



# **OUTPATIENT PHARMACY (PSO)**

## **MANAGER'S USER MANUAL**

Version 7.0  
December 1997

(Revised February 2012)



# Revision History

Each time this manual is updated, the Title Page lists the new revised date and this page describes the changes. If the Revised Pages column lists “All,” replace the existing manual with the reissued manual. If the Revised Pages column lists individual entries (e.g., 25, 32), either update the existing manual with the Change Pages Document or print the entire new manual.

Date	Revised Pages	Patch Number	Description
02/2012	i-ii, <a href="#">iia-iiib</a> , <a href="#">v-xi</a> , <a href="#">12</a> , <a href="#">18</a> , <a href="#">30-31</a> , <a href="#">107</a> , <a href="#">126a-126b</a> , <a href="#">128</a> , <a href="#">133</a> , <a href="#">150</a> , <a href="#">150a-150n</a> , <a href="#">159</a> , <a href="#">198</a> , <a href="#">204-206</a> , <a href="#">209-211</a> , <a href="#">211a-</a> <a href="#">211b</a> , <a href="#">212-213</a> , <a href="#">213a-213b</a> , <a href="#">215-</a> <a href="#">216</a> , <a href="#">218</a> , <a href="#">218a-</a> <a href="#">218b</a> , <a href="#">219-220</a> , <a href="#">220a-220b</a> , <a href="#">221-</a> <a href="#">222</a> , <a href="#">222a-222b</a> , <a href="#">223-226</a> , <a href="#">226a-</a> <a href="#">226b</a> , <a href="#">227-229</a> , <a href="#">229a-229b</a> , <a href="#">230-</a> <a href="#">233</a> , <a href="#">234-236</a> , <a href="#">236a-236b</a> , <a href="#">237</a> , <a href="#">237a-237b</a> , <a href="#">238-</a> <a href="#">240</a> , <a href="#">242-243</a> , <a href="#">244a-244b</a> , <a href="#">245-</a> <a href="#">246</a> , <a href="#">276-277</a> , <a href="#">277a-277b</a> , <a href="#">278</a> , <a href="#">292s-292t</a> , <a href="#">293-</a> <a href="#">297</a> , <a href="#">300-301</a>	PSO*7*385	Removed incorrect listing of View Additional Reject Info (ARI) action Added new actions Submit Multiple Actions (SMA) and Suspense Date Calculation (SMA) Added new option View ePharmacy Rx (VER) Added TRICARE and CHAMPVA examples of rejects on a new order Corrected earlier formatting errors Added signature alert Corrected typos Updated Service Code values Updated changed security key names Updated name of TRICARE CHAMPVA Bypass/Override Report Updated screen shots related to patch changes Updated wording based on reviewer feedback Added CHAMPVA functionality Added separate section to list changes to security keys Updated wording for ¾ Days Supply Hold Added rounding functionality for ¾ Days Supply Hold Added CHAMPVA to Glossary (S. Spence, PM; C. Smith, Tech Writer)
02/12	i, 59, 62, 195a-195b, 248a-248b, 269, 270, 270a – 270b	PSO*7*354	Add an option to the Maintenance menu Added Site Parameter A file named PHARMACY AUTOMATED DISPENSING DEVICES added. A new multiple named OPAI added to DISPENSING SYSTEM PRINTER sub-file. (Niha Goyal, PM; John Owczarzak, Tech Writer)

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10/2011	i-ii, v-xi, 6, 9, 12, 105, 135, 137, 147, 149, 178, 205, 207-209b, 210, 212, 215-216b, 217-218b, 219-220, 223-225, 227-233b, 234-238, 240-244, 297, 299-301	PSO*7*359	Added new action View Additional Reject Info (ARI) Expanded ECME Numbers to twelve digits Updated screen shots related to patch changes Added TRICARE to Glossary Corrected typos Corrected formatting errors from 11/10 reissue (S. Spence, PM; C. Smith, Tech Writer)

09/2011	i, ii, v-xii, 85a-85f	PSO*7*382	Added information regarding the new [PSO HRC PROFILE/REFILL] option. (N. Goyal, PM; J. Owczarzak, Tech Writer)
04/2011	i v-xii 7 9 10 62 66 82 83 85  106 116 121-122ddd  132-132r 133 134a-134h 137-138 285-285b 292-292d 292e-292n  292o-292p 292q-292r 293-294  299-302	PSO*7*251	Updated Revision History Updated Table of Contents Added Order Status Add the word “prompt” New OP Hidden Action Added site parameter Added example of site parameter Added codes New example Added information regarding Intervention Menu Hidden Actions  Added blank page Added blank page Allergy/ADR Order Checks and Drug-Drug Interaction Enhancements Enhanced Order Checks Added remote order checking note CPRS Order Checks Added Intervention Menu to the screen example Incorporate dosing checks in verification process Incorporate dosing checks in verification process examples Verifying ePharmacy Orders Updated screens for Process Checks and Rx Verification CPRS Order Checks – How They Work Error Messages and Order Check Added API, DATUP, DIF, & FDB to the Glossary, and updated page numbering Updated Index to include Enhanced Drug-Drug Interactions, Duplicate Drug Order Check, Allergy/ADR Order Check Display and CPRS Order Checks, and updated page numbering (G. Tucker, PM, H. Whitney, Developer, S. Heiress and G. Scorca, Tech Writer)
11/10	All	PSO*7*358	Added information regarding TRICARE Active Duty Bypass/Override details (S. Spence, PM; G. Johnson, Tech Writer)

*(This page included for two-sided copying.)*

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<b>Action</b>	<b>Description</b>
Patient Information [PI]	Shows patient information, allergies, adverse reactions, and pending clinic appointments.
Pull Rx [PP]	Action taken to pull prescription(s) early from suspense.
Reprint [RP]	Reprints the label.
View Reject [REJ]	Allows the user to view and resolve the Refill Too Soon or Drug Utilization Review returned by the third party payer for a specific prescription/fill claim.
Unhold [UH]	Removes an order from a hold status.
Verify [VF]	Allows the pharmacist to verify an order a pharmacy technician has entered.

## Speed Actions

These Outpatient Pharmacy actions are referred to as “speed actions” and appear on the Medication Profile screen. These actions can be applied to one or more orders at a time.

<b>Action</b>	<b>Description</b>
Reprint [RP]	Reprints the label.
Renew [RN]	A continuation of a medication authorized by the provider.
Refill [RF]	A second or subsequent filling authorized by the provider.
Reprint Signature [RS]	Reprints the signature log.
Discontinue [DC]	Status used when an order was made inactive either by a new order or by the request of a physician.
Release [RL]	Action taken at the time the order is filled and ready to be given to the patient.
Pull Rx [PP]	Action taken to pull prescription(s) early from suspense.
Inpat. Profile [IP]	Action taken to view an Inpatient Profile.
CM	Action taken to manually queue to CMOP.
Fill/Rel Date Disply [RDD]	Switch between displaying the FILL DATE column and the LAST RELD column.
Display Remote [DR]	Action taken to display a patient’s remote prescriptions.

## Other Outpatient Pharmacy ListMan Actions

Action	Description
Exit [EX]	Exit processing pending orders.
AC	Accept.
BY	Bypass.
DC	Discontinue.
ED	Edit.
FN	Finish.

## Other Screen Actions

Action	Description
Edit/Enter Allergy/ADR Data [EA]	Provides access to the Adverse Reaction Tracking package to allow entry and/or edit of allergy adverse reaction data for the patient. See the Adverse Reaction Tracking package documentation for more information on allergy/ADR processing.
Detailed Allergy Display [DA]	Displays a detailed listing of the selected item from the patient's allergy/ADR list. Entry to the Edit Allergy/ADR Data action is provided with this list also.
Patient Record Update [PU]	Allows editing of patient data such as SSN, birth date, address, phone, and outpatient narrative. Patient data can also be updated using the <i>Update Patient Record</i> menu option. If implementing Other Language Modifications, either can be used to set a patient's other language preference.
New Order [NO]	Allows new orders to be entered for the patient.
Exit Patient List [EX]	Exit patient's Patient Information screen so that a new patient can be selected.



## File Retrieval

### [PSO ARCHIVE FILE RETRIEVE]

This option reads information from the HFS file and prints a summary of all prescriptions for the selected patient. This printed copy should be directed to a printer with 132-column width. It should be emphasized that the file must be copied from the long-term storage medium back onto the system and that this retrieval simply prints the information about the prescriptions. It does not restore this information to the on-line database.

### Example: File Retrieval

```
Select Archiving Option: FILE Retrieval

Host File Server Device: [Select Host File Server Device]
HOST FILE NAME: [Enter the unique name for the file.]

Output Device: [Select Print Device]

Do you want to print the file index? YES
&^NEW
OPPATIENT10,ONE%000987654^4541C,5107A,
OPPATIENT6,ONE%000135790^5269A,
OPPATIENT16,ONE%000246802^4713,
OPPATIENT17,ONE%000123456^628,629,630,631,981B,
OPPATIENT2,ONE%000234567^4778,
OPPATIENT29,ONE%000876543^916A,
OPPATIENT31,ONE%000357901^4631,
OPPATIENT11,ONE%000468024^450,
!

Enter Patient Name : OPPATIENT17,ONE    01-01-09    000123456    NO    NSC
VETERAN

THE FOLLOWING SCRIPTS WERE ARCHIVED FOR :

OPPATIENT17,ONE (000123456) - 628,629,630,631,981B,

OPPATIENT17,ONE                                ID#: 000123456    ELIG:
456 STREET                                      DOB: 08-30-1948
PHONE: 5556789
CARBON HILL
ALABAMA    32423
CANNOT USE SAFETY CAPS.
DISABILITIES:

REACTIONS: UNKNOWN
```

-----report continues-----

**Example: File Retrieval (continued)**

```

                                RX RETRIEVAL FOR OPPATIENT17,ONE
07/17/07  PAGE 1

Rx: 628  DRUG: ACETAMINOPHEN W/CODEINE 15MG TAB          TRADE NAME: QTY: 90
30 DAY SUPPLY
    SIG: T1 TAB 23D PRN
    LATEST: JUN 8,2007          # OF REFILLS: 5  REMAINING: 5  PROVIDER:
OPPROVIDER30,TWO
    ISSUED: JUN 8,2007          CLINIC: DR. ALBANY          DIVISION:
GENERAL HOSPITAL
    LOGGED: JUN 8,2007          ROUTING: Window          CLERK CODE:
OPCLERK2,FOUR
    EXPIRES:                    CAP: NON-SAFETY          STATUS:
Active
    FILLED: JUN 8,2007  PHARMACIST:          VERIFYING PHARMACIST:
LOT #:
    NEXT: JUN 28,2007          COPAY TYPE: PSO NSC RX COPAY NEWCOPAY
TRANSACTION #:
    REMARKS: New Order Created due to the editing of Rx # 479

                                RX RETRIEVAL FOR OPPATIENT17,ONE
07/17/07  PAGE 2

Rx: 629          DRUG: ACETAMINOPHEN W/CODEINE 15MG TAB          TRADE NAME:
QTY: 90          30 DAY SUPPLY
    SIG: T1 TAB 23D PRN
    LATEST: JUN 8,2007          # OF REFILLS: 5  REMAINING: 5  PROVIDER:
OPPROVIDER30,TWO
    ISSUED: JUN 8,2007          CLINIC: DR. ALBANY          DIVISION:
GENERAL HOSPITAL
    LOGGED: JUN 8,2007          ROUTING: Window          CLERK CODE:
OPCLERK2,FOUR
    EXPIRES:                    CAP: NON-SAFETY          STATUS:
Active
    FILLED: JUN 8,2007  PHARMACIST:          VERIFYING PHARMACIST:
LOT #:
    NEXT: JUN 28,2007          COPAY TYPE: PSO NSC RX COPAY NEWCOPAY
TRANSACTION #:
    REMARKS: New Order Created due to the editing of Rx # 479

=====
LABEL LOG
#      DATE          REFERENCE      PRINTED BY          COMMENT
=====
1      JUN 8,2007     ORIGINAL      OPCLERK2,FOUR      From RX number 629

```

*[This report has been abbreviated to save space.]*

The *Start Bingo Board Display* option has been changed so that the bingo board can be started without tying up a terminal or requiring the user who starts it to have multiple sign-on capability. A site parameter has been added to indicate whether a dedicated device has been reserved. If so, the user is prompted to enter the device name. If a dedicated device is set up, the user is able to automatically start or stop the board via TaskMan. The user is also prompted for a Display Group that is saved as a site parameter. This option requires working with local IRMS to complete its setup.

Use this option to start the bingo board display. If there are no prescription entries yet, the message typed in the GROUP DISPLAY will cycle. When the entries begin, the message will be displayed and held for a period of time, then pages of numbers or names will be displayed until all the names have been shown. Then the cycle starts over.



The terminal that executes the option may or may not be the display terminal.

## **Stop Bingo Board Display**

### **[PSO BINGO STOP]**

This option is used to stop the bingo board display. The bingo board can be stopped and started as often as desired. It must be stopped if any changes are made to the display group currently being used. This option can be accessed from any terminal.



When the display is stopped and “Yes” entered at the purge prompt, a second prompt displays and allows either all of the display groups or a specific display group to be selected for purging.

## **Bingo Board User (BU)**

[PSO BINGO USER]

The *Bingo Board User* menu enables use of the bingo board display. The options on this menu allow a patient's name or a number to be displayed, entered, or removed from the bingo board display located in the pharmacy area.

When the routing for an order is set to "Window", the entering of prescription orders stores information in the bingo board PATIENT NOTIFICATION (Rx READY) file. For new, renew, pull early from suspense, refill orders, barcode refill/renew, and finish process for orders entered via CPRS, the date and time is captured when the order is stored in this file. The same occurs for partials, except the time is captured when a prescription number is entered.

Releasing the prescription places the name or ticket number of the patient on the bingo board monitor if a display group exists and stores data in the WAITING TIME file. The options on this menu are used to manually enter, display, or remove a patient's name or number from the monitor.

The following options are available on the *Bingo Board User* menu:

- *Enter New Patient*
- *Display Patient's Name on Monitor*
- *Remove Patient's Name from Monitor*
- *Status of Patient's Order*

### **Enter New Patient**

[PSO BINGO NEW PATIENT]

Use this option to manually enter the name of a new patient on the bingo board. Each prescription number for the patient's order must also be entered.

A "Ticket #" prompt displays if ticket number was chosen as the method of display in the *Enter/Edit Display* option on the *Bingo Board Manager* menu. The ticket number will be entered first, and at the next prompt each of the prescription numbers for that patient will be entered.

### **Display Patient's Name on Monitor**

[PSO BINGO DISPLAY PATIENT]

Use this option to begin displaying the name or number of a patient whose prescription is ready. The message, "PRESCRIPTIONS ARE READY FOR:" appears as fixed text on the display screen. This option displays the following reminder for ECME billable prescriptions: "\*\*\*\* This Pharmacy Rx requires a patient signature! \*\*\*\*"

## Remove Patient's Name from Monitor

### [PSO BINGO DELETE PATIENT]

After the patient picks up the prescription, the name or ticket number can be removed from the display either manually or through the barcode reader. This option displays the following reminder for ECME billable prescriptions: “\*\*\* This ePharmacy Rx requires a patient signature! \*\*\*”



It is recommended that a patient's name be removed from the monitor as soon as the prescription is picked up.

## Status of Patient's Order

### [PSO BINGO STATUS]

This option enables checking of the number of prescriptions a patient has ready, the division, time in/time out, and the prescription number(s). There are four possible statuses:

Status	Description
Pending	Active order input via CPRS that is in the PENDING OUTPATIENT ORDERS file.
Being Processed	Order that is in the PATIENT NOTIFICATION (Rx READY) file, but not displayed.
Ready For Pickup	Order that is in the PATIENT NOTIFICATION (Rx READY) file and is being displayed.
Picked Up	Order that has been picked up.

### Example: Status of Patient's Order

```
Select Bingo Board User Option: Status of Patient's Order
Enter Patient Name: OPPATIENT17,ONE      08-30-48      000123456      NO      NSC
VETERAN

      OPPATIENT17,ONE has the following orders for 10/31/06

Being Processed: ***Entered on OCT 31, 2006***
  Division: GENERAL HOSPITAL      Time In: 10:27      Time Out:
  Rx #: 500416,

Pending:
  Orderable Item: ACETAMINOPHEN      Provider: OPPROVIDER24,TWO
  Entered By: OPPHARMACIST28,THREE      Time In: 10/31/06@06:46
  Drug: ACETAMINOPHEN 325MG TAB UD      Routing: MAIL

Ready For Pickup:
  Division: GENERAL HOSPITAL      Time In: 10:36      Time Out: 10:46
  Rx #: 1022731,

Enter Patient Name:
```

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## List of Patients/Prescriptions for Recall Notice

### [PSO RECALL LIST]

This report lists prescriptions containing medications associated with specific recall criteria, such as lot numbers and/or National Drug Code (NDC) numbers.

This new option has been placed under the Output Reports [PSO OUTPUTS] menu and prompts the user for the following criteria:

- *Division*
- *Prescription Release Date Range*
- *Inclusion/Exclusion of Deceased Patients*
- *Medication Identifier*

One of the following four medication identifiers may be selected:

*1-NDC code*

*2-Dispense Drug and Lot Number*

*3-Dispense Drug only*

*4-Drug Name (VA Generic or Orderable Item)*

### Example: List of Patients/Prescriptions for Recall Notice – Input

```
Division: ^ALL
From Release Date: T-90//  (OCT 30, 2009)
To Release Date: T//  (JAN 28, 2010)

Exclude Deceased Patients? YES//
  Select one of the following:

      1          NDC
      2          DISPENSE DRUG AND LOT NUMBER
      3          DISPENSE DRUG
      4          DRUG NAME (VA GENERIC OR ORDERABLE ITEM)

Select 1-4 : 4  DRUG NAME (VA GENERIC OR ORDERABLE ITEM)

VA GENERIC DRUG: PREDNISONE

Dispense Drugs
-----
1 - PREDNISONE 1MG TAB
2 - PREDNISONE 5MG TAB
3 - PREDNISONE 20MG S.T.

Enter a list or range of numbers (1-3): 1-3

VA GENERIC DRUG:

** To avoid undesired wrapping of the output data, **
** please enter '0;256;999' at the 'DEVICE:' prompt. **

DEVICE: HOME// 0;256;999  GENERIC INCOMING TELNET
```

-----example continues-----

### Example: List of Patients/Prescriptions for Recall Notice – Input (continued)

Before continuing, please set up your terminal to capture the detailed report data. On some terminals, this can be done by clicking on the 'Tools' menu above, then click on 'Capture Incoming Data' to save to Desktop. This report may take a while to run.

The output of this report is in a delimited output format suitable for export to MS Excel and includes data from original prescription fills, refills, partial fills, and Consolidated Mail Outpatient Pharmacy (CMOP) fills. The report output is sorted primarily by patient name and secondarily by prescription number.

Each fill of the prescription is printed on a separate line preceded by a "HEADER" line containing patient demographic information. Each prescription detail line starts with a double backslash followed by an identifier to denote the type of fill (ORIGINAL, REFILL, PARTIAL, or CMOP).

### Example: List of Patients/Prescriptions for Recall Notice – Output

```
\\HEADER\^RX #^DRUG NAME^PATIENT^SSN^ADDRESS 1^ADDRESS 2^ADDRESS
3^CITY^STATE^ZIP^PHONE (HOME)^PHONE (WORK)^PHONE (CELL)^DECEASED?
\\ORIGINAL\^RX #^ISSUE DATE^FILL DATE^RELEASED DATE/TIME^EXPIRATION
DATE^LOT #^NDC^DIVISION^PHARMACIST^PROVIDER^RETURNED TO STOCK^PATIENT
STATUS^QTY PER DAY^# OF REFILLS^MAIL/WINDOW
\\REFILL\^RX #^REFILL DATE^RELEASED DATE/TIME^QTY PER DAY^LOT#^NDC^
DIVISION^RETURNED TO STOCK^PROVIDER^PHARMACIST NAME^MAIL/WINDOW
\\PARTIAL\^RX #^PARTIAL DATE^RELEASED DATE/TIME^NDC^LOT #^QTY PER DAY
^DIVISION^ RETURNED TO STOCK^PROVIDER^PHARMACIST NAME^FILLING PERSON^
REMARKS^MAIL/WINDOW
\\CMOP\^RX #^TRANSMISSION NUMBER^SEQUENCE #^NDC SENT^NDC RECEIVED^RX
INDICATOR^STATUS^CANCELLED DATE/TIME^CANCELLED REASON^RESUBMIT STATUS^
DATE SHIPPED^CARRIER^PACKAGE ID

\\HEADER\^301188^PREDNISONE 20MG S.T.^SURPAT, RODNEY^666000148^123
^^^TROY^NEW YORK^12180^^^N
\\ORIGINAL\^301188^9/25/07^9/25/07^9/25/07 15:10:33^9/25/08^^^TROY^
PHARNAM, DAVID^DOCNAM, SUZY^^SC LESS THAN 50%^2^11^W
\\REFILL\^301188^11/14/07^11/14/07 11:09:40^2^^^TROY^^PHARNAM, DAVID^
DOCNAM, SUZY^W
\\CMOP\^301188^179^1^11/18/07 10:22^11/18/07 11:17^2^TRANSMITTED^^^
11/19/07^^
\\HEADER\^100002832^PREDNISONE 20MG S.T.^TRAPATNM, STEVE^ 666000187^12345
^^^TROY^NEW YORK^12180^518-472-4307^^^N
\\ORIGINAL\^100002832^2/8/10^2/8/10^2/8/10 15:16:51^2/9/11^^00009-0165-02
^EXT^TESTMAN, PHARM^TESTMAN, PROV^^SC LESS THAN 50%^1^11^W
\\PARTIAL\^100002832^2/8/10^2/8/10 15:16:51^^^1^EXT^^TESTMAN, PHARM
^TESTMAN, PROV^^W
```

## List Prescriptions on Hold [PSO HOLDRPT]

This report lists prescriptions that have a hold status.



## Changes to Releasing Orders Function – Signature Alert

With Patch PSO\*7\*385, the release function in the *Patient Prescription Processing* option has been modified to display a message to the user when an ECME-billable prescription is being released as a window fill. This message will alert the user that the patient's signature must be obtained. The user is not required to press <Enter> to continue or respond to the alert in any other manner.

### Example: Releasing an ePharmacy Window Fill

```
Prescription Number 100003853 Released  
No Refill(s) to be Released  
No Partial(s) to be Released  
ePharmacy Rx – Obtain Signature
```

*(This page included for two-sided copying.)*

## Changes to Releasing Orders Function – HIPAA NCPDP Global

The release function has been modified with patch PSO\*7\*148 to perform National Drug Code (NDC) validation for ePharmacy prescriptions. These changes also affect the Controlled Substance prescription release, which is performed through the Controlled Substances package.

The user releasing the third-party electronically billable prescription will be prompted for the NDC for the drug being dispensed to the patient. The NDC code previously retrieved when the prescription was finished will be presented as the current (default) NDC for the prescription. The other possible values that the user will be able to choose from are:

- NDC field value in the DRUG file, if valid and different than the current prescription NDC.
- LAST LOCAL NDC field value in NDC BY OUTPATIENT SITE sub-file in the DRUG file for the division filling the prescription, if valid and different than the current prescription NDC.
- NDC CODE field values in the SYNONYM sub-file in the DRUG file, if valid and different than the current prescription NDC.

If the NDC dispensed is not on the list to select, the user must contact the ADPAC or other designated person to add the NDC in a synonym multiple for that drug in the DRUG file.

If the NDC code selected matches the current NDC in the prescription no further NDC processing is required. However, if the user selects a different NDC, the following steps will occur:

1. Outpatient Pharmacy V. 7.0 will instruct the Electronic Claims Management Engine (ECME) to reverse the previous claim for the previous NDC code and submit a new claim for the newly selected NDC code.
2. The newly selected NDC code will be saved in the LAST LOCAL NDC field in NDC BY OUTPATIENT SITE sub-file in the DRUG file for the division filling the prescription.

The following examples show the new prompt for NDC validation during the release process.

#### Example: Releasing an ePharmacy Order – Selecting Default NDC

```
Select Outpatient Pharmacy Manager Option: RELEASE Medication
```

```
Enter PHARMACIST: OPPHARMACIST4,THREE
```

```
Enter/Wand PRESCRIPTION number: 100003853
```

```
NDC: 00580-0277-10// ?
```

```
Select one of the following valid NDC code(s) below:
```

```
1 - 00580-0277-10
```

```
NDC: 00580-0277-10// <Enter> 00580-0277-10  
Prescription Number 100003853 Released  
No Refill(s) to be Released  
No Partial(s) to be Released
```

```
ePharmacy Rx - Obtain Signature
```

#### Example: Releasing an ePharmacy Order – Selecting Different NDC

```
Select Outpatient Pharmacy Manager Option: RELEASE Medication
```

```
Enter PHARMACIST: OPPHARMACIST4,THREE
```

```
Enter/Wand PRESCRIPTION number: 100003853
```

```
NDC: 00580-0277-10// ?
```

```
Select one of the following valid NDC code(s) below:
```

```
1 - 00580-0277-10
```

```
2 - 00580-0277-14
```

```
NDC: 00580-0277-10// 2 00580-0277-14
```

```
Prescription 100003853 successfully submitted to ECME for claim generation.
```

```
Claim Status:
```

```
Reversing and Rebilling a previously submitted claim...
```

```
Reversing...
```

```
IN PROGRESS-Waiting to start
```

```
IN PROGRESS-Waiting for packet build
```

```
IN PROGRESS-Waiting for transmit
```

```
IN PROGRESS-Transmitting
```

```
Resubmitting...
```

```
IN PROGRESS-Waiting to start
```

```
IN PROGRESS-Waiting for packet build
```

```
IN PROGRESS-Waiting for transmit
```

```
IN PROGRESS-Transmitting
```

```
IN PROGRESS-Waiting to process response
```

```
E PAYABLE
```

```
Prescription Number 100003853 Released  
No Refill(s) to be Released  
No Partial(s) to be Released
```



For the *Patient Prescription Processing*, if a temporary address has no end date, the following text is displayed in the Status column: “(Temp address from XXX 99,9999 till (no end date))”.

The check for remote data availability is performed upon entering the patient’s profile, rather than on each order, to ensure that both remote data and local data are used for order checking.



**Note:** Once the above patches have been installed, a new comment for remote order checks, “Now processing Enhanced Order Checks! Please wait...” has been added to the screen. The previous comment, “Now doing order checks. Please wait...” is replaced by: “Now doing allergy checks. Please wait...”

The following will not be included in order checks (after patch PSO\*7\*243):

- Prescriptions with a status of “DELETED” in the STATUS field in the PRESCRIPTION file from a remote facility
- Prescriptions with a missing expiration date, unless the ISSUE DATE field of the PRESCRIPTION file is within the past year

Remote order checking added (after patch PSO\*7\*243):

- For drug class when orders are placed for locally defined drugs
- Allergy Analgesic class order checks only match against the specific 5-character class if the class begins with “CN10”

If for any reason remote order checks cannot be performed, the following message displays:

Remote data not available - Only local order checks processed.



**Note:** For remote order checking, if the remote order does not have a VA PRODUCT file VUID, then it will not be included in drug-drug order checks.

This option also prompts for International Classification of Diseases--9th edition (ICD-9) Diagnosis Codes (maximum of eight). Along with the PROVIDER key, the VistA Outpatient Pharmacy application evaluates the IBB Clinical Indicator Data Capture (CIDC) Insurance Switch to determine if CIDC prompts appear. This allows sites to choose whether to collect CIDC data.

These new ICD-9 Diagnosis Code prompts only appear when the:

1. User entering the prescription holds the PROVIDER key.
2. IBB CIDC Insurance Switch is set to 'YES'. (Yes = Prompt user for ICD-9 Diagnosis Codes)

User response to the ICD-9 Diagnosis Code prompts is optional.

This option is also found on the *Pharmacy Technician's Menu*, but with limited actions. A pharmacy technician can only enter a new order, refill, copy, renew, reprint, release, order a partial, or pull early from suspense.

When an order is an ePharmacy order (determined to be third party billable), the billing data is sent to ECME when an order is finished. ECME sends a message back to Outpatient Pharmacy displaying the status of the claim. This message displays for new, edited, copied, and renewed ePharmacy orders.

```
Is this correct? YES// <Enter>
-Rx 100003869A has been discontinued...

Prescription 100003919 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE
```

## View of RX:

Medication Profile			Nov 02, 2005@07:33:29		Page: 1 of 1	
OPPATIENT, FOUR PID: 000-01-1322P DOB: JAN 13,1922 (83) SEX: MALE						
			Ht (cm): _____ (_____)		Wt (kg): _____ (_____)	
#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST REF DAY FILL REM SUP
-----ACTIVE-----						
1	100003840e	PREDNISONE 5MG TAB	30	A>	11-02	11-02 5 30
<div style="border: 1px solid black; padding: 5px; display: inline-block;">             Denotes ePharmacy Rx           </div>						
Enter ?? for more actions						
PU Patient Record Update		NO New Order				
PI Patient Information		SO Select Order				
Select Action: Quit//						

If a new order is rejected due to a Drug Utilization Review (DUR) or Refill Too Soon, the prescription will be marked as “REJECTED”, and the user will have the opportunity to resolve the reject before continuing.

The following example shows a sample ECME transmission rejection, and how to resolve the rejection.

### Example: Handling a Rejected New Order for ePharmacy Billing

Prescription 999999 successfully submitted to ECME for claim generation.

#### Claim Status:

IN PROGRESS-Waiting to start  
 IN PROGRESS-Waiting for packet build  
 IN PROGRESS-Waiting for transmit  
 IN PROGRESS-Transmitting  
 E REJECTED

#### \*\*\* REJECT RECEIVED FROM THIRD PARTY PAYER \*\*\*

```

-----
Division : ALBANY                                NPI#: 39393939
Patient  : OPPATIENT,FOUR(000-01-1322P) Sex: M    DOB: JAN 13,1922(83)
Prescription : 99999999/0 - TESTOSTERONE (ANDROD ECME#: 000001234567
Reject Type  : 88 - DUR REJECT received on FEB 27, 2006@10:58:25
Payer Message: DUR Reject Error
Reason      : ER (OVERUSE PRECAUTION)
DUR Text    : ANDRODERM DIS 5MG/24HR
Insurance   : TEST INS                           Contact: 800 555-5555
Group Name  : RXINS                               Group Number: 12454
Cardholder ID: 000011322P
-----
  
```

-----example continues-----

### Example: Handling a Rejected New Order for ePharmacy Billing (continued)

```
Select one of the following:

      O          (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES
      I          (I)GNORE - FILL Rx WITHOUT CLAIM SUBMISSION
      Q          (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O)verride, (I)gnore, (Q)uit: Q// ☒ OVERRIDE
```

When a claim is rejected, typically the Payer provides a “Reason for Service Code”, which displays on the reject as “Reason”. The user can use this reason to then select which code is entered for “Professional Service Code” and “Result of Service Code”. To see a list of service codes, enter ? at the specified prompt.

```
Reason for Service Code : ER - OVERUSE
Professional Service Code: RT          RECOMMENDED LABORATORY TEST
Result of Service Code   : 1G          FILLED, WITH PRESCRIBER APPROVAL

Reason for Service Code : ER - OVERUSE
Professional Service Code: RT - RECOMMENDED LABORATORY TEST
Result of Service Code   : 1G - FILLED, WITH PRESCRIBER APPROVAL

Confirm? ? YES// <Enter>

Prescription 99999999 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Waiting to process response
E PAYABLE
```

For Refill Too Soon rejects, the same choices apply.



### Example: Handling a TRICARE Rejected New Order for ePharmacy Billing

Rejected TRICARE claims will be denoted with “TRICARE” during submission to ECME and within the subsequent reject notification screen. Also, the reject codes will be displayed in both places. The following example shows a prescription being submitted to ECME and this process occurs directly following the “Is this correct? YES//” prompt during finish. Where DUR or RTS are one of the reject codes, the user will be able to select from (D)iscontinue the prescription, submit (O)verride codes, or (Q)uit which sends the rejection to the Third Party Payer Rejects - Worklist. A TRICARE rejection may not be (I)gnored.

```
TRICARE Prescription 101110 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Processing response
E REJECTED
  79 - Refill Too Soon
  14 - M/I Eligibility Clarification Code

*** REJECT RECEIVED FOR TRICARE PATIENT ***
-----
Division : ALBANY ISC                      NPI#: 5000000021
Patient  : OPTRICARE,ONE(666-55-4789) Sex: M    DOB: OCT 18,1963(44)
Rx/Drug  : 101110/0 - NAPROXEN 250MG S.T.      ECME#: 000000112303
Reject(s): REFILL TOO SOON (79), 14 - M/I Eligibility Clarification Code (14).
          Received on MAR 03, 2008@14:40:57.

Insurance   : TRICARE                      Contact:
Group Name  : TRICARE PRIME                 Group Number: 123123
Cardholder ID: SI9844532
-----

Select one of the following:

O          (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES
D          (D)ISCONTINUE - DO NOT FILL PRESCRIPTION
Q          (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O)verride, (D)iscontinue, (Q)uit: Q//
```

### Example: Handling a non-DUR/RTS or non-clinical TRICARE rejected New Order for ePharmacy Billing

For TRICARE prescription rejections that have non-DUR/RTS or non-clinical rejects, the user will be able to select from (D)iscontinue the prescription or (Q)uit which sends it to the Third Party Payer Rejects - Worklist. TRICARE prescriptions with these type rejects cannot be filled until the rejection is resolved. Example:

```
TRICARE Prescription 101113 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Building the HL7 packet
IN PROGRESS-Transmitting
E REJECTED
  07 - M/I Cardholder ID Number
  14 - M/I Eligibility Clarification Code

*** REJECT RECEIVED FOR TRICARE PATIENT ***
-----
Division : ALBANY ISC                      NPI#: 5000000021
Patient  : OPTRICARE,ONE(666-55-4789)  Sex: M      DOB: OCT 18,1963(44)
Rx/Drug  : 101113/0 - SIMETHICONE 40MG TAB      ECME#: 000000112306
Reject(s): M/I Eligibility Clarification Code (14), M/I Cardholder ID
          Number (07). Received on MAR 03, 2008@14:43:42.

Insurance   : TRICARE                      Contact:
Group Name  : TRICARE PRIME                 Group Number: 123123
Cardholder ID: SI9844532
-----

Select one of the following:

D (D)iscontinue - DO NOT FILL PRESCRIPTION
Q (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(D)iscontinue, (Q)uit: Q//
```

For non-billable TRICARE prescriptions, an abbreviated version of the reject notification screen will be displayed. Because the prescription is non-billable, the insurance and ECME information that's currently provided for DUR/RTS rejects will not be displayed (i.e. insurance, group name, group #, ECME #, contact, cardholder ID). In this case, the prescription must be discontinued.

```
Is this correct? YES// ...

*** TRICARE - NON-BILLABLE ***
-----
Division : ALBANY ISC                      NPI#:
Patient  : OPTRICARE,ONE(666-55-4789)  Sex: M      DOB: OCT 18,1963(44)
Rx/Drug  : 102058/0 - ABSORBABLE GELATIN S
Date/Time: AUG 27, 2008@16:49:46
Reason   : Drug not billable.
-----

This is a non-billable TRICARE prescription.  It cannot be filled or sent
to the reject worklist.  It must be discontinued.

Press <RETURN> to continue...
Nature of Order: SERVICE CORRECTION//          S

Requesting PROVIDER: OPHARM  OPPHARM,ONE      OO
```

Labels will not print for discontinued TRICARE prescriptions, and reprint label will not be allowed for TRICARE rejected prescriptions.

```
Select Rx (Prescriptions) Option: REPrint an Outpatient Rx Label

Reprint Prescription Label: 101113          SIMETHICONE 40MG TAB
Number of Copies? : (1-99): 1//
Print adhesive portion of label only? ? No//  NO
Do you want to resend to Dispensing System Device? No//  NO
Comments: REPRINT

Rx # 101113          03/03/08
OPTRICARE,ONE          #180

ONE MOUTH TWICE A DAY

SIMETHICONE 40MG TAB
OPPHARM,ONE          OPPHARM,ONE
# of Refills: 3

Select LABEL DEVICE: NULL  Bit Bucket

No Label(s) printed.

Reprint Prescription Label:
```

Suspended TRICARE prescriptions will remain on suspense when a reject occurs, when the prescription is non-billable, or when the third party claim remains in an 'IN PROGRESS' status in ECME. Labels will not print. Once the reject is resolved, the user may pull the prescription early from suspense or wait for the next scheduled Print from Suspense option runs at which time labels will print accordingly. This includes CMOP and local suspense.

```
TRICARE Prescription 101607 submitted to ECME for claim generation.
```

```
Claim Status:  
IN PROGRESS-Building the claim  
IN PROGRESS-Transmitting  
IN PROGRESS-Parsing response
```

```
*** TRICARE - 'IN PROGRESS' ECME status ***
```

```
-----  
Division : ALBANY ISC                                NPI#: 5000000021  
Patient  : OPTRICARE,ONE(666-55-4789) Sex: M          DOB: OCT 18,1963(44)  
Rx/Drug  : 101607/0 - ACETAZOLAMIDE 250MG  
Date/Time: APR 20, 2008@20:11:17  
Reason   : ECME Status is in an 'IN PROGRESS' state and cannot be filled  
-----
```

```
This prescription will be suspended. After the third party claim is resolved,  
it may be printed or pulled early from suspense.
```

```
Press <RETURN> to continue...
```

A rejected TRICARE prescription may not have a partial fill ordered until the reject is resolved.

OP Medications (SUSPENDED)		Apr 18, 2008@19:10:16		Page: 1 of 2	
OPTRICARE, ONE					
PID: 666-55-4789		Ht (cm): _____ (_____)			
DOB: OCT 18, 1963 (44)		Wt (kg): _____ (_____)			
Rx #: 101526e					
(1) *Orderable Item: ACETAZOLAMIDE PILL					
(2) Drug: ACETAZOLAMIDE 500MG SEQUELS					
Verb: TAKE					
(3) *Dosage: 1 PILL					
*Route: ORAL					
*Schedule: BID					
(4) Pat Instructions:					
SIG: TAKE 1 PILL BY MOUTH TWICE A DAY					
(5) Patient Status: OTHER FEDERAL					
(6) Issue Date: 04/18/08		(7) Fill Date: 04/19/08			
Last Fill Date: 04/19/08 (Window)					
Last Release Date:		(8) Lot #:			
Expires: 04/19/09		MFG:			
+					
DC	Discontinue	PR	Partial	RL	Release
ED	Edit	RF	(Refill)	RN	Renew
Select Action: Next Screen// <input checked="" type="checkbox"/> Partial					

  

OP Medications (SUSPENDED)		Apr 18, 2008@19:10:16		Page: 1 of 2	
OPTRICARE, ONE					
PID: 666-55-4789		Ht (cm): _____ (_____)			
DOB: OCT 18, 1963 (44)		Wt (kg): _____ (_____)			
Rx #: 101526e					
(1) *Orderable Item: ACETAZOLAMIDE PILL					
(2) Drug: ACETAZOLAMIDE 500MG SEQUELS					
Verb: TAKE					
(3) *Dosage: 1 PILL					
*Route: ORAL					
*Schedule: BID					
(4) Pat Instructions:					
SIG: TAKE 1 PILL BY MOUTH TWICE A DAY					
(5) Patient Status: OTHER FEDERAL					
(6) Issue Date: 04/18/08		(7) Fill Date: 04/19/08			
Last Fill Date: 04/19/08 (Window)					
Last Release Date:		(8) Lot #:			
Expires: 04/19/09		MFG:			
+					
<b>Partial cannot be filled on TRICARE non-payable Rx</b>					
DC	Discontinue	PR	Partial	RL	Release
ED	Edit	RF	(Refill)	RN	Renew
Select Action: Next Screen//					

If ECME's status on the claim remains in an "In Progress" state past the processing timeout during finish of the prescription, TRICARE prescriptions will not be allowed to be filled. Instead it will be placed on suspense until the rejection is resolved. Below is an example of this screen:

```
TRICARE Prescription 101607 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response

*** TRICARE - 'IN PROGRESS' ECME status ***
-----
Division : ALBANY ISC                                NPI#: 5000000021
Patient  : OPTRICARE,ONE(666-55-4789) Sex: M          DOB: OCT 18,1963(44)
Rx/Drug  : 101607/0 - ACETAZOLAMIDE 250MG
Date/Time: APR 20, 2008@20:11:17
Reason   : ECME Status is in an 'IN PROGRESS' state and cannot be filled
-----

This prescription will be suspended. After the third party claim is resolved,
it may be printed or pulled early from suspense.

Press <RETURN> to continue...
```

If a pharmacy is active for ePharmacy processing but an insurance plan is not linked or not active, TRICARE prescription will be allowed to be filled without third party claim submission. The phrase "Inactive ECME TRICARE" will be displayed during Finish and an ECME log entry will be added stating such.

**Example of message during finish:**

```
Do you want to enter a Progress Note? No//    NO

Rx # 102046                08/27/08
OPTRICARE,TEST                #180
ONE MOUTH TWICE A DAY

DANTROLENE 25MG CAP
OPPROVIDER,ONE                OPPHAR,ONE
# of Refills: 3

Is this correct? YES// ...
-Rx 101921 has been discontinued...

Inactive ECME TRICARE
```

**Example of ECME Activity Log entry:**

```
ECME Log:
#    Date/Time                Rx Ref                Initiator Of Activity
=====
1    8/27/08@11:07:45        ORIGINAL            OPPHARM,ONE
Comments: TRICARE-Inactive ECME TRICARE
```

### Example: Handling a CHAMPVA Rejected New Order for ePharmacy Billing

Rejected CHAMPVA claims will be denoted with “CHAMPVA” during submission to ECME and within the subsequent reject notification screen. Also, the reject codes will be displayed in both places. The following example shows a prescription being submitted to ECME and this process occurs directly following the “Is this correct? YES//” prompt during finish. Where DUR or RTS are one of the reject codes, the user will be able to select from (D)iscontinue the prescription, submit (O)verride codes, or (Q)uit which sends the rejection to the Third Party Payer Rejects - Worklist. A CHAMPVA rejection may not be (I)gnored.

```
CHAMPVA Prescription 101110 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Processing response
E REJECTED
  79 - Refill Too Soon
  14 - M/I Eligibility Clarification Code

*** REJECT RECEIVED FOR CHAMPVA PATIENT ***
-----
Division : ALBANY ISC                      NPI#: 5000000021
Patient  : OPCHAMPVA,ONE(666-55-4789) Sex: M    DOB: OCT 18,1963(44)
Rx/Drug  : 101110/0 - NAPROXEN 250MG S.T.      ECME#: 000000112303
Reject(s): REFILL TOO SOON (79), 14 - M/I Eligibility Clarification Code (14).
          Received on MAR 03, 2008@14:40:57.

Insurance   : CHAMPVA                      Contact:
Group Name  : CHAMPVA PRIME                 Group Number: 123123
Cardholder ID: SI9844532
-----

Select one of the following:

O          (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES
D          (D)ISCONTINUE - DO NOT FILL PRESCRIPTION
Q          (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O)verride, (D)iscontinue, (Q)uit: Q//
```



### Example: Handling a non-DUR/RTS or non-clinical CHAMPVA rejected New Order for ePharmacy Billing

For CHAMPVA prescription rejections that have non-DUR/RTS or non-clinical rejects, the user will be able to select from (D)iscontinue the prescription or (Q)uit which sends it to the Third Party Payer Rejects - Worklist. CHAMPVA prescriptions with these type rejects cannot be filled until the rejection is resolved. Example:

```
CHAMPVA Prescription 101113 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Building the HL7 packet
IN PROGRESS-Transmitting
E REJECTED
  07 - M/I Cardholder ID Number
  14 - M/I Eligibility Clarification Code

*** REJECT RECEIVED FOR CHAMPVA PATIENT ***
-----
Division : ALBANY ISC                      NPI#: 5000000021
Patient  : OPCHAMPVA,ONE(666-55-4789)  Sex: M      DOB: OCT 18,1963(44)
Rx/Drug  : 101113/0 - SIMETHICONE 40MG TAB      ECME#: 000000112306
Reject(s): M/I Eligibility Clarification Code (14), M/I Cardholder ID
           Number (07). Received on MAR 03, 2008@14:43:42.

Insurance   : CHAMPVA                      Contact:
Group Name  : CHAMPVA PRIME                Group Number: 123123
Cardholder ID: SI9844532
-----

Select one of the following:

D (D)iscontinue - DO NOT FILL PRESCRIPTION
Q  (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(D)iscontinue, (Q)uit: Q//
```

For non-billable CHAMPVA prescriptions, an abbreviated version of the reject notification screen will be displayed. Because the prescription is non-billable, the insurance and ECME information that's currently provided for DUR/RTS rejects will not be displayed (i.e. insurance, group name, group #, ECME #, contact, cardholder ID). In this case, the prescription must be discontinued.

```
Is this correct? YES// ...

*** CHAMPVA - NON-BILLABLE ***
-----
Division : ALBANY ISC                      NPI#:
Patient  : OPCHAMPVA,ONE(666-55-4789)  Sex: M      DOB: OCT 18,1963(44)
Rx/Drug  : 102058/0 - ABSORBABLE GELATIN S
Date/Time: AUG 27, 2008@16:49:46
Reason   : Drug not billable.
-----

This is a non-billable CHAMPVA prescription.  It cannot be filled or sent
to the reject worklist.  It must be discontinued.

Press <RETURN> to continue...
Nature of Order: SERVICE CORRECTION//      S

Requesting PROVIDER: OPHARM  OPPHARM,ONE    OO
```

Labels will not print for discontinued CHAMPVA prescriptions, and reprint label will not be allowed for CHAMPVA rejected prescriptions.

```
Select Rx (Prescriptions) Option: REPrint an Outpatient Rx Label

Reprint Prescription Label: 101113          SIMETHICONE 40MG TAB
Number of Copies? : (1-99): 1//
Print adhesive portion of label only? ? No//  NO
Do you want to resend to Dispensing System Device? No//  NO
Comments: REPRINT

Rx # 101113          03/03/08
OPCHAMPVA,ONE          #180

ONE MOUTH TWICE A DAY

SIMETHICONE 40MG TAB
OPPHARM,ONE          OPPHARM,ONE
# of Refills: 3

Select LABEL DEVICE: NULL  Bit Bucket

No Label(s) printed.

Reprint Prescription Label:
```

Suspended CHAMPVA prescriptions will remain on suspense when a reject occurs, when the prescription is non-billable, or when the third party claim remains in an 'IN PROGRESS' status in ECME. Labels will not print. Once the reject is resolved, the user may pull the prescription early from suspense or wait for the next scheduled Print from Suspense option runs at which time labels will print accordingly. This includes CMOP and local suspense.

```
CHAMPVA Prescription 101607 submitted to ECME for claim generation.
```

```
Claim Status:  
IN PROGRESS-Building the claim  
IN PROGRESS-Transmitting  
IN PROGRESS-Parsing response
```

```
*** CHAMPVA - 'IN PROGRESS' ECME status ***
```

```
-----  
Division : ALBANY ISC                                NPI#: 5000000021  
Patient  : OPCHAMPVA, ONE (666-55-4789) Sex: M        DOB: OCT 18, 1963 (44)  
Rx/Drug  : 101607/0 - ACETAZOLAMIDE 250MG  
Date/Time: APR 20, 2008@20:11:17  
Reason   : ECME Status is in an 'IN PROGRESS' state and cannot be filled  
-----
```

```
This prescription will be suspended. After the third party claim is resolved,  
it may be printed or pulled early from suspense.
```

```
Press <RETURN> to continue...
```

A rejected CHAMPVA prescription may not have a partial fill ordered until the reject is resolved.

OP Medications (SUSPENDED)		Apr 18, 2008@19:10:16		Page: 1 of 2	
OPCHAMPVA, ONE					
PID: 666-55-4789		Ht (cm): _____ (_____)			
DOB: OCT 18, 1963 (44)		Wt (kg): _____ (_____)			
Rx #: 101526e					
(1) *Orderable Item: ACETAZOLAMIDE PILL					
(2) Drug: ACETAZOLAMIDE 500MG SEQUELS					
Verb: TAKE					
(3) *Dosage: 1 PILL					
*Route: ORAL					
*Schedule: BID					
(4) Pat Instructions:					
SIG: TAKE 1 PILL BY MOUTH TWICE A DAY					
(5) Patient Status: OTHER FEDERAL					
(6) Issue Date: 04/18/08		(7) Fill Date: 04/19/08			
Last Fill Date: 04/19/08 (Window)					
Last Release Date:		(8) Lot #:			
Expires: 04/19/09		MFG:			
+					
DC	Discontinue	PR	Partial	RL	Release
ED	Edit	RF	(Refill)	RN	Renew
Select Action: Next Screen// <input checked="" type="checkbox"/> Partial					

  

OP Medications (SUSPENDED)		Apr 18, 2008@19:10:16		Page: 1 of 2	
OPCHAMPVA, ONE					
PID: 666-55-4789		Ht (cm): _____ (_____)			
DOB: OCT 18, 1963 (44)		Wt (kg): _____ (_____)			
Rx #: 101526e					
(1) *Orderable Item: ACETAZOLAMIDE PILL					
(2) Drug: ACETAZOLAMIDE 500MG SEQUELS					
Verb: TAKE					
(3) *Dosage: 1 PILL					
*Route: ORAL					
*Schedule: BID					
(4) Pat Instructions:					
SIG: TAKE 1 PILL BY MOUTH TWICE A DAY					
(5) Patient Status: OTHER FEDERAL					
(6) Issue Date: 04/18/08		(7) Fill Date: 04/19/08			
Last Fill Date: 04/19/08 (Window)					
Last Release Date:		(8) Lot #:			
Expires: 04/19/09		MFG:			
+					
<b>Partial cannot be filled on CHAMPVA non-payable Rx</b>					
DC	Discontinue	PR	Partial	RL	Release
ED	Edit	RF	(Refill)	RN	Renew
Select Action: Next Screen//					

If ECME's status on the claim remains in an "In Progress" state past the processing timeout during finish of the prescription, a CHAMPVA prescription will not be allowed to be filled. Instead it will be placed on suspense until the rejection is resolved. Below is an example of this screen:

```
CHAMPVA Prescription 101607 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response

*** CHAMPVA - 'IN PROGRESS' ECME status ***
-----
Division : ALBANY ISC                      NPI#: 5000000021
Patient  : OPCHAMPVA,ONE(666-55-4789)  Sex: M      DOB: OCT 18,1963(44)
Rx/Drug  : 101607/0 - ACETAZOLAMIDE 250MG
Date/Time: APR 20, 2008@20:11:17
Reason   : ECME Status is in an 'IN PROGRESS' state and cannot be filled
-----

This prescription will be suspended. After the third party claim is resolved,
it may be printed or pulled early from suspense.

Press <RETURN> to continue...
```

If a pharmacy is active for ePharmacy processing but an insurance plan is not linked or not active, the CHAMPVA prescription will be allowed to be filled without third party claim submission. The phrase "Inactive ECME CHAMPVA" will be displayed during Finish and an ECME log entry will be added stating such.

**Example of message during finish:**

```
Do you want to enter a Progress Note? No//    NO

Rx # 102046                08/27/08
OPCHAMPVA, TEST            #180
ONE MOUTH TWICE A DAY

DANTROLENE 25MG CAP
OPPROVIDER, ONE            OPPHAR, ONE
# of Refills: 3

Is this correct? YES// ...
-Rx 101921 has been discontinued...

Inactive ECME CHAMPVA
```

**Example of ECME Activity Log entry:**

```
ECME Log:
#    Date/Time            Rx Ref            Initiator Of Activity
=====
1    8/27/08@11:07:45    ORIGINAL          OPPHARM, ONE
Comments: CHAMPVA -Inactive ECME CHAMPVA
```

**Displaying a Patient's Remote Prescriptions**

If RDI is active and a patient has prescriptions at another location, when the user selects the patient to enter a new order from Patient Prescription Processing, the following message appears.

```
REMOTE PRESCRIPTIONS AVAILABLE!
Display Remote Data? N//
```

If the user responds **NO**, then the normal procedure occurs for entering prescriptions. If the user responds **YES**, the "Remote Facilities Visited" screen appears such as the following example.

The field is updated and displayed in the Medication Profile.

OP Medications (ACTIVE)		Nov 03, 2005@12:51:52		Page: 1 of 3	
OPPATIENT, FOUR <span style="float: right;">&lt;A&gt;</span> PID: 000-01-1322P                      Ht (cm): _____ (_____) DOB: JAN 13,1922 (83)                      Wt (kg): _____ (_____)					
(19)            Counseling: YES                      Was Counseling Understood: YES (20)            Refill Data (21)            DAW Code: 0 - NO PRODUCT SELECTION INDICATED Entry By: OPPHARMACIST4,THREE                      Entry Date: 11/03/05 12:50:51					
+            Enter ?? for more actions					
DC	Discontinue	PR	Partial	RL	Release
ED	Edit	RF	Refill	RN	Renew
Select Action: Quit//					

New OP Order (ROUTINE)		Nov 04, 2005@08:36:29		Page: 2 of 2	
OPPATIENT, FOUR <span style="float: right;">&lt;A&gt;</span> PID: 000-01-1322P                      Ht (cm): _____ (_____) DOB: JAN 13,1922 (83)                      Wt (kg): _____ (_____)					
+            Enter ?? for more actions					
(7)            Days Supply: 30                      (8)            QTY (TAB): 30 (9)            # of Refills: 5                      (10)           Routing: WINDOW (11)           Clinic: (12)           Provider: OPPROVIDER4,TWO                      (13)           Copies: 1 (14)           Remarks: New Order Created by editing Rx # 100003840. Entry By: OPPHARMACIST4,THREE                      Entry Date: NOV 4,2005 08:36:06					
This change will create a new prescription!					
AC    Accept                      ED    Edit Select Action: Edit// <b>AC</b> Accept Nature of Order: SERVICE CORRECTION//    <Enter>    S WAS THE PATIENT COUNSELED: NO// <b>YES</b> WAS COUNSELING UNDERSTOOD: NO// <b>YES</b>					
Do you want to enter a Progress Note? No// <Enter> NO					

-----example continues-----

```

Rx # 100003852          11/04/05
OPPATIENT,FOUR          #30
TAKE ONE TABLET BY BY MOUTH FOUR TIMES A DAY FOR 30 DAYS WITH FOOD
AVOIDING DAIRY FOODS

PREDNISONE 5MG TAB
OPPROVIDER4,TWO          OPPHARMACIST4,THREE
# of Refills: 5

Is this correct? YES// <Enter> YES...
Claim has status E REJECTED. Not reversed.

Prescription 100003852 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE

```

## DAW/NDC Edit

The Dispensed As Written(DAW)/National Drug Code (NDC) field for discontinued and expired orders can be edited.

For ePharmacy prescriptions, the DAW/NDC field for discontinued and expired orders can be edited. The following statuses are editable.

- 11 – EXPIRED
- 12 – DISCONTINUED
- 14 - DISCONTINUED BY PROVIDER
- 15 - DISCONTINUED (EDIT).

Status's 14 and 15 above result from the prescription being discontinued from CPRS. For status 14 - DISCONTINUED BY PROVIDER, the user can choose to discontinue the prescription in CPRS by selecting "Requesting Physician Cancelled" for the reason.

The following is an example of the activity log entry stored on the prescription for this type of discontinue:

```

1  06/20/08  DISCONTINUED  ORIGINAL  OPPHARM,ONE
Comments: Discontinued by OE/RR.

```

For status 15 - DISCONTINUED (EDIT), the user can edit a prescription in CPRS which discontinues the prescription being edited resulting in status 15 in the Outpatient Pharmacy package. The following is an example of the activity log entry on the prescription in OP:

```

2  06/05/08  DISCONTINUED  ORIGINAL  OPHARM,ONE
Comments: Discontinued due to CPRS edit

```



When a prescription is discontinued, the software checks for any unresolved ECME rejections for that prescription. If a DUR REJECT or REFILL TOO SOON REJECT is found, it will be marked resolved with the reason PRESCRIPTION DISCONTINUED.

When an ePharmacy prescription is discontinued, the software checks for any unreleased fills with a PAYABLE claim. If found, a reversal request is sent to ECME, which forwards it on to the third party payer.

When a pending renewal order is discontinued, Outpatient Pharmacy verifies if there is an active prescription for the same drug. If an active prescription is found, you are prompted with “There is an active Rx for this pending order, Discontinue both (Y/N)?” If you respond **YES**, both the pending order and the active order are discontinued. If you respond **NO**, only the pending order is discontinued and the active order is not discontinued.

## **Edit Prescriptions**

### **[PSO RXEDIT]**

This option allows changes to be made to entered orders. Newly entered orders can be edited before release by typing in the corresponding field number. Previously entered orders can be edited by entering the prescription number, then specifying the field to be edited. An asterisk or star (\*) is shown in front of each field that will create a new order if it is changed. See the section “Editing an Order” for an example.

When editing fields preceded by an asterisk (\*) in an ePharmacy order (or electronically third party billable prescription), upon acceptance of the edited order the original prescription will be discontinued and a new order created. If the latest fill of the original order has not been released and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription. See “Editing an ePharmacy Order” for an example of editing ePharmacy orders.

## ePharmacy Menu

### [PSO EPHARMACY MENU]



The following menu items are locked with the PSORPH key: ePharmacy Medication Profile Division Preferences, ePharmacy Site Parameters, Third Party Payer Rejects – View/Process and Third Party Payer Rejects – Worklist. The following menu item is locked with the PSO TRICARE/CHAMPVA MGR key: TRICARE CHAMPVA Bypass/Override Report.

These menu items allow the user to perform ePharmacy specific functions including rejections by third party payers including DUR/RTS and has the following options:

- *Ignored Rejects Report*
- *ePharmacy Medication Profile (View Only)*
- *NDC Validation*
- *ePharmacy Medication Profile Division Preferences*
- *ePharmacy SiteParameters*
- *Third Party Payer Rejects – View/Process*
- *Third Party Payer Rejects – Worklist*
- *TRICARE CHAMPVA Bypass/Override Report*
- *View ePharmacy Rx*

DURs can occur when a third party determines there are safety issues involved with an Rx claim submission, and they can be due to high dose, drug interaction, and excessive utilization. The third party payer returns an NCPDP rejection code of 88 to indicate a DUR.

Refill Too Soon rejections happen when a third party payer determines that a prescription is being processed too early compared to the last time the prescription was filled. This can occur for several reasons, including third party payer's policy differs from VA policy, patient receiving medication at another pharmacy, or the provider may have increased the dosage or frequency of the medication. The third party payer returns an NCPDP rejection code of 79 to indicate a Refill Too Soon.

Prescriptions rejected as DUR and Refill Too Soon are moved to the REFILL TOO SOON/DUR REJECTS (Third Party) section of the Medication Profile. The user must resolve a rejected prescription before other actions such as release, label print, renew, and refill, among others, can be performed on it. Actions may still be taken on these prescriptions through CPRS.

## Ignored Rejects Report

### [PSO IGNORED REJECTS REPORT]

This option gives the user the ability to run a report for third-party rejects that have been ignored and consequently closed by the pharmacy users.

The user can select one of the following parameters to filter the data in the report:

- **DIVISION:** Allows the user to select one, some or all divisions.
- **DATE RANGE:** Allows the user to select a date range.

## NDC Validation

The initial validation of the NDC can be performed by a pharmacy technician. This functionality only applies to local fills that are not sent to OPAI. This function provides a pharmacy technician the ability to manually enter the prescription number or scan the bar code of the existing prescription label. Then the user may manually enter or scan the NDC of the stock bottle used to fill the prescription. When the system matches the NDC, confirmation is provided to the pharmacy tech and allows the technician to continue processing. However, if the system detects a mismatch and the NDC of the stock bottle has an associated entry in the synonym file, the NDC will be updated in Prescription file (#52) for the fill. The system will then prompt the technician to press enter to continue, a new label will be printed, the original electronic claim reversed, and a new claim submission will be transmitted with the new NDC. In the event that the revised NDC prompts a RTS/DUR rejection, the system will immediately send the item to the Reject Worklist.

In a case where the NDC entered is not defined for the drug in the Drug File, the system prompts the technician that a mismatch has occurred and the prescription needs to be validated by a pharmacist. The system notes that the NDC had not been validated and allows the pharmacy tech to move to the next prescription. In the event of a change of NDC prompted a rejection, the system immediately sends the item to the Reject Worklist.

The releasing pharmacist will receive a notation that NDC has been validated by technician when processing. If the NDC change has prompted a claim reversal and produced a RTS/DUR rejection, the pharmacist will be presented with a Reject Processing screen at release.

### Example: Matched NDC:

Select ePharmacy Menu Option: NV NDC Validation

Prescription: 101310                      DIPYRIDAMOLE 25MG TAB  
Rx: 101310                      Fill: 0                      Patient: OPPATIENT,ONE  
Drug: DIPYRIDAMOLE 25MG TAB                      NDC: 00597-0017-10  
Prescription label NDC: 00597-0017-10  
Stock NDC: 00597001710

NDC match confirmed

Prescription:

### Example: Non-matched NDC:

Prescription: 101341                      BIPERIDEN 2MG TAB  
Rx: 101341                      Fill: 0                      Patient: OPPATIENT,ONE  
Drug: BIPERIDEN 2MG TAB                      NDC: 00044-0120-05  
Prescription label NDC: 00044-0120-05  
Stock NDC: 00044012006  
Due to a change in NDC, a claims reversal and resubmission will be performed.

Prescription 101341 successfully submitted to ECME for claim generation.

Claim Status:

IN PROGRESS-Building the claim  
IN PROGRESS-Transmitting  
E PAYABLE

Prescription:

## ePharmacy Medication Profile Division Preferences

### [PSO PMP SITE PREFERENCES]

This option allows the user to specify certain settings that will control how the *ePharmacy Medication Profile* option works for that user. Below is the list of settings that can be specified through this option:

- **EXP/CANCEL CUTOFF:** Indicates the maximum number of days for an expired and/or discontinued prescription to be cut from the profile.
- **SORT BY:** Indicates the default sorting column. The options are: Rx#, Drug Name, Issue Date or Last Fill Date.
- **SORT ORDER:** Indicates the order in which the column above will be sorted: Ascending or Descending.
- **DISPLAY SIG:** Indicates whether the SIG should be displayed under each prescription or if it should be hidden.
- **GROUP BY STATUS:** Indicates whether the list should be grouped by status (Active, Discontinued, Hold, etc...) or not.
- **DISPLAY ORDER COUNT:** Indicates whether the number of orders under each group should be displayed beside the group name. Example \_\_\_\_\_ACTIVE (3 orders)\_\_\_\_\_

```
Select ePharmacy Menu Option: PF ePharmacy Medication Profile Division
Preferences
```

```
ALBANY ISC's current default view:
```

```
-----
```

```
EXP/CANCEL CUTOFF : 200 DAYS
SORT BY           : Rx#
SORT ORDER        : ASCENDING
DISPLAY SIG       : ON
GROUP BY STATUS   : OFF
DISPLAY ORDER COUNT: OFF
```

```
Delete this default view? NO// <Enter>
```

```
EXP/CANCEL CUTOFF: 200// <Enter> DAYS
```

```
SORT BY: RX// <Enter> Rx#
```

```
SORT ORDER: ASCENDING// ^EXP
```

```
EXP/CANCEL CUTOFF: 200// 120 DAYS
```

```
SORT BY: RX// <Enter> Rx#
```

```
SORT ORDER: ASCENDING// <Enter>
```

```
DISPLAY SIG: ON// <Enter>
```

```
GROUP BY STATUS: OFF// <Enter>
```

```
DISPLAY ORDER COUNT: OFF//<Enter>
```

```
Saving...OK!
```



If there is a set of preferences already on file for the division the user is logged under, the option to delete such preferences is presented to the user as seen above.

## ePharmacy Site Parameters

The ePharmacy Site Parameters file (#52.86) has been added to store ePharmacy Site parameters by division. Along with this, a new EPHARMACY SITE PARAMETERS [PSO ePHARM SITE

PARAMETERS] option has been added to the existing ePharmacy Menu [PSO EPHARMACY MENU].



This new option requires the PSORPH security key.

The following site parameters are definable using this option:

- **ALLOW ALL REJECTS:** Requires a YES or NO answer. It is highly suggested that NO be answered at this prompt. Answering YES to this prompt will signify that all prescription fills with ePharmacy rejected claims will automatically be placed on the Third Party Payer Rejects - Worklist, also known as the Pharmacy Reject Worklist. This is in addition to Refill-Too-Soon (79), Drug Utilization Review (DUR/88), CHAMPVA rejects and TRICARE rejects, which are automatically placed on the Pharmacy Reject Worklist. Any individually defined reject codes in this file will be overridden when a “YES” answer is given.
- **REJECT WORKLIST DAYS:** This is the number of days an uncommented reject can remain on the reject worklist without being included in the nightly reject worklist alert mail message.

The following prompts appear consecutively and the user may enter as many reject codes as they desire along with the manner in which each will be allowed to be placed on the reject worklist.

- **REJECT CODE:** A valid third party claim reject code should be entered. A listing of these codes is provided when double question marks (??) are entered for this prompt. Valid codes are contained within the BPS NCPDP REJECT CODES file (#9002313.93). Also, a value defined in this field triggers definition of USER field (#2) and DATE OF LAST UPDATE field (#3). Any individually defined codes will be overridden when the ALLOW ALL REJECTS prompt is answered as YES.
- **AUTO SEND:** This prompt is a companion to the REJECT CODE prompt. Enter YES to allow the entered REJECT CODE to be automatically placed on the Pharmacy Reject Worklist or NO to require Outpatient Pharmacy Electronic Claims Coordinator (OPECC) intervention to do so. A null value will be treated the same as entering NO in this field.

The following is an example of definition of ePharmacy Site Parameters:

```
Select ePharmacy Menu Option: SP   ePharmacy Site Parameters

Regardless of any parameters defined, Refill-Too-Soon, Drug Utilization
Review(DUR), CHAMPVA and TRICARE rejects will always be placed on the Third Party
Payer Rejects - Worklist, also known as Pharmacy Reject Worklist.  These
parameters are uneditable and are the default parameters.

Division: ALBANY ISC      500
          ...OK? Yes//    (Yes)

ALLOW ALL REJECTS: NO//
REJECT WORKLIST DAYS: 7
Select REJECT CODE: DAW ??

Select REJECT CODE: ??

  Choose from:    (The following are previously defined reject code(s))
  22      M/I Dispense As Written (DAW)/Product Selection Co      YES

  You may enter a new REJECT CODE, if you wish

*** Enter a valid third party reject code from the previously entered codes
*** above, enter a new code, or enter one from the provided listing below.
*** Valid codes are those defined in BPS NCPDP REJECT CODES file (#9002313.93).

  A valid third party claim reject code should be entered.  A listing
  of these codes is provided when double question marks are entered
  for this field.

  Choose from:
  10      M/I Patient Gender Code
  11      M/I Patient Relationship Code
  12      M/I Place of Service
  13      M/I Other Coverage Code
  14      M/I Eligibility Clarification Code
  15      M/I Date of Service
  16      M/I Prescription/Service Reference Number
  17      M/I Fill Number
  18      M/I Metric Quantity
  19      M/I Days Supply
  20      M/I Compound Code
  21      M/I Product/Service ID
  22      M/I Dispense As Written (DAW)/Product Selection Code
  23      M/I Ingredient Cost Submitted
  24      M/I SALES TAX
  25      M/I Prescriber ID
  26      M/I Unit Of Measure
  27      (FUTURE USE)
          ^

Select REJECT CODE: 22      M/I Dispense As Written (DAW)/Product Selection C
ode
          ...OK? Yes//    (Yes)

CODE: 22//
AUTO SEND: NO// Y  YES
Select REJECT CODE: 75      Prior Authorization Required
          ...OK? Yes//    (Yes)

CODE: 75//
AUTO SEND: NO//
Select REJECT CODE:

Division:
```



The following two sets of characters denote the order by which the list is being sorted: [^] for ascending and [v] for descending. The order inverts every time the user selects the same column by which the list is already ordered. Thus, if the list is currently ordered by Patient in an ascending order ([^]) and the user types “PA”, the list will be re-sorted in descending order and the order indicator will change to ([v]).

The user selects a specific record to display all relevant information about the prescription and the claim submitted to the payer.

#### Example: Viewing and Resolving Open Rejects (continued)

Reject Information (UNRESOLVED) Nov 21, 2005@08:29:30		Page: 1 of 2
Division : ALBANY	NPI#: 1712884	
Patient : OPPATIENT, FOUR (000-01-1322P) Sex: M	DOB: JAN 13, 1922 (83)	
Rx# : 100003873/0	ECME#: 000000504455	Date of Service: Nov 15, 2005
CMOP Drug: DOCUSATE NA 100MG CA	NDC Code: 54629-0600-01	
<u>REJECT Information</u>		
Reject Type : 79 - REFILL TOO SOON received on NOV 15, 2005@14:13:51		
Reject Status : OPEN/UNRESOLVED		
Payer Addl Msg : NEXT RFL 111805, DAYS TO RFL 3, LAST FILL 101805 AT YOUR PHARM, REFILL TOO SOON		
Reason Code : ER (OVERUSE PRECAUTION )		
DUR Text : RETAIL		
<u>OTHER REJECTS</u>		
29 - M/I Number Refills Authorized		
39 - M/I Diagnosis Code		
<u>INSURANCE Information</u>		
Insurance : TEST INS		
Contact : 1-800-555-5050		
BIN : RXINS		
+ Enter ?? for more actions		
VW View Rx	IGN Ignore Reject	OVR Submit Override Codes
MP Medication Profile	RES Resubmit Claim	CSD Change Suspense Date
Select: Next Screen// <b>IGN</b> Ignore Reject		
-----example continues-----		

These options are available on the screen above:

- **VW (View)** – Takes the user to the *View Prescription* option to review details for that prescription.
- **MP (Medication Profile)** – Invokes the patient’s list of medication.
- **IGN (Ignore Reject)** – Allows the user to close or resolve the DUR/REFILL TOO SOON Reject without resubmission to the payer. The user will be required to enter a free-text comment and his/her electronic signature.
- **RES (Resubmit Claim)** – Allows the user to re-submit the claim to the payer. This will automatically mark the reject resolved.
- **OVR (Submit Override Codes)** – Allows the user to re-submit the claim by entering NCPDP override codes, which shall trigger a new claim submission be sent to the payer.
- **CSD (Change Suspense Date)** – Allows the user to change the fill date for suspended prescriptions. The user will not be allowed to enter a suspense date that is greater than the fill date plus 90 days. Dates where the fill date plus 90 days is greater than the expiration date will not be allowed entry, and dates prior to issue date will not be allowed.

### Hidden actions:

- COM (Add Comments) – Allows the user to add reject-specific comments. These comments are local to the Reject Worklist and View/Process options and are not transmitted to ECME.
- CLA (Submit Clarif. Code) – Allows the user to re-submit a claim with Clarification Codes.
- ED (Edit Rx) – Allows the user to edit the prescription.
- PA (Submit Prior Auth.) – Allows the user to re-submit a claim with Prior Authorization information.
- ARI (View Addtnl Rej Info) – Allows the user to display additional reject information from the payer, if available.
- SMA (Submit Multiple Actions) – Allows the user to resubmit a claim with multiple actions, including the following information: Prior Authorization, Submission Clarification Code, Reason for Service Code, Professional Service Code, and Result of Service Code.
- SDC (Suspense Date Calculation) – Allows the user to calculate a new suspense date based on Last Date of Service and Last Days Supply.

### Example: Viewing and Resolving Open Rejects (continued)

```
Enter your Current Signature Code:    SIGNATURE VERIFIED

Comments: Changed quantity

    When you confirm this REJECT will be marked RESOLVED.

Confirm? ? NO// Y YES                [Closing...OK]
```

The following is a sample of the ECME Activity Log update that occurs when a reject is resolved:

### Example: ECME Activity Log entry: Reject Resolved

```
Rx Activity Log                      Nov 21, 2005@09:43:33          Page:    3 of    3
OPPATIENT, FOUR
  PID: 000-01-1322P                  Ht (cm) : _____ (_____)
  DOB: JAN 13,1922 (83)              Wt (kg) : _____ (_____)
+
1  11/15/05@14:13:52  ORIGINAL          OPPHARMACIST4, THREE
Comments: Submitted to ECME:REJECT WORKLIST-DUR OVERRIDE CODES (DD/M0/1B) -E
PAYABLE

ECME REJECT Log:
#   Date/Time Rcvd      Rx Ref    Reject Type    STATUS    Date/Time Resolved
=====
1   12/11/05@19:03:31   ORIGINAL   DUR            RESOLVED   12/12/05@16:45:21
Comments: CLAIM RE-SUBMITTED
2   5/30/06@19:13:57   REFILL 2   DUR            RESOLVED   5/31/06@15:58:32
Comments: CLAIM RE-SUBMITTED

Enter ?? for more actions

Select Action:Quit//
```



## Third Party Payer Rejects - Worklist

### [PSO REJECTS WORKLIST]

This option gives the user the ability to process Third Party Payer Rejects, CHAMPVA Non-billable rejects and TRICARE Non-billable rejects for one, multiple, or all Outpatient Pharmacy Divisions. Only OPEN/UNRESOLVED rejects that have clinical significance, such as DUR and Fill Too Soon, and rejects transferred from the ECME User Screen, are added to the Worklist. Once the reject is marked CLOSED/RESOLVED, it is automatically removed from the Worklist.

### Example: Resolving Open Rejects

Select Rx (Prescriptions) Option: **EPHARMACY** Menu

```

IR      Ignored Rejects Report
MP      ePharmacy Medication Profile (View Only)
NV      NDC Validation
PF      ePharmacy Medication Profile Division Preferences
SP      ePharmacy Site Parameters
VP      Third Party Payer Rejects - View/Process
WL      Third Party Payer Rejects - Worklist
TC      TRICARE CHAMPVA Bypass/Override Report
  
```

Select ePharmacy Menu Option: **WL** Third Party Payer Rejects - Worklist

You may select a single or multiple DIVISIONS,  
or enter ^ALL to select all DIVISIONS.

DIVISION: **^ALL**

Insurance Rejects - Worklist Nov 09, 2010@11:24:10 Page: 1 of 1

Divisions: ALL

Selection: ALL UNRESOLVED REJECTS

#	Rx#	PATIENT (ID) [^]	DRUG	REASON
1	100003521	OPPATIENT,TWELVE(5444)	ACETYLCYSTEINE 20% 3 79	:REFILL TOO SO
Payer Message: PLAN = 8906 NEXT FILL: 20050429				
2	100003521	OPPATIENT,TWELVE(5444)	ACETYLCYSTEINE 20% 3 79	:REFILL TOO SO
Payer Message: RTS - Rx: 9306343 DT: 31-MAR-2005 DS: 30 RD: 23-APRIL 2005				
3	100003872	OPPATIENT,FOUR(1322P)	A AND Z OINTMENT	DUR:
Payer Message: DUR Reject Error				
<b>CHAMPVA - Non-DUR/RTS</b>				
4	101358	OPCVACARE,ONE(7895)	BACLOFEN 10MG TABS	07 :M/I Cardholde
Payer Message:				
5	100923	OPCVACARE,TWO(4933)	LORAZEPAM 1MG TAB	07 :M/I Cardholde
Payer Message:				
<b>TRICARE - Non-DUR/RTS</b>				
6	101359	OPTRICARE,ONE(7894)	BACLOFEN 10MG TABS	07 :M/I Cardholde
Payer Message:				
7	100924	OPTRICARE,TRI(4932)	LORAZEPAM 1MG TAB	07 :M/I Cardholde
Payer Message:				
<b>OTHER REJECTS</b>				
8	101173	OPPATIENT,THREE(9877)	FENOPROFEN 300MG CAP	08 :M/I Person Co
Payer Message:				



```
9 101130      OPPATIENT,ONE(4589)      CHLORAMBUCIL 2MG TAB NN :Transaction R
Payer Message:

      Select the entry # to view or ?? for more actions
DR  Sort by Drug      RE  Sort by Reason      RX  Sort by Prescription
PA  Sort by Patient    RF  Screen Refresh      GI  Group by Insurance
Select: Quit// 3
-----example continues-----
```

*(This page included for two-sided copying.)*



These options are available on the following screen:

- VW (View) – Takes the user to the *View Prescription* option to review details for that prescription.
- MP (Medication Profile) – Invokes the patient’s list of medication.
- IGN (Ignore Reject) – Allows the user to close or resolve the DUR/REFILL TOO SOON Reject without resubmission to the payer. The user will be required to enter a free-text comment and his/her electronic signature.
- RES (Resubmit Claim) – Allows the user to re-submit the claim to the payer. This will automatically mark the reject resolved.
- OVR (Submit Override Codes) – Allows the user to re-submit the claim by entering NCPDP override codes, which shall trigger a new claim submission be sent to the payer.
- CSD (Change Suspense Date) – Allows the user to change the fill date for suspended prescriptions.

#### Example: Resolving Open Rejects (continued)

Reject Information (UNRESOLVED) Nov 21, 2005@09:51:15		Page: 1 of 1
Division : ALBANY	NPI#: 1712884	
Patient : OPPATIENT, FOUR (000-01-1322P) Sex: M	DOB: JAN 13, 1922 (83)	
Rx# : 100003872/0 ECME#: 000000504454	Date of Service: Nov 15, 2005	
CMOP Drug: DOCUSATE NA 100MG CA	NDC Code: 54629-0600-01	
<u>REJECT Information</u>		
Reject Type : 88 - DUR REJECT received on NOV 15, 2005@14:11:51		
Reject Status : OPEN/UNRESOLVED		
Payer Addl Msg : DUR Reject Error		
Reason Code : UNNECESSARY DRUG		
DUR Text : RETAIL		
<u>INSURANCE Information</u>		
Insurance : TEST INS		
Contact :		
BIN : 741852		
Group Number : 12454		
Cardholder ID : 000011322P		
Enter ?? for more actions		
VW View Rx	IGN Ignore Reject	OVR Submit Override Codes
MP Medication Profile	RES Resubmit Claim	CSD Change Suspense Date
Select: Quit// <b>OVR</b> Submit Override Codes		
-----example continues-----		

When a claim is rejected, typically the Payer returns a “Reason for Service Code”, which becomes the default for the “Reason for Service Code” prompt. The user can use this reason to then select which code is entered for “Professional Service Code” and “Result of Service Code”.

Available codes for “Professional Service Code” include:

<b><u>Code</u></b>	<b><u>Description</u></b>
00	NO INTERVENTION
AS	PATIENT ASSESSMENT
CC	COORDINATION OF CARE
DE	DOSING EVALUATION/DETERMINATION
DP	DOSAGE EVALUATED
FE	FORMULARY ENFORCEMENT
GP	GENERIC PRODUCT SELECTION
M0	PRESCRIBER CONSULTED
MA	MEDICATION ADMINISTRATION
MB	OVERRIDING BENEFIT
MP	PATIENT WILL BE MONITORED
MR	MEDICATION REVIEW
P0	PATIENT CONSULTED
PA	PREVIOUS PATIENT TOLERANCE
PE	PATIENT EDUCATION/INSTRUCTION
PH	PATIENT MEDICATION HISTORY
PM	PATIENT MONITORING
PT	PERFORM LABORATORY REQUEST
R0	PHARMACIST CONSULTED OTHER SOURCE
RT	RECOMMENDED LABORATORY TEST
SC	SELF-CARE CONSULTATION
SW	LITERATURE SEARCH/REVIEW
TC	PAYER/PROCESSOR CONSULTED
TH	THERAPEUTIC PRODUCT INTERCHANGE
ZZ	OTHER ACKNOWLEDGEMENT

Available codes for “Result of Service Code” include:

<b><u>Code</u></b>	<b><u>Description</u></b>
00	NOT SPECIFIED
1A	FILLED AS IS, FALSE POSITIVE
1B	FILLED PRESCRIPTION AS IS
1C	FILLED, WITH DIFFERENT DOSE
1D	FILLED, WITH DIFFERENT DIRECTIONS
1E	FILLED, WITH DIFFERENT DRUG
1F	FILLED, WITH DIFFERENT QUANTITY
1G	FILLED, WITH PRESCRIBER APPROVAL
1H	BRAND-TO-GENERIC CHANGE
1J	RX-TO-OTC CHANGE
1K	FILLED, WITH DIFFERENT DOSAGE FORM
2A	PRESCRIPTION NOT FILLED
2B	NOT FILLED, DIRECTIONS CLARIFIED
3A	RECOMMENDATION ACCEPTED
3B	RECOMMENDATION NOT ACCEPTED
3C	DISCONTINUED DRUG
3D	REGIMEN CHANGED





3E	THERAPY CHANGED
3F	THERAPY CHANGED - COST INCREASE ACKNOWLEDGED
3G	DRUG THERAPY UNCHANGED
3H	FOLLOW-UP REPORT
3J	PATIENT REFERRAL
3K	INSTRUCTIONS UNDERSTOOD
3M	COMPLIANCE AID PROVIDED
3N	MEDICATION ADMINISTERED
4A	PRESCRIBED WITH ACKNOWLEDGEMENTS

Available codes for "Reason for Service Code" include:

<b><u>Code</u></b>	<b><u>Description</u></b>
AD	ADDITIONAL DRUG NEEDED
AN	PRESCRIPTION AUTHENTICATION
AR	ADVERSE DRUG REACTION
AT	ADDITIVE TOXICITY
CD	CHRONIC DISEASE MANAGEMENT
CH	CALL HELP DESK
CS	PATIENT COMPLAINT/SYMPTOM
DA	DRUG-ALLERGY
DC	DRUG-DISEASE (INFERRED)
DD	DRUG-DRUG INTERACTION
DF	DRUG-FOOD INTERACTION
DI	DRUG INCOMPATIBILITY
DL	DRUG-LAB CONFLICT
DM	APPARENT DRUG MISUSE
DR	DOSE RANGE CONFLICT
DS	TOBACCO USE
ED	PATIENT EDUCATION/INSTRUCTION
ER	OVERUSE
EX	EXCESSIVE QUANTITY
HD	HIGH DOSE
IC	IATROGENIC CONDITION
ID	INGREDIENT DUPLICATION
LD	LOW DOSE
LK	LOCK IN RECIPIENT
LR	UNDERUSE
MC	DRUG-DISEASE (REPORTED)
MN	INSUFFICIENT DURATION
MS	MISSING INFORMATION/CLARIFICATION
MX	EXCESSIVE DURATION
NA	DRUG NOT AVAILABLE
NC	NON-COVERED DRUG PURCHASE
ND	NEW DISEASE/DIAGNOSIS
NF	NON-FORMULARY DRUG
NN	UNNECESSARY DRUG
NP	NEW PATIENT PROCESSING
NR	LACTATION/NURSING INTERACTION
NS	INSUFFICIENT QUANTITY

OH	ALCOHOL CONFLICT
PA	DRUG-AGE
PC	PATIENT QUESTION/CONCERN
PG	DRUG-PREGNANCY
PH	PREVENTIVE HEALTH CARE
PN	PRESCRIBER CONSULTATION
PP	PLAN PROTOCOL
PR	PRIOR ADVERSE REACTION
PS	PRODUCT SELECTION OPPORTUNITY
RE	SUSPECTED ENVIRONMENTAL RISK
RF	HEALTH PROVIDER REFERRAL
SC	SUBOPTIMAL COMPLIANCE
SD	SUBOPTIMAL DRUG/INDICATION
SE	SIDE EFFECT
SF	SUBOPTIMAL DOSAGE FORM
SR	SUBOPTIMAL REGIMEN
SX	DRUG-GENDER
TD	THERAPEUTIC
TN	LABORATORY TEST NEEDED
TP	PAYER/PROCESSOR QUESTION
UD	DUPLICATE DRUG



### Example: Resolving Open Rejects (continued)

```
Professional Service Code: MR          MEDICATION REVIEW
Result of Service Code   : 1D          FILLED, WITH DIFFERENT DIRECTIONS

Reason for Service Code  : NN - UNNECESSARY DRUG
Professional Service Code: MR - MEDICATION REVIEW
Result of Service Code   : 1D - FILLED, WITH DIFFERENT DIRECTIONS

When you confirm, a new claim will be submitted for
the prescription and this REJECT will be marked
resolved.

Confirm? ? YES// <Enter>

Prescription 100003872 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Waiting to process response
E PAYABLE
```

The following is a sample of the ECME Activity Log update that occurs when a reject is resolved.

### Example: ECME Activity Log entry: Reject Resolved

```
Rx Activity Log          Nov 21, 2005@11:11:53          Page:    3 of    3
OPPATIENT,FOUR
  PID: 000-01-1322P          Ht (cm) : _____ (_____)
  DOB: JAN 13,1922 (83)      Wt (kg) : _____ (_____)
+
#   Date/Time          Rx Ref          Initiator Of Activity
=====
ECME Log:
1   11/15/05@14:08:35   ORIGINAL          OPPHARMACIST4,THREE
Comments: ECME: WINDOW FILL (NDC: 00085-0096-04)-pOPP INSURANCE
2   11/21/05@11:01:37   ORIGINAL          OPPHARMACIST4,THREE
Comments: ECME: DUR OVERRIDE CODES (MR/NN/1D)-pOPP INSURANCE

ECME REJECT Log:
#   Date/Time Rcvd      Rx Ref      Reject Type      STATUS      Date/Time Resolved
=====
1   12/11/05@19:03:31   ORIGINAL    DUR              RESOLVED     12/12/05@16:45:21
Comments: CLAIM RE-SUBMITTED
2   5/30/06@19:13:57    REFILL 2     DUR              RESOLVED     5/31/06@15:58:32
Comments: CLAIM RE-SUBMITTED

Enter ?? for more actions

Select Action:Quit//
```

The following is an example of a prescription being resolved for prior authorization submission.

**Example: Prior Authorization Submission**

```
Reject Information (UNRESOLVED) Nov 21, 2005@09:51:15      Page: 1 of 1
Division : ALBANY                                         NPI#: 1712884
Patient  : OPPATIENT,FOUR(000-01-1322P) Sex: M           DOB: JAN 13,1922(83)
Rx#      : 100003872/0      ECME#: 000000504454 Date of Service: Nov 15, 2005
CMOP Drug: DOCUSATE NA 100MG CA                          NDC Code: 54629-0600-01

REJECT Information .
Reject Type      : 88 - DUR REJECT received on NOV 15, 2005@14:11:51
Reject Status    : OPEN/UNRESOLVED
Payer Addl Msg   : DUR Reject Error
Reason Code      : UNNECESSARY DRUG
DUR Text         : RETAIL

INSURANCE Information .
Insurance        : TEST INS
Contact          :
BIN              : 741852
Group Number     : 12454
Cardholder ID    : 000011322P

Enter ?? for more actions
VW View Rx      IGN Ignore Reject      OVR Submit Override Codes
MP Medication Profile RES Resubmit Claim CSD Change Suspense
Select: Quit// ??

The following actions are also available:
COM Add Comments  DN Down a Line      PS Print Screen
CLA Submit Clarif. Code UP Up a Line   PT Print List
ED Edit Rx        FS First Screen      SL Search List
PA Submit Prior Auth. LS Last Screen    ADPL Auto Display (On/Off)
+ Next Screen     GO Go to Page        QU Quit
- Previous Screen RD Re Display Screen ARI View Addtnl Rej Info

Select: Quit// PA      Send Prior Auth.

Prior Authorization Type: 0// ?

Choose from:
0 NOT SPECIFIED
1 PRIOR AUTHORIZATION #
2 ML-MEDICAL CERTIFIED
3 EPSDT
4 EXEMPT FROM COPAY
5 EXEMPT FROM RX LIMITS
6 FAMILY PLANNING
7 AFDC
8 PAYER DEFINED EXEMPTION

-----example continues-----
```

### Example: Prior Authorization Submission (continued)

```
Prior Authorization Type: 0// 1 PRIOR AUTHORIZATION #
Prior Authorization Number: 12345678901

When you confirm, a new claim will be submitted for
the prescription and this REJECT will be marked
resolved.

Confirm? ? YES// <Enter>

Prescription 787480 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
```

### Example: Clarification Code Submission

The following is an example of a prescription being resolved for clarification code submission.

```
Reject Information(UNRESOLVED)Nov 21, 2005@09:51:15      Page: 1 of 1
Division : ALBANY                                     NPI#: 1712884
Patient : OPPATIENT,FOUR(000-01-1322P) Sex: M          DOB: JAN 13,1922(83)
Rx# : 100003872/0 ECME#: 000000504454 Date of Service: Nov 15, 2005
CMOP Drug: DOCUSATE NA 100MG CA                      NDC Code: 54629-0600-01

REJECT Information .
Reject Type : 88 - DUR REJECT received on NOV 15, 2005@14:11:51
Reject Status : OPEN/UNRESOLVED
Payer Addl Msg : DUR Reject Error
Reason Code : UNNECESSARY DRUG
DUR Text : RETAIL

INSURANCE Information .
Insurance : TEST INS
Contact :
BIN : 741852
Group Number : 12454
Cardholder ID : 000011322P

Enter ?? for more actions
VW View Rx      IGN Ignore Reject      OVR Submit Override Codes
MP Medication Profile RES Resubmit Claim CSD Change Suspense
Select: Quit// ??

The following actions are also available:
COM Add Comments  DN Down a Line      PS Print Screen
CLA Submit Clarif. Code UP Up a Line    PT Print List
ED Edit Rx       FS First Screen      SL Search List
```

### Example: Clarification Code Submission (continued)

```
Select: Quit// CLA   Submit Clarif. Code

Submission Clarification Code 1: ?

Choose from:
0      NOT SPECIFIED
1      NO OVERRIDE
2      OTHER OVERRIDE
3      VACATION SUPPLY
4      LOST PRESCRIPTION
5      THERAPY CHANGE
6      STARTER DOSE
7      MEDICALLY NECESSARY
8      PROCESS COMPOUND
9      ENCOUNTERS
99     OTHER

Submission Clarification Code 1: 3  VACATION SUPPLY

Submission Clarification Code 2: 5  THERAPY CHANGE

Submission Clarification Code 3: 4  LOST PRESCRIPTION

    When you confirm, a new claim will be submitted for
    the prescription and this REJECT will be marked
    resolved.

    Confirm? ? YES//  <Enter>

Prescription 787480 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
```

### Example: Rejected Prescription –Adding Comments

The following is an example of comments added to a rejected prescription.

```
Select: Quit// ??

The following actions are also available:
COM  Add Comments          DN  Down a Line          PS  Print Screen
CLA  Submit Clarif. Code  UP  Up a Line           PT  Print List
ED   Edit Rx              FS  First Screen          SL  Search List
PA   Submit Prior Auth.   LS  Last Screen          ADPL Auto Display(On/Off)
+    Next Screen          GO  Go to Page           QU  Quit
-    Previous Screen      RD  Re Display Screen    ARI  View Addtnl Rej Info
Select: Quit// COM      Add Comments
```

```
Comment: ALREADY CALLED INSURANCE COMPANY AND THEY WILL GET
        BACK TO ME ON MONDAY.
```

```
Reject Information(UNRESOLVED)Nov 21, 2005@09:51:15      Page: 1 of 1
Division : ALBANY                                       NPI#: 1712884
Patient  : OPPATIENT,FOUR(000-01-1322P) Sex: M         DOB: JAN
13,1922(83)
Rx#      : 100003872/0      ECME#: 000000504454 Date of Service: Nov 15, 2005
CMOP Drug: DOCUSATE NA 100MG CA                        NDC Code: 54629-0600-01
```

#### REJECT Information

```
Reject Type : 88 - DUR REJECT received on NOV 15, 2005@14:11:51
Reject Status : OPEN/UNRESOLVED
Payer Addl Msg : DUR Reject Error
Reason : UNNECESSARY DRUG
DUR Text : RETAIL
```

#### COMMENTS

```
- JUN 2, 2007@2:30:10 - ALREADY CALLED INSURANCE COMPANY AND THEY WILL GET
  BACK TO ME ON MONDAY (OPUSER,ONE)
```

#### INSURANCE Information

```
Insurance : TEST INS
Contact :
Group Name : RXINS
Group Number : 12454
Cardholder ID : 000011322P
```

Enter ?? for more actions

```
VW  View Rx          IGN Ignore Reject          OVR Submit Override Codes
MP  Medication Profile  RES Resubmit Claim  CSD Change Suspense
Select: Quit//
```



### Example: Viewing Additional Reject Information

The following is an example of the Additional Reject Information display for a prescription.

Select: Quit// ??

The following actions are also available:

COM	Add Comments	DN	Down a Line	PS	Print Screen
CLA	Submit Clarif. Code	UP	Up a Line	PT	Print List
ED	Edit Rx	FS	First Screen	SL	Search List
PA	Submit Prior Auth.	LS	Last Screen	ADPL	Auto Display (On/Off)
+	Next Screen	GO	Go to Page	QU	Quit
-	Previous Screen	RD	Re Display Screen	ARI	View Addtnl Rej Info
Select: Quit// <b>ARI</b>		View Addtnl Rej Info			

Additional Reject Info	Aug 02, 2011@12:24:51	Page:	1 of 8
Division : CHEYENNE VAM&ROC		NPI#:	4020000012
Patient : ECMETEST,JCH(5454)	Sex: M	DOB:	JAN 2,1968(43)
Rx# : 2054809/1	ECME#: 000001614676	Date of Service:	Jun 08, 2011
CMOP Drug: DOCUSATE NA 100MG CA		NDC Code:	54629-0600-01

Payer Msg: THIS PRESCRIPTION CANNOT BE FILLED BECAUSE IT IS A DISCONTINUED DRUG. RECOMMEND GENERIC VERSION.

Payer Addl Msg: POSSIBLE REPLACEMENTS ARE THE FOLLOWING:

1. DRUG A
2. DRUG B

DUR Response: 1

Reason Code: TD (THERAPEUTIC )

Clinical Significance Code: MINOR

Other Pharmacy Indicator: OTHER PHARMACY SAME CHAIN

+ Enter ?? for more actions

Select Action:Next Screen//

-----example continues-----

### Example: Viewing Additional Reject Information (continued)

```
Additional Reject Info      Aug 02, 2011@12:26:32      Page:      2 of      8

Division : CHEYENNE VAM&ROC                                NPI#: 4020000012
Patient  : ECMETEST,JCH(5454) Sex: M                      DOB: JAN 2,1968(43)
Rx#      : 2054809/1      ECME#: 000001614676      Date of Service: Jun 08, 2011
CMOP Drug: DOCUSATE NA 100MG CA                          NDC Code: 54629-0600-01
+
Previous Date of Fill:
Quantity of Previous Fill: 9999999987
Database Indicator: OTHER
Other Prescriber Indicator: OTHER PRESCRIBER
DUR Text: POSSIBLE DRUG INTERACTION
DUR Add Text: CHECK MEDICATION HISTORY

DUR Response: 2
Reason Code: TD (THERAPEUTIC )
Clinical Significance Code: MINOR
Other Pharmacy Indicator: OTHER PHARMACY SAME CHAIN
Previous Date of Fill: July 15, 2011
Quantity of Previous Fill: 0000090000
Database Indicator: OTHER
+      Enter ?? for more actions

Select Action:Next Screen//
```

One important advantage of having the additional DUR information is the inclusion of the PPS Response information. The information in red above can be used to calculate the next fill date when resolving DUR rejects where the next date of fill is not returned by the payer. The use of this information eliminates a call to the third party in these cases.

## TRICARE CHAMPVA Bypass/Override Report

### [PSO Bypass/Override Report]

This option provides information in a detail or summary report format that will list prescriptions where the Bypass or Override was performed to enable processing of these TRICARE and CHAMPVA prescriptions. The user has the ability to list (I)npatient; (N)on-Billable Product; (R) eject Override; (P)artial Fill; or (A)ll. Besides allowing the selection of all types, the report allows the selection of one or two types. For example, the user can select Non-billable and Reject for the same report.



This menu option is locked with the PSO TRICARE/CHAMPVA MGR security key.

### Example: Accessing the TRICARE CHAMPVA Bypass/Override Report

```
Select Rx (Prescriptions) Option: epharmacy Menu

IR      Ignored Rejects Report
MP      ePharmacy Medication Profile (View Only)
NV      NDC Validation
PF      ePharmacy Medication Profile Division Preferences
SP      ePharmacy Site Parameters
VP      Third Party Payer Rejects - View/Process
WL      Third Party Payer Rejects - Worklist
TC      TRICARE CHAMPVA Bypass/Override Report

You've got PRIORITY mail!

Select ePharmacy Menu Option: TC  TRICARE CHAMPVA Bypass/Override Report

Select one of the following:

D          DIVISION
A          ALL

Select Certain Pharmacy (D)ivisions or (A)LL:
```

## Example: TRICARE CHAMPVA Bypass/Override Report Filters and Data Elements

```
Select one of the following:
  D      DIVISION
  A      ALL
Select Certain Pharmacy (D)ivisions or (A)LL: DIVISION
Select ECME Pharmacy Division(s): BATTLE CREEK
  Selected:
    BATTLE CREEK
Select ECME Pharmacy Division(s): GRAND RAPIDS    MI  CBOC  515BY    VA GRAND RAPIDS OPC  515BY
VA GRAND RAPIDS OPC
  Selected:
    BATTLE CREEK
    VA GRAND RAPIDS OPC
Select ECME Pharmacy Division(s):

Select one of the following:

  T      TRICARE
  C      CHAMPVA
  A      ALL

Display (T)RICARE, (C)HAMPVA or (A)LL Entries: ALL// ALL

  Select one of the following:

  S      Summary
  D      Detail

Display (S)ummary or (D)etail Format: Detail//

START WITH TRANSACTION DATE: T-1// T-10  (APR 30, 2010)
GO TO TRANSACTION DATE: T// T-9  (MAY 01, 2010)

  Select one of the following:

  I      INPATIENT
  N      NON-BILLABLE PRODUCT
  R      REJECT OVERRIDE
  P      PARTIAL FILL
  A      ALL

Select one of the following: **Can select multiples - limit of 2** : <no default> ALL

  Select one of the following:

  S      SPECIFIC PHARMACIST(S)
  A      ALL PHARMACISTS

Select Specific Pharmacist(s) or ALL Pharmacists: ALL//

  Select one of the following:

  S      SPECIFIC PROVIDER(S)
  A      ALL PROVIDERS

Select Specific Provider(s) or include ALL Providers: ALL//

  Select one of the following:

  R      Pharmacist
  P      Provider/Prescriber Name

Group/Subtotal Report by Pharmacy (R)Pharmacist or (P)rovider: <no default> Pharmacist

Do you want to capture report data for an Excel document? NO//

WARNING - THIS REPORT REQUIRES THAT A DEVICE WITH 132 COLUMN WIDTH BE USED.
```

IT WILL NOT DISPLAY CORRECTLY USING 80 COLUMN WIDTH DEVICES

DEVICE: HOME// 0;132;99 INCOMING TELNET

Please wait...

**\*\* When selecting from above, Specific Pharmacist(s), the user will be able to continue selecting Pharmacist(s) as necessary. This filter will have the same functionality as the Division/Insurance Company selection filters.**

**\*\* When selecting from above, Specific Provider(s), the user will be able to continue selecting Provider(s) as necessary. This filter will have the same functionality as the Division/Insurance Company selection filters.**

*(This page included for two-sided copying.)*

## Example of TRICARE CHAMPVA Bypass/Override Report Summary

```
TRICARE CHAMPVA BYPASS/OVERRIDE AUDIT REPORT - SUMMARY Print Date: NOV 10, 2010@10:05:26 PAGE: 1
DIVISION(S): ALL
ELIGIBILITY: ALL
TC TYPES: INPATIENT, NON-BILLABLE PRODUCT, PARTIAL FILL, REJECT OVERRIDE
ALL PRESCRIPTIONS BY AUDIT DATE: From 10/31/10 through 11/10/10
=====
-----
DIVISION: DIVISION ONE
***** CHAMPVA INPATIENT *****

PHARMACIST: PHARMACIST,ONE -----
SUB-TOTALS 45.00
RX COUNT 1
MEAN 10.00

PHARMACIST: PHARMACIST,TWO -----
SUB-TOTALS 30.00
RX COUNT 1
MEAN 30.00
-----

CHAMPVA INPATIENT
SUBTOTALS 75.00
RX COUNT 2
MEAN 37.50

***** CHAMPVA NON-BILLABLE PRODUCT *****

PHARMACIST: PHARMACIST,THREE -----
SUB-TOTALS 20.00
RX COUNT 1
MEAN 20.00

CHAMPVA NON-BILLABLE PRODUCT
SUBTOTALS 20.00
RX COUNT 1
MEAN 20.00

***** CHAMPVA PARTIAL FILL *****

PHARMACIST: PHARMACIST,FOUR -----
SUB-TOTALS 16.20
RX COUNT 2
MEAN 8.10
```

PHARMACIST: PHARMACIST, FIVE	-----
SUB-TOTALS	8.00
RX COUNT	1
MEAN	8.00

PHARMACIST: PHARMACIST, SIX	-----
SUB-TOTALS	23.58
RX COUNT	1
MEAN	23.58

CHAMPVA PARTIAL FILL	
SUBTOTALS	47.78
RX COUNT	4
MEAN	11.95

\*\*\*\*\* CHAMPVA REJECT OVERRIDE \*\*\*\*\*

CHAMPVA REJECT OVERRIDE	
SUBTOTALS	0.00
RX COUNT	0
MEAN	0.00

\*\*\*\*\* TRICARE INPATIENT \*\*\*\*\*

TRICARE INPATIENT	
SUBTOTALS	11.93
RX COUNT	1
MEAN	11.93

\*\*\*\*\* TRICARE NON-BILLABLE PRODUCT \*\*\*\*\*

PHARMACIST: OPPHARM, ONE	-----
SUB-TOTALS	8.03
RX COUNT	1
MEAN	8.03

TRICARE NON-BILLABLE PRODUCT	
SUBTOTALS	8.03
RX COUNT	1
MEAN	8.03

\*\*\*\*\* TRICARE PARTIAL FILL \*\*\*\*\*

PHARMACIST: OPPHARM, FOUR	-----
SUB-TOTALS	8.54
RX COUNT	1
MEAN	8.54



PHARMACIST: OPPHARM, FIVE	-----
SUB-TOTALS	16.20
RX COUNT	2
MEAN	8.10
TRICARE PARTIAL FILL	
SUBTOTALS	24.74
RX COUNT	3
MEAN	8.25
***** TRICARE REJECT OVERRIDE *****	
PHARMACIST: OPPHARM, TWO	-----
SUB-TOTALS	29.17
RX COUNT	3
MEAN	9.72
PHARMACIST: OPPHARM, THREE	-----
SUB-TOTALS	10.38
RX COUNT	1
MEAN	10.38
TRICARE REJECT OVERRIDE	
SUBTOTALS	39.55
RX COUNT	4
MEAN	9.89
DIVISION DIVISION ONE	-----
SUBTOTALS	154.51
RX COUNT	9
MEAN	17.17
-----	
GRAND TOTALS	154.51
RX COUNT	9
MEAN	17.17
-----	
REPORT HAS FINISHED	
Press Return to continue, '^' to exit:	

*(This page included for two-sided copying.)*

## Example of TRICARE CHAMPVA Bypass/Override Report Detail

```

TRICARE CHAMPVA BYPASS/OVERRIDE AUDIT REPORT -    DETAIL Print Date: OCT 31, 2010@11:59:22    Page: 1
DIVISION(S): DIVISION ONE, DIVISION TWO
ELIGIBILITY: ALL
TC TYPES: INPATIENT, NON-BILLABLE PRODUCT, PARTIAL FILL, REJECT OVERRIDE
ALL PRESCRIPTIONS BY AUDIT DATE: From 09/01/10 through 09/30/10
=====
BENEFICIARY NAME/ID      RX#      REF/ECME#      RX DATE      RX INFO      DRUG
  ACTION DATE      USER NAME      $BILLED      QTY      NDC#
=====
-----
DIVISION: DIVISION ONE
***** CHAMPVA INPATIENT *****
CVAPATIENT,TWO/xxxx      10750570B$      0/000009300476      02/13/10      C RT AC/N
  02/13/10      POSTMASTER      45.00      180      06524328809      METFORMIN HCL 500MG TAB
  CHAMPVA INPATIENT/DISCHARGE

CVAPATIENT,THREE/xxxx      10750570B$      0/000009300476      02/13/10      C RT AC/N
  02/13/10      POSTMASTER      30.00      180      06524328809      METFORMIN HCL 500MG TAB
  CHAMPVA INPATIENT/DISCHARGE

  CHAMPVA INPATIENT
  SUBTOTALS      75.00
  RX COUNT      2
  MEAN      37.50

***** CHAMPVA NON-BILLABLE PRODUCT*****
CVAPATIENT,ONE/xxxx      10750570B$      0/000009300476      02/13/10      C RT AC/N
  02/13/10      POSTMASTER      20.00      180      06524328809      DOCUSATE NA 100MG CA
  ec CHAMPVA DRUG NOT BILLABLE
  Fill Per Provider

  PSUSER,ONE
  SUB-TOTALS      20.00
  RX COUNT      1
  MEAN      20.00

  CHAMPVA NON-BILLABLE PRODUCT
  SUBTOTALS      20.00
  RX COUNT      1
  MEAN      20.00

***** CHAMPVA PARTIAL FILL *****

```

OPCVA,TWO/272P	2719140	0/N/A	07/27/11	W ** AC/N	
07/27/11 PSUSER,THREE		8.18	60	51111048893	ACETAMINOPHEN 325MG TAB
eC:CHAMPVA-DRUG NON BILLABLE					
CHAMPVA Partial Fill					
OPCVA,TWO/272P	2719141	0/000004315966	07/27/11	W ** AC/N	
07/27/11 PSUSER,THREE		8.02	1	58177032404	NITROGLYCERIN 0.4MG SL T
79:Refill Too Soon					
CHAMPVA Partial Fill					
PSUSER,ONE					
SUBTOTALS		16.20			
RX COUNT		2			
MEAN		8.10			
TCOUSER,TWO/265P	2719348	0/N/A	09/08/11	W ** AC/N	
09/08/11 PSUSER,FOUR		8.00	1	51111048893	ACETAMINOPHEN 325MG TAB
CHAMPVA Partial Fill					
PSUSER,TWO					
SUBTOTALS		8.00			
RX COUNT		1			
MEAN		8.00			
TCOUSER,TWO/265P	2719354	0/000004316183	09/08/11	W ** AC/N	
09/08/11 PSUSER,FOUR		23.58	30	00052047260	CALCIFEDIOL 20MCG CAPS
79:Refill Too Soon					
22:M/I Dispense As Written (DAW)/Product Selection Code					
23:M/I Ingredient Cost Submitted					
24:M/I SALES TAX					
25:M/I Prescriber ID					
26:M/I Unit Of Measure					
CHAMPVA Partial Fill					
PSUSER,FIVE					
SUBTOTALS		23.58			
RX COUNT		1			
MEAN		23.58			
CHAMPVA PARTIAL FILL					
SUBTOTALS		47.78			
RX COUNT		4			
MEAN		11.95			
***** CHAMPVA REJECT OVERRIDE *****					
CHAMPVA REJECT OVERRIDE					
SUBTOTALS		0.00			

RX COUNT		0				
MEAN		0.00				
***** TRICARE INPATIENT *****						
OPPATIENT,TRIONE/XXXX	10750XXXX\$	0/000009300XXX	09/10/10	C RT	AC/N	
09/10/10 POSTMASTER		45.00	180	06XXX3XXXXX		METFORMIN HCL 500MG TAB
TRICARE Inpatient/Discharge						
TRICARE INPATIENT						
SUBTOTALS		45.00				
RX COUNT		1				
MEAN		45.00				
***** TRICARE NON-BILLABLE PRODUCT*****						
OPPATIENT,TRITWO/XXXX	1075XXXXX\$	0/00000930XXXX	09/10/10	C RT	AC/N	
09/10/10 OPPhARM,ONE		20.00	180	06XXX3XXXXX		DOCUSATE NA 100MG CA
eT TRICARE DRUG NOT BILLABLE						
Fill Per Provider						
OPPhARM,ONE						
SUB-TOTALS		20.00				
RX COUNT		1				
MEAN		20.00				
TRICARE NON-BILLABLE PRODUCT						
SUBTOTALS		20.00				
RX COUNT		1				
MEAN		20.00				
***** TRICARE REJECT OVERRIDE *****						
OPPATIENT,TRIFOUR/XXXX	107XXXX0B\$	0/00000930XXXX	09/10/10	C RT	AC/N	
09/10/10 OPPhARM,ONE		20.00	180	06524328809		DOCUSATE NA 100MG CA
50:Non-Matched Pharmacy Number						
25:M/I Prescriber ID						
OPPhARM,ONE						
SUB-TOTALS		20.00				
RX COUNT		1				
MEAN		20.00				
TRICARE REJECT						
SUBTOTALS		20.00				
RX COUNT		1				
MEAN		20.00				
DIVISION: DIVISION ONE -----						

SUBTOTALS		180.00				
RX COUNT		6				
MEAN		30.00				
-----						
DIVISION: DIVISION TWO						
***** CHAMPVA INPATIENT *****						
CVAPATIENT,TWO/xxxx	10750570B\$	0/000009300476	02/13/10	C RT	AC/N	
02/13/10 POSTMASTER		10.00	180	06524328809		METFORMIN HCL 500MG TAB
CHAMPVA INPATIENT/DISCHARGE						
SUB-TOTALS	10.00					
RX COUNT	1					
MEAN	10.00					
CVAPATIENT,THREE/xxxx	10750570B\$	0/000009300476	02/13/10	C RT	AC/N	
02/13/10 POSTMASTER		40.00	180	06524328809		METFORMIN HCL 500MG TAB
CHAMPVA INPATIENT/DISCHARGE						
SUB-TOTALS	40.00					
RX COUNT	1					
MEAN	40.00					
CHAMPVA INPATIENT						
SUBTOTALS	50.00					
RX COUNT	2					
MEAN	25.00					
***** CHAMPVA NON-BILLABLE PRODUCT*****						
CVAPATIENT,ONE/xxxx	10750570B\$	0/000009300476	02/13/10	C RT	AC/N	
02/13/10 POSTMASTER		60.00	180	06524328809		DOCUSATE NA 100MG CA
ec CHAMPVA DRUG NOT BILLABLE						
Fill Per Provider						
OPUSER,SIX						
SUB-TOTALS	60.00					
RX COUNT	1					
MEAN	60.00					
CHAMPVA NON-BILLABLE PRODUCT						
SUBTOTALS	60.00					
RX COUNT	1					
MEAN	60.00					
***** CHAMPVA PARTIAL FILL *****						
OPCVA,TWO/272P	2719140	0/N/A	07/27/11	W **	AC/N	
07/27/11 OPUSER,THREE		8.18	60	51111048893		ACETAMINOPHEN 325MG TAB
ec:CHAMPVA-DRUG NON BILLABLE						

```

CHAMPVA Partial Fill

OPCVA,TWO/272P          2719141          0/000004315966    07/27/11          W ** AC/N
07/27/11          OPUSER,THREE          8.02          1          58177032404          NITROGLYCERIN 0.4MG SL T
79:Refill Too Soon
CHAMPVA Partial Fill

          OPUSER,TWO
          SUBTOTALS          16.20
          RX COUNT          2
          MEAN          8.10

CHAMPVA PARTIAL FILL
SUBTOTALS          16.20
RX COUNT          2
MEAN          8.10

***** CHAMPVA REJECT OVERRIDE *****

CHAMPVA REJECT OVERRIDE
SUBTOTALS          0.00
RX COUNT          0
MEAN          0.00

***** TRICARE INPATIENT *****

OPPATIENT,TRISIX/XXXX          107XXXXXX$          0/00000930XXXX    09/10/10          C RT AC/N
09/10/10          POSTMASTER          10.00          180          06XXXXXXXXXX          METFORMIN HCL 500MG TAB
PATIENT IS CURRENTLY ON A WEEKEND PASS AND WILL RETURN ON MONDAY 09/13/2010.

OPPATIENT,TRISEVEN/XXXX          107XXXXXB$          0/0000093XXXXX    09/10/10          C RT AC/N
09/10/10          POSTMASTER          40.00          180          06XXXXXXXXXX          METFORMIN HCL 500MG TAB
PATIENT IS CURRENTLY ON A WEEKEND PASS AND WILL RETURN ON MONDAY 09/13/2010.

TRICARE INPATIENT
SUB-TOTALS          50.00
RX COUNT          2
MEAN          50.00

***** TRICARE NON-BILLABLE PRODUCT *****

OPPATIENT,TRIEIGHT/XXXX          107XXXXXX$          0/000009300XXX    09/10/10          C RT AC/N
09/10/10 OPPHARM,THREE          60.00          180          06XXX3XXXXXX          DOCUSATE NA 100MG CA
eT TRICARE DRUG NOT BILLABLE
Fill Per Provider

          OPHRAM,THREE
          SUBTOTALS          60.00
          RX COUNT          1

```

MEAN	60.00
TRICARE NON-BILLABLE PRODUCT	
SUBTOTALS	60.00
RX COUNT	1
MEAN	60.00
***** TRICARE REJECT OVERRIDE *****	
OPPATIENT, TRININE/XXXX	107XXXXXX\$
09/10/10 OPHARM, TWO	0/00000930XXXX
Claim ID: VA2005-056XXXX-XXXXXX-0007XXX	20.00
50:Non-Matched Pharmacy Number	09/10/10
25:M/I Prescriber ID	180
	C RT AC/N
	06XXXXXXXXXX
	METFORMIN HCL 500MG TAB
OPPHARM, TWO	
SUBTOTALS	20.00
RX COUNT	1
MEAN	20.00
TRICARE REJECT	
SUBTOTALS	20.00
RX COUNT	1
MEAN	20.00
DIVISION: DIVISION TWO	-----
SUBTOTALS	200.00
RX COUNT	7
MEAN	28.57
	-----
GRAND TOTALS	380.00
RX COUNT	13
MEAN	29.23
	-----
REPORT HAS FINISHED	
Press RETURN to continue, '^' to exit:	



### TRICARE/CHAMPVA Reject Processing

The Third Party Payer Rejects - Worklist [PSO REJECTS WORKLIST] and Third Party Payer Rejects - View/Process [PSO REJECTS VIEW/PROCESS] options have been modified in the following manner:

#### Display of non-DUR/RTS rejects

- Non-DUR/RTS TRICARE and CHAMPVA rejections each will be segregated into distinct sections. They will be denoted with a "TRICARE - Non-DUR/RTS" or "CHAMPVA - Non-DUR/RTS" header. This header remains regardless of whether the GI - Group by Insurance action is toggled on or off. The TRICARE and CHAMPVA sections sort in the same manner as the main sort for non-TRICARE/CHAMPVA prescriptions (by Rx, drug, patient).

Insurance Rejects-Worklist		Aug 13, 2008@16:04:05		Page: 1 of 1	
Division : ALBANY ISC					
Selection : ALL UNRESOLVED REJECTS					
#	Rx#	PATIENT(ID) [^]	DRUG	REASON	
1	101238	ECMEIBTEST,ONE(5566)	MEDROXYPROGESTRONE 1	79	:REFILL TOO SO
Payer Message:					
2	100739	ECMEPAT,TWO(8887)	BENZTROPINE 2MG TAB	79	:REFILL TOO SO
Payer Message:					
3	101960	OPTRICARE,ONE(4789)	ACETAZOLAMIDE 250MG	79	:REFILL TOO SO
Payer Message:					
CHAMPVA - Non-DUR/RTS					
4	101358	OPCVACARE,ONE(7895)	BACLOFEN 10MG TABS	07	:M/I Cardholde
Payer Message:					
5	100923	OPCVACARE,TWO(4933)	LORAZEPAM 1MG TAB	07	:M/I Cardholde
Payer Message:					
TRICARE - Non-DUR/RTS					
6	101980	OPTRICARE,ONE(4789)	DANTROLENE 25MG CAP	14	:M/I Eligibili
Payer Message:					
Select the entry # to view or ?? for more actions					
DR	Sort by Drug		RE	Sort by Reason	
PA	Sort by Patient		RF	Screen Refresh	
			RX	Sort by Prescription	
			GI	Group by Insurance	
Select: Quit//					

- TRICARE and CHAMPVA DUR/RTS rejects display with all other DUR/RTS rejects. See the boxed text in the example below. Sequences 5 and 9 are rejects for the same prescription. Also note that in the following example GI - Group by Insurance action is toggled OFF.

Insurance Rejects-Worklist		Aug 13, 2008@16:10:22		Page: 1 of 1	
Division : ALBANY ISC					
Selection : ALL UNRESOLVED REJECTS					
#	Rx#	PATIENT (ID) [^]	DRUG	REASON	
1	101238	ECMEIBTEST,ONE(5566)	MEDROXYPROGESTRONE 1	79 :REFILL TOO SO	
Payer Message:					
2	100739	ECMEPAT,TWO(8887)	BENZTROPINE 2MG TAB	79 :REFILL TOO SO	
Payer Message:					
3	101358	OPCVACARE,ONE(7895)	BACLOFEN 10MG TABS	07 :REFILL TOO SO	
Payer Message:					
4	101960	OPTRICARE,ONE(4789)	ACETAZOLAMIDE 250MG	79 :REFILL TOO SO	
Payer Message:					
5	101981	OPTRICARE,ONE(4789)	ATENOLOL 100MG TAB	79 :REFILL TOO SO	
Payer Message:					
CHAMPVA - Non-DUR/RTS					
6	101358	OPCVACARE,ONE(7895)	BACLOFEN 10MG TABS	07 :M/I Cardholde	
Payer Message:					
7	100923	OPCVACARE,TWO(4933)	LORAZEPAM 1MG TAB	07 :M/I Cardholde	
Payer Message:					
TRICARE - Non-DUR/RTS					

8	101980	OPTRICARE,ONE (4789)	DANTROLENE 25MG CAP	14	:M/I Eligibili
Payer Message:					
9	101981	OPTRICARE,ONE (4789)	ATENOLOL 100MG TAB	14	:M/I Eligibili
Payer Message:					

Select the entry # to view or ?? for more actions

DR	Sort by Drug	RE	Sort by Reason	RX	Sort by Prescription
PA	Sort by Patient	RF	Screen Refresh	GI	Group by Insurance

Select: Quit//

When GI - Group by Insurance action is toggled ON, the headers "TRICARE" and "CHAMPVA" display, and these "TRICARE" and "CHAMPVA" sections sort alphabetically within RTS/DUR insurances. These TRICARE/CHAMPVA sections are separate from the Non-DUR/RTS section.

**Example with GI action toggled on:**

Insurance Rejects-Worklist		Aug 13, 2008@16:12:46		Page: 1 of 1	
Division : ALBANY ISC					
Selection : ALL UNRESOLVED REJECTS GROUPED BY INSURANCE					
#	Rx#	PATIENT (ID) [^]	DRUG	REASON	
BLUE CROSS BLUE SHIELD					
1	100739	ECMEPAT,TWO(8887)	BENZTROPINE 2MG TAB	79 :REFILL TOO SO	
Payer Message:					
CHAMPVA					
2	101358	OPCVACARE,ONE(7895)	BACLOFEN 10MG TABS	07 :REFILL TOO SO	
Payer Message:					
TRICARE					
3	101960	OPTRICARE,ONE(4789)	ACETAZOLAMIDE 250MG	79 :REFILL TOO SO	
Payer Message:					
ZENITH ADMINISTRATORS					
4	101238	ECMEIBTEST,ONE(5566)	MEDROXYPROGESTRONE 1	79 :REFILL TOO SO	
Payer Message:					
5	101981	OPTRICARE,ONE(4789)	ATENOLOL 100MG TAB	79 :REFILL TOO SO	
Payer Message:					
CHAMPVA - Non-DUR/RTS					
6	101358	OPCVACARE,ONE(7895)	BACLOFEN 10MG TABS	07 :M/I Cardholde	
Payer Message:					
7	100923	OPCVACARE,TWO(4933)	LORAZEPAM 1MG TAB	07 :M/I Cardholde	
Payer Message:					
TRICARE - Non-DUR/RTS					
8	101980	OPTRICARE,ONE(4789)	DANTROLENE 25MG CAP	14 :M/I Eligibili	
Payer Message:					
9	101981	OPTRICARE,ONE(4789)	ATENOLOL 100MG TAB	14 :M/I Eligibili	
Payer Message:					
Select the entry # to view or ?? for more actions					
DR	Sort by Drug		RE	Sort by Reason	
PA	Sort by Patient		RF	Screen Refresh	
			RX	Sort by Prescription	
			GI	Group by Insurance	
Select: Quit//					

The TRI - Show/Hide TRICARE and CVA - Show/Hide CHAMPVA toggle actions can be found on the hidden menu on the Insurance Rejects screen. When the TRI action is toggled to Show, TRICARE Non-DUR/RTS rejects will automatically display in the listing. Toggling the TRI action to Hide will remove them from the screen. The CVA action behaves likewise for CHAMPVA Non-DUR/RTS rejects.



**Example with TRICARE and CHAMPVA rejects displayed:**

```
Insurance Rejects-Worklist      Aug 13, 2008@16:04:05      Page:      1 of      1
Division      : ALBANY ISC
Selection      : ALL UNRESOLVED REJECTS

# Rx#          PATIENT (ID)  [^]          DRUG          REASON
1 101238      ECMEIBTEST,ONE(5566)      MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
Payer Message:
2 100739      ECMEPAT,TWO(8887)          BENZTROPINE 2MG TAB  79 :REFILL TOO SO
Payer Message:
3 101960      OPTRICARE,ONE(4789)          ACETAZOLAMIDE 250MG  79 :REFILL TOO SO
Payer Message:
                                CHAMPVA - Non-DUR/RTS
4 101358      OPCVACARE,ONE(7895)          BACLOFEN 10MG TABS   07 :M/I Cardholde
Payer Message:
                                TRICARE - Non-DUR/RTS
5 101980      OPTRICARE,ONE(4789)          DANTROLENE 25MG CAP  14 :M/I Eligibili
Payer Message:
```

```
Select the entry # to view or ?? for more actions
DR  Sort by Drug      RE  Sort by Reason      RX  Sort by Prescription
PA  Sort by Patient   RF  Screen Refresh      GI  Group by Insurance
Select: Quit// ??
```

The following actions are also available:

TRI	Show/Hide TRICARE	CVA	Show/Hide CHAMPVA	FS	First Screen
+	Next Screen	LS	Last Screen	SL	Search List
-	Previous Screen	GO	Go to Page	ADPL	Auto Display(On/Off)
UP	Up a Line	RD	Re Display Screen	PT	Print List
DN	Down a Line	PS	Print Screen	QU	Quit

Enter RETURN to continue or '^' to exit:

*(This page included for two-sided copying.)*



### Example of TRICARE and CHAMPVA rejects removed from display:

```
Insurance Rejects-Worklist      Aug 13, 2008@16:04:05      Page:      1 of      1
Division      : ALBANY ISC
Selection      : ALL UNRESOLVED REJECTS

# Rx#          PATIENT (ID)  [^]          DRUG          REASON
1 101238      ECMEIBTEST,ONE(5566)      MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
Payer Message:
2 100739      ECMEPAT,TWO(8887)          BENZTROPINE 2MG TAB  79 :REFILL TOO SO
Payer Message:
3 101960      OPTRICARE,ONE(4789)          ACETAZOLAMIDE 250MG  79 :REFILL TOO SO
Payer Message:

Select the entry # to view or ?? for more actions
DR  Sort by Drug      RE  Sort by Reason      RX  Sort by Prescription
PA  Sort by Patient    RF  Screen Refresh      GI  Group by Insurance
Select: Quit// ??
The following actions are also available:
TRI  Show/Hide TRICARE  CVA  Show/Hide CHAMPVA  FS  First Screen
+    Next Screen        LS  Last Screen          SL  Search List
-    Previous Screen     GO  Go to Page          ADPL Auto Display(On/Off)
UP   Up a Line          RD  Re Display Screen    PT  Print List
DN   Down a Line        PS  Print Screen        QU  Quit

Enter RETURN to continue or '^' to exit:
```

### Processing of TRICARE and CHAMPVA Rejections - TRICARE/CHAMPVA Eligible Bypass/Override Functions

- A bypass function is provided to allow continued processing of prescriptions for TRICARE and CHAMPVA eligible inpatients whose Patient status = Inpatient at the time the prescription is issued.

In the following example a patient who has been admitted into a VA hospital (Patient status = Inpatient) is allowed to go on a weekend “pass” and issued outpatient medications such as OTC drugs or supplies for the weekend. The system displays the Non-Billable Reason “TRICARE INPATIENT/DISCHARGE” on the screen. The display of this Non-Billable Reason is due to the patient having Patient status = Inpatient, the patient is a TRICARE patient with TRICARE Insurance and an outpatient medication, OTC or Supply was issued.



ISSUE DATE: OCT 31,2010// (OCT 31, 2010)  
FILL DATE: (10/31/2010 - 11/01/2011): OCT 31,2010// (OCT 31, 2010)  
Nature of Order: WRITTEN// W  
WAS THE PATIENT COUNSELED: NO// NO

Do you want to enter a Progress Note? No// NO

Rx # XXXX885 10/31/10  
TRICARE,ONE (XXX-XX-XXXX) #3  
TAKE 1 BY MOUTH 9

ACETAMINOPHEN 160MG/5ML ELIXIR (OZ)  
VHAPROVIDER,ONE JOHN,DOE  
# of Refills: 5

Is this correct? YES//

TRICARE INPATIENT/DISCHARGE

Another New Order for TRICARE,ONE? YES//

The following is a sample of the View Prescription ECME Log update. The Non-Billable Reason “TRICARE INPATIENT/DISCHARGE” is now displayed on the View Prescription ECME Log. The TRICARE INPATIENT/DISCHARGE status allows the system to record why a TRICARE prescription was allowed to be bypassed.

### Example: View Prescription ECME Log entry: TRICARE INPATIENT/DISCHARGE

Rx View (Active)	Oct 26, 2010@17:07:34	Page: 4 of 4
TRICARE, ONE	<NO ALLERGY ASSESSMENT>	
PID: XXX-XX-XXXX	Ht (cm) : _____ (_____)	
DOB: MAR 16, 19xx (xx)	Wt (kg) : _____ (_____)	
+		
Label Log:		
#	Date	Rx Ref
=====		
There are NO Labels printed.		
ECME Log:		
#	Date/Time	Rx Ref
=====		
1	10/26/10@16:04:50	ORIGINAL
		Initiator Of Activity
		=====
		JOHN, DOE
Comments: TRICARE-Not ECME Billable: <b>TRICARE INPATIENT/DISCHARGE</b>		
Enter ?? for more actions		
Select Action:Quit//		

In a similar situation where a prescription is issued to a CHAMPVA patient with Patient status = Inpatient, the Non-Billable Reason “CHAMPVA INPATIENT/DISCHARGE” would be displayed on the reject processing screen and in the View Prescription ECME Log.

### TRICARE/CHAMPVA Eligible Outpatient Override Function

- An override function is provided to allow continued processing of prescriptions for TRICARE or CHAMPVA eligible outpatients when a rejected response is received from the TRICARE or CHAMPVA payer/PBM.

The Reject Action prompt will default to “Quit”. If the Q (Quit) action is selected, the rejected claim will go to the TRICARE or CHAMPVA section, as appropriate, of the Pharmacy Third Party Payer Rejects – Worklist. If the D (Discontinue) action is selected, the next prompt “Nature of Order” will default to “Service Reject”. The I (Ignore) action is available if the user holds the “PSO TRICARE/CHAMPVA” security key and if selected, continued processing will occur.

### Example of Reject Notification Screen Non-DUR/RTS with the action of D (Discontinue)

```
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response
E REJECTED
  21 - M/I Product/Service ID

      *** TRICARE - REJECT RECEIVED FROM THIRD PARTY PAYER ***
-----
Division : XXXX DIVISION                      NPI#: XXXXXXXXXX
Patient  : TRICARE,ONE(XXX-XX-XXXX) Sex: M      DOB: OCT 1,19XX(XX)
Rx/Drug  : XXX5341/0 - AMOXICILLIN 250MG CA    ECME#: 000002345678
Reject(s): M/I Product/Service ID (21) Received on NOV 01, 2010@09:30:03.

Insurance : EXPRESS SCRIPT                      Contact:
Group Name : TRICARE                          Group Number: DODA
-----
Select one of the following:

      I      (I)GNORE - FILL Rx WITHOUT CLAIM SUBMISSION
      D      (D)iscontinue - DO NOT FILL PRESCRIPTION
      Q      (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(I)gnore, (D)iscontinue, (Q)uit: Q/D (D)iscontinue - DO NOT FILL PRESCRIPTION
Nature of Order: SERVICE REJECT//

Requesting PROVIDER: VHAPROVIDER,ONE          111      PHYSICIAN
```

In the following example a prescription is rejected from the Third Party Payer with a reject code of (88) DUR REJECT. The pharmacist has the option to Discontinue, Ignore, Override or Quit.



h

The Ignore action is only displayed for holders of the PSO TRICARE/CHAMPVA security key.



## Example of Reject Notification Screen DUR/RTS

88 - DUR Reject Error

\*\*\* TRICARE - REJECT RECEIVED FROM THIRD PARTY PAYER \*\*\*

-----  
Division : XXXXXX NPI#: XXXXXXXXXX  
Patient : OPPATIENT,TRICARE (765-XX-XXXX) Sex: F DOB: OCT 17,19XX(XX)  
Rx/Drug : 2718XXX/0 - BALNETAR 7.5 OZ ECME#: 00000431XXXX  
Reject(s): DUR REJECT (88). Received on NOV 01, 2010@07:08:44.

Insurance : EXPRESS SCRIPTS Contact:  
Group Name : TRICARE Group Number: DODA  
-----

Select one of the following:

O (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES  
I (I)GNORE - FILL Rx WITHOUT CLAIM SUBMISSION  
D (D)iscontinue - DO NOT FILL PRESCRIPTION  
Q (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O)verride, (I)gnore, (D)iscontinue, (Q)uit: Q / i (I)GNORE - FILL Rx WITHOUT CLAIM SUBMISSION

You are bypassing claims processing. Do you wish to continue? NO// y YES

*(This page included for two-sided copying.)*



- For Non-Billable TRICARE or CHAMPVA rejects, a Non-Billable Notification Screen is provided to allow continued processing of prescriptions. The Reject Action prompt will default to “Discontinue”. If the action D (Discontinue) is selected, the prompt “Nature of Order” will default to “Service Reject”. The I (Ignore) action is available if the user holds the “PSO TRICARE/CHAMPVA” security key and if it is selected, continued processing will occur. If the action Q (Quit) is selected, the Non-Billable TRICARE or CHAMPVA eligible prescription will go to the **Pharmacy Third Party Payer Rejects – Worklist** utilizing either Reject Code “eT” with reject description “TRICARE-DRUG NON BILLABLE” or Reject Code “eC” with reject description “CHAMPVA-DRUG NON BILLABLE.” (The reject codes “eT” and “eC” are for use internal to the VistA system only and have no relation to any NCPDP reject code listing.) The new entry will be displayed in the TRICARE or CHAMPVA section of the **Pharmacy Third Party Payer Rejects – Worklist**, as applicable.

In the following example a TRICARE Active Duty patient with Outpatient status submits an OTC, Non-Billable drug or supplies prescription for dispensing. The pharmacist will have the option of Discontinuing the Rx, Ignoring the Rx or Quitting. Discontinue is the option displayed below.

#### Example of Non-Billable Notification Screen

```

Is this correct? YES//

DRUG NOT BILLABLE

*** TRICARE - NON-BILLABLE ***

-----
Division : XXXX DIVISION                      NPI#: 9999999999
Patient  : TRICARE,ONE(XXXX) Sex: M           DOB: JAN 1,19XX(XX)
Rx/Drug  : XXX5339/0 - DOCUSATE NA 100MG CA
Date/Time: OCT 31, 2010@12:22:10
Reason   : Drug not billable
-----

This is a non-billable TRICARE prescription.
Select one of the following:
    D      (D)iscontinue - DO NOT FILL PRESCRIPTION
    Q      (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)
    I      (I)gnore - FILL Rx WITHOUT CLAIM SUBMISSION

(D)iscontinue, (Q)uit, (I)gnore: D// Discontinue

Nature of Order: SERVICE REJECT//

Requesting PROVIDER: VHAPROVIDER,ONE          111          PHYSICIAN

```

In the following example a TRICARE Active Duty patient with Outpatient status submitted an OTC, Non-Billable drug or Supplies prescription for dispensing. The pharmacist selected the Quit option to send the prescription to the worklist for further review. The Non-Billable drug is displayed on the Pharmacy Third Party Payer Rejects – Worklist with a reason code “eT”.



## Example of Pharmacy Third Party Payer Rejects – Worklist

Insurance Rejects-Worklist		Oct 31, 2010@09:15:58	Page: 2 of 5
Division : ALBANY ISC			
Selection : ALL UNRESOLVED REJECTS			
# Rx#	PATIENT (ID) [^]	DRUG	REASON
Payer Message:			
TRICARE - Non-DUR/RTS			
13 102xxx	OPTRICARE,ONE (4789)	DIAZOXIDE 300MG INJ	eT :TRICARE-DRUG NON
Payer Message:			
14 102xxx	OPTRICARE,ONE (4789)	MANNITOL 15% S.S. LV 22	:M/I Dispense
Payer Message:			
15 1028xxx	OPTRICARE,ONE (4789)	METHOCARBAMOL 750MG	34 :M/I Submissio
Payer Message:			
16 103xxx	OPTRICARE,ONE (4789)	BENZTROPINE 2MG TAB	07 :M/I Cardholde
Payer Message:			
17 103xxx	OPTRICARE,ONE (4789)	DEXAMETHASONE 0.5MG	07 :M/I Cardholde
Payer Message:			
18 102xxx	TRICARE,ONLYTRICAR(3939)	NEODECADRON OPHTMALI	07 :M/I Cardholde
Payer Message:			
19 102xxx	TRICARE,ONLYTRICAR(3939)	GENTAMICIN OPHTHALMI	07 :M/I Cardholde
Payer Message:			
+ Select the entry # to view or ?? for more actions			
DR	Sort by Drug	RE	Sort by Reason
PA	Sort by Patient	RF	Screen Refresh
		RX	Sort by Prescription
		GI	Group by Insurance
Select: Next Screen//			

- The Non-Billable TRICARE prescriptions will appear on the Reject Information screen shown in the example below once the TRICARE Non-Billable claim has been selected from the Pharmacy Third Party Payer Rejects – Worklist. The screen will display:
  - ECME# field – will be blank
  - Insurance Information – will be blank
  - Reject code section will have the reject code eT and status will state “NO CLAIM SUBMITTED”
  - Available Actions will be DC – Discontinue Rx, VW -View Rx, MP – Medication Profile, FIL – Fill Rx and IGN Ignore Reject (FIL and IGN will require PSO TRICARE/CHAMPVA Security key)
  - Available Hidden Actions will be COM – Add Comments, ED – Edit Rx and all other standard List Manager hidden actions
  - If the action DC is chosen, the system will discontinue the prescription and the prompt “Nature of Order” will default to “SERVICE REJECT”
  - The following actions will ***not*** be selectable when processing a TRICARE or CHAMPVA eligible Non-Billable reject: Resubmit Claim (RES)/Change Suspense Date (CSD)/Submit Override Codes (OVR)/Submit Clairf Code (CLA)/Submit Prior Auth (PA)/Suspense Date Calculation (SDC)/Submit Mult Actions (SMA). If selected for a TRICARE reject, an error message will appear: “[action] not allowed for TRICARE Non-Billable claim”. If selected for a CHAMPVA reject, an error message will appear: “[action] not allowed for CHAMPVA Non-Billable claim”. The only actions available are to Discontinue, Fill the prescription, View prescription or Medication Profile.

### Example of Non-Billable Product Reject Information Screen

```

Reject Information (TRICARE) Oct 30, 2010@10:15:01 Page: 1 of 1
Division : ECME DIVISION NPI#: XXXXXXXXXXXX
Patient : TRICARE,TWO(XXX-XX-XXXX) Sex: M DOB: JUL 1,19XX(XX)
Rx# : ###4928/0 ECME#: Date of Service: Mar 16, 2009
CMOP Drug: DOCUSATE NA 100MG CAP NDC Code: 54629-0600-01

REJECT Information (TRICARE)
Reject Type : TRICARE DRUG NOT BILLABLE(eT) received on OCT 17, 2010@13:19:22
Reject Status : NO CLAIM SUBMITTED
Payer Addl Msg : Not ECME Billable: DRUG NOT BILLABLE
Reason Code :

COMMENTS
- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK,ONE)

INSURANCE Information
Insurance :
Contact :
BIN :
Group Number :
Cardholder ID :

Enter ?? for more actions
VW View Rx FIL Fill Rx CSD Change Suspense Date
MP Medication Profile DC Discontinue Rx IGN Ignore Reject
RES Resubmit Claim OVR Submit Override Codes
Select Item(s): Next Screen//

```

### Example of Non-Billable Product Reject Information Screen displaying the action RES (Resubmit Claim) error message

```

Reject Information (TRICARE) Nov 11, 2010@12:37:30 Page: 1 of 2
Division : ECME DIVISION NPI#:
Patient : OPPATIENT,TRICARE(XXX-XX-XXXX) Sex: F DOB: OCT 7,19XX(XX)
Rx# : 27XXXXX/0 ECME#: Date of Service: Sep 16, 2010
Drug : ALUMINUM HYDROXIDE GEL 320MG/5ML SUSP NDC Code: 00054-3035-63

REJECT Information (TRICARE)
Reject Type : TRICARE DRUG NOT BILLABLE(eT) received on SEP 16, 2010@13:07:12
Reject Status : NO CLAIM SUBMITTED
Payer Addl Msg : Not ECME Billable: DRUG NOT BILLABLE
Reason Code :
DUR Text :

COMMENTS
- SEP 16, 2010@13:07:12 - Transferred by (XXXXXXXX,XXXX)

INSURANCE Information
Insurance :
Contact :
BIN :
Group Number :
+ RES not allowed for TRICARE Non-Billable claim.
VW View Rx FIL Fill Rx CSD Change Suspense Date
MP Medication Profile DC Discontinue Rx IGN Ignore Reject
RES Resubmit Claim OVR Submit Override Codes
Select Item(s): Next Screen//

```

## **Reject Information Screen – Electronic Signature and TRICARE/CHAMPVA Justification**



This action requires the security key PSO TRICARE/CHAMPVA.

*(This page included for two-sided copying.)*

- A user must hold the “PSO TRICARE/CHAMPVA” security key to perform the Fill Rx (FIL) and Ignore Reject (IGN) actions on the Third Party Payer Rejects – Worklist and the “Ignore” action on the TRICARE or CHAMPVA Reject Notification screen. If the user holds the security key “PSO TRICARE/CHAMPVA”, the prompt will display: “You are bypassing claims processing. Do you wish to continue?” If the user enters (No=Default), the user will return to the reject notification screen. If the user selects Yes to continue, the system will mimic the current Ignore action/functionality and allow processing of the prescription. The user will be prompted to enter their electronic signature code and asked to enter data into the TRICARE Justification or CHAMPVA Justification field, which is required. The user will be allowed to “^” out of the process. If the user opts to “^” out of the process, they will be taken back to the Reject Information screen prompt.

In the following example a TRICARE patient with Outpatient status submits a prescription for processing and a rejected response is received from the TRICARE payer/PBM. The pharmacist initially sends the prescription to the Third Party Payer Rejects – Worklist then later decides to finish processing the prescription and chooses the FIL action.

#### Example of Reject Information Screen – Electronic Signature and TRICARE Justification

Reject Information (TRICARE) Sep 30, 2010@10:25:13		Page: 1 of 1
Division : ECME DIVISION		NPI#: XXXXXXXXXX
Patient : TRICARE,TWO(XXX-XX-XXXX)	Sex: M	DOB: JAN 1,19XX(XX)
Rx# : XXX4928/0	ECME#: 000001231234	Date of Service: Feb 08, 2009
CMOP Drug: ACARBOSE 25MG TAB		NDC Code: 00026-2863-52

---

REJECT Information (TRICARE)

Reject Type : M/I Cardholder ID (07)

Reject Status : OPEN/UNRESOLVED - E REJECTED

Payer Addl Msg :

Reason Code :

DUR Text :

---

COMMENTS

- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK,ONE)

---

INSURANCE Information

Insurance : EXPRESS SCRIPTS

Contact :

BIN : 741852

Group Number : DODA

Cardholder ID : XXXXXXXX

---

Enter ?? for more actions

VW View Rx	FIL Fill Rx	CSD Change Suspense Date
MP Medication Profile	DC Discontinue Rx	IGN Ignore Reject
RES Resubmit Claim	OVR Submit Override Codes	

Select Item(s): Quit/☒ FIL

You are bypassing claims processing. Do you wish to continue (Y/N)? No/☒ Yes

Enter your Current Signature Code:

TRICARE Justification:



- If the user does not hold the security key “PSO TRICARE/CHAMPVA”, an on-screen alert to the user will display “Action Requires <PSO TRICARE/CHAMPVA> security key” as displayed in the below example. The user will need to press any key to return to the Reject Information screen.

*(This page included for two-sided copying.)*





### Example of Reject Information Screen – Security Key – ALERT

```
Reject Information (TRICARE) May 15, 2010@11:45:23 Page: 1 of 1
Division : ECME DIVISION NPI#: XXXXXXXXXX
Patient : TRICARE,TWO(XXX-XX-XXXX) Sex: M DOB: JAN 1,19XX(XX)
Rx# : XXX4928/0 ECME#: 000001231234 Date of Service: Mar 10, 2009
CMOP Drug: ACARBOSE 25MG TAB NDC Code: 00026-2863-52
```

#### REJECT Information (TRICARE)

```
Reject Type : M/I Cardholder ID (07)
Reject Status : OPEN/UNRESOLVED - E REJECTED
Payer Addl Msg :
Reason Code :
DUR Text :
```

#### INSURANCE Information

```
Insurance : EXPRESS SCRIPTS
Contact :
BIN : 741852
Group Number : DODA
Cardholder ID : XXXXXXXX
```

#### Action Requires <PSO TRICARE/CHAMPVA> Security Key

```
VW View Rx FIL Fill Rx CSD Change Suspense Date
MP Medication Profile DC Discontinue Rx IGN Ignore Reject
RES Resubmit Claim OVR Submit Override Codes
Select Item(s): Quit//
```

- The person that resolves TRICARE and CHAMPVA non-DUR/RTS rejects is dependent upon the type of reject. Dispense As Written (DAW) reject code 22 can be resolved by the pharmacy staff by editing the prescription and entering the appropriate DAW code that results in a claims resubmission. Other insurance-related rejects (missing eligibility or cardholder ID number) are resolved by the Outpatient Pharmacy Electronic Claims Coordinator (OPECC). Once the rejection has been resolved, the Reject Information screen under the pharmacy reject worklist shows the status of the prescription as E PAYABLE. At this point the user may select the FIL action which will prompt for label print.

```
Reject Information (TRICARE) Aug 27, 2008@17:16:27 Page: 1 of 1
Division : ALBANY ISC NPI#: 5000000021
Patient : OPTRICARE,ONE(666-55-4789) Sex: M DOB: OCT 18,1963(44)
Rx# : 102059/0 ECME#: 000000113288 Date of Service: Aug 27, 2008
Drug : IMIPRAMINE 25MG TAB NDC Code: 00779-0588-30
```

#### REJECT Information (TRICARE)

```
Reject Type : M/I Cardholder ID Number (07)
Reject Status : OPEN/UNRESOLVED - E PAYABLE
Payer Addl Msg :
Reason Code :
DUR Text :
```

#### INSURANCE Information

```
Insurance : EXPRESS SCRIPTS
Contact :
BIN : 741852
Group Number : DODA
Cardholder ID : XXXXXXXX
```

Enter ?? for more actions

```
VW View Rx FIL Fill Rx OVR Submit Override Codes
MP Medication Profile DC Discontinue Rx CSD Change Suspense Date
Select Item(s): Quit// FIL Fill Rx
[Closing all rejections for prescription 102059:
07 - ...OK]
```

```
Print Label? ? YES//
```

```
Select LABEL PRINTER: HOME// UCX/TELNET Right Margin: 80//
```

- For rejects that remain in suspense, the user will be allowed to process the rejection as indicated above, however no labels will be printed until the prescription is pulled early or printed from suspense. Upon resolving the reject, the user will be notified of this information. CMOP prescriptions will function in the same manner.

## Other Rejects

### [PSO REJECTS WORKLIST]

Rejects under the OTHER REJECTS section of the screen are resolved in the same manner as DUR/RTS rejects. The comments section will denote whether the reject was transferred automatically as is the case in the example below or “Transferred by OPECC” would denote those rejects where the OPECC manually transferred them to pharmacy for resolution.

The following example shows the user selecting to resolve sequence 16 from the Third Party Payer Rejects - Worklist option shown above. The user selects ED to edit the DAW code for the prescription, then resubmits the claim afterward. Since the claim was payable, both the RTS reject in sequence 13 and the DAW reject in sequence 16 were marked resolved. Also both are removed from the worklist after submission. The user then proceeds to Patient Prescription Processing option to view the ECME logs which show that claim resubmission was payable and that both rejects have been resolved.

### Example: Resolving Other Rejects

```
Reject Information(UNRESOLVED)Jul 30, 2008@14:54:51      Page: 1 of 2
Division : CHEYENNE VAM&ROC                          NPI#: 1164471991
Patient  : OPPATIENT,FOUR(XXXX)                      Sex: M      DOB: OCT 20,1965(42)
Rx#      : 2055203/1      ECME#: 000001615102 Date of Service: Jul 15, 2008
CMOP Drug: DANAZOL 50MG CAP                          NDC Code: 00024-0304-06

REJECT Information
Reject Type      : 22 - M/I Dispense As Written- received on JUL 30, 2008@14:32:16
Reject Status    : OPEN/UNRESOLVED
Payer Addl Msg   :
Reason Code      :
DUR Text         :

OTHER REJECTS
79 - Refill Too Soon

COMMENTS
- JUL 30, 2008@14:32:16 - Automatically transferred due to override for reject
  code. (OPHARM,ONE)

+ Enter ?? for more actions
VW View Rx      IGN Ignore Reject      OVR Submit Override Codes
MP Medication Profile RES Resubmit Claim CSD Change Suspense Date
Select: Next Screen// ed ED
```

Jul 30, 2008@14:54:53

-----example continues-----

### Example: Resolving Other Rejects (continued)

```
Rx #: 2055203$e
(1) *Orderable Item: DANAZOL CAP,ORAL
(2)      CMOP Drug: DANAZOL 50MG CAP
(3)      *Dosage: 50 (MG)
          Verb: TAKE
          Dispense Units: 1
          Noun: CAPSULE
          *Route: ORAL (BY MOUTH)
          *Schedule: BID
(4) Pat Instructions:
          SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
(5) Patient Status: OUTPT NON-SC
(6)      Issue Date: 07/11/08          (7) Fill Date: 07/11/08
          Last Fill Date: 07/15/08 (Window)
Select Action: Next Screen//      NEXT SCREEN

Last Release Date:          (8)      Lot #:
          Expires: 07/12/09          MFG:
(9)      Days Supply: 3          (10) QTY (CAP): 6
(11)     # of Refills: 11          Remaining: 10
(12)     Provider: OPPROVIDER,ONE
(13)     Routing: MAIL          (14)     Copies: 1
(15)     Clinic: Not on File
(16)     Division: CHEYENNE VAM&ROC (442)
(17)     Pharmacist:
(18)     Remarks: New Order Created by copying Rx # 2055182.
(19)     Counseling: NO
(20)     Refill Data
(21)     DAW Code: 0 - NO PRODUCT SELECTION INDICATED
          Finished By: OPHARM,ONE
+      Enter ?? for more actions
DC  (Discontinue)      PR  (Partial)      RL  (Release)
ED  Edit              RF  (Refill)        RN  (Renew)
Select Action: Next Screen// 21
DAW CODE: 0// ?

OP Medications (SUSPENDED)      Jul 30, 2008@14:54:55      Page:      2 of      3
OPPATIENT,FOUR
  PID: 666-55-9987          Ht (cm) : _____ (_____)
  DOB: OCT 20,1965 (42)      Wt (kg) : _____ (_____)
+

  Answer with BPS NCPDP DAW CODE
  Choose from:
  0      NO PRODUCT SELECTION INDICATED
  1      SUBSTITUTION NOT ALLOWED BY PRESCRIBER
  2      SUBSTITUTION ALLOWED-PATIENT REQUESTED PRODUCT DISPENSED
  3      SUBSTITUTION ALLOWED-PHARMACIST SELECTED PRODUCT DISPENSED
  4      SUBSTITUTION ALLOWED-GENERIC DRUG NOT IN STOCK
  5      SUBSTITUTION ALLOWED-BRAND DRUG DISPENSED AS A GENERIC
  6      OVERRIDE
  7      SUBSTITUTION NOT ALLOWED-BRAND DRUG MANDATED BY LAW
  8      SUBSTITUTION ALLOWED-GENERIC DRUG NOT AVAILABLE IN MARKETPLACE
  9      OTHER

  DAW CODE: 0// 1 - SUBSTITUTION NOT ALLOWED BY PRESCRIBER
  Are You Sure You Want to Update Rx 2055203? Yes//      YES

-----example continues-----
```

### Example: Resolving Other Rejects (continued)

```
OP Medications (SUSPENDED) Jul 30, 2008@14:55:21 Page: 2 of 3
OPPATIENT,FOUR
  PID: 666-55-9987 Ht (cm): _____ (_____)
  DOB: OCT 20,1965 (42) Wt (kg): _____ (_____)
+
  Last Release Date: (8) Lot #:
    Expires: 07/12/09 MFG:
(9) Days Supply: 3 (10) QTY (CAP): 6
(11) # of Refills: 11 Remaining: 10
(12) Provider: OPPROVIDER,ONE
(13) Routing: MAIL (14) Copies: 1
(15) Clinic: Not on File
(16) Division: CHEYENNE VAM&ROC (442)
(17) Pharmacist:
(18) Remarks: New Order Created by copying Rx # 2055182.
(19) Counseling: NO
(20) Refill Data
(21) DAW Code: 1 - SUBSTITUTION NOT ALLOWED BY PRESCRIBER
    Finished By: OPHARM,ONE
+ Enter ?? for more actions
DC (Discontinue) PR (Partial) RL (Release)
ED Edit RF (Refill) RN (Renew)
Select Action: Next Screen// ^

Reject Information(UNRESOLVED) Jul 30, 2008@14:55:28 Page: 1 of 2
Division : CHEYENNE VAM&ROC NPI#: 1164471991
Patient : OPPATIENT,FOUR(XXXX) Sex: M DOB: OCT 20,1965(42)
Rx# : 2055203/1 ECME#: 000001615102 Date of Service: Jul 15, 2008
CMOP Drug: DANAZOL 50MG CAP NDC Code: 00024-0304-06

REJECT Information
Reject Type : 22 - M/I Dispense As Written- received on JUL 30, 2008@14:32:16
Reject Status : OPEN/UNRESOLVED
Payer Addl Msg :
Reason Code :
DUR Text :

OTHER REJECTS
79 - Refill Too Soon

COMMENTS
- JUL 30, 2008@14:32:16 - Automatically transferred due to override for reject
  code. (OPHARM,ONE)
+ Enter ?? for more actions
VW View Rx IGN Ignore Reject OVR Submit Override Codes
MP Medication Profile RES Resubmit Claim CSD Change Suspense Date
Select: Next Screen// RES Resubmit Claim

When you confirm, a new claim will be submitted for
the prescription and this REJECT will be marked
resolved.

Confirm? YES//
```

-----example continues-----

### Example: Resolving Other Rejects (continued)

```
Prescription 2055203 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Transmitting
E PAYABLE

Please wait...

Insurance Rejects-Worklist      Jul 30, 2008@14:38:38      Page:      2 of      3
Division : CHEYENNE VAM&ROC
Selection : ALL UNRESOLVED REJECTS
# Rx#      PATIENT(ID) [v]      DRUG      REASON
Payer Message:
13 2055202      OPPATIENT,FOUR(9987)      BACLOFEN 10MG TAB      79 :REFILL TOO SO
Payer Message:
14 2055155      OPPATIENT,FOUR(9987)      BENAZEPRIL HCL 40MG      79 :REFILL TOO SO
Payer Message:
OTHER REJECTS
15 2055134A      OPPATIENT,FOUR(9987)      CALCIUM GLUCONATE 65 22 :M/I Dispense
Payer Message:

+      Select the entry # to view or ?? for more actions
DR  Sort by Drug      RE  Sort by Reason      RX  Sort by Prescription
PA  Sort by Patient      RF  Screen Refresh      GI  Group by Insurance
Select: Next Screen//^
```

Below is taken from Patient Prescription Processing option for the Rx in this example:

```
Medication Profile      Jul 30, 2008@15:03:25      Page:      1 of      2
OPPATIENT,FOUR
PID: 666-55-9987      Ht(cm): _____ (_____)
DOB: OCT 20,1965 (42)      Wt(kg): _____ (_____)
SEX: MALE

#  RX #      DRUG      QTY ST  ISSUE  LAST REF DAY
                                DATE  FILL REM SUP
-----REFILL TOO SOON/DUR REJECTS (Third Party)-----
1 2055202$e      BACLOFEN 10MG TAB      14 S> 07-08 12-12 11 3
2 2055155$e      BENAZEPRIL HCL 40MG TAB      1 S> 06-24 06-26 10 1
3 2055134A$e      CALCIUM GLUCONATE 650MG TAB      4 A> 06-16 07-30 10 2
-----ACTIVE-----
4 2055174$e      ACEBUTOLOL HCL 200MG CAP      1 S> 06-26 06-27 11 1
5 2055123$e      BACITRACIN 500 UNT/GM OPTHALMIC OINT      1 AT 06-13 06-14 10 30
6 2055203$e      DANAZOL 50MG CAP      6 S> 07-11 07-15 10 3
7 2055183$e      FAMCICLOVIR 125MG TAB      2 AT 06-26 06-26 11 2
8 2055215$      GABAPENTIN 100MG CAP      6 S> 07-30 07-30 11 3
9 2055186$e      HALOPERIDOL 0.5MG TAB      2 AT 06-26 06-26 11 4
+      Enter ?? for more actions
DC  Discontinue      PR  Partial      RL  Release
ED  Edit      RF  (Refill)      RN  RenewSelect Action: Next
```

-----example continues-----

### Example: Resolving Other Rejects (continued)

```

Select Action: Next Screen// AL  AL
OP Medications (SUSPENDED)  Jul 30, 2008@15:03:25  Page: 1 of 3
OPPATIENT,FOUR
  PID: 666-55-9987  Ht (cm) : _____ (_____)
  DOB: OCT 20,1965 (42)  Wt (kg) : _____ (_____)

      Rx #: 2055203$e
(1) *Orderable Item: DANAZOL CAP,ORAL
(2)   CMOP Drug: DANAZOL 50MG CAP
(3)   *Dosage: 50 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: CAPSULE
      *Route: ORAL (BY MOUTH)
      *Schedule: BID
(4) Pat Instructions:
      SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
(5) Patient Status: OUTPT NON-SC
(6)   Issue Date: 07/11/08  (7) Fill Date: 07/11/08
      Last Fill Date: 07/15/08 (Window)
+   Enter ?? for more actions
DC  Discontinue  PR  Partial  RL  Release
ED  Edit  RF  (Refill)  RN  Renew
Select Action: Next Screen// AL  AL

Select Activity Log by number
1. Refill 2. Partial 3. Activity 4. Labels
5. Copay 6. ECME 7. CMOP Events 8. All Logs: (1-8): 8// 6

Rx #: 2055203 Original Fill Released:
Routing: Mail Finished by: OPPHARM,ONE

ECME Log:
# Date/Time Rx Ref Initiator Of Activity
=====
1 7/11/08@10:13:11 ORIGINAL OPPHARM,ONE
Comments: ECME:PULLED FROM SUSPENSE(NDC:00024-0303-06)-E PAYABLE-pOPP INSURANCE
2 7/30/08@14:32:17 REFILL 1 OPPHARM,TWO
Comments: ECME:PULLED FROM SUSPENSE(NDC:00024-0303-06)-E REJECTED-pOPP INSURANCE
3 7/30/08@14:55:56 REFILL 1 OPPHARM,TWO
Comments: ECME:REJECT WORKLIST-E PAYABLE-pOPP INSURANCE

ECME REJECT Log:
# Date/Time Rcvd Rx Ref Reject Type STATUS Date/Time Resolved
=====
1 7/30/08@14:32:16 REFILL 1 M/I Dispense As RESOLVED 7/30/08@14:55:40
Comments: AUTOMATICALLY CLOSED (CLAIM RE-SUBMITTED)
2 7/30/08@14:32:16 REFILL 1 REFILL TOO SOON RESOLVED 7/30/08@14:55:40
Comments: AUTOMATICALLY CLOSED (CLAIM RE-SUBMITTED)

Enter ?? for more actions

Select Action:Quit//

```



## **View ePharmacy Rx**

### **[BPS RPT VIEW ECME RX]**

The *View ePharmacy Rx* option allows you to view information for one prescription, combining information from Outpatient Pharmacy, Integrated Billing and ECME. More information on this report is available in the *Electronic Claims Management Engine (ECME) User Manual*.

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## MailMan Message for Open/Unresolved Rejects

When prescriptions remain on the Third Party Payer Reject – Worklist over the specified number of days, the system will send a Mailman Message. This message will be sent to the PSO REJECTS BACKGROUND MESSAGE mail group. Those users needing access to this information will need to be added manually to this mail group.

The specified number of days referred to above is the number of days an uncommented reject can remain on the reject worklist without being included in the nightly reject worklist alert mail message. The number of days are defined in the EPHARMACY SITE PARAMETERS file (#52.86) as described in the EPHARMACY SITE PARAMETERS FILE section of this document.

The following are the criteria for generating a Mailman message regarding a rejected claim:

- Prescription is active
- Prescription is unreleased
- Claim is on the Reject Worklist for specified number of days or greater
- Claim has no comments added within date range.

Adding a comment to the reject will automatically reset the clock for the alert. The specified number of days will be site configurable and stored in EPHARMACY SITE PARAMETERS file (#52.86). The initial patch default setting will be five (5) days; however, the site will be able to reset the parameter between one (1) and thirty (30) to generate the alert message. MailMan message will be sent as a Priority message, and there will be a separate MailMan message for each division. The following is an example of the message:

```
Subj: ePharmacy - OPEN/UNRESOLVED REJECTS LIST for ALBANY ISC  [#2680833]
07/25/08@11:52  53 lines
From: OUTPATIENT PHARMACY PACKAGE  In 'IN' basket.  Page 1  *New*
-----
The prescriptions listed below are third party electronically billable and can
not be filled until the rejection is resolved.  No action to resolve the
rejection has taken place within the past 1 days.

Please use the THIRD PARTY PAYER REJECTS WORKLIST option to resolve the
rejection or add a comment to the rejection.

Unresolved rejects will not be sent to CMOP or the local print queue for
filling.  They will continue to show on the rejects list until acted upon.

-----
# RX/FILL      PATIENT(ID)      DRUG              FILL      REJECT
DATE          DATE
-----
1 100805/1      IBSCDC,TWO(2828)  SIMETHICONE 40MG TAB  6/5/08    6/5/08
Reason: 79 :Refill Too Soon

2 101149/0      OPPATIENT,TH(7789) DIAZEPAM 10MG S.T.  6/9/08    6/9/08
Reason: 75 :Prior Authorization Required
COMMENT: JUN 09, 2008@18:04:35 - Automatically transferred due to
Override for reject code. (PHARM,ONE)

3 100928/0      IBPATIENT,QFO(567) ETHACRYNIC ACID 50MG S.  5/7/08    6/23/08
Reason: 31 :Submission Clarification Code
COMMENT: JUN 23, 2008@15:02:11 - Transferred by OPECC. (OPECC,ONE)

Enter RETURN to continue or '^' to exit:
```

## Alerts for Discontinued CMOP Prescription

### Discontinued by a Background Process

When a CMOP prescription with a status of Transmitted or Retransmitted is discontinued by a background process to the Outpatient Pharmacy options, e.g. CPRS or Registration V. 5.3 packages, an email will be sent to the PSX EXTERNAL DISPENSE ALERTS mail group. If no recipients are defined in the new mail group, the message will be sent to PSXCMOPMGR key holders stating that a prescription was just discontinued and that the CMOP status for the discontinued prescription was either Transmitted or Retransmitted.

```
Subj: TROY - DC Alert on CMOP Rx 123456789 TRANSMITTED  [#90494]
03/03/09@17:37 8 lines
From: POSTMASTER  In 'IN' basket.    Page 1  *New*
-----
Rx #: 123456789    Fill: 0
Patient: OUTPATIENT, DCONE (6660)
Drug: TAMOXIFEN CITRATE 10MG TABS
Rx Status: DISCONTINUED BY PROVIDER
Processing Status: TRANSMITTED to CMOP on 02/27/09
Provider: OPPROVIDER, PROV

*****      Please contact CMOP or take appropriate action      *****

Enter message action (in IN basket): Ignore//
-----
```

### Discontinued by a Foreground Pharmacy Process

When a CMOP prescription with a status of Transmitted or Retransmitted is discontinued by a foreground Pharmacy process due to a duplicate drug scenario that would trigger the duplicate to be discontinued, then the Processing Status field of the duplicate drug message is highlighted to alert the user.

```
-----
Duplicate Drug A AND Z OINTMENT in Prescription: 123456789

Status: Active                                Issued: 11/27/09
Processing Status: Transmitted to CMOP on 11/27/09
SIG: APPLY 1 TUBE TO AFFECTED AREA TWICE A DAY
QTY: 1                                         # of refills: 5
Provider: OPPROVIDER, PROV                    Refills remaining: 5
Last filled on: 11/27/09
Days Supply: 5
-----
Discontinue RX # 123456789?
```

In the above example, the line “Processing Status: Transmitted to CMOP on 11/27/09” is bold.

## Delete Printed Rx's from Suspense

### [PSO PNDPRI]

With this option printed prescriptions can be deleted from suspense manually. Basically, it does the same thing as the *Auto-delete from Suspense* option, but it prompts the user to delete a single prescription, all prescriptions for one patient, all prescriptions for a given date range, or all prescriptions that have printed in a batch.

A batch is the group of labels that printed for a particular Print from Suspense File job. For example, if for one day, the *Print from Suspense File* option is queued 3 times, three batches will be printed for that day. (See the *Print from Suspense File* option.)

If it is necessary to reset and reprint the suspense labels and only selected labels are wanted, those not wanted can be deleted from the batch. The deleted labels will not be reprinted as part of the batch.

## Log of Suspended Rx's by Day (this Division)

### [PSO PNDLOG]

Using this option, the manager can print a report by division of all suspended prescriptions sorted either by patient or identification number. The log contains the prescription number, patient name, drug name, type, and print status.

The *Log of Suspended Rx's by Day (this Division)* [PSO PNDLOG] option is updated to add a new column showing the B/D/F (Bad Address Indicator/ Do Not Mail/ Foreign Address) status of the prescription.

## Print from Suspense File

### [PSO PNDLBL]

This option allows the user to print labels from the RX SUSPENSE file. First, enter the "Print Through" date. Any prescriptions with a suspense date on or before the date entered will print. Additionally, if a patient has at least one prescription on or before the date entered, any other prescriptions for that patient that are in suspense will be printed for the site parameter specified number of days to be pulled from suspense.

For example, if today's date is entered and Patient A has a prescription to be printed through the date entered, all of Patient A's prescriptions between the date entered plus the number of days set in the local site parameter will be printed. If there are no prescriptions for Patient A through the date entered, no labels will print.

Labels can be sorted by the patient name, the SSN, or the DEA Special Handling code. If sorted by DEA, the labels must then sort by patient name or SSN. Sorting by DEA will send the labels to the printer in three groups:

- **First group** – will contain all the prescriptions with drugs that contain an “A” (narcotics and alcoholics) or a “C” (controlled substances-non narcotic) in the DEA Special Handling field.
- **Second group** – will contain all the prescriptions with drugs containing an “S” (supply) in the DEA Special Handling field.
- **Third group** – will contain all others. If a patient has prescriptions in suspense that fall in all three categories, that patient's labels will be printed three times, once in each group.

Only one job is tasked for all of the prescriptions in the batch; therefore, if the job is queued by mistake, only one tasked job must be undone. Any prescription that is put in suspense for the "Print Through Date" between the times the job was queued until the time it actually runs will be included in the job.

Labels for each job printed from suspense will be part of a batch. Each batch is identified by the Division, the user who queued the batch, and the date/time that the job was queued to begin.



Prescriptions pulled early from suspense will not be part of a batch, so they will not be able to be reprinted through the *Reprint Batches from Suspense* option.

A short profile for every patient for whom a label for a new prescription is being printed will also be printed if the local Profile with New Prescriptions site parameter is set to Yes.



If a patient has partial prescriptions with regular fills, only one set of trailing documents will print for that patient. (In V. 6.0 trailer documents were printed after each partial.)

If the patient has remote prescriptions, then the text “THIS PATIENT HAS PRESCRIPTIONS AT OTHER FACILITIES” will appear on the report as shown in the following example.

```
PREScription PROFILE AS OF 12/30/2008

NAME: PSOPATIENT, ONE

THIS PATIENT HAS PRESCRIPTIONS AT OTHER FACILITIES

PHARMACIST: _____ DATE: _____
```

If a prescription is determined to be an ePharmacy prescription (e.g., third party electronically billable), an electronic claim will be sent by ECME to the third party payer. TRICARE and CHAMPVA prescriptions are exceptions, as noted in the TRICARE and CHAMPVA section. The communication events between Outpatient Pharmacy and ECME are recorded in the ECME Log section of each prescription. The ECME log can be viewed in the patient Medication Profile screen (Activity Log option - AL) and also from the View Prescriptions option. If the claim submission returns a Refill Too Soon (79) or Drug Utilization Review (88) reject, the label is not printed for the prescription and it is moved to the Refill Too Soon/DUR section of the patient Medication Profile screen until the user resolves the reject. The prescription will also display on the Third Party Payer Reject worklist.

## ¾ Days Supply Hold

Because of the great number of refill-too-soon third party claim rejections that can occur due to prescriptions being filled too early, the system verifies that ¾ of the days supply has elapsed on the previous fill before the ePharmacy prescription may be refilled. The following list describes this functionality.

- ePharmacy prescriptions are delayed from being sent to CMOP and printed for local mail until ¾ of the days supply has elapsed. For CMOP suspense, a partial day will be rounded up (ex.: ¾ of 30 days will be 23 days). With the release of PSO\*7\*367, this rounding functionality will also be available for local mail suspense.
- An activity log entry states the date/time that the prescription will be allowed to be removed from suspense. The activity log is defined on the initial evaluation. The following is an example of the log entry:

4	06/18/08	SUSPENSE	REFILL 2	OPHARM,ONE
Comments: 3/4 of Days Supply SUSPENSE HOLD until 6/20/08.				

- To fill the prescription earlier, users may pull these types of prescriptions early from suspense.

## Host Errors

Prescriptions (ePharmacy only) will be prevented from being filled/sent to CMOP when a host processing error occurs as a claim is submitted through ECME. Host processing errors are identified by reject codes M6, M8, NN, and 99 which are returned by the third party payer. The following conditions apply when this scenario occurs.

- The transmission of the prescription fill will be delayed 1 day in hopes that the host processing issues will be resolved by the third party payer.
- An activity log entry will state the date/time along with a comment stating that the Rx/fill was left in suspense hold due to a host processing error. The following is an example of the log entry:

2	06/25/08	SUSPENSE	ORIGINAL	OPPHARM,TWO
Comments: SUSPENSE HOLD until 6/26/08 due to host reject error.				

- The Pull Early from Suspense function is not impacted by this added functionality. Users may pull these type prescriptions early from suspense.

There is no user interaction for this function. It initiates when the Print from Suspense [PSO PNDLBL] option is initiated for CMOP prescriptions.

## TRICARE and CHAMPVA

If there is an override or bypass for a TRICARE or CHAMPVA prescription and there are no open claim rejections for that prescription, then an electronic claim is not generated from suspense, and the label will be printed when the prescription is processed from suspense. This





exception applies to TRICARE and CHAMPVA ePharmacy billable prescriptions and non-billable prescriptions.

If a claim is submitted from suspense for a TRICARE or CHAMPVA prescription, the prescription will be displayed on the Third Party Payer Reject worklist if the claim submission returns any type of reject. Also, non-billable TRICARE and CHAMPVA prescriptions will be displayed on the Third Party Payer Reject worklist. A user must resolve the reject or submit an override before the prescription can be processed through suspense.

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## Pull Early from Suspense

### [PSO PNDRX]

This option is used to pull a specific prescription or all prescriptions for a patient early. If a prescription is pulled early using this option, it will not be associated with any printed batch, and the user will not be able to reprint a label with the *Reprint Batches from Suspense* option. Since prescriptions that are pulled early from suspense do not belong to any printed batch and cannot be reprinted from suspense, there is no reason to leave them in suspense.

The user may also edit the “Method of Pickup”. For the prompt “Pull Rx(s) and delete from Suspense”, the user should answer **YES** to pull the prescriptions, and they will always be deleted from suspense.



If the routing is changed to “Window” when pulling from suspense early and the bingo board is being used, those prescriptions will be sent to the bingo board.

If a prescription is determined to be an ePharmacy prescription (e.g., third party electronically billable), an electronic claim will be sent by ECME to the third party payer. The communication events between Outpatient Pharmacy and ECME are recorded in the ECME Log section of each prescription. The ECME log can be viewed in the patient Medication Profile screen (Activity Log option - AL) and also from the *View Prescriptions* option. If the claim submission returns a Refill Too Soon (79) or Drug Utilization Review (88) reject, the label is not printed for the prescription and it is moved to the Refill Too Soon/DUR section of the patient Medication Profile screen until the user resolves the reject. The prescription will also display on the Third Party Payer Reject worklist.

## Queue CMOP Prescription

### [PSO RX QUEUE CMOP]

The *Queue CMOP Prescription* option allows the users (including pharmacy technicians) to put mail-routed prescription(s) for CMOP drugs on suspense for CMOP.

#### Example: Queue CMOP Prescription

```
Select Suspense Functions Option: QUEUE CMOP Prescription
Enter the Rx # to queue to CMOP: 300486
```

If the prescription does not have a routing of Mail, has already been released, or is not for a CMOP drug, and does not pass all the other normal checks for CMOP, it will not be put on suspense for CMOP.

# Chapter 1: Security Keys

---

A security key is a unique entry in the Security Key file (^DIC(19.1,)) which may prevent access to a specific option or action by including the key as part of the option's entry in the Option file (^DIC(19,)). Only users entered in the Holder field of the Security Key file may access the option or action.

## New or Modified Security Keys

### PSO TRICARE/CHAMPVA

PSO\*7\*385 renamed the PSO TRICARE security key to PSO TRICARE/CHAMPVA. Please see [TRICARE/CHAMPVA Eligible Outpatient Override Function](#) for further information on this security key.

### PSO TRICARE/CHAMPVA MGR

PSO\*7\*385 renamed the PSO TRICARE MGR security key to PSO TRICARE/CHAMPVA MGR. Please see [TRICARE CHAMPVA Bypass/Override Report](#) for further information on this security key.

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# Glossary

The following table provides definitions for common acronyms and terms used in this manual.

Acronym/Term	Definition
<b>Action Profile</b>	A list of all active and recently canceled or expired prescriptions for a patient sorted by classification. This profile also includes a signature line for each prescription to allow the physician to cancel or renew it.
<b>Activity Log</b>	A log, by date, of changes made to or actions taken on a prescription. An entry is made in this log each time the prescription is edited, canceled, reinstated after being canceled, or renewed. An entry will be made into this log each time a label is reprinted. A CMOP activity log will contain information related to CMOP dispensing activities.
<b>Allergy/ADR Information</b>	Includes non-verified and verified allergy and/or adverse reaction information as defined in the Adverse Reaction Tracking (ART) package. The allergy data is sorted by type (DRUG, OTHER, FOOD). If no data is found for a category, the heading for that category is not displayed.
<b>AMIS</b>	Automated Management Information System
<b>Answer Sheet</b>	An entry in the DUE ANSWER SHEET file. It contains the questions and answers of a DUE questionnaire. This term is also used to refer to the hard copy representation of a DUE ANSWER SHEET entry.
<b>API</b>	Application Programming Interfaces
<b>APSP</b>	Originally Indian Health Service Pharmacy's name space now owned by the Outpatient Pharmacy software.
<b>Bypass</b>	Take no action on a medication order.
<b>CHAMPVA</b>	CHAMPVA (Civilian Health and Medical Program of the Department of Veterans Affairs) is a cost-shared health benefits program established for the dependents and survivors of certain severely disabled and/or deceased veterans.
<b>CMOP</b>	Consolidated Mail Outpatient Pharmacy.
<b>CPRS</b>	Computerized Patient Record System. CPRS is an entry point in VistA that allows the user to enter all necessary orders for a patient in different packages (e.g., Outpatient Pharmacy, Inpatient Pharmacy, etc.) from a single entry point.
<b>Critical</b>	Interactions with severe consequences that require some type of action (finding facts, contacting prescribers) to prevent potential serious harm.
<b>DATUP</b>	Data Update (DATUP). Functionality that allows the Pharmacy Enterprise Customization System (PECS) to send out custom and standard commercial-off-the-shelf (COTS) vendor database changes to update the two centralized databases at Austin and Martinsburg.
<b>DEA</b>	Drug Enforcement Agency

<b>Acronym/Term</b>	<b>Definition</b>
<b>DEA Special Handling</b>	The Drug Enforcement Agency special Handling code used for drugs to designate if they are over-the counter, narcotics, bulk compounds, supply items, etc.
<b>DHCP</b>	See VistA.
<b>DIF</b>	Drug Information Framework
<b>Dispense Drug</b>	The Dispense Drug name has the strength attached to it (e.g., Acetaminophen 325 mg). The name alone without a strength attached is the Orderable Item name.
<b>Dosage Ordered</b>	After the user has selected the drug during order entry, the dosage ordered prompt is displayed.
<b>Drug/Drug Interaction</b>	The pharmacological or clinical response to the administration of a drug combination different from that anticipated from the known effects of the two agents when given alone.
<b>DUE</b>	Drug Usage Evaluation
<b>Expiration/Stop</b>	The date on which a prescription is no longer active. Typically, this date is 30 days after the issue date for narcotics, 365 days after the issue date for other medications and 365 days after the issue date for supplies.
<b>FDB</b>	First DataBank
<b>Finish</b>	Term used for completing orders from Order Entry/Results Reporting V. 3.0.
<b>GUI</b>	Acronym for Graphical User Interface.
<b>Issue Date</b>	The date on which the prescription was written. This date is usually, but not always, the same as the first fill date. This date cannot be later than the first fill date.
<b>HFS</b>	Host File Server.
<b>Health Insurance Portability and Accountability Act of 1996 (HIPAA)</b>	A Federal law that makes a number of changes that have the goal of allowing persons to qualify immediately for comparable health insurance coverage when they change their employment relationships. Title II, Subtitle F, of HIPAA gives HHS the authority to mandate the use of standards for the electronic exchange of health care data; to specify what medical and administrative code sets should be used within those standards; to require the use of national identification systems for health care patients, providers, payers (or plans), and employers (or sponsors); and to specify the types of measures required to protect the security and privacy of personally identifiable health care information. Also known as the Kennedy-Kassebaum Bill, the Kassebaum-Kennedy Bill, K2, or Public Law 104-191.
<b>JCAHO</b>	Acronym for Joint Commission on Accreditation of Healthcare Organizations
<b>Label/Profile Monitor</b>	A file for each printer which records, in the order in which they were printed, the last 1000 labels or profiles printed on that printer. This allows a rapid reprint of a series of labels or profiles that were damaged by a printer malfunction or other event.



<b>Acronym/Term</b>	<b>Definition</b>
<b>Local Possible Dosages</b>	Free text dosages that are associated with drugs that do not meet all of the criteria for Possible Dosages.
<b>Medication Instruction File</b>	The MEDICATION INSTRUCTION file is used by Unit Dose and Outpatient Pharmacy. It contains the medication instruction name, expansion and intended use.
<b>Medication Order</b>	A prescription.
<b>Medication Profile</b>	A list of all active or recently canceled or expired prescriptions for a patient sorted either by date, drug, or classification. Unlike the action profile, this profile is for information only and does not provide a signature line for a physician to indicate action to be taken on the prescription.
<b>Medication Routes File</b>	The MEDICATION ROUTES file contains medication route names. The user can enter an abbreviation for each route to be used at the local site. The abbreviation will most likely be the Latin abbreviation for the term.
<b>Med Route</b>	The method in which the prescription is to be administered (e.g., oral, injection).
<b>NCCC</b>	Acronym for National Clozapine Coordinating Center.
<b>Non-Formulary Drugs</b>	The medications, which are defined as commercially available drug products not included in the VA National Formulary.
<b>Non-VA Meds</b>	Term that encompasses any Over-the-Counter (OTC) medications, Herbal supplements, Veterans Health Administration (VHA) prescribed medications but purchased by the patient at an outside pharmacy, and medications prescribed by providers outside VHA. All Non-VA Meds must be documented in patients' medical records.
<b>Order</b>	Request for medication.
<b>Orderable Item</b>	An Orderable Item name has no strength attached to it (e.g., Acetaminophen). The name with a strength attached to it is the Dispense drug name (e.g., Acetaminophen 325mg).
<b>Partial Prescription</b>	A prescription that has been filled for a quantity smaller than requested. A possible reason for a partial fill is that a patient is to return to the clinic in ten days but the prescription calls for a thirty-day supply. Partial prescriptions do count as workload but do not count against the total number of refills for a prescription.
<b>Payer</b>	In health care, an entity that assumes the risk of paying for medical treatments. This can be an uninsured patient, a self-insured employer, or a health care plan or Health Maintenance Organization (HMO).
<b>Pending Order</b>	A pending order is one that has been entered by a provider through CPRS without Pharmacy finishing the order. Once Pharmacy has finished the order, it will become active.
<b>Pharmacy Narrative</b>	OUTPATIENT NARRATIVE field that may be used by pharmacy staff to display information specific to the patient.
<b>Polypharmacy</b>	The administration of many drugs together.

Acronym/Term	Definition
<b>POE</b>	Acronym for Pharmacy Ordering Enhancements (POE) project. Patch PSO*7*46 contains all the related changes for Outpatient Pharmacy.
<b>Possible Dosages</b>	Dosages that have a numeric dosage and numeric dispense units per dose appropriate for administration. For a drug to have possible dosages, it must be a single ingredient product that is matched to the DRUG file. The DRUG file entry must have a numeric strength and the dosage form/unit combination must be such that a numeric strength combined with the unit can be an appropriate dosage selection.
<b>Prescription</b>	This term is now referred to throughout the software as medication orders.
<b>Prescription Status</b>	<p>A prescription can have one of the following statuses.</p> <p><b>Active</b> - A prescription with this status can be filled or refilled.</p> <p><b>Canceled</b> - This term is now referred to throughout the software as Discontinued. (See Discontinued.)</p> <p><b>Discontinued</b> - This status is used when a prescription was made inactive either by a new prescription or by the request of a physician.</p> <p><b>Discontinued (Edit)</b> - Discontinued (Edit) is the status used when a medication order has been edited and causes a new order to be created due to the editing of certain data elements.</p> <p><b>Deleted</b> - This status is used when a prescription is deleted. Prescriptions are no longer physically deleted from the system, but marked as deleted. Once a prescription is marked deleted no access is allowed other than view.</p> <p><b>Expired</b> - This status indicates the expiration date has passed.</p> <p>*Note: A prescription that was canceled or has expired more recently than the date specified by the cutoff date, typically 120 days in the past, can still be acted upon.</p> <p><b>Hold</b> - A prescription that was placed on hold due to reasons determined by the pharmacist.</p> <p><b>Non-verified</b> - There are two types of non-verified statuses. Depending on a site parameter, prescriptions entered by a technician do not become active until a pharmacist reviews them. Until such review, they remain non-verified and cannot be printed, canceled or edited except through the <i>Verification</i> menu.</p> <p>The second non-verified status is given to prescriptions when a drug/drug interaction is encountered during the new order entry or editing of a prescription.</p> <p><b>Pending</b> - A prescription that has been entered through OERR.</p> <p><b>Refill</b> - A second or subsequent filling authorized by the provider.</p> <p><b>Suspended</b> - A prescription that will be filled at some future date.</p>
<b>Progress Notes</b>	A component of Text Integration Utilities (TIU) that can function as part of CPRS.
<b>Provider</b>	The person who authorized an order. Only users identified as providers who are authorized to write medication orders may be selected.
<b>Reprinted Label</b>	Unlike a partial prescription, a reprint does not count as workload.
<b>Questionnaire</b>	An entry in the DUE QUESTIONNAIRE file. This file entry contains the set

<b>Acronym/Term</b>	<b>Definition</b>
	of questions related to a DUE as well as the drugs being evaluated.
<b>Schedule</b>	The frequency by which the doses are to be administered, such as Q8H, BID, NOW, etc.
<b>Sig</b>	The instructions printed on the label.
<b>Significant</b>	The potential for harm is either rare or generally known so that it is reasonable to expect that all prescribers have taken this information into account.
<b>Speed Actions</b>	See Actions.
<b>Suspense</b>	A prescription may not be able to be filled on the day it was requested. When the prescription is entered, a label is not printed. Rather, the prescription is put in the RX SUSPENSE file to be printed at a later date.
<b>Third (3<sup>rd</sup>) Party Claims</b>	Health care insurance claims submitted to an entity for reimbursement of health care bills.
<b>Time In</b>	This is the time that the patient's name was entered in the computer.
<b>Time Out</b>	This is the time that the patient's name was entered on the bingo board monitor.
<b>TIU</b>	Text Integration Utilities; a package for document handling, that includes Consults, Discharge summary, and Progress Notes, and will later add other document types such as surgical pathology reports. TIU components can be accessed for individual patients through the CPRS, or for multiple patients through the TIU interface.
<b>TRICARE</b>	<p>TRICARE is the uniformed service health care program for:</p> <ul style="list-style-type: none"> <li>• active duty service members and their families</li> <li>• retired service members and their families</li> <li>• members of the National Guard and Reserves and their families</li> <li>• survivors, and</li> <li>• others who are eligible</li> </ul> <p>There are differences in how prescriptions for TRICARE beneficiaries are processed versus how prescriptions are processed for Veterans.</p>
<b>Units per Dose</b>	The number of Units (tablets, capsules, etc.) to be dispensed as a Dose for an order. Fractional numbers will be accepted for medications that can be split.
<b>VistA</b>	Acronym for Veterans Health Information Systems and Technology Architecture, the new name for Decentralized Hospital Computer Program (DHCP).
<b>Wait Time</b>	This is the amount of time it took to fill the prescription. It is the difference between Time In and Time Out. For orders with more than one prescription, the wait time is the same for each.

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