

Program

Washington State Prescription Monitoring Program

Contact

[Carly Bartz-Overman](#)

Title: Drug Systems Director

Dept: Washington State Department Of Health

Agency: Health Systems and Quality Assurance

Email: [Send an Email to Carly Bartz-Overman](#)

Phone: (360) 236-3044

<http://www.doh.wa.gov/pmp>

Collection Agency

Bamboo Health

Frequency of Reporting

Report data for schedule II, III, IV, and V controlled substances, and other required drugs identified by the pharmacy quality assurance commission under WAC 246-470-020, dispensed for more than a fourteen-day supply;

- Submit data quarterly. Data must be reported on the following schedule

Reporting Period	Report Due Date
January - March	April 10
April - June	July 10
July - September	October 10
October - December	January 10

Is Zero-Fill Reporting Required?

Yes. (Required weekly)

Required Information

Owner last Name	OwnerDI
Owner First Name	Owner DIState
Owner Address	Species Code
Owner City	Animal Name
Owner State	Patient ID
Owner Zip	NOC
Owner Country	Qty Dispensed
Owner Phone	Rx Number
Owner DOB	DOS
Owner Gender	Days Supply

*Please note that CubexPMP utilizes the NDC for all the drug information that is required by the state

**CubexPMP uses the unique transaction number as the prescription number (Rx Number)