

KASPER Tips: Interpreting KASPER Reports

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The KASPER report is a great tool for you to use to guide your patient interaction. The majority of KASPER reports are self-explanatory and easy to read. However, you may have found one that contained unusual or incomplete information that you were unsure how to interpret. Here are some common examples:

1. Numbers where the drug name should be. These numbers correspond to the National Drug Code (NDC) of the medication that was dispensed. Sometimes, the NDC submitted by the dispenser did not match a NDC in the KASPER database; for example, a brand new generic medication may not match. With no match found, the KASPER system will show the NDC number that was reported in the drug name field. In this case, you can always call the dispenser to determine what medication was dispensed to the patient and verify the information with the patient. Please note that the NDC database used by KASPER is updated often to minimize these occurrences.
2. A Drug Enforcement Administration (DEA) number where the prescriber name should be. In this instance, the prescriber's DEA number submitted by the dispenser did not match a DEA number in the KASPER system database. Our DEA number database is loaded directly from the DEA. If this is your DEA number showing in the KASPER report, please call your local DEA office to verify that your information is correct in their system. Again, you can call the dispenser to verify the prescriber of the medication and verify the information with the patient.
3. A DEA number where the pharmacy name should be. This typically happens when a physician is dispensing medication out of their office. In this case, it might be difficult to verify the information with the dispenser because you may not recognize that DEA number. However, if the prescriber is dispensing medication out of their office, the dispenser and the prescriber should be the same. You should be able to call and verify the information from the provider. As always, the patient can also verify the information.
4. I don't see the medication I prescribed to the patient. Prior to July 1, 2013, dispensers had seven days to submit their data to KASPER. This resulted in lag time in information showing up on the report. **Effective July 1, 2013, dispensing data MUST be submitted to the KASPER system by close of the next business day.** This will allow KASPER reports to show the most recent data available. You can always verify information by having the patient show their prescription bottle and call the dispenser to verify.
5. I see my prescription was filled twice; why did the dispenser do that? There is a good chance that this is simply a duplication error on the KASPER report, and that the prescription was only filled once. Before jumping to conclusions, discuss with the patient and call the dispenser to verify.

Each dispenser should be vigilant about submitting data for the KASPER program. Remember, the KASPER report is only as accurate as the information submitted. The more accurate the KASPER report, the better treatment you can provide to your patients.

KASPER staff is available to help with any questions or problems you may encounter. For support, please contact the KASPER Help Desk at eKASPERHelp@ky.gov or (502) 564-2703, or the Drug Enforcement and Professional Practices Branch at (502) 564-7985.

Next time: Controlled substance prescribing tips

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