



# **OUTPATIENT PHARMACY (PSO)**

## **PHARMACIST'S USER MANUAL**

Version 7.0  
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## 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
10/11	i-ii, <a href="#">v-viii</a> , <a href="#">4</a> , <a href="#">7-10</a> , <a href="#">36</a> , <a href="#">56-58</a> , <a href="#">64</a> , <a href="#">66</a> , <a href="#">95</a> , <a href="#">118</a> , <a href="#">120-124</a> , <a href="#">126-127</a> , <a href="#">128-128b</a> , <a href="#">135-137</a> , <a href="#">139-145</a> , <a href="#">146-146b</a> , <a href="#">148</a> , <a href="#">149-149b</a> , <a href="#">150-153</a> , <a href="#">154-154b</a> , <a href="#">155-156</a> , <a href="#">165</a> , <a href="#">175-178</a>	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)
09/11	i,vi-vii, 30a-30f	PSO*7*382	Added information regarding the new [PSO HRC PROFILE/REFILL] option. (N. Goyal, PM; J. Owczarzak, Tech Writer)
04/11	i, viii, 8, 170a-170d, 177-179	PSO*7*343	To add functionality to Outpatient Pharmacy for the On-Demand Displaying of FDA Medication Guides.  Display FDA Medication Guide [MG] added to Other OP Actions [OTH]  Updates to Index (T. Leggett, PM; B. Thomas, Tech Writer)

<b>Date</b>	<b>Revised Pages</b>	<b>Patch Number</b>	<b>Description</b>
04/11	i, vi, vii, viii, 5, 8, 10, 27-27b, 28, 30, 39-39nnn, 40, 54-54t, 58, 59, 60-60l, 78, 82, 159, 163, 167-180	PSO*7*251	<p>The following changes are included in this patch:</p> <ul style="list-style-type: none"> <li>-Outpatient List Manager Screen Views</li> <li>-Added HP and H to Hold Status</li> <li>-Removed DC code; Added DF,DE,DP,DD and DA</li> <li>-Added to Hidden Action List: IN</li> <li>- Removed DC code; Added DF,DE,DP,DD and DA, and</li> <li>- Added HP and H to Hold Status</li> <li>-Replaced Medication Short Profile</li> <li>-Inserted enhanced Order checks, Outpatient Pharmacy generated order checks</li> <li>-Added IN to Screen Scrape</li> <li>-Modified New Order Screen Scrape</li> <li>-Inserted Drug Allergy Screens</li> <li>-Updated Glossary and Index to start on odd pages (G. Tucker, PM; G. Scorca, Tech Writer)</li> </ul>
11/10	All	PSO*7*358	<p>Added information regarding TRICARE Active Duty Bypass/Override details (S. Spence, PM; G. Johnson, Tech Writer)</p>

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# Chapter 1: List Manager

The screen displayed when processing an order has changed dramatically from the previous version of Outpatient Pharmacy (e.g., v. 6.0). The new screen was designed using List Manager.

This new screen gives more information and easier accessibility to vital reports and areas of a patient's chart.

Please take the time to read over the explanation of the screen and the actions that can now be executed at the touch of a key. This type of preparation before attempting to use List Manager will reduce the time and effort needed to become skilled in order processing with this new version of List Manager.

## Outpatient List Manager

Allergy Indicator

Screen Title → Patient Information      Feb 09, 2006 16:31:03      Page: 1 of 2

Header Area {  
OPPATIENT17, ONE  
PID: 000-12-3456      Ht (cm): 175.26 (08/06/2000)  
DOB: AUG 30, 1948 (52)      Wt (kg): 108.18 (01/14/2006)  
SEX: MALE  
+  
Eligibility: SERVICE CONNECTED 50% to 100%      SC%: 70  
RX PATIENT STATUS: SC LESS THAN 50%

List Area (Scrolling region) {  
Disabilities:  
1313 TWIN OAKS LANE  
ANYVILLE  
ALABAMA 12345  
Prescription Mail Delivery: Regular Mail  
HOME PHONE: 555-555-8361  
CELL PHONE:  
WORK PHONE:

Message Window {  
Allergies  
Verified: PEANUTS,  
+ Enter ?? for more actions

Action Area {  
EA Enter/Edit Allergy/ADR Data      PU Patient Record Update  
DD Detailed Allergy/ADR List      EX Exit Patient List  
Select Action: Quit//

**Screen title:** The screen title changes according to what type of information List Manager is displaying (e.g., Patient Information, Medication Profile, New OP Order (ROUTINE), etc.).

**Allergy indicator:** This indicator displays when there has been information entered into the ALLERGY field for the patient. The indicator displays "NO ALLERGY ASSESSMENT" if there is no allergy assessment for the patient.

**Header area:** The header area is a "fixed" (non-scrollable) area that displays patient information.

**List area:** (scrolling region) This area scrolls (like the previous version) and displays the information on which action can be taken.

**Message window:** This section displays a plus (+) sign, minus (-) sign, or informational text (i.e., Enter ?? for more actions). If a plus sign is entered at the action prompt, List Manager will "jump" forward a page. If a minus sign is displayed and entered at the action prompt, List Manager will "jump" back a screen. The plus and minus signs are only valid actions if they are displayed in the message window.

**Action area:** A list of actions display in this area of the screen. If a double question mark (??) is entered at the "Select Item(s)" prompt, a "hidden" list of additional actions that are available will be displayed.

**Example: Showing more Indicators and Definitions**

**Order Status and CMOP Indicators**

**Allergy Indicator**

**Copay Indicator**

**ePharmacy Indicator**

**Pending Orders**

**Flagged Order**

**Non-VA Meds Orders**

**Return To Stock Indicator**

Medication Profile		May 22, 2006 10:44:56	Page: 1 of 1					
OPPATIENT16, ONE			<A>					
PID: 000-24-6802		Ht (cm): 177.80 (02/08/2004)						
DOB: APR 3, 1941 (65)		Wt (kg): 90.45 (02/08/2004)						
SEX: MALE		Non-VA Meds on File						
		Last entry on 01/13/01						
#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----ACTIVE-----								
1	503902	ACETAMINOPHEN 500MG TAB	60	AT	05-22	05-22	3	30
2	503886\$	DIGOXIN (LANOXIN) 0.2MG CAP	60	A>	05-07	05-07	5	30
3	503871\$	HISTOPLASMIN 1ML	1	A	03-14	03-14R	5	30
4	100002042\$e	NALBUPHINE HCL INJ 10MG/ML	1	A	03-14	03-14	5	30
5	100002040\$	SALICYLIC ACID 40% OINT (OZ)	1	S	03-14	03-17	5	30
-----DISCONTINUED-----								
6	503881	BACLOFEN 10MG TABS	30	DC	04-07	05-01	2	30
7	100002020A\$	TIMOLOL 0.25% OPTH SOL 10ML	1	DE	02-03	02-03	5	30
-----HOLD-----								
8	100001942	ABDOMINAL PAD 7 1/2 X 8 STERILE	1	H	09-28	09-28	5	30
-----NON-VERIFIED-----								
9	100002039\$	BACLOFEN 10MG TABS	30	N	03-14	03-14	5	30
-----PENDING-----								
10	AMPICILLIN 250MG CAP		QTY: 40		ISDT: 05-29		REF: 0	
11	SIMETHICONE 40MG TAB		QTY: 30		ISDT: 05-30		REF: 3	
-----NON-VA MEDS (Not dispensed by VA)-----								
GINKO EXT 1 TAB ONCE A DAY BY MOUTH					Date Documented: 01/13/01			
IBUPROFEN 50MG TAB					Date Documented: 12/10/00			
Enter ?? for more actions								
PU	Patient Record Update			NO	New Order			
PI	Patient Information			SO	Select Order			
Select Action: Quit//								

# Using List Manager with Outpatient Pharmacy

List Manager is a tool designed so that a list of items can be presented to the user for an action.

For Outpatient Pharmacy, the List Manager does the following:

- Allows the pharmacist or technician to browse through a list of actions
- Allows the pharmacist or technician to take action against those items
- Allows the user to select an action that displays an action or informational profile
- Allows the user to select a different action without leaving an option.

## Entering Actions

Actions are entered by typing the name(s), or synonym(s) at the "Select Item(s)" prompt. In addition to the various actions that may be available specific to a particular option, List Manager provides generic actions applicable to any List Manager screen. A double question mark (??) may be entered at the "Select Action" prompt for a list of all actions available. The following is a list of generic List Manager actions with a brief description. The synonym for each action is shown in brackets following the action name. Entering the synonym is the quickest way to select an action.

Action	Description
Next Screen [+]	Move to the next screen (may be shown as a default).
Previous Screen [-]	Move to the previous screen.
Up a Line [UP]	Move up one line.
Down a Line [DN]	Move down one line.
Shift View to Right [>]	Move the screen to the right if the screen width is more than 80 characters.
Shift View to Left [<]	Move the screen to the left if the screen width is more than 80 characters.
First Screen [FS]	Move to the first screen.
Last Screen [LS]	Move to the last screen.

<b>Action</b>	<b>Description</b>
Go to Page [GO]	Move to any selected page in the list.
Re Display Screen [RD]	Redisplay the current.
Print Screen [PS]	Prints the header and the portion of the list currently displayed.
Print List [PL]	Prints the list of entries currently displayed.
Search List [SL]	Finds selected text in list of entries.
Auto Display (On/Off) [ADPL] automatically.	Toggles the menu of actions to be displayed/not displayed
Quit [QU]	Exits the screen (may be shown as a default).

## Outpatient Pharmacy Hidden Actions

The Outpatient Pharmacy hidden actions will display with the previous hidden actions once a completed or finished order is selected and a double question mark (??) is entered at the "Select Action" prompt.

The following hidden actions appear on the Medication Profile screen and can only be applied to one order at a time.

<b>Action</b>	<b>Description</b>
Activity Logs [AL]	Displays the Activity Logs.
Copy [CO]	Allows the user to copy and edit an order.
DIN	Displays available drug restriction/guideline information for the Dispense Drug and Orderable Item associated with the selected medication order.
IN	Intervention Menu
Hold [HD]	Places an order on a hold status.
Other OP Actions [OTH]	Allows the user to choose from the following sub-actions: Progress Note [PN], Action Profile [AP], Print Medication Instructions [MI], Display Orders' Statuses [DO], Non-VA Meds Report [NV], or Display FDA Medication Guide [MG].

<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

<b>Action</b>	<b>Description</b>
Exit [EX]	Exit processing pending orders.
AC	Accept.
BY	Bypass.
ED	Edit.
FN	Finish.

## Other Screen Actions

<b>Action</b>	<b>Description</b>
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.
View Addtnl Rej Info [ARI]	Displays additional reject information from the payer, if available. This hidden action is available from the Reject Information screen.

## Chapter 2: Print from Suspense File

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This chapter describes the *Print from Suspense File* option used for printing suspended prescriptions.

### 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 that date, 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 a prescription is determined to be an ePharmacy prescription (e.g., third party electronically billable), an electronic claim will be sent by the Electronic Claims Management Engine (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.

### **¾ Days Supply Hold**

Sites were seeing a great number of refill-too-soon third party claim rejections due to prescriptions being filled too early. To help prevent this for ePharmacy prescriptions, the system will now verify that ¾ of the days supply has elapsed on the previous fill before the prescription may be refilled. The following list describes the changes.

- ePharmacy prescriptions are delayed from being sent to CMOP and printed for local mail until ¾ of the days supply has elapsed.
- An activity log entry will state the date/time that the Rx will be allowed to be removed from suspense. The activity log will be 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.				

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



remote prescription statuses will be included in order checking for a new order being processed from within backdoor outpatient pharmacy and for new orders being placed by CPRS or by Inpatient Medications. Any remote Outpatient order that has been expired or discontinued for 30 days or less will be included in the list of medications to be checked.

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 doing remote order checks. Please wait..." has been added to the screen. The previous comment, "Now doing order checks. Please wait..." is replaced by: "Now doing drug interaction and 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. However, future patches are planned to send/receive the drug class to the HDR, and then it will be possible to use non-standardized remote orders for duplicate drug class checks.

When an order is an ePharmacy order (determined to be third party billable), the billing data is sent to the Electronic Claims Management Engine (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
```

## Entering a New Order

Actions display in the action area of the screen. Actions with parentheses ( ) around them are invalid actions for that order. A double question mark (??) displays all the actions available, including the Outpatient Pharmacy actions described in the section "Using List Manager." If one of the hidden actions is selected and it is invalid, a message will display in the message window.

### Example: Entering a New Order

```
Select Option: RX (Prescriptions)

      Orders to be completed for all divisions: 14

Do you want an Order Summary? No//
```

A summary list of the number of pending orders can be displayed by Division or by each Clinic within the Division where the user is signed on. This is helpful when completing batch orders. In this example, an individual patient name is entered.

```
Patient Prescription Processing
Barcode Rx Menu ...
Complete Orders from OERR
Discontinue Prescription(s)
Edit Prescriptions
List One Patient's Archived Rx's
Manual Print of Multi-Rx Forms
Reprint an Outpatient Rx Label
Signature Log Reprint
View Prescriptions

Select Rx (Prescriptions) Option: PATient Prescription Processing
Select PATIENT NAME: OPPATIENT16,ONE  OPPATIENT16,ONE  4-3-41  000246802
YES      SC VETERAN
Patient is enrolled to receive ScripTalk 'talking' prescription labels.

Eligibility: SC
RX PATIENT STATUS: SERVICE CONNECTED//  <Enter>
-----example continues-----
```

A detailed explanation of the different parts of the screen can be found under "List Manager Options" at the beginning of this manual. The Patient Information screen displays the information on two pages. Only the second screen is shown in this example.

### Example: Entering a New Order (continued)

Patient Information	May 22, 2001 10:44:38	Page: 2 of 2
OPPATIENT16,ONE		
PID: 000-24-6802	Ht (cm): 177.80 (02/08/1999)	
DOB: APR 3,1941 (60)	Wt (kg): 90.45 (02/08/1999)	
SEX: MALE		
+		
Allergies:		
Remote: ASPIRIN, NON-OPIOID ANALGESICS		
Adverse Reactions:		
Enter ?? for more actions		
EA Enter/Edit Allergy/ADR Data	PU Patient Record Update	
DD Detailed Allergy/ADR List	EX Exit Patient List	
Select Action: Quit// <Enter>		

Although the default option is “Quit” at the "Select Action" prompt, pressing the Enter key here quits the Patient Information screen and displays the Medication Profile. This Medication Profile includes any Non-VA Med orders documented via the CPRS GUI application.

Medication Profile	May 22, 2001 10:44:56	Page: 1 of 1
OPPATIENT16,ONE		
PID: 000-24-6802	Ht (cm): 177.80 (02/08/1999)	
DOB: APR 3,1941 (60)	Wt (kg): 90.45 (02/08/1999)	
#	RX #	DRUG
		QTY ST
		ISSUE LAST REF DAY
		DATE FILL REM SUP
-----ACTIVE-----		
1	503902	ACETAMINOPHEN 500MG TAB
		60 A> 05-22 05-22 3 30
2	503886\$	DIGOXIN (LANOXIN) 0.2MG CAP
		60 A> 05-07 05-07 5 30
-----PENDING-----		
3	AMPICILLIN 250MG CAP	QTY: 40
		ISDT: 05-29 REF: 0
Enter ?? for more actions		
PU Patient Record Update	NO New Order	
PI Patient Information	SO Select Order	
Select Action: Quit//		

If a double question mark (??) is entered at the above “Select Action” prompt, the following hidden actions display in the action area.

The following actions are also available:			
RP Reprint (OP)	OTH Other OP Actions	DR Display Remote	
RN Renew (OP)	DN Down a Line	QU Quit	
DC Discontinue (OP)	RD Re Display Screen	LS Last Screen	
RL Release (OP)	PT Print List	FS First Screen	
RF Refill (OP)	PS Print Screen	GO Go to Page	
PP Pull Rx (OP)	> Shift View to Right	+ Next Screen	
IP Inpat. Profile (OP)	< Shift View to Left	- Previous Screen	
RS Reprint Sig Log	SL Search List	ADPL Auto Display (On/Off)	
IN Intervention Menu	CM Manual Queue to CMOP	RDD Fill/Rel Date Display	
UP Up a Line	Select Action: Quit//	OTH OTH	
--- Other OP Actions ---			
-----example continues-----			

Medications with non-numeric dosages, such as ointments and creams, will display non-numeric possible dosages as a default. Because the dosage is non-numeric, values for dispense units per dose and quantity cannot be calculated.

**Example: Entering a New Order (continued)**

```
DRUG:      HYDROCORTISONE 0.5% CREAM          DE200      VISN FORM; 30 GM/TUBE (IEN)
...OK? Yes//      (Yes)
Now doing order checks.  Please wait...

Available Dosage(s)
  1. SMALL AMOUNT
  2. MODERATE AMOUNT
  3. LIBERALLY
  4. LARGE AMOUNT

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 2 MODERATE AMOUNT

You entered MODERATE AMOUNT is this correct? Yes// <Enter> YES
ROUTE: TOPICAL// <Enter> TOPICAL
```

### **Entering a New Order --ePharmacy (Third Party Billable)**

For patients who have active third party insurance and have the appropriate eligibility requirements, the software will submit electronic claims to their insurance companies when prescriptions for billable drugs are ordered.

After a WINDOW order is entered and finished, the billing data is sent to the Electronic Claims Management Engine (ECME). ECME sends a message back to Outpatient Pharmacy displaying the status of the claim. For MAIL orders, the communication between Outpatient Pharmacy and ECME happens either during the Local Mail Label Print or during the CMOP transmission.

The following example shows the creation of a new WINDOW order starting with the "DRUG:" prompt.

#### **Example: Entering a New Order for ePharmacy Billing**

```
DRUG: PREDNISONE
  Lookup: GENERIC NAME
    1  PREDNISONE 1MG TAB          HS051
    2  PREDNISONE 20MG S.T.       HS051
    3  PREDNISONE 5MG TAB         HS051
CHOOSE 1-3: 3  PREDNISONE 5MG TAB      HS051
Now doing order checks.  Please wait...

Previously entered ICD-9 diagnosis codes: <Enter>

Select Primary ICD-9 Code: <Enter>
VERB: TAKE
Available Dosage(s)
    1. 20MG
    2. 40MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 20MG

You entered 20MG is this correct? Yes// <Enter> YES
VERB: TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// <Enter> 1
Dosage Ordered: 20MG

NOUN: TABLET
ROUTE: PO// <Enter>
    1  PO  ORAL (BY MOUTH)        PO
    2  PO  ORAL                   PO
CHOOSE 1-2: 2  ORAL              PO  BY MOUTH
Schedule: TID (THREE TIMES A DAY)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 10 (DAYS)
CONJUNCTION: <Enter>
PATIENT INSTRUCTIONS: WF
WITH FOOD
```

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

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

```
(TAKE ONE TABLET BY BY MOUTH THREE TIMES A DAY FOR 10 DAYS WITH FOOD)
DAYS SUPPLY: (1-90): 30// <Enter>
QTY ( TAB ) : 30// <Enter> 30
COPIES: 1// <Enter> 1
# OF REFILLS: (0-5): 5// <Enter>
PROVIDER: OPPROVIDER4,TWO
CLINIC: <Enter>
MAIL/WINDOW: WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: <Enter>
REMARKS: <Enter>
ISSUE DATE: TODAY// <Enter> (NOV 02, 2005)
FILL DATE: (11/2/2005 - 11/3/2006): TODAY// <Enter> (NOV 02, 2005)
Nature of Order: WRITTEN// <Enter> W
WAS THE PATIENT COUNSELED: NO// YES
WAS COUNSELING UNDERSTOOD: NO// YES

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

Rx # 100003840          11/02/05
OPPATIENT,FOUR          #30
TAKE ONE TABLET BY BY MOUTH THREE TIMES A DAY FOR 10 DAYS WITH FOOD

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

Is this correct? YES// <Enter> YES
```

Prescription 100003840 successfully submitted to ECME for claim generation.

```
Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Gathering claim info
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE
```

Another New Order for OPPATIENT,FOUR? YES// NO

## View of RX:

Medication Profile			Nov 02, 2005@07:33:29		Page: 1 of 1	
OPPATIENT, FOUR PID: 000-01-1322P      Ht (cm): _____ (_____) DOB: JAN 13,1922 (83)      Wt (kg): _____ (_____) SEX: MALE						
#	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 before continuing.

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

### 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-----



## Complete Orders from OERR

### [PSO LMOE FINISH]

When a clinician has created an order for a patient, the pharmacist then completes and verifies the order. The *Complete Orders from OERR* option is used to complete orders entered into the patient record through Order Entry Results Reporting (OERR) V. 3.0. This option uses the List Manager features.

Orders may be selected by patient, route, priority, clinic, or flag. “E” can be entered at the “Select By:” prompt to stop processing orders.

If a temporary address has no end date, the following text is now displayed: “(Temp address from XXX 99,9999 till (no end date))”.

For ePharmacy orders, after an order is finished, the billing data is sent to the Electronic Claims Management Engine (ECME). ECME sends a message back to Outpatient Pharmacy displaying the status of the claim. For an example, see “Finishing an ePharmacy Order” in this section.

#### Example: Finishing an Order from OERR

```
Select Outpatient Pharmacy Manager Option: RX (Prescriptions)

      Orders to be completed for all divisions: 16

Do you want an Order Summary? No//  <Enter> NO

      Patient Prescription Processing
      Barcode Rx Menu ...
      Complete Orders from OERR
      Discontinue Prescription(s)
      Edit Prescriptions
      ePharmacy Menu...
      List One Patient's Archived Rx's
      Manual Print of Multi-Rx Forms
      Reprint an Outpatient Rx Label
      Signature Log Reprint
      View Prescriptions

Select Rx (Prescriptions) Option: Complete Orders from OERR

There are multiple Institutions associated with this Outpatient Site for
finishing orders entered through CPRS. Select the Institution for which to
finish orders from. Enter '?' to see all choices.

Select CPRS ORDERING INSTITUTION: ALBANY// <Enter>      NY  VAMC  500

You have selected ALBANY.
After completing these orders, you may re-enter this option and select again.

Select By: (PA/RT/PR/CL/FL/E): PATIENT// <Enter>
All Patients or Single Patient: (A/S/E): SINGLE// <Enter>
Select Patient: OPPATIENT16,ONE  OPPATIENT16,ONE      4-3-41      000246802
      YES      SC VETERAN

Do you want to see Medication Profile? Yes//
```

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



The user may enter a question mark at the “Select Patient” prompt to view a list of patients with pending orders. A single patient may be selected for processing, or pending orders for all patients may be processed in sequence by the time of each order’s entry into the system.



Flagged orders will not be processed. They are not a part of any pending orders. To process flagged orders, you should enter **FL** at the “Select By” prompt. This ensures you will view all patients with flagged pending orders, allowing you to address their flagged orders; however, if you know which patients have flagged orders, you can access the flagged orders through the Medication Profile.



If the user answers **YES** to “Do you want to see Medication Profile?” and the patient has remote prescription(s), the following prompt appears.

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

If the user answers **YES** to “Display Remote Data?” then the “Remote Facilities Visited” screen appears, allowing the user to see what facilities the patient has prescriptions at and what those prescriptions are.

After the user answers the medication profile prompt, a warning displays if no allergy assessment has been made. The patient’s eligibility and RX patient status also displays.

## 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 besides 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) 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) 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:
```

## Third Party Payer Rejects - View/Process

### [PSO REJECTS VIEW/PROCESS]

This option provides information about rejects that have been on the Third Party Payer Rejects – Worklist.. This option allows the user to find, display and reopen rejects previously resolved from the Third Party Payer Rejects – Worklist in order to take action on them again.

The user can choose to view rejects for one, multiple, or all Outpatient Pharmacy Divisions.

#### Example: Viewing and Resolving Open Rejects

```
Select ePharmacy Menu Option: VP Third Party Payer Rejects - View/Process

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

DIVISION: ^ALL
```

The user can select one of the following selections to filter the data displayed:

- **DATE RANGE:** Selects a date range (Default: Last 90 days).

```
BEGIN REJECT DATE: T-90// <Enter> (MAR 09, 2007)

END REJECT DATE: T// <Enter> (JUN 07, 2007)
```

- **(P)ATIENT:** Selects a single patient, multiple patients, or all patients.
- **(D)RUG:** Selects a single drug, multiple drugs, or all drugs.
- **(R)x:** Selects a single prescription number, or multiple prescription numbers.
- **(I)NSURANCE:** Selects a single insurance, multiple insurances, or all insurances.

```
Select one of the following:

      P      PATIENT
      D      DRUG
      R      Rx
      I      INSURANCE

By (P)atient, (D)rug, (R)x or (I)nsurance: P// INSURANCE

Enter the whole or part of the Insurance Company
name for which you want to view/process REJECTS.

INSURANCE: TEST INS
ANOTHER ONE: <Enter>
```

Next, the user can choose to display either Unresolved, Resolved, or Both types of rejects.

```
Select one of the following:

      U      UNRESOLVED
      R      RESOLVED
      B      BOTH

(U)NRESOLVED, (R)RESOLVED or (B)OTH REJECT statuses: B// <Enter> BOTH
Please wait...

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

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

Rejects Processing Screen		Nov 21, 2005@08:27:37		Page:	1 of 1
Divisions: ALL					
Selection: ALL REJECTS FOR TEST INS					
#	Rx#	PATIENT(ID) [^]	DRUG	REASON	
1	100003872	OPPATIENT,FOUR(1322P	A AND Z OINTMENT	DUR:	
Payer Message:					
2	100003873	OPPATIENT,FOUR(1322P	PHYTONADIONE 5MG TAB 79	:REFILL	
TOO SO					
Payer Message:					
3	100003873	OPPATIENT,FOUR(1322P	PHYTONADIONE 5MG TAB	DUR:	
Payer Message:					
4	100003785	OPPATIENT,TEN(3222)	ALBUMIN 5% 250ML	DUR:	
Payer Message:					
5	100003882	OPPATIENT,TEN(3222)	ALBUTEROL INHALER	DUR:	
Payer Message:					
6	100003884	OPPATIENT,TEN(3222)	TEMAZEPAM 15MG CAP	DUR:	
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//					
-----example continues-----					

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

The following options are available on the screen above:

- DR – Sorts the list by the drug name.
- PA – Sorts the list by the patient's last name.
- RE – Sorts the list by the reject reason.
- RF – Refreshes the screen. (This selection retrieves DUR/ REFILL TOO SOON rejects that happened after the screen was originally populated.)
- RX – Sorts the list by Prescription number.
- GI – Groups the rejects by Insurance Company name.



an

The following two sets of characters denote the order by which the list is being ordered: [^] 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

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#: 17128842
Patient :	OPPATIENT, FOUR (000-01-1322P) Sex: M	DOB: JAN 13, 1922 (83)
Rx# :	100003873/0	ECME#: 000000504455 Date of Service: Nov 15, 2005
<b>REJECT Information</b>		
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	
DUR Add Msg :	THIS IS THE DUR ADDITIONAL TEXT.	
<b>OTHER REJECTS</b>		
29 - M/I Number Refills Authorized		
39 - M/I Diagnosis Code		
<b>INSURANCE Information</b>		
Insurance :	TEST INS	
Contact :	1-800-555-5050	
Group Name :	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.

#### **Hidden actions:**

- **COM (Add Comments)** – Allows the user to add reject specific comments. This 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.

### 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 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 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>TRICARE - Non-DUR/RTS</b>				
4	101359	OPTRICARE,ONE(7894)	BACLOFEN 10MG TABS	07 :M/I Cardholde
Payer Message:				
5	100924	OPTRICARE,TRI(4932)	LORAZEPAM 1MG TAB	07 :M/I Cardholde
Payer Message:				
<b>OTHER REJECTS</b>				
6	101173	IBPATIENT,ONE(9877)	FENOPROFEN 300MG CAP	08 :M/I Person Co
Payer Message:				
7	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**

**Hidden actions:**

- TRI (Show/Hide Tricare) - When toggled to Show, TRICARE Non-DUR/RTS rejects will be automatically displayed at the end of the listing. Toggling the TRI action to Hide will remove them from the screen.

These options are available on the following screen:

- VW (View Rx) – 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. This option is active for DUR rejects only.
- CSD (Change Suspense Date) – Allows the user to change the fill date for suspended prescriptions.

#### **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 Addtl Rej Info) – Allows the user to display additional reject information from the payer, if available.

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

Reject Information (UNRESOLVED) Nov 21, 2005@09:51:15		Page: 1 of 1
Division :	ALBANY	NPI#: 17128842
Patient :	OPPATIENT, FOUR (000-01-1322P) Sex: M	DOB: JAN 13, 1922 (83)
Rx# :	100003872/0	ECME#: 000000504454 Date of Service: Nov 15, 2005
<b>REJECT Information</b>		
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 :		
DUR Text :		
<b>INSURANCE Information</b>		
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 Date
Select: Quit//	<b>OVR</b> Override Reject	

When a claim is rejected, typically the Payer provides a “Reason for Service Code”, which displays on the reject as “Reason Code”. 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
FE	FORMULARY ENFORCEMENT
GP	GENERIC PRODUCT SELECTION
M0	PRESCRIBER CONSULTED
MA	MEDICATION ADMINISTRATION
MR	MEDICATION REVIEW
P0	PATIENT CONSULTED
PE	PATIENT EDUCATION/INSTRUCTION
PF	PATIENT REFERRAL
PH	PATIENT MEDICATION HISTORY
PM	PATIENT MONITORING
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

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
3M	COMPLIANCE AID PROVIDED

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## Example of TRICARE Bypass/Override Audit Report Detail

TRICARE BYPASS/OVERRIDE AUDIT REPORT -      DETAIL Print Date: OCT 31, 2010@11:59:22      Page: 1  
 DIVISION(S): DIVISION ONE, DIVISION TWO  
 TC TYPES: INPATIENT, NON-BILLABLE PRODUCT, REJECT OVERRIDE      By Division  
 ALL PRESCRIPTIONS BY ACTION 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					
***** TRICARE INPATIENT *****					
OPPATIENT, TRIONE/XXXX	10750XXXX\$	0/000009300XXX	09/10/10	C RT AC/N	
09/10/10 POSTMASTER	45.00	180	06XXX-3XXX-XX	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	06XXX-3XXX-XX	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	06524-3288-09	DOCUSATE NA 100MG CA	
50:Non-Matched Pharmacy Number					
25:M/I Prescriber ID					

OPHARM, 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		85.00			
RX COUNT		3			
MEAN		28.33			
		-----			
DIVISION: DIVISION TWO					
***** TRICARE INPATIENT *****					
OPPATIENT, TRISIX/XXXX	107XXXXXX\$	0/00000930XXXX	09/10/10	C RT AC/N	
09/10/10 POSTMASTER		10.00	180	06XXX-XXXX-XX	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	06XXX-XXXX-XX	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	06XXX-3XXX-XX	DOCUSATE NA 100MG CA
eT TRICARE DRUG NOT BILLABLE					
Fill Per Provider					
OPHARM, 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$      0/00000930XXXX      09/10/10      C RT AC/N
09/10/10 OPHARM,TWO          20.00          180          06XXX-XXXX-XX      METFORMIN HCL 500MG TAB
Claim ID: VA2005-056XXXX-XXXXXX-0007XXX
50:Non-Matched Pharmacy Number
25:M/I Prescriber ID

      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                    130.00
RX COUNT                      4
MEAN                          36.67
                               -----
GRAND TOTALS                  215.00
RX COUNT                      7
MEAN                          30.71
                               =====
REPORT HAS FINISHED

Press RETURN to continue:

```

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### **TRICARE 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:

#### **1. Display of non-DUR/RTS rejects**

- Non-DUR/RTS TRICARE rejections will be segregated at the end of the displayed information. They will be denoted with a "TRICARE - Non-DUR/RTS" header. This header remains regardless of whether the GI - Group by Insurance action is toggled on or off. The TRICARE section sorts in the same manner as the main sort for non-TRICARE 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:					
TRICARE - Non-DUR/RTS					
4	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//					

- TRICARE DUR/RTS rejects displays with all other DUR/RTS rejects. See the boxed text in the example below. Sequence 4 and 6 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	101960	OPTRICARE,ONE(4789)	ACETAZOLAMIDE 250MG	79 :REFILL TOO SO
Payer Message:				
4	101981	OPTRICARE,ONE(4789)	ATENOLOL 100MG TAB	79 :REFILL TOO SO
Payer Message:				
TRICARE - Non-DUR/RTS				
5	101980	OPTRICARE,ONE(4789)	DANTROLENE 25MG CAP	14 :M/I Eligibili
Payer Message:				
6	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 header "TRICARE" displays, and this "TRICARE" section sorts alphabetically within RTS/DUR insurances. This TRICARE section is separate from the Non-DUR/RTS section that displays at the end of the listing.

### 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:					
TRICARE					
2	101960	OPTRICARE,ONE(4789)	ACETAZOLAMIDE 250MG	79	:REFILL TOO SO
Payer Message:					
ZENITH ADMINISTRATORS					
2	101238	ECMEIBTEST,ONE(5566)	MEDROXYPROGESTRONE 1	79	:REFILL TOO SO
Payer Message:					
4	101981	OPTRICARE,ONE(4789)	ATENOLOL 100MG TAB	79	:REFILL TOO SO
Payer Message:					
TRICARE - Non-DUR/RTS					
5	101980	OPTRICARE,ONE(4789)	DANTROLENE 25MG CAP	14	:M/I Eligibili
Payer Message:					
6	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//					

The new TRI - Show/Hide Tricare toggle action has been added to the hidden menu on the Insurance Rejects screen. When toggled to Show, TRICARE Non-DUR/RTS rejects will automatically display at the end of the listing. Toggling the TRI action to Hide will remove them from the screen.

### Example with TRICARE 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:			
TRICARE - Non-DUR/RTS			
4 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:

<b>TRI Show/Hide Tricare</b>	FS First Screen	PT Print List
+ 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	QU Quit
DN Down a Line	PS Print Screen	

Enter RETURN to continue or '^' to exit:

**Example of TRICARE 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:

<b>TRI</b>	<b>Show/Hide Tricare</b>	FS	First Screen	PT	Print List
+	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	QU	Quit
DN	Down a Line	PS	Print Screen		

Enter RETURN to continue or '^' to exit:



## 2. Processing of TRICARE Rejections - TRICARE Eligible Bypass/Override Functions

- A bypass function is provided to allow continued processing of prescriptions for TRICARE eligible inpatients who's 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 the new 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 Rx 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 Printed By
```

```

=====
There are NO Labels printed.

ECME Log:
#    Date/Time          Rx Ref          Initiator Of Activity
=====
1    10/26/10@16:04:50  ORIGINAL      JOHN,DOE
Comments: TRICARE-Not ECME Billable: TRICARE INPATIENT/DISCHARGE

Enter ?? for more actions

Select Action:Quit//

```

## TRICARE Eligible Outpatient Override Function

- **An override function is provided to allow continued processing of prescriptions for TRICARE eligible outpatients when a rejected response is received from the TRICARE 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 section 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” security key and if selected, continued processing will occur.
- The Reject Action prompt will be updated to a default of “Quit”.

### Example of Reject Notification Screen Non-DUR/RTS with the default 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/[Discontinue]

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

- For Non-Billable TRICARE 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” security key and if selected, continued processing will occur. If the action Q (Quit) is selected, the Non-Billable TRICARE eligible prescription will go to the **Pharmacy Third Party Payer Rejects – Worklist** utilizing Reject Code “eT” with reject description “TRICARE-DRUG NON BILLABLE.” (The reject code “eT” is for use internal to the Vista system only and has no relation to any NCPDP reject code listing.) The new entry will be displayed in the TRICARE section of the **Pharmacy Third Party Payer Rejects – Worklist**.

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#: XXXXXXXXXX
Patient  : TRICARE,ONE(XXX-XX-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”.

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

## 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	RX	Sort by Prescription
PA	Sort by Patient	RF	Screen Refresh	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 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, Resubmit Claim (RES), Change Suspense Date (CSD) and Submit Override Codes (OVR) actions are not available for processing a TRICARE eligible Non-Billable reject. If selected, an error message will appear: “RES not allowed for TRICARE Non-Billable claim”, “CSD not allowed for TRICARE Non-Billable claim” or “OVR not allowed for TRICARE 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#:                                     Fill Date: Mar 16, 2009
CMOP Drug: DOCUSATE NA 100MG CA                          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 Message :
Reason :
DUR Text :
```

#### COMMENTS

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

#### INSURANCE Information

```
Insurance :
Contact :
Group Name :
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): DC//
```

### 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# : 27XXXXXX/0 ECME#:                                     Fill Date: 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 Message :
Reason :
DUR Text :
```

#### COMMENTS

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

#### INSURANCE Information

```
Insurance :
Contact :
Group Name :
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 Justification



This action requires the security key PSO TRICARE.

- A user must hold the “PSO TRICARE” security key for certain actions on the Third Party Payer Rejects – Worklist and the “Ignore” action on the TRICARE Reject Notification screen. If the user holds the security key “PSO TRICARE”, 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. The user will be prompted to enter their electronic signature code and asked to enter data into the TRICARE 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	Fill Date: Feb 08, 2009	
CMOP Drug: ACARBOSE 25MG TAB	NDC Code: 00026-2863-52	
REJECT Information (TRICARE)		
Reject Type	: M/I Cardholder ID (07) received on JUL 10, 2010@12:22:10	
Reject Status	: OPEN/UNRESOLVED - E REJECTED	
Payer Message	:	
Reason	:	
DUR Text	:	
COMMENTS		
- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK,ONE)		
INSURANCE Information		
Insurance	: EXPRESS SCRIPTS	
Contact	:	
Group Name	: TRICARE	
Group Number	: DODA	
Cardholder ID	: XXXXXXX	
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/ <input type="text" value="FIL"/>		
You are bypassing claims processing. Do you wish to continue (Y/N)? No/ <input type="text" value="Yes"/>		
Enter your Current Signature Code: <input type="text" value="SIGNATURE VERIFIED"/>		



TRICARE Justification: Patient required medication

- If the user does not hold the security key “PSO TRICARE”, an on screen alert to the user will display “Action Requires <PSO TRICARE> 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) 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 Fill Date: Feb 08, 2009
CMOP Drug: ACARBOSE 25MG TAB NDC Code: 00026-2863-52

REJECT Information (TRICARE)
Reject Type : M/I Cardholder ID (07) received on JUL 10, 2010@12:22:10
Reject Status : OPEN/UNRESOLVED - E REJECTED
Payer Message :
Reason :
DUR Text :

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

INSURANCE Information
Insurance : EXPRESS SCRIPTS
Contact :
Group Name : TRICARE
Group Number : DODA
Cardholder ID : XXXXXXXX
+ [Action Requires <PSO TRICARE> 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): Next Screen//

```

- The person that resolves TRICARE 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 which 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 that will prompt for label print.

```

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

REJECT Information (TRICARE)
Reject Type : M/I Cardholder ID (07) received on JUL 10, 2010@12:22:10
Reject Status : OPEN/UNRESOLVED - E REJECTED
Payer Message :
Reason :
DUR Text :

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

INSURANCE Information
Insurance : EXPRESS SCRIPTS
Contact :
Group Name : TRICARE
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 contain non-clinical rejects and are resolved in the same manner as DUR/RTS rejects. The comments section denotes whether the reject was transferred automatically as is the case in the example below or “Transferred by OPECC” will 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.

```
Reject Information (UNRESOLVED) Jul 30, 2008@14:54:51      Page: 1 of 2
Division : CHEYENNE VAM&ROC                             NPI#: 1164471991
Patient  : OPPATIENT, FOUR (666-55-9987) Sex: M          DOB: OCT 20, 1965 (42)
Rx#      : 2055203/1                                     ECME#: 000001615102
Date of Service: Jul 15, 2008
```

```
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

```
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
    Last Fill Date: 07/15/08 (Window)
(7) Fill Date: 07/11/08
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				
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(666-55-9987) Sex: M DOB: OCT 20, 1965 (42)  
 Rx# : 2055203/1 ECME#: 000001615102 Date of Service: Jul 15, 2008

#### 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//

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  
Select: Next Screen//^

RF Screen Refresh

GI Group by Insurance

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

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	DATE	ISSUE	LAST REF	FILL	REM	SUP	DAY
-----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 OPHTHALMIC 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	Renew

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-p OPP INSURANCE			
2	7/30/08@14:32:17	REFILL 1	OPPHARM, TWO
Comments: ECME: PULLED FROM SUSPENSE (NDC:00024-0303-06) -E REJECTED-p OPP INSURANCE			
3	7/30/08@14:55:56	REFILL 1	OPPHARM, TWO
Comments: Submitted to ECME: REJECT WORKLIST -E PAYABLE			

  

ECME REJECT Log:

```
Select Action:Quit//
```

## Non-Verified Counts

### [PSO NVCNT]

This option allows the user to obtain a count of the number of prescriptions remaining in a status of non-verified.

#### Example: Total of Non-verified prescriptions

```
Select Verification Option: NON-Verified Counts
DEVICE: HOME// [Select Print Device]

                                NON-VERIFIED PRESCRIPTION COUNTS
                                JUL 16,2007@14:57:34

TOTAL NUMBER OF NON-VERIFIED PRESCRIPTIONS : 12

NUMBER OF PATIENTS WITH ONE OR MORE NON-VERIFIED PRESCRIPTIONS : 9

(NOTE: Total number of patients listed here may not always equal the number at
the bottom, since some patients at the bottom may be counted more than once,
possibly having non-verified Rx's entered on different days.)

      # of          # of
      Date      Non-verified Rx's      Different Patients
      ----      -
07-27-98          1              1
05-18-99          2              1
06-22-00          2              2
TOTAL              5              4

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

## Rx Verification by Clerk

### [PSO VR]

This option verifies prescriptions in the non-verified status by entering the clerk.

## Verifying ePharmacy Orders

Verifying an ePharmacy order is similar to finishing an order. After the user reviews the ePharmacy order and chooses to accept the order, the billing data is sent to ECME, which sends a message back to Outpatient Pharmacy displaying the status of the claim. The ECME section of the Activity Log is also updated.

```
RX: 101435    PATIENT: OPPATIENT,FOUR (000-01-1322P)
STATUS: Non-Verified
      DRUG: ENTEX CAP
      QTY: 10      10 DAY SUPPLY
      SIG: TAKE 25MG BY BY MOUTH EVERY DAY FOR 10 DAYS WITH FOOD
      LATEST: 11/05/2005      # OF REFILLS: 0  REMAINING: 0
      ISSUED: 11/05/2005      PROVIDER:
      LOGGED: 11/05/2005      CLINIC: NOT ON FILE
      EXPIRES: 11/15/2005      DIVISION: ALBANY ISC (500)
      CAP: NON-SAFETY      ROUTING: WINDOW
      ENTRY BY: OPPHARMACIST,ONE      VERIFIED BY:

PATIENT STATUS : SC LESS THAN 50%      COPIES : 1
EDIT: (Y/N/P): N// NO
VERIFY FOR OPPHARMACIST4,THREE ? (Y/N/Delete/Quit): Y// <Enter>

Prescription 100003840 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Gathering claim info
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE

Another New Order for OPPATIENT,FOUR? YES//
```



<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 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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