Filled:</b> 09/01/2016		
<b>DEA #:</b> BC8802426 <b>Prescriber:</b> BETTY AUSTIN		
<b>Drug:</b> BUTALBITAL CPD/CODEINE <b>Reporting Status:</b> New		
<b>Quantity:</b> 5 <b>Units:</b> Each <b>Days Supply:</b> 30		

Upload All Prescriptions In Batch List

- Each time you click **Add Prescription To Batch List**, if there are no errors on the form, a new prescription record is added to the **Batch List** table at the bottom of the form. The details of that prescription depend on whether the **Controlled Substance** or **Compounded Controlled Substance** tab is selected when you click **Add Prescription To Batch List**.
- If you click [Edit](#) on any prescription in the table:
  - The form values (in all sections, including **Dispenser Information** and **Patient Information**) are populated with that row's data, and the **Add Prescription To Batch List** button is replaced with **Save** and **Cancel** buttons.
  - Make any needed changes to the prescription, then click **Save** to save the changes.
  - Click on **Cancel** if you change your mind and do not need to make any changes.
- You can click [Remove](#) on any prescription in the **Batch List** to remove it from the list.

**Note: The removal process cannot be undone!**

- When all the prescription records you need to report are in the Batch List, click on **Upload All Prescriptions In Batch List** to upload the data to KASPER for processing. The system will inform you of the success or failure of the upload.

**IMPORTANT! The records in the batch list are not sent to KASPER until you click on Upload All Prescriptions In Batch List!**

### 3.3 Required Data Elements

All submitted data must adhere to the ASAP 4.2B Standard, and also include any additional Kentucky-required values listed in the table below, which lists the complete set of required values.

Complete information on the ASAP 4.2B Standard for prescription monitoring programs is available directly from the American Society for Automation in Pharmacy, at <http://www.asapnet.org/pmp-implementation-guides.html>, in the *Implementation Guide ASAP Standard for Prescription Monitoring Programs*.

#### 3.3.1 Data Element Table

ASAP 4.2B Element ID	Name	Usage	Specifications
TH01	Version/Release Number	Required	Always populate with "4.2"
TH02	Transaction Control Number	Required	Unique transaction identifier
TH05	Creation Date	Required	Formatting = CCYYMMDD
TH06	Creation Time	Required	Formatting = HHMMSS, HHMM
TH07	File Type	Required	<ul style="list-style-type: none"> <li>▪ P = Production</li> <li>▪ T = Test</li> </ul>
TH09	Segment Terminator Character	Required	Any allowed terminator character (see the ASAP 4.2B specification), although most commonly, the tilde ~ is used. Indicates to the system that this segment has ended. This character must also be used to terminate every subsequent segment.
IS01	Unique Info Source ID	Required	Always populate with "KY"
IS02	Info Receiver Entity Name	Required	Always populate with "PMP Program"
PHA01	Pharmacy NPI	Situational	Used if supplied, but not required.
PHA02	NCPDP Provider ID	Situational	Used if supplied, but not required.
PHA03	Pharmacy DEA#	Required	Required as the Pharmacy ID.
PAT01	ID Qualifier of Patient Identifier	Situational	Used if supplied but not required. Identifies the jurisdiction of ID used in PAT03

ASAP 4.2B Element ID	Name	Usage	Specifications
PAT02	Patient ID Qualifier	Required	Qualifies ID type used in PAT03. The only allowable values for Kentucky are 06 or 07. <ul style="list-style-type: none"> <li>▪ 06 = Driver’s License</li> <li>▪ 07 = Social Security</li> </ul>
PAT03	Patient ID	Required	ID as specified in PAT02. SSN is required if present and <b>must be reported as nine numeric digits</b> . If an adult patient has not been assigned an SSN, driver’s license number may be used. If patient does not have SSN or DL, an SSN of all zeros must be used.
PAT07	Patient Last Name	Required	Cannot be blank.
PAT08	Patient First Name	Required	Cannot be blank.
PAT09	Patient Middle Name	Situational	Used if supplied, but not required.
PAT10	Prefix	Situational	Used if supplied, but not required.
PAT11	Suffix	Situational	Used if supplied, but not required.
PAT12	Patient Address 1	Required	Cannot be blank. <b>Note:</b> This should <i>not</i> be a P.O. Box – must be physical address.
PAT13	Patient Address 2	Situational	Used if supplied, but not required.
PAT14	City	Required	Cannot be blank.
PAT15	State	Required	Cannot be blank. Two character postal code.
PAT16	ZIP Code	Required	Cannot be blank. 5 or 9 digit patient ZIP
PAT17	Phone	Situational	Used if supplied, but not required.
PAT18	DOB	Required	CCYYMMDD format. Cannot be future and must not be before 1900.
PAT19	Gender	Required	<ul style="list-style-type: none"> <li>▪ M = Male</li> <li>▪ F = Female</li> <li>▪ U = Unknown</li> </ul>
PAT22	Country of Non-U.S. Resident	Situational	Used to identify a patient’s country of origin, in case where address is foreign and PAT12-PAT16 are therefore blank.

ASAP 4.2B Element ID	Name	Usage	Specifications
DSP01	Reporting Status	Required	Specifies whether the record is new, revised, or void. <ul style="list-style-type: none"> <li>▪ 00 = New Record</li> <li>▪ 01 = Revised Record</li> <li>▪ 02 = Void</li> </ul>
DSP02	Prescription Number	Required	RX Number
DSP03	Date Written	Required	CCYYMMDD, must be later than Patient DOB (PAT18)
DSP04	Refills Authorized	Required	# of refills authorized
DSP05	Date Filled	Required	CCYYMMDD, must be later than Patient DOB (PAT18)
DSP06	Refill Number	Required	0 = first fill    01-99 = refills
DSP07	Product ID Qualifier	Required	<ul style="list-style-type: none"> <li>▪ Use 01 to indicate State required NDC</li> <li>▪ Use 06 to indicate compound that will be identified with CDI fields</li> </ul>
DSP08	Product ID	Required	NDC with leading zeros and no dashes
DSP09	Quantity Dispensed	Required	Metric units dispensed, in metric decimal format
DSP10	Days Supply	Required	Estimation
DSP12	Transmission Form of Rx Origin Code	Required	Code indicating how the pharmacy received the prescription
DSP13	Partial Fill Indicator	Required	<p>This field is used to identify when the quantity in DSP09 is less than the metric quantity per dispensing authorized by the prescriber. This dispensing activity is often referred to as a split fill.</p> <ul style="list-style-type: none"> <li>▪ 00 Not a Partial Fill</li> <li>▪ 01 First Partial Fill</li> </ul> <p>Note: For additional fills per prescription, increment by 1. So the second partial fill would be reported as 02, up to a maximum of 99.</p>
DSP16	Classification Code for Payment Type	Required	Identifies type of payment rendered
DSP20	Electronic Prescription Reference Number	Situational	Used if supplied, but not required
DSP21	Electronic Prescription Order Number	Situational	Used if supplied, but not required

ASAP 4.2B Element ID	Name	Usage	Specifications
PRE02	Prescriber DEA Number	Required	Identifying number assigned to the prescriber by the DEA. The prescriber DEA number must begin with the letter A, B, F or M. DEA data waiver numbers starting with the letter X will be rejected. The prescriber's actual DEA number must be reported.
CDI01	Compound Drug Ingredient Sequence Number	Required if Compound	First ingredient must begin with "1" and be incremented by 1 thereafter
CDI02	Product ID Qualifier	Required if Compound	Use 01 to indicate State Required NDC
CDI03	Product ID	Required if Compound	Product NDC
CDI04	Component Ingredient Quantity	Required if Compound	Metric decimal quantity dispensed
TP01	Detail Segment Count	Required	Number of detail segments included for the pharmacy (includes PHA and TP)
TT01	Transaction Control Number	Required	Unique transaction number used in TH02
TT02	Segment Count	Required	Total segments in file in including header and trailer

## 4 Upload Reports

After a successful upload, the data file will be parsed by the KASPER system. If it meets success criteria, the data will be loaded into the KASPER system; if not, the data will be rejected and not loaded into the KASPER system.

### 4.1 Error Thresholds and Tolerances

Submitted data files will be accepted or rejected based on these criteria:

- There are two types of errors:
  - **Minor** – Incorrect data in non-vital field; record can be loaded
  - **Fatal** – Record cannot be loaded
- An individual record will be rejected if it contains a fatal error.
- As of July 2018, entire files will no longer be rejected for meeting an error threshold. All records will be loaded or rejected on an individual basis.

**Important:** Data Reporters are **required** to correct fatal errors and resubmit the records within 7 days of the initial record submission.

### 4.2 Error Correction

When correcting prescription records with errors, here are some guidelines.

- Correcting records with **fatal errors** should be the highest priority, because those specific records were not loaded into KASPER.
- Records with **minor** errors are loaded into KASPER, and should be reviewed and corrected as needed.
- When making a correction, it is important to know whether to do so via a record revision, or by voiding the old record and submitting a new one. If one of the following four fields must be changed, then **you must void the original and submit a new record**:
  - Pharmacy/Dispenser DEA Number
  - Rx Number
  - Date Filled
  - NDC Number

Otherwise, you can simply submit a revision of the existing record.

- If you use a vendor pharmacy software system, you probably must do revisions and voids using their software. Contact them if you are unsure of how to do so. If you report your own data to KASPER, you can correct records using the **Prescription Data Entry Form** detailed in Section 3.2. For error correction, you need to set the **Action Type** dropdown under **Prescription Information** to *Revise* or *Void* as needed.
- In the event that you find records that require a void or revision whose dates (written and/or filled) are older than two years plus the current year, you must [contact us](#) to temporarily enable an override to allow those records through the record validation process.

- If you repeatedly receive **Edit Code 21 or 21b (NDC Not Found)**, and you have carefully verified that the NDC is correct and valid, please [contact us](#) to report it, and in most cases we will be able to get the NDC added to our reference table within a few weeks.

### ***4.3 Upload Notifications***

Notification emails are sent to the primary contact's email address, as well as any additional email addresses listed in your account profile, but *not* to the secondary contact's email address.

After KASPER has analyzed and validated the data in your file, a notification email will be sent which provides the following information:

- The total number of records in the data
- The number of fatal and minor errors detected
- Whether or not you are responsible for correcting any issues, and the deadline for doing so

A .csv file containing all details of the upload report will be attached to all emails to allow you to easily review and address the errors. A .csv file can be imported into almost any spreadsheet program. Additionally, the full report can be viewed and downloaded in PDF format from the **Upload Reports** page (see next section).

### ***4.4 Viewing Upload Reports***

To view the report in an upload report notification email, click on the link and then sign in to the KASPER Data Reporting site if prompted. Afterwards, the report should open for you to view or save in PDF format.

You can also search for upload reports on the site using the following steps.

1. Log in to the KASPER Data Reporting website as directed under Logging Into an Existing Account.
2. Select ***Upload Reports*** from the navigation menu.



Upload Reports

**Report Search**  
 Report Id

**Advanced File Search**  
Note: Max date range is 90 days.  
 From Date  To Date    
 File Name   
 File Status

Click a Report ID to open that upload report or File Name to view data from that file

**Total Records : 4** Download as csv


Date	Report Id	File Name	Method	Status	Records	Fatal	Minor
10/31/2016	1077	20161031124828	PDEF	Pending			
10/31/2016	<a href="#">1070</a>	<a href="#">20161028131249</a>	PDEF	Accepted	1	0	0
10/26/2016	<a href="#">53</a>	<a href="#">20161024140942</a>	PDEF	Accepted	2	0	2
10/24/2016	<a href="#">26</a>	<a href="#">20161017144450</a>	PDEF	Accepted	1	0	0

3. The system will automatically display a table of all of your upload reports from the last 30 days.
  - Click on any **Report ID** link to open that report in PDF format.
  - Click on any **File Name** to open a .csv file containing the data which was parsed from your uploaded file. A .csv file can be opened by any spreadsheet program.
  - If more reports are found than will fit on one page, you will see paging tools at the bottom right which allow you to access the full set of reports. You can also click on **Download As CSV** to open a .csv file which contains your search results in a file that you can open with any spreadsheet program.
  - To look up a particular report by ID, enter the Report ID in the box at the top and then click **Search**.
  - To search for reports from other time periods, set the **From Date** and **To Date** to the start and end dates of the time period you want, and then click on **Search** to display reports from the given date range.

*Note: The maximum date range is 90 days.*

- You can also enter a specific filename or select a particular file status from the dropdown menu to further refine your search.

### 4.4.1 Sample Upload Report



## Pharmacy Data Upload Report

**Report Id : 6015**  
**File Name : 201606216028A01.dat**  
**Uploader : John Smith, M.D.**  
**Submission Date : 7/12/2018**

**Upload Report Data Summary :**

**1132 records imported on 7/12/2018**  
**13 records rejected - Corrective action required**

Total Records :	1145
Records with errors :	57 (5.0%)
Records with FATAL errors, corrective action required :	13 (1.1%)
Records with MINOR errors, corrective action requested :	46 (4.0%)
Duplicate records rejected, no action required :	0

Error Code	Error Description	Incorrect Data	Dispenser DEA	Rx Number	Severity
14z	Void not Found	924137	FF3421283	2605780	Minor
28b	Date Written Irrational	20151119	FF3421283	4613442	Fatal
14z	Void not Found	924423	FF3421283	2605631	Minor
14z	Void not Found	924425	FF3421283	4614392	Minor
21	NDC not found	41167431004	FF3421283	4614468	Minor
54	Customer Zip and State Code conflict	42155	FF3421283	4614040	Minor
54	Customer Zip and State Code conflict	42155	FF3421283	4614039	Minor
14z	Void not Found	924668	FF3421283	2605771	Minor
14z	Void not Found	924671	FF3421283	2605771	Minor
54	Customer Zip and State Code conflict	42144	FF3421283	2605849	Minor

For more details on the error codes and description , refer to the [KASPER Controlled Substance Reporting Guide](#)

### 4.5 Report Edits (Error Codes)

The following error codes are used in upload reports to report errors:

Edit	Message	Severity
01	File Format Error	Fatal

<b>Edit</b>	<b>Message</b>	<b>Severity</b>
02	Dispenser DEA Invalid	Fatal
05	Dispenser ID not found	Fatal
08	Patient ID Invalid	Fatal
08a	Patient ID Irrational	Fatal
09	DOB Invalid	Fatal
09b	DOB Irrational	Fatal
10	Gender Invalid	Minor
14z	Void not found	Minor
15	Date Filled Invalid	Fatal
15b	Date Filled Irrational	Fatal
18	Metric Quantity Invalid	Fatal
18b	Metric Quantity Irrational	Fatal
18c	Metric Quantity Irrational (compound ingredient)	Fatal
19	Days Supply Invalid	Fatal
19b	Days Supply Irrational	Fatal
20	Days Supply Extreme	Minor
21	NDC not found	Minor
21b	NDC not found (compound ingredient)	Minor
22	Product ID Qualifier Invalid	Fatal
25	Prescriber ID not found	Minor
25b	Prescriber ID Invalid	Fatal
28	Date Written Invalid	Fatal
28b	Date Written Irrational	Fatal
29	Number Refills Authorized Invalid	Minor
29b	Refill Number is invalid	Minor
31	Classification Code For Payment Type Invalid	Fatal
32	Transmission Form of Rx Origin Code Invalid	Fatal
32b	Transmission Form of Rx Origin Code Irrational	Fatal
33	Partial Fill Indicator Invalid	Fatal
33b	Partial Fill Indicator Irrational	Fatal
34	Electronic Prescription Reference Number Invalid	Fatal
35	Electronic Prescription Order Number Invalid	Fatal
50	Customer Last Name Blank	Fatal
51	Customer First Name Blank	Fatal
52	Customer Address Blank	Minor
53	Customer ZIP Code Blank	Fatal
54	Customer ZIP Code and State Conflict	Fatal
56	Customer City Blank	Minor
60	Customer State Code Blank	Fatal
61	Customer State Code Invalid	Minor

<b>Edit</b>	<b>Message</b>	<b>Severity</b>
200	Prescription Number Blank	Fatal
201	Record Reporting Status Invalid	Fatal
354	Patient ID Qualifier requires value 06 or 07	Fatal
V1	Record Already Exists	Minor

#### 4.5.1 Error Terminology

- In general, the word “Invalid” describes values which are not allowed for a given data field. For example, the field requires a numeric value, but an alphabetic value was provided instead. Generally, most invalid errors are Fatal.
- The word “Irrational” generally indicates that the value provided is out of a defined range. Some of these ranges are defined by the ASAP 4.2B Standard, and others are set by KASPER.

## **5 KASPER Prescription Upload Support Contacts**

### ***5.1 KASPER Prescription Upload Technical Support***

Contact the KASPER Help Desk:

Email address: [KPUPSupport@ky.gov](mailto:KPUPSupport@ky.gov)

### ***5.2 KASPER Program Support***

Contact the Drug Enforcement and Professional Practices Branch:

Email address: [eKASPER.Admin@ky.gov](mailto:eKASPER.Admin@ky.gov)

Phone: 502-564-7985

Address: Drug Enforcement Branch  
275 East Main Street, 5E-D  
Frankfort, KY 40621

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## 6 Glossary

<b>ASAP</b>	American Society for Automation in Pharmacy
<b>Batch</b>	A group of multiple records sent to KASPER via FTP, secure file upload or using the PDEF
<b>DEA Number</b>	The identification number assigned to a prescriber or dispenser by the Drug Enforcement Agency
<b>Dispenser</b>	Pharmacy, dispensing pharmacist, or dispensing health care practitioner which dispenses controlled substances
<b>KASPER</b>	The Kentucky All Schedule Prescription Electronic Reporting program; the name of Kentucky's Prescription Drug monitoring Program
<b>FTP</b>	File Transfer Protocol; commonly-used protocol for exchanging files over any network
<b>NDC</b>	National Drug Code; describes specific drugs by drug manufacturer and package size
<b>PDMP</b>	Prescription Drug Monitoring Program
<b>PMP</b>	Prescription Monitoring Program
<b>Prescriber</b>	A practitioner who is authorized by state and federal agencies to prescribe controlled substances
<b>Prescription Data Entry Form (PDEF)</b>	Online form for submitting small quantities of data for those without the means of reporting using data files over SFTP or SSL Upload
<b>SFTP</b>	Secure File Transfer Protocol (also referred to as "SSH File Transfer Protocol"); provides file transfer and manipulation functionality over any reliable data stream
<b>SSL</b>	Secure Sockets Layer; cryptographic protocol that provides secure communications for data transfers
<b>Uploader</b>	Someone who uploads data containing controlled substance dispensing information, either the dispenser or a third party on behalf of the dispenser