



**Arkansas Insurance Department**

**PHARMACY BENEFITS  
MANAGERS REGULATION  
Rule 118 & Arkansas Code § 23-92-  
509(b)(2)(B)  
Reporting Data Specifications**

**Version 4.3**

**Last Edited: March 9, 2026**

## DOCUMENT CONTROL

### DOCUMENT HISTORY

Version Number	Date	Summary of Change
1.0	December 11, 2018	First release
1.1	September 9, 2019	IPD "Plan Market Type" revised to include other types.
1.2	September 10, 2019	Data model corrected to replace "TerminationFlag" with "TerminationDate". Administrative template IAD updated to include contact person for data issues.
1.3	October 17, 2019	"Pharmacy Declination Totals & Terminations" explanation reinforced – termination due to compensation issues
1.4	December 17, 2019	Changed periodicity of annual data submission to be uniform for all data submitters. In PAS template, 1) added description on how to calculate AvgDistance1 for counties with no members and 2) added column for CountyName.
1.5	November 13, 2020	Data file PDT containing both pharmacy contract termination and drug declination totals split to avoid potential confusion. New data file PCT will provide termination data separately from declination count file PDT. Henceforth, PDT data file does not have the contract termination date.
1.6	May 25, 2021	ER diagram corrected for the relationship between PCT and PLN. The prior relation incorrectly showed zero, one or <i>more</i> of PCT for each PLN. Added clarification for how to report 0 declinations for PDT and 0 terminations for PCT.
2.0	December 12, 2021	Reworked to accommodate Arkansas Code § 23-92-509(b)(2)(B). There are two changes of significance 1) Addition of data elements in the Pharmacy Access Statistics Template (specifically <i>MemberCountAccess_2</i> , <i>MemberCountAccess_5</i> & <i>MemberCountAccess_15</i> to report on number of members covered within 2, 5 & 15 miles respectively of a community retail pharmacy in the county). The Department is no longer asking for number of members within 30 miles of a pharmacy. 2) Verbiage across all templates to report only on Retail Community Pharmacies.
2.1	February 15, 2023	Additional notes added for the measures PAS06, PAS07, PAS08 & PAS09 for the Pharmacy Access Statistics Template after an issuer sought clarifications on these measures.
2.2	March 24, 2023	Issuer confusion on how to report data with multiple networks addressed. The meaning of red asterisk within templates addressed.

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3.0	Jan 6, 2025	The "Pharmacy Access Statistics" template is no longer required. The term "plan" in the "Issuer Plan Data" has been clarified.
3.1	Jan 14, 2025	Stressing on the types of pharmacy reporting prohibited
3.2	Jan 24, 2025	Added "Need Clarifications?" section to help issuers, especially those new to this process reach, out with their concerns and needs. Clarifications added in the "Data files required" section on role of issuers versus PBMs in this data submission. Added language in PREFACE to stress that this document only addresses the NA component of PBM data requirements
4.0	Dec 15, 2025	Reworked to reflect the change from CSV to Excel for PBM data submissions.
4.1	Dec 30, 2025	Added information on the role of PTNP in PBM network adequacy.
4.2	Jan 6, 2026	Updated "Method of File Delivery" to reflect change from SFTP to PBM Data Upload page.
4.3	Mar 9, 2026	Added "Self-funded (ERISA) plans are exempt from filing this data" to Executive Overview.

## PREFACE

This document provides technical standards for the files to be submitted to Arkansas Insurance Department for meeting the network adequacy requirements of Rule 118 & Arkansas Code § 23-92-509(b)(2)(B). This document addresses only the network adequacy data requirements for PBM regulation.

## EXECUTIVE OVERVIEW

Insurers covered under Rule 118 & Arkansas Code § 23-92-509(b)(2)(B) which use a PBM in Arkansas within its networks must submit data specified in this document to the Arkansas Insurance Department (AID). Self-funded (ERISA) plans are exempt from filing this data. Data must be submitted annually for each network using the PBM.

For PBM Network Adequacy review, the Arkansas Insurance Department will rely exclusively on the Provider Type NPI Pool (PTNP) to determine which pharmacy NPIs qualify as community retail pharmacies for inclusion in adequacy metrics. Under 23 CAR § 137-107, the PTNP is the authoritative source of provider classification data and supersedes classification information from any other source.

Beginning with the 2026–2027 review cycle, the PTNP has been expanded to include community retail pharmacies because external datasets (including NPPES and NCPDP) frequently misclassify such providers. As a result, **only pharmacies listed in the latest finalized PTNP will be credited toward PBM network adequacy requirements**. Any pharmacy reported in the PLN dataset that is not present in the PTNP will be excluded from AID's adequacy analysis.

Issuers using PBMs are therefore expected to (1) verify the community-retail status of their pharmacies, (2) submit additions or removals during PTNP Stage 1 where appropriate, and (3) participate in Stage 2 voting consistent with PTNP governance. Inclusion in the PTNP is a prerequisite to being counted toward access metrics; failure to maintain accurate PTNP representation may result in apparent network deficiencies.

Inclusion of pharmacies that do not cater to the general public or that provide only specialty medications is strictly prohibited, as such misclassifications lead to an incorrect evaluation of network adequacy.

The data artifacts specified in this document may be updated over time depending on operational observations.

1. AID will compare data between consecutive years to look for negative shifts in pharmacy access within each network of an insurer.
  - a. AID will compare access statistics using CMS QHP Sample population file, US Census geography data and Pharmacy locations. AID has developed separate algorithms to calculate the access statistics for the different requirements of the two laws. Details on AID's methodology for

calculating Arkansas Code § 23-92-509(b)(2)(B) metrics can be accessed at this [link](#) whereas the methodology for calculating Rule 118 metrics can be obtained at the [link](#).

- b. AID will study the volume of network denials and pharmacy terminations (using the Pharmacy Declination Totals due to compensation reasons, across two dimensions – geography and time, to gauge adverse network access shifts).
2. AID may request for Pharmacy Declination Details from the concerned insurer. This may be triggered due to concerning negative shifts from the data processing described in 1) above, or repeated complaints from pharmacies on compensatory declinations, or for purposes of analysis by the Department.

This data specification document does not cover financial compensatory details between PBM, Insurer or the pharmacies. Financial compensatory details would be handled through a separate process not elaborated here.

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## RELATIONSHIP WITH THE PROVIDER TYPE NPI POOL (PTNP)

The Arkansas Insurance Department maintains the Provider Type NPI Pool (PTNP), a collaboratively governed, industry-vetted list of NPIs associated with each provider type. Historically, the PTNP has applied only to medical provider types used in CMS–CCIIO network adequacy reviews. Beginning with the 2026–2027 review cycle, pharmacies have been added to the PTNP to support the accuracy and uniformity of PBM network adequacy analysis. This ensures that pharmacy classifications used in PBM NA are based on jointly validated information rather than taxonomies or databases (e.g., NPPES, NCPDP) that may not reliably distinguish true community retail pharmacies from specialty or closed-door facilities.

For PBM Network Adequacy purposes, AID will include only those pharmacies that appear in the latest finalized PTNP. If an issuer reports 3,000 pharmacy locations in its PLN file, but only 1,300 of those NPIs are present in the current PTNP pharmacy list, AID will evaluate network adequacy using only those 1,300 pharmacies. Pharmacies not included in the PTNP will not count toward network sufficiency metrics. Issuers and PBMs should therefore review their pharmacy networks during each PTNP round and participate in the PTNP maintenance process when using PBMs, ensuring that all community retail pharmacies intended for inclusion in a network are accurately classified and represented in the PTNP.

### 1. Datasets Required.

There are a total of seven required datasets, each of which must be filed annually by applicable issuers per Rule 118 & Arkansas Code § 23-92-509(b)(2)(B).

Previously, these datasets were submitted as separate CSV files. Beginning in 2026, they are to be submitted as worksheets within a single Excel workbook (the PBM Data Submission Template). Each dataset corresponds to one worksheet tab, identified by its abbreviated ID (e.g., IAD, NID, SAR).

One dataset, “Pharmacy Declination Details” (PDD), is to be submitted only per request by the Arkansas Insurance Department (AID). The data for the PDD file is to be maintained at the issuer’s system with a record retention of 7 years.

While PBMs may help issuers prepare some of the critical data required, the issuers are expected to review and complete the data submission.

Following are the various datasets along with their abbreviated identifications.

Dataset (Worksheet)	Worksheet ID	Periodicity
Pharmacy Locations	PLN	Annual
Pharmacy Declination Totals	PDT	Annual

<b>Pharmacy Contract Terminations</b>	PCT	Annual
<b>Service Areas</b>	SAR	Annual
<b>NetworkID</b>	NID	Annual
<b>Issuer Plan Data</b>	IPD	Annual
<b>Issuer Administrative Data</b>	IAD	Annual
<b>Pharmacy Declinations Details</b>	PDD	Upon AID Request

The data specified in this document will enable the Department to gauge problems with regard to pharmacy network access over geography and time. Issuers are expected to maintain appropriate reimbursement information within their premises, should the Commissioner initiate a detailed reimbursement audit, based on findings using data specified within this document or elsewhere.

## 2. Relationship between Datasets.

This section is intended for review by a person with Data Modeling skills from the issuers side. The Entity-Relationship conceptual diagram below communicates AID's expectations of how the required datasets relate to each other.

In the PBM Data Submission Template, each dataset is represented as a separate worksheet (e.g., IAD, NID, SAR).

Note: The PAS dataset is no longer required from 2025 onwards.

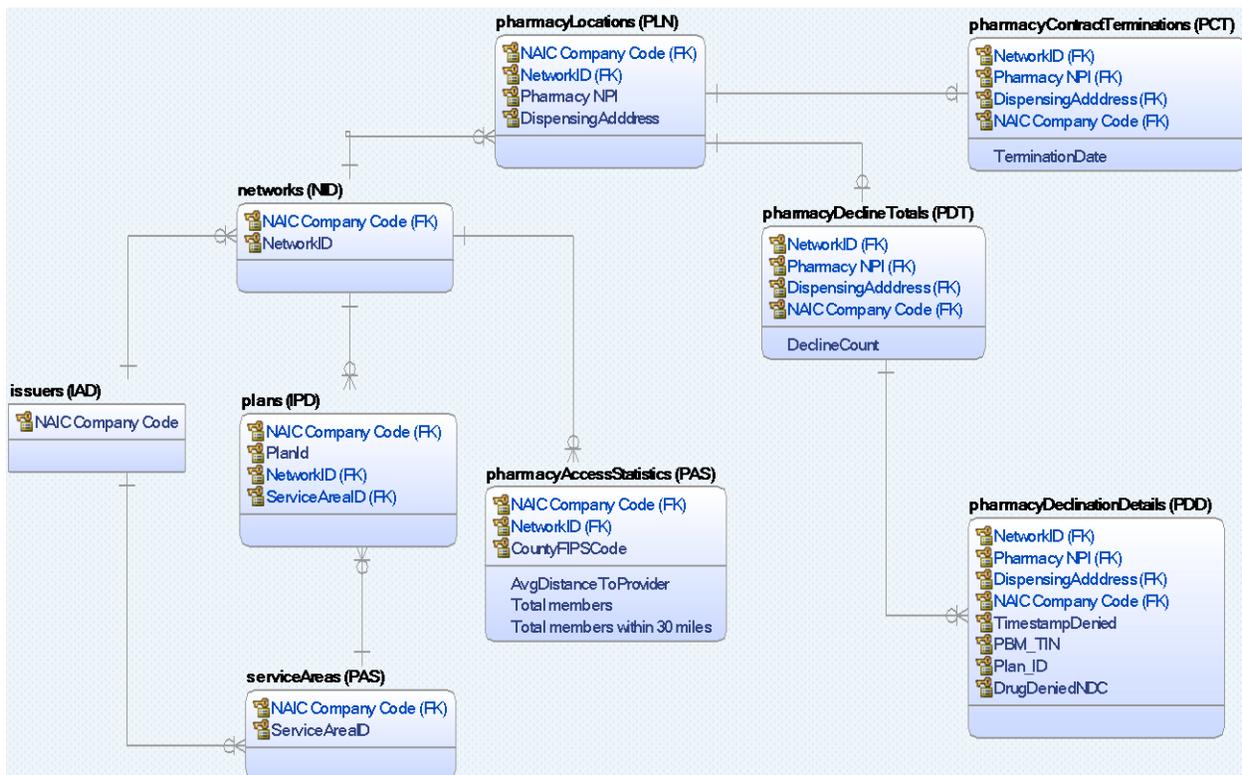


Figure 1: ER Diagram of Required Datasets (Worksheets in PBM Template)

## 3. PERIODICITY OF FILE SUBMISSION

There are two categories for periodicity of data submissions:

1. First category requires annual submission on March 1 of every year (or the next business day if March 1 is on a holiday or weekend).
2. Second category is to be submitted **only upon request by Arkansas Insurance Department** within 10 business days of request to the insurer. This dataset must

contain all data as of the day prior to the request and should include data within the period in the request. The issuer should maintain this detailed data in their internal systems for a period of 7 years.

Dataset ID	Periodicity Category
PLN	Annual
PDT	Annual
PCT	Annual
SAR	Annual
NID	Annual
IPD	Annual
IAD	Annual
PDD	Upon AID request

## 4. METHOD OF FILE DELIVERY

The issuer should use the PBM data upload page located at <https://rhld.insurance.arkansas.gov/PBMDataUpload> to deliver the completed PBM data submission template to AID.

## 5. FILE NAMING CONVENTION

The following is the naming convention for file submissions:

`<NaicCode>_<YYYY>_PBM_Data_Submission_<YYYYMMDD>.xlsm`

Table 3.0-1: File Naming Convention

Where	Means	Limit in characters
NaicCode	Company NAIC Code	5
YYYY	Year of report submission	4
YYYYMMDD	The data submission date	8
.xlsm	Extension identifying the file format: .xlsm (Excel Macro-Enabled Worksheet)	

Example: The template submitted by Qualchoice Life and Health on Tuesday, February 24, 2026 would be named

`95448_2026_PBM_Data_Submission_20260224.xlsm`

## 6. NEED CLARIFICATIONS?

If you have any questions or concerns related to the required data submission, please contact us at [NetworkAdequacy.Compliance@arkansas.gov](mailto:NetworkAdequacy.Compliance@arkansas.gov) detailing your need and with the subject-line including the words "...PBM-Network Adequacy...".

## 7. FILE SPECIFICATIONS

- 1) The PBM Data Submission Template contains one worksheet per dataset (IAD, NID, SAR, etc.).
- 2) The Issuer should use the current template each year. The year will be part of the heading on the User Control sheet. For example, data submissions in 2026 should have a User Control heading of "2026 PBM Data Submissions."
- 3) In all cases date and date/time fields must follow ISO8601 format:
  - a) Date: YYYY-MM-DD
  - b) Date/Time: YYYY-MM-DDThh:mm:ss (Local and not GMT)
- 4) Within each worksheet, a column name followed with a red asterisk means that data for that column cannot be empty for any row being reported.
- 5) If you have multiple networks, do not submit multiple templates for each network. Instead identify your different networks in the Network ID (NID) worksheet and in other worksheets, use the Network ID for rows being reported for each network.

## 1. Pharmacy Locations

**Table 1: Retail Community Pharmacy Locations Data Records (PLN)**

(One record per dispensing pharmacy location per network. **Please understand that reporting pharmacies other than community retail pharmacies is strictly prohibited with penalties for each erroneous pharmacy inclusion. For details refer to the document “Applicable Community Retail Pharmacy Taxonomic Definition” in the webpage <https://rhld.insurance.arkansas.gov/PBMRegulation>.**

If you have multiple networks, and a pharmacy is within multiple networks, repeat the row with pharmacy details for every Network ID the pharmacy belongs to. Do not report that pharmacy in one row with multiple Network IDs in the NetworkID field separated by spaces or commas. If a pharmacy belongs to only one network for a multi-network issuer, that pharmacy should be reported in only one row with the associated Network ID.)

Data Element ID	Data Element Name	Type	Definition / Comments	Permitted Values
PLN02	National Provider Identifier (NPI)	String	The NPI for the dispensing Pharmacy ( <b>Retail Community Pharmacy Only</b> ). This field should not be filled with individual pharmacists	Valid values from the NPI registry
PLN03	Facility Name	String	Any name chosen by the insurer identifying the facility	Issuer choice
PLN04	Street Address	String		
PLN05	Street Address 2	String		
PLN06	City	String		
PLN07	State	String		Two character state code. Only Arkansas and surrounding states are permitted: AR, MO, TN, MS, LA, TX, OK.
PLN08	County	String		5 character FIPS code
PLN09	ZIP	String		
PLN10	NetworkID	String	Identification of one or more network this Pharmacy is associated with	This should correspond to IDs in the NetworkID template.

## 2. Retail Pharmacy Declination Totals

**Table 1: Pharmacy Declination Totals Data Records (PDT)**  
 (Needs one record per Retail Community Pharmacy location per network having drug declination(s) due to compensation issues in the prior calendar year. If there were no declinations reported, the file should contain the header row only and otherwise be blank.)

Data Element ID	Data Element Name	Type	Definition / Comments	Permitted Values
PDT02	National Provider Identifier (NPI)	String	The NPI for the dispensing Pharmacy ( <b>Retail Community Pharmacy Only</b> ). This field should not be filled with individual pharmacists	Valid values from the NPI registry
PDT03	Facility Name	String	Any name chosen by the insurer identifying the facility	Issuer choice
PDT04	Street Address	String		
PDT05	Street Address 2	String		
PDT06	City	String		
PDT07	State	String		Two character state code. Only Arkansas and surrounding states are permitted.
PDT08	County	String		5 character FIPS code
PDT09	ZIP	String		5 Character ZIP code
PDT10	NetworkID	String	Identification of network this Pharmacy is associated with	This should correspond to IDs in the NetworkID template.
PDT11	Total Declinations Count	Integer	Total Declinations Count in prior calendar year due to compensation reasons	

## 3. Service Areas

**Table 1: Service Areas Data Records (SAR)**

**(Description of Service Areas)**

Data Element ID	Data Element Name	Type	Definition / Comments	Permitted Values
SAR02	Service Area ID	String	The identification of service area associated with one or more plans. The format is AR<nnn> where the number <nnn> is a rolling number chosen by the insurer.	Issuer choice with the prescribed format.
SAR03	Service Area Name	String	Any name chosen by the insurer identifying the service area	Issuer choice
SAR04	Entire State Flag	String	Indication whether the network serves the entire state	"Yes" or "No"
SAR05	County FIPS Code	String	Five character county FIPS code	Valid Arkansas County FIPS codes

**4. Network ID**

**Table 1: Network ID Data Records (NID)**  
**(Needs one record per unique network associated with a plan)**

Data Element ID	Data Element Name	Type	Definition / Comments	Permitted Values
NID02	Network ID	String	The identification of network associated with one or more plans. The format is ARN<nn> where the number <nn> is a rolling number chosen by the insurer.	Issuer choice. with the prescribed format.
NID03	Network Name	String	Any name the issuer wants to associate with the network.	Issuer choice. with the prescribed format.

Data Element ID	Data Element Name	Type	Definition / Comments	Permitted Values
NID04	Network URL	String	The network URL is the web address on the issuer website that consumers use to view the providers in the issuer's network associated with the specific identified network.	Urls

### 5. Issuer Plan Data

**Table 1: Issuer Plan Data Records (IPD)**

**(Description of Plans. There should be only one record per Plan. The “plan” information requested here is how CMS interprets a plan to be. It is not the insurer that many in the industry refer to as a “plan”. A plan can have only one pharmacy network associated with it.)**

Data Element ID	Data Element Name	Type	Definition / Comments	Permitted Values
IPD02	Plan ID	String	The identification of plan. Prefer HIOS Plan ID if available (without variant extensions). IF HIOS Plan ID is not available the issuer may enter any ID they use to identify their plans with a code.	Issuer choice (See comments).
IPD03	Plan Marketing Name	String	Any name chosen by the insurer identifying the Plan area	Issuer choice
IPD04	Network ID	String	Network ID associated with the Plan ID	This must match an ID in the NID file submitted
IPD05	Service Area ID	String	Service Area ID associated with the Plan ID	This must match an ID in the SAR file submitted.
IPD06	Plan Introduction Date	Date	Date plan was made (or will be made) available to consumers	Valid date in format YYYY-MM-DD

Data Element ID	Data Element Name	Type	Definition / Comments	Permitted Values
IPD07	Plan Termination Date	Date	Date last enrollee terminated after plan withdrawal from market by issuer	Blank if unavailable
IPD08	Plan Market Type	String	Whether "Individual", "Small Group", "Large Group", "PASSE", "Other"	See comments

## 6. Issuer Administrative Data

Table 1: Issuer Administrative Data Records (IAD)

Data Group ID	Data Element Name (S)	Type	Definition / Comments	Permitted Values
IAD01	Company Legal Name, Issuer Legal Name, Issuer Marketing Name	String	1. Enter the company's legal name (this may be your parent or holding company), enter the issuer's legal name and enter any marketing name (DBA or Trade Names) you use for the plans you offer.	
IAD02	TIN, NAIC Company Code, NAIC Group Code	String	The TIN and NAIC Company Code are mandatory. If your company does not have a NAIC <b>Group</b> Code, it may be left blank (Note: NAIC Company Code and Group Codes are different - all issuers should have a NAIC Company Code but may or may not have a NAIC Group Code)	
IAD03	Company Address	String	Physical location	
IAD04	Issuer Address	String	Physical location	
IAD05	CEO	String	Enter current (or acting) CEO Name with contact details	
IAD06	CFO	String	Enter current (or acting) CFO Name with contact details	

Data Group ID	Data Element Name (S)	Type	Definition / Comments	Permitted Values
IAD07	Contact for communicating data submission problems	String	If there is a problem in the data contents, AID needs a contact to communicate the issues that need correction. The issuer will need to notify AID if there is a change in this person mid-year by emailing RHLD.DataOversight@arkansas.gov	
IAD07	PBM Details	String	List details of PBMs used in issuers' networks in Arkansas including PBM's identifying TIN.	

## 7. Pharmacy Declination Details

**Table 1: Retail Community Pharmacy Declination Details Data Records (PDD)**

(There needs to be one record for every drug denial with timestamp. If there is no declination data to be reported, submit the template back empty. **Inclusion of pharmacies other than Retail Community Pharmacies is strictly prohibited because it can lead to a misleading adequacy assessment of a network. Their inclusion could lead to a non-compliant disposition, For details, refer to the document "Applicable Community Retail Pharmacy Taxonomic Definition" in the webpage <https://rhld.insurance.arkansas.gov/PBMRegulation>.)**

Data Element ID	Data Element Name	Type	Definition / Comments	Permitted Values
PDD02	National Provider Identifier (NPI)	String	The NPI for the dispensing Pharmacy ( <b>Retail Community Pharmacy Only</b> ). This field should not be filled with individual pharmacists	Valid values from the NPI registry
PDD03	Facility Name	String	Any name chosen by the insurer identifying the facility	Issuer choice
PDD04	Street Address	String		
PDD05	Street Address 2	String		
PDD06	City	String		

Data Element ID	Data Element Name	Type	Definition / Comments	Permitted Values
PDD07	State	String		Two character state code. Only Arkansas and surrounding states are permitted.
PDD08	County	String		5 character FIPS code
PDD09	ZIP	String		5 Character ZIP code
PDD10	NetworkID	String	Identification of network this Pharmacy is associated with	This should correspond to IDs in the NetworkID template.
PDD11	Issuer Plan ID	String	Plan identification associated with this denial	Valid Plan ID reported in the Issuer Plan Data
PDD12	PBM TIN	String	The Tax ID of the PBM associated with the denial	Valid Tax ID reported of the PBM associated with the network. This must match with a PBM TIN the Administrative Template
PDD13	Timestamp Denied	Date time (ISO 8601)	This is the date and time the decline was done.	Example of valid date and time: 2014-02-23T14:25:10 (Do not report as GMT)
PDD14	Drug Denied NDC	String	National Drug Code of the drug denied	
PDD15	Drug Denied RXCUI	String	RXCUI associated with the NDC (Optional)	

## 8. Pharmacy Contract Terminations

**Table 1: Pharmacy Contract Termination Data Records (PCT)**  
**(Needs one record per dispensing pharmacy location per network where contract was terminated due to compensation issues in the prior calendar year. If there were no terminations reported, the template should be returned back empty.)**

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Data Element ID	Data Element Name	Type	Definition / Comments	Permitted Values
PCT02	National Provider Identifier (NPI)	String	The NPI for the dispensing Pharmacy ( <b>Retail Community Pharmacy Only</b> ). This field should not be filled with individual pharmacists	Valid values from the NPI registry
PCT03	Facility Name	String	Any name chosen by the insurer identifying the facility	Issuer choice
PCT04	Street Address	String		
PCT05	Street Address 2	String		
PCT06	City	String		
PCT07	State	String		Two character state code. Only Arkansas and surrounding states are permitted.
PCT08	County	String		5 character FIPS code
PCT09	ZIP	String		5 Character ZIP code
PCT10	NetworkID	String	Identification of network this Pharmacy is associated with	This should correspond to IDs in the NetworkID template.
PCT11	Termination Date	Date	Date this Pharmacy terminated contract due to inadequate compensation in the prior calendar year	Blank or date in YYYY-MM-DD format