Preface

This updated patch addendum replaces all earlier versions of the patch addendum.

The requirements and functionality outlined in the Software Requirements Specification Indian Health Service Point of Sale (POS) Version 1.0 Patch 39 include the following:

1. Addition of an Audit Trail capability to monitor new and changed fields, along with the ability to run the POSM/RPT/ADMN AUD POS Table Maintenance Site Parameters Report

2. The transmission to Third Party Billing of a Payer Indicator field to facilitate a POS transaction crossing over

3. Addition of a parameter that will keep Reject Information from being passed to IHS Third Party Billing if set

4. Addition of a new report (PVT) to the RPT/SITE menu

5. A correction so that no Unrecognized Reject Codes show up in reports or the POS User Screen

6. Modifications to ABSP Routine

7. New and modified POS NCPDP 5.1 formats

Security

This patch uses the same security keys as described in the Pharmacy Point-of-Sale (ABSP) User Manual, Version 1.0.
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1.0 Introduction

Please review these changes and add a copy of them to any printed documentation your site may be using for ABSP Version 1.0. These changes will be integrated into future versions of the software and user manuals, and will no longer be considered an addendum at the time of the next release.

Patch 39 of Pharmacy Point of Sale (POS) Version 1.0 contains the following changes:

1. RX BILLING is now a required field in the Insurer File.

2. New Audit Trail POS Table Maintenance Site Parameters report is available through POSM/RPT/ADMN/AUD. It will display BEFORE VALUE, AFTER VALUE, and USER who made the change to a specific SITE parameter.

   Note: Only users with the ABSPZ MANAGER KEY are able to run this report.

3. The field Payer Indicator has been added to the array of information being passed to IHS TPB.

4. Reject information can now be kept from being sent to TPB by setting a parameter in the BAS: Edit basic pharmacy POS parameters option in the POS MGR menu if the site is using the Accounts Receivable system IHS Third Party Billing.


6. Paging on Collection Productivity report and Rejected Claims By Reject Code report has been corrected. (Heat Ticket #12800).

7. POS User Display or reports will not contain Unrecognized Reject Codes. (Heat Ticket #11645).
2.0 **New Audit Trail Functionality and Report**

The Menu options under the SET (Pharmacy Point of Sale Setup Menu) listed in Figure 2-1 is included in the Audit trail and report. Any changes made in these menus are tracked with the old value to the new value, and with who made the change.

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**Figure 2-1: Pharmacy POS Manager Menu options**

Figure 2-2 shows that no fields have been audited, and thus the report has no data.
Output DEVICE: HOME/

Running POSM/BAS to restore fields:

============================================================================
LISTING of Audited fields   JUL 8,2010  Page 1
============================================================================
Date/Time     User     Old Value        New Value
---------------------------------------------------------------------------
(REPORT COMPLETE):

Figure 2-2: Example of report without audits

Figure 2-3 is an example of changes made to fields in the BAS–Edit basic pharmacy
POS parameters. The Audit Report displays OLD VALUE, NEW VALUE, and
USER who made the change.

Path POS/MGR/SET/BAS

Select Pharmacy Point of Sale Setup Menu Option: BAS  Edit basic pharmacy POS
parameters

Edit Pharmacy POS configuration

Answer with '?' for help at any question.

How will data be input to Point of Sale?: MANUAL  
// 1 RPMS RX CALLS POS <-NEW VALUE  
What is the default dial-out to send claims to?: ENVOY DIRECT VIA T1 LINE
    //
To get an outside line, what number should be dialed?:
    //
What Accounts Receivable system is used?: IHS 3RD PARTY BILLING
    //
Send POS rejected claims to 3PB/AR?: SEND 3PB REJECT
    // SUP SUPPRESS 3PB REJECT <-NEW VALUE

Now set up the STANDARD Pricing Formula. (Different pricing
policies for different insurers can be established later.)

Where do we find the UNIT PRICE of a drug?: PRESCRIPTION FILE AWP
    //
Multiply the unit price by what factor (1 = 100%, .95 = 95%, etc.) ?: 1
    //
What is the default DISPENSING FEE?: 5.6//

Figure 2-3: Example of changes in the BAS–Edit basic pharmacy POS parameters

Figure 2-4 is an example of the Audit Trail Report. The report can be run by
pharmacy or by date range. In this example, the parameter selected was by date range.
This report shows any changes made for the date range specified.
Figure 2-4: Audit Trail Report
3.0 Transmission of Third Party Billing Payer Indicator Field

A Payer Indicator field (primary, secondary, tertiary) has been added for future use when the Coordination of Benefits is implemented for Pharmacy POS. This field will be transmitted to Third Party Billing and Accounts Receivable with the Rx Transmission and, when in use, indicates the payer type. It is not being used at this time.
4.0 **New Parameter Added for Pharmacy POS**

A new parameter was added in Pharmacy Point of Sale (BAS) Basic pharmacy POS parameter to turn on or off sending rejected claims to Third Party Billing and Accounts Receivable.
5.0 New RPT/SITE/PVT Report

<table>
<thead>
<tr>
<th>DAY TOTALS - by RELEASED DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>INS TOTALS - by INSURER</td>
</tr>
<tr>
<td>MPD TOTALS - MEDICARE PART D INSURERS</td>
</tr>
<tr>
<td>PVT TOTALS - by PRIVATE INSURER</td>
</tr>
<tr>
<td>DRUG Billed and Collected DRUG cost</td>
</tr>
<tr>
<td>EXP Print Expense Report</td>
</tr>
<tr>
<td>PSR AR Period Summary Report</td>
</tr>
<tr>
<td>STA A/R Statistical Report</td>
</tr>
<tr>
<td>RIC Insurance Coverage Report</td>
</tr>
<tr>
<td>TPS Transaction Posting Summary</td>
</tr>
</tbody>
</table>

Select Administration reports Option: PVT TOTALS - by PRIVATE INSURER
...updating the Report Master file, please stand by...

* Previous selection: RELEASED DATE from Jan 1,2010
START WITH RELEASED DATE: Jan 1,2010// (JAN 01, 2010)
GO TO RELEASED DATE: LAST//
DEVICE: VT Right Margin: 80//

POINT OF SALE TOTALS MAY 4,2010
From JAN 1,2010 thru 2:00 PM
PAYABLE SHORTED PAPER REJECTED UNINSURED DUPLICATE
PRIVATE RX ANTHEM PRESCRIPTION

<table>
<thead>
<tr>
<th>SUBTOTAL</th>
<th>0.00</th>
<th>0.00</th>
<th>0.00</th>
<th>89.92</th>
<th>0.00</th>
<th>0.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>SUBCOUNT</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>89.92</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>COUNT</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Press ENTER to continue:

Figure 5-1: PVT totals by private insurer
6.0 No Unrecognized Reject Codes in reports or the POS User Screen

Unrecognized Reject Codes were procreated in reports and the POS User screen due to an error of spaces inserted into the Reject Code field. This issue has been fixed and no Unrecognized Reject Codes will appear in reports and the POS User screen.
7.0 ABSP Routine/Data Dictionary Definition Modification

The following routines were new for POS Patch 39

<table>
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<tr>
<th>Routine</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABSPOSRS</td>
<td>POS Parameter setup for Audit Trail Report</td>
</tr>
<tr>
<td>ABSPOSUQ</td>
<td>Creation of Audit Trail</td>
</tr>
<tr>
<td>ABSPOSUU</td>
<td>Paging correction for several reports</td>
</tr>
</tbody>
</table>

The following routines were modified in Patch 39

<table>
<thead>
<tr>
<th>Routine</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABSPOSBB</td>
<td>Modified for setting sending rejects to TPB</td>
</tr>
<tr>
<td>ABSPOSCF</td>
<td>Modified to allow formatting in field 104 for North Carolina Medicaid</td>
</tr>
<tr>
<td>ABSPOSEV</td>
<td>verification for requirements for this version of POS</td>
</tr>
<tr>
<td>ABSPOSH6</td>
<td>stripping out unwanted spaces for unwanted rejects codes</td>
</tr>
<tr>
<td>ABSPOSR5</td>
<td>Adding NDC #/drug name RCR report</td>
</tr>
<tr>
<td>ABSPOSS8</td>
<td>prompt for not sending rejects to claims for TPB</td>
</tr>
<tr>
<td>ABSPOSSH</td>
<td>Added code to populate Coordination of Benefit fields</td>
</tr>
</tbody>
</table>

The following data dictionary definitions were altered for POS Patch 39

- ABSP DIAL OUT
- ABSP INSURER
- ABSP NCPDP FIELD DEFS
- ABSP NCPDP FORMATS
- ABSP PHARMACIES
- ABSP PRICING TABLES
- ABSP SETUPA
8.0 POS 5.1 Formats

8.1 New 5.1 POS Formats—None

8.2 Adjusted 5.1 Formats
- ADVANCE MEDBLUERX PDP 5.1 ALL 5.1 FORMATS
  - Removed special code in 104 field
- ADVANCE MEDBLUERX PDP 5.1
  - Removed special code in 104 field
- ADVANCE PRSCPT MGMT ADV 5.1
  - Removed special code in 104 field
- ADVANCEPCS 5.1
  - Removed special code in 104 field
- ALTA RX 5.1
  - Removed special code in 104 field
- BC/BS ARIZONA 5.1
  - Removed special code in 104 field
- BLUE SHIELD CALIFORNIA 5.1
  - Removed special code in 104 field
- CALIFORNIA MED-CAL 5.1
  - MULTIPLE HEAT TICKETS;
- CARECLAIM PDP 5.1
  - Removed special code in 104 field
- CAROLINA HEALTH PLAN 5.1
  - Removed special code in 104 field
- CAROLINA HEALTH PLAN RVRSL 5.1
  - Removed special code in 104 field
- COLORADO MEDICAID 5.1
  - Removed special code in 104 field
- COLORADO MEDICAID 5.1 REVERSAL
  - Removed special code in 104 field
- ENVISIONS 5.1
  - Added field 301
- FFI RX CHOICE 5.1
  - Removed special code in 104 field
- FOUNDATION HEALTH GENERIC 5.1
  - Removed special code in 104 field
- KANSAS MEDICAID 5.1
  - Added field 426 to the pricing segment
- LDI PHARMACY BENEFIT MGMT 5.1
  - Removed special code in 104 field
- MAILHANDLERS 5.1
  - Removed special code in 104 field
- MEDICARE PART D LOVELACE
  - Removed special code in 104 field
- MEDICARE PART D LOVELACE RVRSL
  - Removed special code in 104 field
- MEDICARE PARTD PCS 5.1
  - Removed special code in 104 field
- MICHIGAN MEDICAID 5.1
  - Added field 306 to INSURANCE segment
- MISSISSIPPI MEDICAID 5.1
  - Removed special code in 104 field
- MOLINA SALUD OF NM 5.1
  - Removed special code in 104 field
- NC MEDICAID 5.1
  - Added special code in fields 104 and 101
- NEBRASKA MEDICAID 5.1 REVERSAL
  - Removed special code in 104 field
- NEW MEXICO MEDICAID 5.1
  - Removed special code in 104 field
- NM MEDICAID 5.1 REVERSAL
  - Removed special code in 104 field
- OKLAHOMA CLAIM REVERSAL 5.1
  - Removed special code in 104 field
- OMNISYS REVERSAL 5.1
  - Removed special code in 104 field
- PCS 5.1
  - Removed special code in 104 field
- UNION PACIFIC RR EMP RVRSL 5.1
  - Removed special code in 104 field
- UTAH MEDICAID 5.1
  - Change to enhance DUR segment
- WA MEDICAID 5.1 REVERSAL
  - Removed special code in 104 field
- WALMART ASSOCIATES 5.1
  - Removed special code in 104 field
- WASHINGTON MDCAID SXC RVRSL
  - Removed special code in 104 field
- WASHINGTON MEDICAID 5.1
  - Removed special code in 104 field
- WASHINGTON MEDICAID SXC 5.1
  - Removed special code in 104 field
Contact Information

If you have any questions or comments regarding this distribution, please contact the OIT Help Desk (IHS).

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