



RESOURCE AND PATIENT MANAGEMENT SYSTEM

Pharmacy POS

(ABSP)

Technical Manual

Version 1.0 Patch 61
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Table of Contents

Revision History	vi
Preface	vii
1.0 Introduction.....	1
2.0 Implementation and Maintenance	2
2.1 General Information	2
2.2 System Requirements	2
2.3 Package-wide Variables	2
2.4 Journaling	2
2.5 Security Keys.....	2
3.0 (mnemonic) Menu	4
3.1 Routine Descriptions.....	10
3.2 Routine List.....	10
3.3 Routines With Descriptions.....	11
4.0 Files and Tables.....	23
4.1 File List	23
4.2 File Access	27
4.3 Cross Reference.....	30
4.3.1 ABSP Claims (9002313.02).....	30
4.3.2 ABSP RESPONSES (9002313.03)	31
4.3.3 ABSP COMBINED INSURANCE (9002313.1)	31
4.3.4 ABSP REJECT CODES (9002313.3)	31
4.3.5 ABSP CERTIFICATION (9002313.31)	32
4.3.6 ABSP INSURER (9002313.4).....	32
4.3.7 ABSP DUR/PPS (9002313.473).....	32
4.3.8 ABSP DIAGNOSIS CODE (9002313.491)	32
4.3.9 ABSP DATA INPUT (9002313.51)	32
4.3.10 ABSP NCPDP OVERRIDE (9002313.511)	33
4.3.11 ABSP INPUT USER PREF (9002313.515)	33
4.3.12 ABSP ORIGIN OF INPUT (9002313.516)	33
4.3.13 ABSP PRICING TABLES (9002313.53)	33
4.3.14 ABSP MODEM TYPES (9002313.54)	33
4.3.15 ABSP DIAL OUT (9002313.55)	33
4.3.16 ABSP PHARMACIES (9002313.56)	33
4.3.17 ABSP LOG OF TRANSACTIONS (9002313.57)	34
4.3.18 ABSP STATISTICS (9002313.58)	34
4.3.19 ABSP TRANSACTION (9002313.59)	34
4.3.20 ABSP REPORT MASTER (9002313.61).....	35
4.3.21 ABSP ELIGIBILITY (9002313.7).....	35
4.3.22 ABSP FILEMAN ERROR LOG (9002313.71).....	36

4.3.23	ABSP CLASS XML (9002313.72).....	36
4.3.24	ABSP TRANSLATE 9999999.36 (9002313.81).....	36
4.3.25	ABSP NCPDP FIELD 103 (9002313.82103)	36
4.3.26	ABSP NCPDP FIELD 305 (9002313.82305)	36
4.3.27	4ABSP NCPDP FIELD 306 (9002313.82306)	36
4.3.28	ABSP NCPDP FIELD 307 (9002313.82307)	36
4.3.29	ABSP NCPDP FIELD 308 (9002313.82308)	36
4.3.30	ABSP NCPDP FIELD 309 (9002313.82309)	37
4.3.31	ABSP NCPDP FIELD 406 (9002313.82406)	37
4.3.32	ABSP NCPDP FIELD 408 (9002313.82408)	37
4.3.33	ABSP NCPDP FIELD 416 (9002313.82416)	37
4.3.34	ABSP NCPDP FIELD 418 (9002313.82418)	37
4.3.35	ABSP NCPDP FIELD 419 (9002313.82419)	37
4.3.36	ABSP NCPDP FIELD 420 (9002313.8242)	37
4.3.37	ABSP NCPDP FIELD 423 (9002313.82423)	37
4.3.38	ABSP NCPDP FIELD 425 (9002313.82425)	38
4.3.39	ABSP NCPDP FIELD 429 (9002313.82429)	38
4.3.40	ABSP NCPDP FIELD 432 (9002313.82432)	38
4.3.41	ABSP NCPDP FIELD 436 (9002313.82436)	38
4.3.42	ABSP NCPDP FIELD 439 (9002313.82439)	38
4.3.43	ABSP NCPDP FIELD 440 (9002313.8244)	38
4.3.44	ABSP NCPDP FIELD 441 (9002313.82441)	38
4.3.45	ABSP NCPDP FIELD 501 (9002313.82501)	38
4.3.46	ABSP NCPDP FIELD 522 (9002313.82522)	39
4.3.47	ABSP NCPDP FIELD 528 (9002313.82528)	39
4.3.48	ABSP NCPDP FIELD 529 (9002313.82529)	39
4.3.49	ABSP NCPDP FIELD 532 (9002313.82532)	39
4.3.50	ABSP NCPDP FIELD 533 (9002313.82533)	39
4.3.51	ABSP NCPDP FIELD 535 (9002313.82535)	39
4.3.52	ABSP RESULT CATEGORY (9002313.83)	39
4.3.53	ABSP ERROR CODES (9002313.89)	39
4.3.54	ABSP NCPDP FIELD DEFS (9002313.91)	40
4.3.55	ABSP NCPDP FORMATS (9002313.92).....	40
4.3.56	ABSP NCPDP REJECT CODES (9002313.93).....	40
4.3.57	ABSP INSURANCE RULES (9002313.94).....	40
4.3.58	ABSP SETUP (9002313.99).....	40
4.4	Table File	41
4.4.1	ABSP CLAIMS FILE	41
4.4.2	ABSP RESPONSES FILE	47
4.4.3	ABSP COMBINED INSURANCE FILE	50
4.4.4	ABSP REJECT CODES FILE	51
4.4.5	ABSP CERTIFICATION FILE	51
4.4.6	ABSP INSURER FILE	52
4.4.7	ABSP DUR/PPS FILE	54
4.4.8	ABSP DIAGNOSIS CODE FILE	54

4.4.9	ABSP DATA INPUT FILE	55
4.4.10	ABSP NCPDP OVERRIDE FILE	56
4.4.11	ABSP INPUT USER PREF FILE	57
4.4.12	ABSP ORIGIN OF INPUT FILE	57
4.4.13	ABSP PRICING TABLES FILE	57
4.4.14	ABSP MODEM TYPES FILE	58
4.4.15	ABSP DIAL OUT FILE	58
4.4.16	ABSP PHARMACIES FILE	59
4.4.17	ABSP LOG OF TRANSACTIONS FILE	60
4.4.18	ABSP STATISTICS FILE	68
4.4.19	ABSP TRANSACTION FILE	70
4.4.20	ABSP REPORT MASTER FILE	73
4.4.21	ABSP ELIGIBILITY FILE	74
4.4.22	ABSP FILEMAN ERROR LOG FILE	75
4.4.23	ABSP CLASS XML FILE	75
4.4.24	ABSP TRANSLATE 9999999.36 FILE	76
4.4.25	ABSP NCPDP FIELD 103 FILE	76
4.4.26	ABSP NCPDP FIELD 305 FILE	76
4.4.27	ABSP NCPDP FIELD 306 FILE	76
4.4.28	ABSP NCPDP FIELD 307 FILE	76
4.4.29	ABSP NCPDP FIELD 308 FILE	77
4.4.30	ABSP NCPDP FIELD 309 FILE	77
4.4.31	ABSP NCPDP FIELD 406 FILE	77
4.4.32	ABSP NCPDP FIELD 408 FILE	77
4.4.33	ABSP NCPDP FIELD 416 FILE	77
4.4.34	ABSP NCPDP FIELD 418 FILE	78
4.4.35	ABSP NCPDP FIELD 419 FILE	78
4.4.36	ABSP NCPDP FIELD 420 FILE	78
4.4.37	ABSP NCPDP FIELD 423 FILE	78
4.4.38	ABSP NCPDP FIELD 425 FILE	78
4.4.39	ABSP NCPDP FIELD 429 FILE	79
4.4.40	ABSP NCPDP FIELD 432 FILE	79
4.4.41	ABSP NCPDP FIELD 436 FILE	79
4.4.42	ABSP NCPDP FIELD 439 FILE	79
4.4.43	ABSP NCPDP FIELD 440 FILE	79
4.4.44	ABSP NCPDP FIELD 441 FILE	80
4.4.45	ABSP NCPDP FIELD 501 FILE	80
4.4.46	ABSP NCPDP FIELD 522 FILE	80
4.4.47	ABSP NCPDP FIELD 528 FILE	80
4.4.48	ABSP NCPDP FIELD 529 FILE	80
4.4.49	ABSP NCPDP FIELD 532 FILE	81
4.4.50	ABSP NCPDP FIELD 533 FILE	81
4.4.51	ABSP NCPDP FIELD 535 FILE	81
4.4.52	ABSP RESULT CATEGORY FILE	81
4.4.53	ABSP ERROR CODES FILE	81

4.4.54	ABSP NCPDP FIELD DEFS FILE	82
4.4.55	ABSP NCPDP FORMATS FILE	82
4.4.56	ABSP NCPDP REJECT CODES FILE	87
4.4.57	ABSP INSURANCE RULES FILE	87
4.4.58	ABSP SETUP FILE	88
5.0	External Relations	93
5.1	Callable Routines.....	93
5.1.1	[PRD,SYS]>D DOCU^ABSPOSRX	93
5.2	Published Entry Points.....	94
5.3	Exported Options.....	95
6.0	Internal Relations	109
7.0	Archiving and Purging	110
7.1	Log Files	110
7.2	Rest of the Data.....	110
8.0	Documentation Resources	111
8.1	System Documentation.....	111
8.1.1	%INDEX	111
8.1.2	Inquire Options	112
8.1.3	Print Option File.....	112
8.1.4	List File Attributes	112
8.2	Online Help	113
9.0	SAC Requirements and Exemptions	114
	Glossary.....	115
	Acronym List	117
	Contact Information	118

Revision History

Version	Date	Author	Section	Page Number	Summary of Change
1.0	05/12/26	Shonda Render	All	All	New document thru p61

Preface

The Pharmacy Point of Sale module does electronic billing for outpatient pharmacy. It also interfaces to various Accounts Receivable packages.

This manual contains the technical documentation for the Pharmacy Point of Sale v1.0. Included here are a system description, routine descriptions, option descriptions, and other information necessary for use by IRM personnel to operate and maintain the POS software.

1.0 Introduction

This manual provides IHS site managers with a technical description of the Pharmacy POS routines, files, menus, cross references, globals, and other necessary information required to effectively manage the system.

All routines, files, options, and keys are namespaced starting with the letters ABSP.

The file number range for this package is 9002313.01 – 9002313.99.

2.0 Implementation and Maintenance

2.1 General Information

Everything in Point of Sale occupies ABSP namespace. Significant interaction occurs with the PS namespace (pharmacy). Some interaction occurs with various billing packages, including ABM, ABS, and BBM (another Accounts Receivable package). Of course, patient data and insurance information is also accessed.

2.2 System Requirements

- VA Kernel (XU) v8.0 p1019 or higher
- VA FileMan (DI) v22 p1019 or higher
- IHS Dictionaries (AUPN) v99.1 p26 or higher
- Pharmacy (PSO) v6.0, including p03 or higher
- IHS Dictionary (Pointers) (AUT) v98.1, including p08
- Registration (AG) v7.1, including p13 or higher
- *Third Party Billing (ABM) v2.6 or higher, including p1 or higher
- *Accounts Receivable (BAR) v1.8 or higher

Note: The starred (*) requirements only apply to sites using the **RPMS Third Party Billing** or **Accounts Receivable** software. If the site is using a **COTS Third Party Billing** and/or **Accounts Receivable** package, disregard the respective RPMS requirement.

2.3 Package-wide Variables

There are no package-wide variables associated with the ABSP system. All namespace variables are deleted upon exiting a menu.

2.4 Journaling

Globals ^ABSPECP, ^ABSPECX, and ^ABSPT do not have to be journaled. All other ^ABSP* globals should be journaled.

2.5 Security Keys

The following ABSP security keys lock Kernel menus.

Key Name	Description
ABSPZ BILLER	Access to the Billing interface menu
ABSPZ INSURER	Access to set up insurance menu
ABSPZ MANAGER	Access to the Manager menu, including the Setup options
ABSPZ REPORTS	Access to the Reports menu
ABSPZ USER	Access to the User menu
ABSPZMENU	(ABSP Main Menu) All Point of Sale users should have this key

3.0 (mnemonic) Menu

```
|Pharmacy Point of Sale[ABSPMENU]
  **LOCKED: ABSPZMENU**
|--U Pharmacy POS User Menu ... [ABSP USER MENU]
  ** Locked with ABSPZ USER
| |--U Claims data entry screen... [ABSP USER SCREEN]
  ** Locked with ABSPZ USER
| |--RPT Pharmacy electronic claims reports ... [ABSP MENU RPT MAIN]
  ** Locked with ABSPZ REPORTS
|   |--CLA Claim results and status ... [ABSP MENU RPT CLAIM STATUS]
    ** Locked with ABSPZ REPORTS
|     |--CAP Captured claims report [ABSP RPT CAPTURED]
|     |--CLO Closed Claim Report [ABSP RPT CLOSED REJECTION]
|     |--ELFC Eligibility Found for Unpaid Claims Report [ABSP RPT
      ELIG FND UNPD CLMS]
|     |--ERCR Enhanced Rejected Claims by Reject Code [ABSP RPT ENH
      RJCTN TYPE]
|     |--PAP Paper claims report [ABSP RPT PAPER]
|     |--PAY Payable claims report [ABSP RPT PAYABLE]
|     |--RCR Rejected Claims by Reject Code [ABSP RPT RJCTN TYPE]
|     |--REC Recent transactions [ABSP RECENT TRANSACTIONS]
|     |--REJ Rejected claims report [ABSP RPT REJECTION]
|     |--UN Uninsured claims report [ABSP RPT UNINSURED]
|   |--SITE Claims result and status by site ... [ABSP MENU RPT CLMS BY
      SITE]
|     |--PAY Payable claims report by site [ABSP RPT SITE PAYABLE]
|     |--REJ Rejected claims report by site [ABSP RPT SITE REJECTION]
|     |--DAY Totals by Released Date by site [ABSP RPT SITE TOTALS BY
      DAY]
|     |--INS Totals by Insurer by site [ABSP RPT SITE TOTALS BY INSUR]
|     |--MPD Totals by Medicare Part D by site [ABSP RPT SITE MPD
      INSUR]
|     |--CLO Closed Claim Report by Site [ABSP RPT SITE CLOSED RJTNS]
|     |--PVT Totals by Private Insurer by site [ABSP RPT SITE TTLS BY
      PVT INS]
|   |--MNT Maintenance Reports ... [ABSP MENU RPT MNT]
|     |--DUP Duplicate claims report (should be none) [ABSP RPT
      DUPLICATE]
|     |--MISS Find prescriptions missed by POS [ABSP RPT MISSED
      PRESCRIPTIONS]
|     |--NRV Reversals needed [ABSP RPT NEED REVERSAL]
|     |--URM Update Report Master File for a date range [ABSP UPDATE
      REPORT MASTER FILE]
|     |--STR List possibly stranded claims [ABSP STRANDED CLAIMS]
|   |--ADMN Administration reports ... [ABSP MENU RPT ADMIN]
|     |--DAY TOTALS - by RELEASED DATE [ABSP RPT TOTALS BY DAY]
|     |--INS TOTALS - by INSURER [ABSP RPT TOTALS BY INSURER]
|     |--MPD TOTALS - MEDICARE PART D INSURERS [ABSP RPT MEDICARE PD
      INS]
|     |--PVT TOTALS - by PRIVATE INSURER [ABSP RPT TOTALS BY PVT
      INSURER]
|     |--DRUG Billed and Collected DRUG cost [ABSP RPT DRUG AMOUNTS]
|     |--EXP Print Expense Report [ABSP RPT EXPENSE]
|     |--PSR AR Period Summary Report [ABSP RPT BAR PERIOD SUMMARY]
|     |--STA A/R Statistical Report [ABSP RPT BARSTATRPT]
|     |--RIC Insurance Coverage Report [ABSP RPT INSURANCE COVERAGE]
|     |--TPS Transaction Posting Summary [ABSP RPT TXN POSTING
      SUMMARY]
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|      |--CPR Collection Productivity Report [ABSP RPT COLLECTION PROD]
|      |--AUD POS Table Maintenance Site Parameters Audit [ABSP RPT
|              AUDIT TBLE MNT]
|              ** Locked with ABSPZ MANAGER
|      |--THR Transaction History Report [ABSP RPT TRANS HISTORY]
|      |--CAN ABSP CAN PHARMACY REPORT [ABSP CAN PHARMACY REPORT]
|      |--SET Setup (Configuration) reports ... [ABSP MENU RPT SETUP]
|              ** Locked with ABSPZ REPORTS
|      |--DET POS Setup - Detailed Report [ABSP SETUP DETAIL]
|      |--PHAR POS Setup - Pharmacies Report [ABSP SETUP PHARMACIES]
|      |--SUMI POS Setup - Summary of Insurers [ABSP SETUP SUMMARY]
|      |--RXB POS Setup - Rx Billing Status Report [ABSP RPT RX BILLING
|              STATUS]
|      |--USER Display user preference settings [ABSP USER PREFERENCES]
|      |--SURV Surveys of RPMS database ... [ABSP MENU RPT SURVEY]
|              ** Locked with ABSPZ REPORTS
|      |--INS Survey insurers by frequency [ABSP INSURER SURVEY]
|      |--PROV Survey if recent providers have ID #s [ABSP PROVIDER #S
|              SURVEY]
|      |--VOL Survey of volume [ABSP VOLUME SURVEY]
|      |--DIV Survey pharmacy divisions [ABSP DIVISIONS SURVEY]
|      |--BEN Survey patients' beneficiary/eligibility status [ABSP
|              BEN/ELIG SURVEY]
|      |--ELIG Medicare Part D Eligibility Check [ABSP MEDICARE PART D
|              ELIG CHK]
|      |--PRIV Private Ins Eligibility Check [ABSP PRIVATE INS ELIG
|              CHECK]
|      |--OTH Other reports ... [ABSP MENU RPT OTHER]
|      |--FMT List electronic claims formats [ABSP FORMATS LIST]
|      |--FLD List NCPDP Fields [ABSP NCPDP FIELDS LIST]
|      |--INS Insurer FM Inquiry [ABSP FM INQUIRY]
|      |--MOR Mass Override [ABSP USER MOR MASS OVERRIDE]
|      |--MGR Pharmacy POS Manager Menu ... [ABSP MANAGER MENU]
|              ** Locked with ABSPZ MANAGER
|      |--SET Pharmacy Point of Sale Setup Menu ... [ABSP SETUP MENU]
|              ** Locked with ABSPZ MANAGER
|      |--BAS Edit basic pharmacy POS parameters [ABSP SETUP PART 1]
|      |--ILC Edit pharmacy POS ILC A/R settings [ABSP SETUP ILC AR]
|      |--DIAL Edit pharmacy POS dial out settings ... [ABSP SETUP DIAL
|              OUT MENU]
|      |--BAS Basic settings for POS dial out [ABSP SETUP DIAL OUT
|              BASIC]
|      |--DEF Select default destination for claims [ABSP SETUP DIAL
|              OUT DEF.]
|      |--ADV Advanced settings for POS dial out [ABSP SETUP DIAL OUT
|              ADV.]
|      |--PHAR Edit pharmacy POS pharmacy data [ABSP SETUP PHARMACY]
|      |--INS Edit Pharmacy POS Insurance settings ... [ABSP SETUP
|              INSURANCE MENU]
|      |--SYS Insurance selection parameters (system-wide) [ABSP
|              SETUP INSURANCE SEL]
|      |--INS Quick setup of insurer [ABSP SETUP INSURER QUICK]
|      |--ADV Advanced setup of insurer [ABSP SETUP INSURER]
|              ** Locked with ABSPZ INSURER
|      |--RPMS Enter/edit RPMS Insurance file RX settings [ABSP RPMS
|              RX BILLING STATUS]
|      |--NPI Set Global NPI Flag [ABSP SET GLOBAL NPI FLAG]
|      |--SUMI POS Setup - Summary of Insurers [ABSP SETUP SUMMARY]
|      |--USER Edit pharmacy POS user preferences [ABSP SETUP USERS]
|      |--BILL Unbillable/Billable POS items menu ... [ABSP UNBILLABLE
|              MENU]
|      |--OTC Set billable status of OTC drugs [ABSP UNBILLABLE OTC]

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|      |--NDC Enter/edit unbillable NDC #s [ABSP UNBILLABLE NDC]
|      |--NAME Enter/edit unbillable drug names [ABSP UNBILLABLE
|              DRUG]
|      |--PRI Enter/edit Pricing formulas [ABSP SETUP PRICING]
|      |--MISC Miscellaneous setup programs ... [ABSP SETUP MISC.]
|      |--OK Parameters for Oklahoma Medicaid [ABSP SETUP OKLA.
|              MEDICAID]
|      |--PROV Enter/Edit providers' ID #s [ABSP PROVIDER #S EDIT]
|      |--NPI Add/Edit NPI values for Providers [ABSP ENTER NPI FOR
|              PROVIDER]
|      |--SUMI POS Setup - Summary of Insurers [ABSP SETUP SUMMARY]
|      |--SETD POS Setup - Detailed Report [ABSP SETUP DETAIL]
|      |--MGR Statistics & misc. options screen... [ABSP MANAGER SCREEN]
|              ** Locked with ABSPZ MANAGER
|      |--RPT Pharmacy electronic claims reports ... [ABSP MENU RPT MAIN]
|              ** Locked with ABSPZ REPORTS
|      |--CLA Claim results and status ... [ABSP MENU RPT CLAIM STATUS]
|              ** Locked with ABSPZ REPORTS
|      |--CAP Captured claims report [ABSP RPT CAPTURED]
|      |--CLO Closed Claim Report [ABSP RPT CLOSED REJECTION]
|      |--ELFC Eligibility Found for Unpaid Claims Report [ABSP RPT
|              ELIG FND UNPD CLMS]
|      |--ERCR Enhanced Rejected Claims by Reject Code [ABSP RPT ENH
|              RJCTN TYPE]
|      |--PAP Paper claims report [ABSP RPT PAPER]
|      |--PAY Payable claims report [ABSP RPT PAYABLE]
|      |--RCR Rejected Claims by Reject Code [ABSP RPT RJCTN TYPE]
|      |--REC Recent transactions [ABSP RECENT TRANSACTIONS]
|      |--REJ Rejected claims report [ABSP RPT REJECTION]
|      |--UN Uninsured claims report [ABSP RPT UNINSURED]
|      |--SITE Claims result and status by site ... [ABSP MENU RPT CLMS BY
|              SITE]
|      |--PAY Payable claims report by site [ABSP RPT SITE PAYABLE]
|      |--REJ Rejected claims report by site [ABSP RPT SITE REJECTION]
|      |--DAY Totals by Released Date by site [ABSP RPT SITE TOTALS BY
|              DAY]
|      |--INS Totals by Insurer by site [ABSP RPT SITE TOTALS BY INSUR]
|      |--MPD Totals by Medicare Part D by site [ABSP RPT SITE MPD
|              INSUR]
|      |--CLO Closed Claim Report by Site [ABSP RPT SITE CLOSED RJTNS]
|      |--PVT Totals by Private Insurer by site [ABSP RPT SITE TTLS BY
|              PVT INS]
|      |--MNT Maintenance Reports ... [ABSP MENU RPT MNT]
|      |--DUP Duplicate claims report (should be none) [ABSP RPT
|              DUPLICATE]
|      |--MISS Find prescriptions missed by POS [ABSP RPT MISSED
|              PRESCRIPTIONS]
|      |--NRV Reversals needed [ABSP RPT NEED REVERSAL]
|      |--URM Update Report Master File for a date range [ABSP UPDATE
|              REPORT MASTER FILE]
|      |--STR List possibly stranded claims [ABSP STRANDED CLAIMS]
|      |--ADMN Administration reports ... [ABSP MENU RPT ADMIN]
|      |--DAY TOTALS - by RELEASED DATE [ABSP RPT TOTALS BY DAY]
|      |--INS TOTALS - by INSURER [ABSP RPT TOTALS BY INSURER]
|      |--MPD TOTALS - MEDICARE PART D INSURERS [ABSP RPT MEDICARE PD
|              INS]
|      |--PVT TOTALS - by PRIVATE INSURER [ABSP RPT TOTALS BY PVT
|              INSURER]
|      |--DRUG Billed and Collected DRUG cost [ABSP RPT DRUG AMOUNTS]
|      |--EXP Print Expense Report [ABSP RPT EXPENSE]
|      |--PSR AR Period Summary Report [ABSP RPT BAR PERIOD SUMMARY]
|      |--STA A/R Statistical Report [ABSP RPT BARSTATRPT]

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|      |--RIC Insurance Coverage Report [ABSP RPT INSURANCE COVERAGE]
|      |--TPS Transaction Posting Summary [ABSP RPT TXN POSTING
|              SUMMARY]
|      |--CPR Collection Productivity Report [ABSP RPT COLLECTION PROD]
|      |--AUD POS Table Maintenance Site Parameters Audit [ABSP RPT
|              AUDIT TBLE MNT]
|              ** Locked with ABSPZ MANAGER
|      |--THR Transaction History Report [ABSP RPT TRANS HISTORY]
|      |--CAN ABSP CAN PHARMACY REPORT [ABSP CAN PHARMACY REPORT]
|      |--SET Setup (Configuration) reports ... [ABSP MENU RPT SETUP]
|              ** Locked with ABSPZ REPORTS
|      |--DET POS Setup - Detailed Report [ABSP SETUP DETAIL]
|      |--PHAR POS Setup - Pharmacies Report [ABSP SETUP PHARMACIES]
|      |--SUMI POS Setup - Summary of Insurers [ABSP SETUP SUMMARY]
|      |--RXB POS Setup - Rx Billing Status Report [ABSP RPT RX BILLING
|              STATUS]
|      |--USER Display user preference settings [ABSP USER PREFERENCES]
|      |--SURV Surveys of RPMS database ... [ABSP MENU RPT SURVEY]
|              ** Locked with ABSPZ REPORTS
|      |--INS Survey insurers by frequency [ABSP INSURER SURVEY]
|      |--PROV Survey if recent providers have ID #s [ABSP PROVIDER #S
|              SURVEY]
|      |--VOL Survey of volume [ABSP VOLUME SURVEY]
|      |--DIV Survey pharmacy divisions [ABSP DIVISIONS SURVEY]
|      |--BEN Survey patients' beneficiary/eligibility status [ABSP
|              BEN/ELIG SURVEY]
|      |--ELIG Medicare Part D Eligibility Check [ABSP MEDICARE PART D
|              ELIG CHK]
|      |--PRIV Private Ins Eligibility Check [ABSP PRIVATE INS ELIG
|              CHECK]
|      |--OTH Other reports ... [ABSP MENU RPT OTHER]
|      |--FMT List electronic claims formats [ABSP FORMATS LIST]
|      |--FLD List NCPDP Fields [ABSP NCPDP FIELDS LIST]
|      |--INS Insurer FM Inquiry [ABSP FM INQUIRY]
|      |--COMM Communications - View Dial Out Log File [ABSP COMMS LOG
|              VIEW]
|      |--BACK Pharmacy POS background scan ... [ABSP MENU BACKGROUND
|              SCAN]
|              ** Locked with ABSPZ MANAGER
|      |--STAR Start Pharmacy POS background scan [ABSP BACKGROUND SCAN
|              START]
|      |--STOP Stop Pharmacy POS background scan [ABSP BACKGROUND SCAN
|              STOP]
|      |--STAT Status of Pharmacy POS background scan [ABSP BACKGROUND
|              SCAN STATUS]
|      |--LOG Print log file of Pharmacy POS background scan [ABSP
|              BACKGROUND SCAN LOG]
|      |--USER Claims data entry screen... [ABSP USER SCREEN]
|              ** Locked with ABSPZ USER
|      |--REST Restore deferred claims from Optum outage (p53) [ABSP MGR
|              RESTORE CLAIMS]
|      |--ZERO Reset Queue to zero & Poke (p53) [ABSP MGR ZERO QUEUE]
|      |--ASLP Asleep Insurer Check [ABSP MGR ASLEEP INSURER]
|      |--BILL RX Point of Sale Billing Menu ... [ABSP BILLING MENU]
|              ** Locked with ABSPZ BILLER
|      |--RPT Pharmacy electronic claims reports ... [ABSP MENU RPT MAIN]
|              ** Locked with ABSPZ REPORTS
|      |--CLA Claim results and status ... [ABSP MENU RPT CLAIM STATUS]
|              ** Locked with ABSPZ REPORTS
|      |--CAP Captured claims report [ABSP RPT CAPTURED]
|      |--CLO Closed Claim Report [ABSP RPT CLOSED REJECTION]
|      |--ELFC Eligibility Found for Unpaid Claims Report [ABSP RPT

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        ELIG FND UNPD CLMS]
|      |--ERCR Enhanced Rejected Claims by Reject Code [ABSP RPT ENH
|              RJCTN TYPE]
|      |--PAP Paper claims report [ABSP RPT PAPER]
|      |--PAY Payable claims report [ABSP RPT PAYABLE]
|      |--RCR Rejected Claims by Reject Code [ABSP RPT RJCTN TYPE]
|      |--REC Recent transactions [ABSP RECENT TRANSACTIONS]
|      |--REJ Rejected claims report [ABSP RPT REJECTION]
|      |--UN Uninsured claims report [ABSP RPT UNINSURED]
|      |--SITE Claims result and status by site ... [ABSP MENU RPT CLMS
|              BY SITE]
|      |--PAY Payable claims report by site [ABSP RPT SITE PAYABLE]
|      |--REJ Rejected claims report by site [ABSP RPT SITE
|              REJECTION]
|      |--DAY Totals by Released Date by site [ABSP RPT SITE TOTALS
|              BY DAY]
|      |--INS Totals by Insurer by site [ABSP RPT SITE TOTALS BY
|              INSUR]
|      |--MPD Totals by Medicare Part D by site [ABSP RPT SITE MPD
|              INSUR]
|      |--CLO Closed Claim Report by Site [ABSP RPT SITE CLOSED
|              RJTNS]
|      |--PVT Totals by Private Insurer by site [ABSP RPT SITE TTLS
|              BY PVT INS]
|      |--MNT Maintenance Reports ... [ABSP MENU RPT MNT]
|      |--DUP Duplicate claims report (should be none) [ABSP RPT
|              DUPLICATE]
|      |--MISS Find prescriptions missed by POS [ABSP RPT MISSED
|              PRESCRIPTIONS]
|      |--NRV Reversals needed [ABSP RPT NEED REVERSAL]
|      |--URM Update Report Master File for a date range [ABSP UPDATE
|              REPORT MASTER FILE]
|      |--STR List possibly stranded claims [ABSP STRANDED CLAIMS]
|      |--CORR Corrupt Response Report [ABSP RPT CORRUPT RESPONSE]
|      |--ADMN Administration reports ... [ABSP MENU RPT ADMIN]
|      |--DAY TOTALS - by RELEASED DATE [ABSP RPT TOTALS BY DAY]
|      |--INS TOTALS - by INSURER [ABSP RPT TOTALS BY INSURER]
|      |--MPD TOTALS - MEDICARE PART D INSURERS [ABSP RPT MEDICARE PD
|              INS]
|      |--PVT TOTALS - by PRIVATE INSURER [ABSP RPT TOTALS BY PVT
|              INSURER]
|      |--DRUG Billed and Collected DRUG cost [ABSP RPT DRUG AMOUNTS]
|      |--EXP Print Expense Report [ABSP RPT EXPENSE]
|      |--PSR AR Period Summary Report [ABSP RPT BAR PERIOD SUMMARY]
|      |--STA A/R Statistical Report [ABSP RPT BARSTATRPT]
|      |--RIC Insurance Coverage Report [ABSP RPT INSURANCE COVERAGE]
|      |--TPS Transaction Posting Summary [ABSP RPT TXN POSTING
|              SUMMARY]
|      |--CPR Collection Productivity Report [ABSP RPT COLLECTION
|              PROD]
|      |--AUD POS Table Maintenance Site Parameters Audit [ABSP RPT
|              AUDIT TBLE MNT]
|              ** Locked with ABSPZ MANAGER
|      |--THR Transaction History Report [ABSP RPT TRANS HISTORY]
|      |--CAN ABSP CAN PHARMACY REPORT [ABSP CAN PHARMACY REPORT]
|      |--SET Setup (Configuration) reports ... [ABSP MENU RPT SETUP]
|              ** Locked with ABSPZ REPORTS
|      |--DET POS Setup - Detailed Report [ABSP SETUP DETAIL]
|      |--PHAR POS Setup - Pharmacies Report [ABSP SETUP PHARMACIES]
|      |--SUMI POS Setup - Summary of Insurers [ABSP SETUP SUMMARY]
|      |--RXB POS Setup - Rx Billing Status Report [ABSP RPT RX
|              BILLING STATUS]

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|      |--USER Display user preference settings [ABSP USER
|          PREFERENCES]
|      |--SURV Surveys of RPMS database ... [ABSP MENU RPT SURVEY]
|          ** Locked with ABSPZ REPORTS
|      |--INS Survey insurers by frequency [ABSP INSURER SURVEY]
|      |--PROV Survey if recent providers have ID #s [ABSP PROVIDER
|          #S SURVEY]
|      |--VOL Survey of volume [ABSP VOLUME SURVEY]
|      |--DIV Survey pharmacy divisions [ABSP DIVISIONS SURVEY]
|      |--BEN Survey patients' beneficiary/eligibility status [ABSP
|          BEN/ELIG SURVEY]
|      |--ELIG Medicare Part D Eligibility Check [ABSP MEDICARE PART D
|          ELIG CHK]
|      |--PRIV Private Ins Eligibility Check [ABSP PRIVATE INS ELIG
|          CHECK]
|      |--OTH Other reports ... [ABSP MENU RPT OTHER]
|      |--FMT List electronic claims formats [ABSP FORMATS LIST]
|      |--FLD List NCPDP Fields [ABSP NCPDP FIELDS LIST]
|      |--INS Insurer FM Inquiry [ABSP FM INQUIRY]
|      |--PPOS Claims data entry screen... [ABSP USER SCREEN]
|          ** Locked with ABSPZ USER
|  |--RPT Pharmacy electronic claims reports ... [ABSP MENU RPT MAIN]
|      ** Locked with ABSPZ REPORTS
|  |--CLA Claim results and status ... [ABSP MENU RPT CLAIM STATUS]
|      ** Locked with ABSPZ REPORTS
|  |--CAP Captured claims report [ABSP RPT CAPTURED]
|  |--CLO Closed Claim Report [ABSP RPT CLOSED REJECTION]
|  |--ELFC Eligibility Found for Unpaid Claims Report [ABSP RPT
|      ELIG FND UNPD CLMS]
|  |--ERCR Enhanced Rejected Claims by Reject Code [ABSP RPT ENH
|      RJCTN TYPE]
|  |--PAP Paper claims report [ABSP RPT PAPER]
|  |--PAY Payable claims report [ABSP RPT PAYABLE]
|  |--RCR Rejected Claims by Reject Code [ABSP RPT RJCTN TYPE]
|  |--REC Recent transactions [ABSP RECENT TRANSACTIONS]
|  |--REJ Rejected claims report [ABSP RPT REJECTION]
|  |--UN Uninsured claims report [ABSP RPT UNINSURED]
|  |--SITE Claims result and status by site ... [ABSP MENU RPT CLMS
|      BY SITE]
|  |--PAY Payable claims report by site [ABSP RPT SITE PAYABLE]
|  |--REJ Rejected claims report by site [ABSP RPT SITE
|      REJECTION]
|  |--DAY Totals by Released Date by site [ABSP RPT SITE TOTALS
|      BY DAY]
|  |--INS Totals by Insurer by site [ABSP RPT SITE TOTALS BY
|      INSUR]
|  |--MPD Totals by Medicare Part D by site [ABSP RPT SITE MPD
|      INSUR]
|  |--CLO Closed Claim Report by Site [ABSP RPT SITE CLOSED
|      RJTNS]
|  |--PVT Totals by Private Insurer by site [ABSP RPT SITE TTLS
|      BY PVT INS]
|  |--MNT Maintenance Reports ... [ABSP MENU RPT MNT]
|  |--DUP Duplicate claims report (should be none) [ABSP RPT
|      DUPLICATE]
|  |--MISS Find prescriptions missed by POS [ABSP RPT MISSED
|      PRESCRIPTIONS]
|  |--NRV Reversals needed [ABSP RPT NEED REVERSAL]
|  |--URM Update Report Master File for a date range [ABSP UPDATE
|      REPORT MASTER FILE]
|  |--STR List possibly stranded claims [ABSP STRANDED CLAIMS]
|  |--ADMN Administration reports ... [ABSP MENU RPT ADMIN]

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|  |--DAY TOTALS - by RELEASED DATE [ABSP RPT TOTALS BY DAY]
|  |--INS TOTALS - by INSURER [ABSP RPT TOTALS BY INSURER]
|  |--MPD TOTALS - MEDICARE PART D INSURERS [ABSP RPT MEDICARE PD
|      INS]
|  |--PVT TOTALS - by PRIVATE INSURER [ABSP RPT TOTALS BY PVT
|      INSURER]
|  |--DRUG Billed and Collected DRUG cost [ABSP RPT DRUG AMOUNTS]
|  |--EXP Print Expense Report [ABSP RPT EXPENSE]
|  |--PSR AR Period Summary Report [ABSP RPT BAR PERIOD SUMMARY]
|  |--STA A/R Statistical Report [ABSP RPT BARSTATRPT]
|  |--RIC Insurance Coverage Report [ABSP RPT INSURANCE COVERAGE]
|  |--TPS Transaction Posting Summary [ABSP RPT TXN POSTING
|      SUMMARY]
|  |--CPR Collection Productivity Report [ABSP RPT COLLECTION
|      PROD]
|  |--AUD POS Table Maintenance Site Parameters Audit [ABSP RPT
|      AUDIT TBLE MNT]
|      ** Locked with ABSPZ MANAGER
|  |--THR Transaction History Report [ABSP RPT TRANS HISTORY]
|  |--CAN ABSP CAN PHARMACY REPORT [ABSP CAN PHARMACY REPORT]
|  |--SET Setup (Configuration) reports ... [ABSP MENU RPT SETUP]
|      ** Locked with ABSPZ REPORTS
|  |--DET POS Setup - Detailed Report [ABSP SETUP DETAIL]
|  |--PHAR POS Setup - Pharmacies Report [ABSP SETUP PHARMACIES]
|  |--SUMI POS Setup - Summary of Insurers [ABSP SETUP SUMMARY]
|  |--RXB POS Setup - Rx Billing Status Report [ABSP RPT RX
|      BILLING STATUS]
|  |--USER Display user preference settings [ABSP USER
|      PREFERENCES]
|  |--SURV Surveys of RPMS database ... [ABSP MENU RPT SURVEY]
|      ** Locked with ABSPZ REPORTS
|  |--INS Survey insurers by frequency [ABSP INSURER SURVEY]
|  |--PROV Survey if recent providers have ID #s [ABSP PROVIDER
|      #S SURVEY]
|  |--VOL Survey of volume [ABSP VOLUME SURVEY]
|  |--DIV Survey pharmacy divisions [ABSP DIVISIONS SURVEY]
|  |--BEN Survey patients' beneficiary/eligibility status [ABSP
|      BEN/ELIG SURVEY]
|  |--ELIG Medicare Part D Eligibility Check [ABSP MEDICARE PART D
|      ELIG CHK]
|  |--PRIV Private Ins Eligibility Check [ABSP PRIVATE INS ELIG
|      CHECK]
|  |--OTH Other reports ... [ABSP MENU RPT OTHER]
|  |--FMT List electronic claims formats [ABSP FORMATS LIST]
|  |--FLD List NCPDP Fields [ABSP NCPDP FIELDS LIST]
|  |--INS Insurer FM Inquiry [ABSP FM INQUIRY]

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3.1 Routine Descriptions

Note: To create a list of the ABSP routines after the ABSP package is loaded, type **D ^%RD** in programmer mode.

3.2 Routine List

ABSP1209	ABSP5B1	ABSP5B1A	ABSP5B1B	ABSP5B1C	ABSP5B1D	ABSP5B1E	ABSP5B1F
ABSP5B2	ABSP5B2A	ABSP5E1	ABSPCINF	ABSPCORR	ABSPDB1	ABSPDB1A	ABSPDB1B
ABSPDB1C	ABSPDB1D	ABSPDB1E	ABSPDB1F	ABSPDB1G	ABSPDB2	ABSPDB2A	ABSPDE1

ABSPDR	ABSPECA1	ABSPECA2	ABSPECA4	ABSPECA5	ABSPECA6	ABSPECA7	ABSPECA8
ABSPECA9	ABSPECC4	ABSPECD4	ABSPECFM	ABSPECP0	ABSPECP1	ABSPECP2	ABSPECP3
ABSPECR0	ABSPECR1	ABSPECR2	ABSPECT1	ABSPECT4	ABSPECT5	ABSPECT7	ABSPECT8
ABSPECT9	ABSPECX0	ABSPECX1	ABSPECX4	ABSPECX2	ABSPECX3	ABSPECX4	ABSPENVC
ABSPER10	ABSPER1A	ABSPER20	ABSPER2A	ABSPER30	ABSPER3A	ABSPER40	ABSPER4A
ABSPER50	ABSPER5A	ABSPES00	ABSPES01	ABSPES02	ABSPFUNC	ABSPHTTP	ABSPICNV
ABSPICPY	ABSPIN1	ABSPIN11	ABSPIN12	ABSPIN13	ABSPMHDR	ABSPNTE0	ABSPNTEG
ABSP0S	ABSP0S0	ABSP0S02	ABSP0S03	ABSP0S1	ABSP0S2	ABSP0S25	ABSP0S26
ABSP0S28	ABSP0S29	ABSP0S2A	ABSP0S2B	ABSP0S2C	ABSP0S2D	ABSP0S2E	ABSP0S2F
ABSP0S3	ABSP0S31	ABSP0S32	ABSP0S33	ABSP0S34	ABSP0S35	ABSP0S4	ABSP0S5
ABSP0S57	ABSP0S6A	ABSP0S6B	ABSP0S6C	ABSP0S6D	ABSP0S6E	ABSP0S6F	ABSP0S6G
ABSP0S6H	ABSP0S6I	ABSP0S6J	ABSP0S6K	ABSP0S6L	ABSP0S6M	ABSP0S6N	ABSP0S7
ABSP0S8	ABSP0S81	ABSP0S9	ABSP0S96	ABSP0S97	ABSP0S99	ABSP0SA	ABSP0SAA
ABSP0SAB	ABSP0SAD	ABSP0SAE	ABSP0SAM	ABSP0SAN	ABSP0SAO	ABSP0SAP	ABSP0SAQ
ABSP0SAR	ABSP0SAS	ABSP0SAW	ABSP0SAY	ABSP0SAZ	ABSP0SB	ABSP0SB0	ABSP0SB1
ABSP0SB2	ABSP0SB3	ABSP0SB4	ABSP0SB5	ABSP0SB8	ABSP0SBA	ABSP0SBB	ABSP0SBC
ABSP0SBD	ABSP0SBE	ABSP0SBF	ABSP0SBH	ABSP0SBI	ABSP0SBL	ABSP0SBM	ABSP0SBP
ABSP0SBQ	ABSP0SBT	ABSP0SBU	ABSP0SBV	ABSP0SBW	ABSP0SBX	ABSP0SC1	ABSP0SC2
ABSP0SC3	ABSP0SC4	ABSP0SCA	ABSP0SCB	ABSP0SCC	ABSP0SCD	ABSP0SCE	ABSP0SCF
ABSP0SCG	ABSP0SCH	ABSP0SD1	ABSP0SD2	ABSP0SD3	ABSP0SE1	ABSP0SE2	ABSP0SE3
ABSP0SE4	ABSP0SEC	ABSP0SEV	ABSP0SEX	ABSP0SF	ABSP0SFA	ABSP0SFB	ABSP0SFC
ABSP0SFD	ABSP0SFP	ABSP0SFX	ABSP0SH2	ABSP0SH4	ABSP0SH5	ABSP0SH6	ABSP0SH7
ABSP0SHF	ABSP0SHR	ABSP0SHU	ABSP0SI	ABSP0SI1	ABSP0SI2	ABSP0SI7	ABSP0SI8
ABSP0SIB	ABSP0SID	ABSP0SIF	ABSP0SIH	ABSP0SII	ABSP0SIO	ABSP0SIP	ABSP0SIV
ABSP0SIW	ABSP0SIY	ABSP0SIZ	ABSP0SJ	ABSP0SJ1	ABSP0SJ2	ABSP0SK	ABSP0SK1
ABSP0SK2	ABSP0SL	ABSP0SL1	ABSP0SL2	ABSP0SM	ABSP0SM1	ABSP0SM2	ABSP0SMA
ABSP0SMB	ABSP0SMC	ABSP0SMD	ABSP0SMF	ABSP0SMG	ABSP0SMH	ABSP0SMI	ABSP0SMZ
ABSP0SN0	ABSP0SN1	ABSP0SN2	ABSP0SN3	ABSP0SN4	ABSP0SN5	ABSP0SN6	ABSP0SN7
ABSP0SN8	ABSP0SNC	ABSP0SO	ABSP0SO1	ABSP0SO2	ABSP0SO3	ABSP0SO4	ABSP0SO5
ABSP0SP	ABSP0SP1	ABSP0SP2	ABSP0SPE	ABSP0SPW	ABSP0SPX	ABSP0SQ	ABSP0SQ1
ABSP0SQ2	ABSP0SQ3	ABSP0SQ4	ABSP0SQ9	ABSP0SQA	ABSP0SQB	ABSP0SQC	ABSP0SQD
ABSP0SQF	ABSP0SQG	ABSP0SQH	ABSP0SQJ	ABSP0SQL	ABSP0SQP	ABSP0SQQ	ABSP0SQS
ABSP0SR1	ABSP0SR2	ABSP0SR3	ABSP0SR4	ABSP0SR5	ABSP0SR6	ABSP0SR7	ABSP0SR9
ABSP0SRA	ABSP0SRB	ABSP0SRE	ABSP0SRF	ABSP0SRR	ABSP0SRS	ABSP0SRT	ABSP0SRU
ABSP0SRX	ABSP0SRY	ABSP0SRZ	ABSP0SS	ABSP0SS1	ABSP0SS2	ABSP0SS3	ABSP0SS4
ABSP0SS5	ABSP0SS6	ABSP0SS7	ABSP0SS8	ABSP0SS9	ABSP0SSC	ABSP0SSG	ABSP0SSH
ABSP0SU	ABSP0SU1	ABSP0SU2	ABSP0SU3	ABSP0SU4	ABSP0SU5	ABSP0SU6	ABSP0SU7
ABSP0SU8	ABSP0SU9	ABSP0SUA	ABSP0SUB	ABSP0SUC	ABSP0SUD	ABSP0SUE	ABSP0SUQ
ABSP0SUT	ABSP0SUU	ABSP0SUZ	ABSP0SVV	ABSP0SX	ABSP0SXA	ABSP0SXE	ABSP0SZ
ABSP48	ABSP49	ABSP53	ABSP54	ABSP55	ABSP5TMRG	ABSP5MOR	ABSP5MR1
ABSPUNK	ABSPUTL	ABSPVDF					

3.3 Routines With Descriptions

Routine	Description
ABSP5B1	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of outgoing NCPDP Billing "B1" and Reversal "B2" Claims for 5.1
ABSP5B1A	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of outgoing NCPDP Billing "B1" Claims for 5.1 (Claim Segment)
ABSP5B1B	;CASSevern/Pieran ran 1/19/2011 - Handling of outgoing NCPDP Billing "B1" Claims for 5.1 (PRICING,PREScriBER, and PROVIDER Segments)
ABSP5B1C	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of outgoing NCPDP Billing "B1" Claims for 5.1 (COB and WORKERS COMP Segments)

Routine	Description
ABSP5B1D	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of outgoing NCPDP Billing "B1" Claims for 5.1 (DURR,CLINICAL,COMPOUND, and COUPON segments)
ABSP5B1B	;CASSevern/Pieran ran 1/19/2011 - Handling of outgoing NCPDP Billing "B1" Claims for 5.1 (PRICING,PREScriBER, and PROVIDER Segments)
ABSP5B1C	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of outgoing NCPDP Billing "B1" Claims for 5.1 (COB and WORKERS COMP Segments)
ABSP5B1D	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of outgoing NCPDP Billing "B1" Claims for 5.1 (DURR,CLINICAL,COMPOUND, and COUPON segments)
ABSP5B1E	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of outgoing NCPDP Billing "B1" Claims for 5.1 (Prior Authorization segment)
ABSP5B1F	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of outgoing NCPDP Billing "B1" Claims for 5.1 (Helper subroutines)
ABSP5B2	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of NCPDP Reversal "B2" Claims for 5.1
ABSP5B2A	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of NCPDP Reversal "B2" Claims for 5.1 (Claim Segment)
ABSP5E1	; IHS/OIT/CASSevern/Pieran ran 2/23/2011 - Handling of outgoing NCPDP Eligibility "E1" transactions for 5.1
ABSPCINF	; /IHS/OIT/RAM - CLAIM INFO ROUTINES BEFORE PATCH 53 ; 02 APR 2024 ;
ABSPCORR	; /IHS/SD/SDR – ABSP CORRUPTED REPORT ; 12/18/2024;
ABSPDB1	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of outgoing NCPDP Billing "B1" and Reversal "B2" Claims for D.0
ABSPDB1A	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of outgoing NCPDP Billing "B1" Claims for D.0 (Claim Segment)
ABSPDB1B	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of outgoing NCPDP Billing "B1" Claims for D.0 (PRICING,PREScriBER, and PROVIDER Segments)
ABSPDB1C	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of outgoing NCPDP Billing "B1" Claims for D.0 (COB and WORKERS COMP Segments)
ABSPDB1D	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of outgoing NCPDP Billing "B1" Claims for D.0 (DURR,CLINICAL,COMPOUND, and COUPON segments)
ABSPDB1E	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of outgoing NCPDP Billing "B1" Claims for D.0 (APPEND, FACILITY and NARRATIVE segments)
ABSPDB1F	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of outgoing NCPDP Billing "B1" Claims for D.0 (Helper subroutines)

Routine	Description
ABSPDB1G	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of outgoing NCPDP Billing "B1" and Reversal "B2" Claims for D.0
ABSPDB2	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of NCPDP Reversal "B2" Claims for D.0
ABSPDB2A	; IHS/OIT/CASSevern/Pieran ran 1/19/2011 - Handling of NCPDP Reversal "B2" Claims for D.0 (Claim Segment)
ABSPDE1	; IHS/OIT/CASSevern/Pieran ran 2/23/2011 - Handling of outgoing NCPDP Eligibility "E1" transactions for D.0
ABSPDR	; IHS/OIT/CASSEVER/RAN - Parse Claim D.0 Response ; [03/04/2011 12:56 PM]
ABSPECA1	; IHS/FCS/DRS - Assemble formatted claim ; [09/23/2002 2:36 PM]
ABSPECA2	; IHS/FCS/DRS - Assemble formatted claim ; [09/12/2002 9:57 AM]
ABSPECA4	; IHS/FCS/DRS - Parse Claim Response ; [08/09/2002 11:08 AM]
ABSPECA5	; IHS/FCS/DRS - Parse Claim Response ; [09/12/2002 9:57 AM]
ABSPECA7	; IHS/FCS/DRS - Parse Claim Response ; [09/12/2002 9:58 AM]
ABSPECA8	; IHS/FCS/DRS - construct a claim reversal ; [11/18/2002 10:07 AM]
ABSPECA9	; IHS/FCS/DRS - pretty print pharm claim packet ;
ABSPECFM	; IHS/FCS/DRS - JWS 04:09 PM 28 May 1996 ; [09/04/2002 1:55 PM]
ABSPECP0	; IHS/FCS/DRS - receipt ;
ABSPECP1	; IHS/FCS/DRS - printing for PCS ; [10/09/2002 8:01 AM]
ABSPECP2	; IHS/FCS/DRS - NO DESCRIPTION PROVIDED ; [10/09/2002 8:02 AM]
ABSPECP3	; IHS/FCS/DRS - Receipts ; [09/19/2002 10:16 AM]
ABSPECR0	; IHS/FCS/DRS - JWS 02:16 PM 28 Sep 1995 ; [09/12/2002 9:59 AM]
ABSPECR1	; IHS/FCS/DRS - JWS 10:21 AM 6 Dec 1995 ; [09/12/2002 9:59 AM]
ABSPECR2	; IHS/FCS/DRS - JWS 10:24 AM 19 Dec 1995 ; [09/12/2002 10:00 AM]
ABSPECX0	; IHS/FCS/DRS - JWS 04:26 PM 18 Jun 1996 ; [09/09/2002 5:18 PM]
ABSPECX1	; IHS/FCS/DRS - JWS 03:35 PM 6 Jun 1995 ; [09/12/2002 10:00 AM]
ABSPECX4	; IHS/FCS/DRS - JWS ; [09/12/2002 10:00 AM]
ABSPECZ2	; IHS/FCS/DRS - JWS 10:08 AM 22 Jun 1995 ; [09/12/2002 10:00 AM]
ABSPECZ3	; IHS/FCS/DRS - JWS 01:51 PM 12 Sep 1995 ; [09/12/2002 10:01 AM]
ABSPECZA	; IHS/FCS/DRS - JWS 04:27 PM 28 Sep 1995 ; [09/12/2002 10:01 AM]

Routine	Description
ABSPER10	; IHS/FCS/DRS - JWS 03:58 PM 16 Jul 1996 ; [09/12/2002 10:01 AM]
ABSPER1A	; IHS/FCS/DRS - JWS 10:23 AM 17 Jul 1996 ; [09/12/2002 10:01 AM]
ABSPER20	; IHS/FCS/DRS - Payable claims report ; [09/12/2002 10:01 AM]
ABSPER2A	; IHS/FCS/DRS - Payable claims report ; [09/12/2002 10:02 AM]
ABSPER30	; IHS/FCS/DRS - JWS 10:33 AM 17 Jul 1996 ; [09/12/2002 10:02 AM]
ABSPER3A	; IHS/FCS/DRS - JWS 10:27 AM 17 Jul 1996 ; [09/12/2002 10:02 AM]
ABSPER40	; IHS/FCS/DRS - JWS 03:58 PM 16 Jul 1996 ; [09/12/2002 10:02 AM]
ABSPER4A	; IHS/FCS/DRS - JWS 10:29 AM 17 Jul 1996 ; [09/12/2002 10:03 AM]
ABSPES00	; IHS/FCS/DRS - JWS 03:02 PM 12 Jun 1995 ; [09/12/2002 10:03 AM]
ABSPES01	; IHS/FCS/DRS - JWS 03:55 PM 28 Sep 1995 ; [09/12/2002 10:03 AM]
ABSPES02	; IHS/FCS/DRS - JWS 03:28 PM 6 Mar 1996 ; [09/12/2002 10:03 AM]
ABSPFUNC	;IHS/ITSC/ENM - MISC FUNCTIONS [02/24/2004 9:00 AM]
ABSPHTTP	; IHS/OIT/RAM - HTTP POST functionality for sending claims ; [25 Mar 24 1200]
ABSPICNV	; IHS/OIT/CASSevern/Pieran ran 2/24/2011 - Convert Insurance Profiles based on Formats
ABSPICPY	; IHS/OIT/CASSevern/Pieran ran 9/19/2011 - Copy Insurance default Profiles
ABSPIN1	; GENERATED FROM 'ABSP SETUP PHARMACY' INPUT TEMPLATE(#1957), FILE 9002313.56;11/18/24
ABSPIN11	; ;11/18/24
ABSPIN12	; ;11/18/24
ABSPIN13	; ;11/18/24 ABSPMHDR ; IHS/FCS/DRS - MENUS HEADERS ;
ABSPNTE0	; IHS/OIT/RAM - ISC/XTSUMBLD KERNEL ; 12 JUN 2017 ; Package checksum checker ;3080409.163058
ABSPNTEG	; IHS/OIT/RAM - ISC/XTSUMBLD KERNEL ; 12 JUN 2017 ; Package checksum checker ;3080409.163058
ABSPPOS	; IHS/FCS/DRS - Table of Contents, etc ;
ABSPPOS0	;IHS/GDIT/AEF - continuation of ABSPPOS [09/16/2000 5:17 PM]
ABSPPOS02	; IHS/FCS/DRS - 9002313.02 utilities ;
ABSPPOS03	; IHS/FCS/DRS - 9002313.03 utilities ; [09/17/2002 10:04 AM]

Routine	Description
ABSPOS1	; IHS/UNK/UNK - less commonly called subroutines ; [10/13/2000 9:06 AM]
ABSPOS2	; IHS/FCS/DRS - POS manager's ScreenMan ;
ABSPOS25	; IHS/FCS/DRS - insurance auto-selection ; [08/28/2002 2:43 PM]
ABSPOS26	; IHS/FCS/DRS - put insurance in order ;
ABSPOS28	; IHS/FCS/DRS - test of insurance selection ;
ABSPOS29	; IHS/FCS/DRS - BUILD COMBINED INSURANCE ; [09/12/2002 10:04 AM]
ABSPOS2A	; IHS/FCS/DRS - continuation of ABSPOS2 ;
ABSPOS2B	; IHS/FCS/DRS - ABSPOS2 continuation ;
ABSPOS2C	; IHS/FCS/DRS - ABSPOS2 continuation ;
ABSPOS2D	; IHS/FCS/DRS - Poke the queues ;
ABSPOS2E	; IHS/FCS/DRS - print queues ;
ABSPOS2F	; IHS/FCS/DRS - transmitter/receiver control
ABSPOS31	; IHS/FCS/DRS - survey prescribers' ID #s ;
ABSPOS32	; IHS/FCS/DRS - survey insurances ;
ABSPOS33	; IHS/FCS/DRS - survey divisions ;
ABSPOS34	; IHS/FCS/DRS - survey elig. status ;
ABSPOS35	; IHS/FCS/DRS - survey pharmacy volume ;
ABSPOS57	; IHS/FCS/DRS - 9002313.57 utils ; [04/17/2002 11:36 AM]
ABSPOS6A	; IHS/FCS/DRS - Data Entry & Status Disp ;
ABSPOS6B	; IHS/FCS/DRS - user display screen, cont
ABSPOS6C	; IHS/FCS/DRS - continuation of ABSPOS6*
ABSPOS6D	; IHS/FCS/DRS - user screen subrou ;
ABSPOS6E	; IHS/FCS/DRS - more overflow from ^ABSPOS1
ABSPOS6F	; IHS/FCS/DRS - debugging for ABSPOS ; [09/12/2002 10:04 AM]
ABSPOS6G	; IHS/FCS/DRS - DUR stuff ;
ABSPOS6H	; IHS/FCS/DRS - Data Entry & Status Disp
ABSPOS6I	; IHS/FCS/DRS - Data Entry & Status Disp ;
ABSPOS6J	; IHS/FCS/DRS - user screen subrou ;
ABSPOS6K	; IHS/FCS/DRS - Other options ;
ABSPOS6L	; IHS/FCS/DRS - Cancel a claim ;
ABSPOS6M	; IHS/FCS/DRS - Print log of claim ;
ABSPOS6N	; IHS/OIT/SCR - Functions to Close and Re-open a claim
ABSPOS8	;IHS/GDIT/AEF - more overflow from ^ABSPOS1 [09/05/2000 8:42 AM]
ABSPOS9	; IHS/FCS/DRS - NDC # lookup, formatting

Technical Manual
September 2026

(mnemonic) Menu

Routine	Description
ABSPOSBM	; IHS/FCS/DRS - POS billing, part 3 ;
ABSPOSBP	; IHS/FCS/DRS - Billing - PAC;
ABSPOSBQ	; IHS/FCS/DRS - Billing - Other A/R;
ABSPOSBT	; IHS/FCS/DRS - Billing - ANMC ;
ABSPOSBU	; IHS/FCS/DRS - obsolete ;
ABSPOSBV	; IHS/FCS/DRS - ILC A/R billing interface ;
ABSPOSBW	; IHS/FCS/DRS - Billing - FSI/ILC A/R v1,2;
ABSPOSBX	; IHS/FCS/DRS - Billing - FSI/ILC A/R v1,2;
ABSPOSC1	; IHS/FCS/DRS - certification testing;
ABSPOSC2	; IHS/FCS/DRS - certification testing ; [06/22/2001 2:14 PM]
ABSPOSC3	; IHS/FCS/DRS - development - certification testing ;
ABSPOSC4	; IHS/FCS/DRS - installation testing ;
ABSPOSCA	; IHS/FCS/DRS - Create 9002313.02 entries ;
ABSPOSCB	; IHS/FCS/DRS - VMEDS(*) prep for ABSP(*) ; [09/12/2002 10:07 AM]
ABSPOSCC	; IHS/FCS/DRS - Set up ABSP() ; [05/09/2003 9:37 AM]
ABSPOSCD	; IHS/FCS/DRS - ABSP("RX",*); [10/28/2002 2:40 PM]
ABSPOSCE	; IHS/FCS/DRS - New entry in 9002313.02 ; [12/20/2002 11:24 AM]
ABSPOSCF	; IHS/FCS/DRS - Low-level format of .02 ; [12/02/2002 2:54 PM]
ABSPOSCG	; IHS/SD/RLT - Set up ABSP() - CONT; [05/22/2006 9:00 AM]
ABSPOSCH	; IHS/FCS/DRS - Set up ABSP() ; [05/09/2003 9:37 AM]
ABSPOSD1	; IHS/FCS/DRS - (unused) ;
ABSPOSD2	; IHS/FCS/DRS - NCPDP DUR overrides ; [09/03/2002 11:10 AM]
ABSPOSD3	; IHS/SD/RLT - DIAGNOSIS CODE ; [06/21/2007 11:10 AM]
ABSPOSE1	; IHS/SD/lwj - E1 generation routine ; [10/24/2005 10:09:07 AM]
ABSPOSE2	; IHS/SD/lwj - E1 generation routine ; [10/24/2005 10:09:07 AM]
ABSPOSE3	; IHS/SD/lwj - E1 generation routine for private insurance ; [12 FEB 2020 10:09:07 AM]
ABSPOSE4	; IHS/GDIT/AEF - E1 generation routine for private insurance [12 FEB 2020 10:09:07 AM]
ABSPOSEC	; IHS/SD/lwj - Point of Sale environment checker [05/28/2002 10:03 AM]
ABSPOSEV	; IHS/SD/lwj - Point of Sale environment checker [05/28/2002 10:03 AM]
ABSPOSEX	; IHS/OIT/SCR - PATIENT EXPENSE generation routine ; [10/24/2005 10:09:07 AM]
ABSPOSF	; IHS/FCS/DRS - Print NCPDP claim ; [09/12/2002 10:08 AM]
ABSPOSFA	; IHS/FCS/DRS - Print NCPDP claim ; [09/12/2002 10:08 AM]

Routine	Description
ABSPOSFB	; IHS/FCS/DRS - VMEDS(*) prep for ABSP(*) ; [09/12/2002 10:08 AM]
ABSPOSFC	; IHS/FCS/DRS - Set up ABSP() ; [09/12/2002 10:09 AM]
ABSPOSFD	; IHS/FCS/DRS - ABSP("RX",*) ; [09/12/2002 10:09 AM]
ABSPOSFP	; IHS/FCS/DRS - Print NCPDP claim ; [09/12/2002 10:09 AM]
ABSPOSFX	; IHS/FCS/DRS - Print NCPDP claim ; [09/12/2002 10:09 AM]
ABSPOSH2	; IHS/SD/lwj - Assemble frmtd claim for 5.1 ; [08/22/2002 2:05 PM]
ABSPOSH4	; IHS/FCS/DRS - Parse Claim 5.1,D.0 Response ; [09/04/2002 12:56 PM]
ABSPOSH5	; IHS/SD/lwj - Post 5.1 Claim Response ; 8/7/02 [09/04/2002 12:57 PM]
ABSPOSH6	; IHS/SD/lwj - NCPDP 5.1 Post 5.1 response [09/04/2002 12:57 PM]
ABSPOSH7	; IHS/SD/lwj - NCPDP 5.1 Post 5.1 response [09/04/2002 10:54 AM]
ABSPOSHF	; IHS/SD/lwj- Get/Format/Set value for DUR/PPS segment [09/04/2002 2:09 PM]
ABSPOSHR	; IHS/SD/lwj - 3.2 to 5.1 clm reversal format ; [10/24/2002 8:18 AM]
ABSPOSHU	; IHS/SD/lwj - various miscellaneous 5.1 utilities [09/04/2002 10:17 AM]
ABSPOSI	; IHS/FCS/DRS - Data entry w/ScreenMan ; [09/12/2002 10:10 AM]
ABSPOSI1	; IHS/FCS/DRS - support for the prescrip. field on the form ; [09/12/2002 10:10 AM]
ABSPOSI2	; IHS/FCS/DRS - support for the NDC/HCP/PCS/CPT field ; [09/12/2002 10:10 AM]
ABSPOSI7	; IHS/FCS/DRS - utilities to go with Page 7 ; [08/30/2002 7:20 AM]
ABSPOSI8	; IHS/FCS/DRS - insurance selection - page 8 ; [11/06/2002 1:26 PM]
ABSPOSI B	; IHS/FCS/DRS - branching logic ; [09/12/2002 10:11 AM]
ABSPOSID	; IHS/FCS/DRS - the fill date field ; [09/12/2002 10:11 AM]
ABSPOSIF	; IHS/FCS/DRS - handle FIND command ; [09/12/2002 10:11 AM]
ABSPOSIH	; IHS/FCS/DRS - NCPDP 5.1 DUR Overrides form ; [06/03/2002 4:40 AM]
ABSPOSI I	; IHS/SD/RLT - DIAGNOSIS CODES form ; [06/21/2007 9:30 AM]
ABSPOSIO	; IHS/FCS/DRS - NCPDP Overrides form ; [06/03/2002 4:40 AM]
ABSPOSIP	; IHS/FCS/DRS - ABSP INPUT POSTAGE block ;
ABSPOSIV	; IHS/FCS/DRS - Old-style input ; [09/12/2002 10:11 AM]
ABSPOSIW	; IHS/FCS/DRS - Old-style input ;
ABSPOSIY	; IHS/FCS/DRS - Filing with .51,.59 ; [08/30/2002 10:26 AM]
ABSPOSIZ	; IHS/FCS/DRS - Filing with .51,.59 ; [11/04/2002 2:01 PM]
ABSPOSJ	; IHS/GDIT/AEF - the input in 9002335.591 moves to 9002335.59 [04/28/2000 5:35 PM]

Routine	Description
ABSPOSJ1	;IHS/SD/lwj - NCPDP 5.1 pre and post init for V1.0 patch 3 [10/31/2002 10:58 AM]
ABSPOSJ2	;IHS/OIT/SCR - pre and post init for V1.0 patch 28 [10/31/2002 10:58 AM]
ABSPOSK	; IHS/FCS/DRS - winnow POS data ;
ABSPOSK1	; IHS/FCS/DRS - winnow POS data ; [04/03/2002 10:05 AM]
ABSPOSK2	; IHS/FCS/DRS - winnow POS data ;
ABSPOSL	; IHS/FCS/DRS - logging ;
ABSPOSL1	; IHS/FCS/DRS - log file printing ;
ABSPOSL2	; IHS/OIT/RAM - NEW LOGGING FACILITY SYSTEM ; [7 JUN 2017 9:37 AM]
ABSPOSM	; IHS/FCS/DRS - Report Master (.61) ; [09/12/2002 10:12 AM]
ABSPOSM1	; IHS/FCS/DRS - build Report Master data ; [09/12/2002 10:12 AM]
ABSPOSM2	; IHS/FCS/DRS - Report Master (.61) ; [09/12/2002 10:12 AM]
ABSPOSMA	; IHS/FCS/DRS - General Inquiry/Report .57; [08/28/2002 3:01 PM]
ABSPOSMB	; IHS/FCS/DRS - General Inquiry/Report .57; [09/12/2002 10:14 AM]
ABSPOSMC	; IHS/FCS/DRS - General Inquiry/Report .57; [09/12/2002 10:14 AM]
ABSPOSMC	; IHS/FCS/DRS - General Inquiry/Report .57; [09/12/2002 10:14 AM]
ABSPOSMF	; IHS/SD/RLT - Medicare Part D Insurer Report ; [01/30/06 09:20 AM]
ABSPOSMG	; IHS/SD/RLT - INSURER BILLING STATUS ; [06/13/06 11:20 AM]
ABSPOSMH	; IHS/SD/RLT - POS Insurers with Missing Tax IDs; [09/11/07 02:00 PM]
ABSPOSMI	; IHS/SD/RLT - POS Claims not Passed to 3PB ; [09/18/07 02:00PM]
ABSPOSMZ	; IHS/FCS/DRS - General Inquiry/Report .57; [09/12/2002 10:15 AM]
ABSPOSN0	; IHS/FCS/DRS - NCPDP forms
ABSPOSN1	; IHS/FCS/DRS - NCPDP forms for ILC A/R ; [09/12/2002 10:15 AM]
ABSPOSN2	; IHS/FCS/DRS - NCPDP Fms F ILC A/R ; [09/12/2002 10:16 AM]
ABSPOSN3	; IHS/FCS/DRS - NCPDP Fms F ILC A/R ; [09/12/2002 10:16 AM]
ABSPOSN4	; IHS/FCS/DRS - NCPDP Fms F ILC A/R ; [09/12/2002 10:16 AM]
ABSPOSN5	; IHS/FCS/DRS - NCPDP Forms for ILC A/R ; [09/12/2002 10:16 AM]
ABSPOSN6	; IHS/FCS/DRS - NCPDP Fms F ILC A/R ; [09/12/2002 10:16 AM]
ABSPOSN7	; IHS/FCS/DRS - NCPDP Fms F ILC A/R ; [09/12/2002 10:17 AM]
ABSPOSN3	; IHS/FCS/DRS - NCPDP Fms F ILC A/R ; [09/12/2002 10:16 AM]
ABSPOSN4	; IHS/FCS/DRS - NCPDP Fms F ILC A/R ; [09/12/2002 10:16 AM]
ABSPOSN5	; IHS/FCS/DRS - NCPDP Forms for ILC A/R ; [09/12/2002 10:16 AM]
ABSPOSN6	; IHS/FCS/DRS - NCPDP Fms F ILC A/R ; [09/12/2002 10:16 AM]

Routine	Description
ABSPOSN7	; IHS/FCS/DRS - NCPDP Fms F ILC A/R ; [09/12/2002 10:17 AM]
ABSPOSN8	; IHS/FCS/DRS - NCPDP Fms F ILC A/R ; [09/12/2002 10:17 AM]
ABSPOSNC	; IHS/FCS/DRS - PHARmacy POS interface query from without ;
ABSPOSO	; IHS/FCS/DRS - "O" is for Override NCPDP field values ; [08/20/2002 8:46 AM]
ABSPOSO1	; IHS/FCS/DRS - NCPDP Override Main menu ; [09/03/2002 11:14 AM]
ABSPOSO2	; IHS/FCS/DRS - NCPDP Override-Fman utils ; [09/03/2002 11:10 AM]
ABSPOSO3	; IHS/FCS/DRS - NO DESCRIPTION PROVIDED ;
ABSPOSO4	; IHS/FCS/DRS - NO DESCRIPTION PROVIDED ;
ABSPOSO5	; IHS/FCS/DRS - NO DESCRIPTION PROVIDED ;
ABSPOSP	; IHS/FCS/DRS - Pharm POS pay/adj batches ; [09/12/2002 10:17 AM]
ABSPOSP1	; IHS/FCS/DRS - POS Writeoffs batch ; [09/12/2002 10:17 AM]
ABSPOSP2	; IHS/FCS/DRS - EOB to Payments Batch ; [09/12/2002 10:17 AM]
ABSPOSPE	; IHS/OIT/RAN - Pharmacy EXPENSE report modeled after ABPOSEX Patient Expense report
ABSPOSPW	; IHS/FCS/DRS - automatic writeoffs - criteria on form ; [09/12/2002 10:18 AM]
ABSPOSPX	; IHS/FCS/DRS - automatic writeoffs - criteria on form ; [09/12/2002 10:18 AM]
ABSPOSQ	; IHS/FCS/DRS - POS background, Part 1 ;
ABSPOSQ1	; IHS/FCS/DRS - POS background, Part 1 ; [11/04/2002 2:21 PM]
ABSPOSQ2	; IHS/FCS/DRS - form transmission packets ; [11/07/2002 6:57 AM]
ABSPOSQ3	; IHS/FCS/DRS - tasked from ABSPOSQ2 ; [09/12/2002 10:18 AM]
ABSPOSQ4	; IHS/FCS/DRS - Process responses ; [10/07/2002 10:36 AM]
ABSPOSQA	; IHS/FCS/DRS - POS background, Part 1 ;
ABSPOSQB	; IHS/FCS/DRS - POS background, Part 1 ; [08/20/2002 9:01 AM]
ABSPOSQC	; IHS/FCS/DRS - POS background, Part 1 ;
ABSPOSQD	; IHS/FCS/DRS - POS background Part 1 ;
ABSPOSQF	; IHS/FCS/DRS - Insurer asleep - status 31 ;
ABSPOSQG	; IHS/FCS/DRS - form transmission packets ;
ABSPOSQH	; IHS/FCS/DRS - JWS 10:46 AM 7 Jan 1997 ;
ABSPOSQJ	; IHS/FCS/DRS - subroutines of ABSPOSQ2 ;
ABSPOSQL	; IHS/FCS/DRS - Process responses ; [10/07/2002 8:20 AM]
ABSPOSQP	; IHS/FCS/DRS - SGM 05:46 PM 20 Jan 1997 ; [09/12/2002 10:18 AM]
ABSPOSQQ	; IHS/FCS/DRS - VTL 05:51 PM 20 Jan 1997 ;

Routine	Description
ABSPOSQS	; IHS/FCS/DRS - special queuing considerations ; [08/28/2002 2:25PM]
ABSPOSR1	; IHS/FCS/DRS - silent claim submitter
ABSPOSR2	; IHS/FCS/DRS - silent claim submitter
ABSPOSR3	; IHS/FCS/DRS - silent claim submitter
ABSPOSR4	; IHS/FCS/DRS - back billing ;
ABSPOSR5	;IHS/OIT/SCR - REJECTION REPORT BY REJECTION REASON
ABSPOSR6	;IHS/OIT/SCR – obsolete - RECOVERED FROM REJECTION REPORT - WRR
ABSPOSR7	;IHS/OIT/SCR - POS Insurance Report ;
ABSPOSR9	;IHS/OIT/SCR - COLLECTION PRODUCTIVITY REPORT
ABSPOSRA	; IHS/OIT/SCR - POS TRANSACTION POSTING SUMMARY REPORT ;
ABSPOSRB	; IHS/FCS/DRS - background from ABSPOSRX ;
ABSPOSRE	;IHS/OIT/RAM - EXTENDED REJECTION REPORT BY REJECTION REASON
ABSPOSRF	;IHS/OIT/RAM - EXTENDED REJECTION REPORT BY REJECTION REASON
ABSPOSRR	;IHS/GDIT/AEF - REJECTION REPORT BY REJECTION REASON
ABSPOSRS	; IHS/OIT/CNI/SCR - TM Audit report
ABSPOSRT	;IHS/OIT/CNI/RAN - Transaction History Report
ABSPOSRU	;IHS/OIT/SCR - Utilities for POS Insurance Report ;
ABSPOSRX	; IHS/FCS/DRS - callable from RPMS pharm ; [01/21/2003 8:40 AM]
ABSPOSRY	;IHS/OIT/SCR - COLLECTION PRODUCTIVITY REPORT ;IHS/OIT/CNI/RAN REWRITTEN TO NOT USE REPORT MASTER
ABSPOSZR	IHS/OIT/SCR - REJECTION REPORT BY REJECTION REASON
ABSPOSS	; IHS/FCS/DRS - POS setup ;
ABSPOSS1	; IHS/FCS/DRS - report what's in POS tables ;
ABSPOSS2	; IHS/FCS/DRS - ^ABSPEI printout,utils ;
ABSPOSS3	; IHS/FCS/DRS - file 9002313.53 - Pricing tables ;
ABSPOSS4	; IHS/FCS/DRS - file 9002313.54 Modem Types
ABSPOSS5	; IHS/FCS/DRS - 9002313.55 DIAL OUT ;
ABSPOSS6	; IHS/FCS/DRS - file 9002313.515 - user settings
ABSPOSS7	; IHS/FCS/DRS - Summary of POS insurers
ABSPOSS8	; IHS/FCS/DRS - 9002313.99
ABSPOSS9	; IHS/FCS/DRS - ANY CRITICAL MISSING ITEMS ;
ABSPOSSC	;IHS/SD/lwj - Set Cache device type in ABSP Dial out file [09/16/2002 9:37 AM]

Routine	Description
ABSPOSSG	; IHS/SD/lwj - Special gets for formats ; [12/23/2002 8:10 AM]
ABSPOSSH	; IHS/SD/RLT - Special sets for formats - cont; [7/11/2007 9:40 AM]
ABSPOSU	; IHS/FCS/DRS - utilities ;
ABSPOSU1	; IHS/FCS/DRS - copied for POS ; [09/04/2002 12:58 PM]
ABSPOSU2	; IHS/FCS/DRS - copied for POS ; [09/12/2002 10:19 AM]
ABSPOSU3	; IHS/FCS/DRS - copied for POS ; [09/12/2002 10:19 AM]
ABSPOSU4	; IHS/FCS/DRS - copied for POS ; [09/12/2002 10:19 AM]
ABSPOSU5	; IHS/FCS/DRS - utilities ; [09/12/2002 10:19 AM]
ABSPOSU6	; IHS/FCS/DRS - utilities, continued ;
ABSPOSU7	; IHS/FCS/DRS - misc. utilities ; [05/15/2001 12:09 PM]
ABSPOSU8	; IHS/FCS/DRS - utilities ;
ABSPOSU9	; IHS/FCS/DRS - copied for POS ; [09/12/2002 10:20 AM]
ABSPOSUA	;IHS/FCS/DRS - sort and print utilities ;
ABSPOSUB	; IHS/FCS/DRS - diagnostic data collection ; [09/12/2002 10:20 AM]
ABSPOSUC	; IHS/FCS/DRS - POS utilities ;
ABSPOSUD	; IHS/FCS/DRS - utils, some options ;
ABSPOSUE	; IHS/FCS/DRS - impossible errors ;
ABSPOSUQ	; IHS/OIT/CNI/SCR - DOUBLE QUEING SHELL HANDLER ;
ABSPOSUT	; IHS/FCS/DRS - POS utilities - testing modem ;
ABSPOSUU	; IHS/OIT/CNI/RAN REPORT - utilities[05/04/2010 5:18 PM]
ABSPOSX	; IHS/FCS/DRS - Support ;
ABSPOSXA	; IHS/FCS/DRS - Support
ABSPOSXE	; IHS/FCS/DRS - Support - error log search
ABSPOSZ	; IHS/FCS/DRS - Upgrades ;
ABSPP48	; /IHS/OIT/RAM ; 25 MAY 2017 ; PRE & POST INSTALL ROUTINES FOR ABSP PATCH 48
ABSPP49	; /IHS/OIT/RAM - PRE & POST INSTALL ROUTINES FOR ABSP PATCH 49 ; 13 OCT 2017 ;
ABSPP53	; /IHS/OIT/RAM - PRE & POST INSTALL ROUTINES FOR ABSP PATCH 53 ; 26 MAR 2024 ;
ABSPP54	;IHS/GDIT/AEF - PRE,POST,ENV CHECK ROUTINE FOR PATCH 54
ABSPTMRG	;IHS/OIT/RAM - EXTENDED REJECTION REPORT BY REJECTION REASON
ABSPUNK	;IHS/SD/SDR – UNKC option
ABSPUMOR	;IHS/SD/SDR – MOR Mass Override option part 1
ABSPUMR1	;IHS/SD/SDR – MOR Mass Override option part 2

Routine	Description
ABSPUTL	;IHS/GDIT/AEF - PHARMACY POINT OF SALE UTILITIES

4.0 Files and Tables

4.1 File List

File #	Filename	Description
9002313.02	ABSP CLAIMS	Intermediate form of claims. Fields are stored in formatted form. Raw packet is stored, too.
9002313.03	ABSP RESPONSES	Intermediate form of responses to claims. Data is stored in formatted form, as received from insurer. Raw data packet may also be present.
9002313.1	ABSP COMBINED INSURANCE	Temporarily gather insurance data into a common global to facilitate automatic insurance selection. A copy of the ^ABSBCOMB file as found in ILC A/R Version 2. The only reason a separate file is kept here is because of namespacing. Some reworking will be needed for BBM package.
9002313.3	ABSP REJECT CODES	CODES FOR POS REJECTIONS AS ASSIGNED BY THE BUSINESS OFFICE P - PREVENTABLE N - NON-RECOVERABLE B – BOTH.
9002313.31	ABSP CERTIFICATION	Data for development use in certifying software when required by switches and claims end processors. Also contains test claim used by MGR/TEST option. This file is completely overwritten by installation.
9002313.4	ABSP INSURER	Insurers for whom claims are being sent electronically. Various other insurer-specific, ABSP-specific parameters. DINUM'd to ^AUTNINS.
9002313.473	ABSP DUR/PPS	This file will hold the repeating DUR/PPS records. These records represent a brand new claim segment as of NCPDP 5.1 and is required by some of the major insurers/processors.
9002313.492	ABSP DIAGNOSIS CODE	Tracks when the ASK OVERRIDE is used and what diagnosis is put for a prescription.
9002313.51	ABSP DATA INPUT	Data input. Used by Screen Manager; routines ABSPOSI* primarily. ABSPOSRX calls and old-style data input also manage to find their way into this file - it's one standard pathway through which all data arrives in Point of Sale.
9002313.511	ABSP NCPDP OVERRIDE	More input. Override of specific NCPDP fields. ABSPOSO* routines (letter O).
9002313.515	ABSP INPUT USER PREF	User preferences for certain operations, especially Screenman input. Seldom used.
9002313.516	ABSP ORIGIN OF INPUT	Codes used in 9002313.59, 9002313.57, 9002313.51 to describe where the input came from. This file is overwritten by installation.

File #	Filename	Description
9002313.53	ABSP PRICING TABLES	Different pricing policies can be maintained for different insurers. `1 is always named STANDARD and is placed there by installation, originally. Site may create more. STANDARD is not changed by upgrade (that is, no overwriting happens.)
9002313.54	ABSP MODEM TYPES	Dictionary of modem types and characteristics. Should never be edited locally, except in coordination with development. Installation overwrites this file, totally.
9002313.55	ABSP DIAL OUT	Destinations for electronic claims. Each of the HTTP POST 800 numbers, and the HTTP POSTT1, and the NDC numbers are in here, as well as one entry reserved for development and testing use.
9002313.56	ABSP PHARMACIES	Pharmacy-specific data -- NCPDP #, default DEA #, etc. One ABSP PHARMACY has a list of one or more OUTPATIENT SITES (file 59).
9002313.57	ABSP LOG OF TRANSACTIONS	A copy of 9002313.59. As each transaction completes, a snapshot of 9002313.59 entry is placed here in 9002313.57.
9002313.58	ABSP STATISTICS	Statistics, as displayed by List Manager and ^ABSPOS2.
9002313.59	ABSP TRANSACTION	Transactions in progress. When complete (status 99), a copy of the record is placed in 9002313.57.
9002313.61	ABSP REPORT MASTER	Ties together pointers to the prescription/fill and the latest transaction for the fill - for easy Fileman report writing.
9002313.7	ABSP ELIGIBILITY	The ABSP Eligibility field is use to store the outgoing E1 transmission and the incoming E1 response message. When this file was originally created, it was to be used solely for the purpose of working with the Medicare Part D TrOOP facilitator to help determine which Medicare Part D plan (if any) a patient had enrolled in. In the future, there is a possibility that IHS and other payors will want to expand and incorporate the E1 into their processes as well. It was determined that only the most recent E1 transmission and response need to be stored for a patient. This decision was based on no regulatory requirements being identified for retention of the eligibility information, coupled with the fact that eligibility information is very fluid and could alter at any time. (Indicating that it should be checked frequently.) About the layout of this file - the outgoing transmission will be stored in raw form, and split out into individual fields. The transmission fields will be stored on TRANS (multiple of raw transmission), TINSSG (transmission insurance segment) and TPATSG (transmission patient segment). The response fields will be stored in RESP (multiple of raw transmission), RINSSG (response insurance

File #	Filename	Description
		segment), MSGSG (response message segment), RSTSG (response status segment), 511 (multiple for rejects), 526 (additional message information) and 548 (multiple for approval codes). Unfortunately, 511, 626 and 548 had to be stored separately from the response status segment (on which they return) because of their length and/or repetitive nature. (The header records will only appear in the raw form. The raw data is stored to make debugging of the messages easier should problems occur with field placement, value, or field/group/segment identifiers.
9002313.71	ABSP FILEMAN ERROR LOG	Used for error handling.
9002313.72	ABSP CLASS XML	Added in p53; part of connectivity changes for Change Healthcare.
9002313.81	ABSP TRANSLATE	Translation of relationship names (which match those in 9999999.36, ^AUTTRLSH) to relationship code for claim messages.
9002313.82103	ABSP NCPDP FIELD 103	Values for NCPDP field 103, Transaction Code. ~~~~~ GENERAL REMARK ABOUT THE 9002313.82*** FILES: They're used much like a Fileman Set of Codes field might be used. So why aren't they implemented as a Set of Codes? 1) Sometimes the same field appears in more than one file. We avoid maintaining the same set of codes multiple times. 2) Quantity of data - some of these fields would have to be chopped and abbreviated in a big way in order to fit in one global data dictionary node. 3) Consistency - we nevertheless want to hand all of these NCPDP fields with set of codes-like values in a consistent way, so even the ones which don't fall under the conditions 1) or 2) are handled this way. 4) Future extensions / expansions, which are at the whim of NCPDP, can be handled with no change to the Point of Sale application. 5) Backwards compatibility - many fields in 9002313.02 and .03 are already implemented as free text fields, sometimes with a two-byte field ID prefixed. It could get messy if we had to change them. ~~~~~ Now, what we might do in future development is to implement certain fields as pointers to these files. ~~~~~ Special note for Version 1.0: These fields are not used by any options reachable by users. However, they are usable in Join-type pointers with certain computed fields in 9002313.57 ABSP TRANSACTIONS, and as such, may be of

File #	Filename	Description
		interest in developing site-specific receipts now, and as a platform for developing a general receipt capability for the next version.
9002313.82305	ABSP NCPDP FIELD 305	Values for NCPDP field 305, Sex Code.
9002313.82306	ABSP NCPDP FIELD 306	Values for NCPDP field 306, RELATIONSHIP CODE.
9002313.82307	ABSP NCPDP FIELD 307	Values for NCPDP field 307, Customer Location.
9002313.82308	ABSP NCPDP FIELD 308	Values for NCPDP field 308, Other Coverage Code.
9002313.82309	ABSP NCPDP FIELD 309	Values for NCPDP field 309, Eligibility Clarification Code.
9002313.82406	ABSP NCPDP FIELD 406	Values for NCPDP field 406, Compound Code.
9002313.82408	ABSP NCPDP FIELD 408	Values for NCPDP field 408, Dispense as Written (DAW) / Product Selection Code.
9002313.82416	ABSP NCPDP FIELD 416	Values for the leading digit of NCPDP field 416, PAMC Code and Number.
9002313.82418	ABSP NCPDP FIELD 418	Values for NCPDP field 418, Level of Service.
9002313.82419	ABSP NCPDP FIELD 418	Values for NCPDP field 418, Level of Service.
9002313.8242	ABSP NCPDP FIELD 420	Values for NCPDP Field 420, Prescription Clarification Code.
9002313.82423	ABSP NCPDP FIELD 423	Values for NCPDP Field 423, BASIS OF COST DETERMINATION. Indicates the method by which the drug cost (field 409) was calculated.
9002313.82425	ABSP NCPDP FIELD 425	Values for NCPDP field 425, Drug Type.
9002313.82429	ABSP NCPDP FIELD 429	Values for NCPDP field 429, Unit Dose Indicator.
9002313.82432	ABSP NCPDP FIELD 432	Values for NCPDP field 432, BASIS OF DAYS SUPPLY DETERMINATION.
9002313.82436	ABSP NCPDP FIELD 436	Values for Field 436, Alternate Product Type. The code number that identifies the product type that was dispensed. This code is used only if the National Drug Code number is not available.
9002313.82439	ABSP NCPDP FIELD 439	Values for NCPDP field 439, DUR Conflict Code.
9002313.8244	ABSP NCPDP FIELD 440	Values for NCPDP field 440, DUR Intervention Code.
9002313.82441	ABSP NCPDP FIELD 441	Values for NCPDP field 441, DUR Outcome Code.

File #	Filename	Description
9002313.82501	ABSP NCPDP FIELD 501	Values for NCPDP field 501, Response Status.
9002313.82522	ABSP NCPDP FIELD 522	Values for field 522, BASIS OF REIMBURSEMENT DETERMINATION.
9002313.82528	ABSP NCPDP FIELD 528	Meanings of codes in NCPDP field 528. CLINICAL SIGNIFICANCE CODE a/k/a SEVERITY INDEX CODE.
9002313.82529	ABSP NCPDP FIELD 529	Values of NCPDP field 529, OTHER PHARMACY INDICATOR.
9002313.82532	ABSP NCPDP FIELD 532	Values of NCPDP field 532, DATABASE INDICATOR.
9002313.82533	ABSP NCPDP FIELD 533	Values for NCPDP field 533, OTHER PRESCRIBER INDICATOR.
9002313.82535	ABSP NCPDP FIELD 535	Values for NCPDP field 535, DUR OVERFLOW.
9002313.83	ABSP RESULT CATEGORY	A list of the possible result categories, as returned by CATEG^ABSPPOSUC().
9002313.89	ABSP ERROR CODES	Obsolete. But it may be revived.
9002313.91	ABSP NCPDP FIELD DEFS	The NCPDP Data Dictionary Individual fields which combine into formatted packets. Installation overwrites this file, totally.
9002313.92	ABSP NCPDP FORMATS	The formats for sending claims. As derived from NDC Payor Sheets and HTTP POST Plan Sheets. Never modify locally, except in cooperation with development. Installation overwrites this file, totally.
9002313.93	ABSP NCPDP REJECT CODES	Rejection codes as defined by NCPDP. Never ever edit. Installation overwrites this file, totally.
9002313.94	ABSP INSURANCE RULES	The insurance rules which are available for selection. Never edit this file. Installation overwrites it.
9002313.99	ABSP SETUP	All manner of parameters and stuff. Always has one and only one entry, IEN `1.

4.2 File Access

File #	Filename	GL	RD	WR	LYG	DD	DEL
9002313.02	ABSP CLAIMS	^ABSPC(	Pp	@	@	@	@
9002313.03	ABSP RESPONSES	^ABSPR(	Pp	@	@	@	@
9002313.1	ABSP COMBINED INSURANCE	^ABSPCOMB(	Pp	@	@	@	@

File #	Filename	GL	RD	WR	LYG	DD	DEL
9002313.3	ABSP REJECT CODES	^ABSPRJC(	@	@	@	@	@
9002313.31	ABSP CERTIFICATION	^ABSP(9002313.31,	Pp	@	@	@	@
9002313.4	ABSP INSURER	^ABSPEI(	Pp	Pp	Pp	@	@
9002313.473	ABSP DUR/PPS	^ABSP(9002313.473,	@	@	@	@	@
9002313.492	ABSP DIAGNOSIS CODE	^ABSP(9002313.491,	@	@	@	@	@
9002313.51	ABSP DATA INPUT	^ABSP(9002313.51,	Pp	@	@	@	@
9002313.511	ABSP NCPDP OVERRIDE	^ABSP(9002313.511,	Pp	@	@	@	@
9002313.515	ABSP INPUT USER PREF	^ABSP(9002313.515,	Pp	@	@	@	@
9002313.516	ABSP ORIGIN OF INPUT	^ABSP(9002313.516,	Pp	@	@	@	@
9002313.53	ABSP PRICING TABLES	^ABSP(9002313.53,	Pp	@	@	@	@
9002313.54	ABSP MODEM TYPES	^ABSP(9002313.54,	Pp	@	@	@	@
9002313.55	ABSP DIAL OUT	^ABSP(9002313.55,	Pp	@	@	@	@
9002313.56	ABSP PHARMACIES	^ABSP(9002313.56,	Pp	@	@	@	@
9002313.57	ABSP LOG OF TRANSACTIONS	^ABSPTL(	Pp	@	@	@	@
9002313.58	ABSP STATISTICS	^ABSPECX("S",	Pp	@	@	@	@
9002313.59	ABSP TRANSACTION	^ABSPT(	Pp	@	@	@	@
9002313.61	ABSP REPORT MASTER	^ABSPECX("RPT",	Pp	@	@	@	@
9002313.7	ABSP ELIGIBILITY	^ABSPE(	@	@	@	@	@
9002313.71	ABSP FILEMAN ERROR LOG	^ABSPFMLOG(	@	@	@	@	@

File #	Filename	GL	RD	WR	LYG	DD	DEL
9002313.72	ABSP CLASS XML	^ABSPCXML(	@	@	@	@	@
9002313.81	ABSP TRANSLATE	^ABSPF(9002313.81,	Pp	@	@	@	@
9002313.82103	ABSP NCPDP FIELD 103	^ABSPF(9002313.82103,	Pp	@	@	@	@
9002313.82305	ABSP NCPDP FIELD 305	^ABSPF(9002313.82305,	Pp	@	@	@	@
9002313.82306	ABSP NCPDP FIELD 306	^ABSPF(9002313.82306,	Pp	@	@	@	@
9002313.82307	ABSP NCPDP FIELD 307	^ABSPF(9002313.82307,	Pp	@	@	@	@
9002313.82308	ABSP NCPDP FIELD 308	^ABSPF(9002313.82308,	Pp	@	@	@	@
9002313.82309	ABSP NCPDP FIELD 309	^ABSPF(9002313.82309,	Pp	@	@	@	@
9002313.82406	ABSP NCPDP FIELD 406	^ABSPF(9002313.82406,	Pp	@	@	@	@
9002313.82408	ABSP NCPDP FIELD 408	^ABSPF(9002313.82408,	Pp	@	@	@	@
9002313.82416	ABSP NCPDP FIELD 416	^ABSPF(9002313.82416,	Pp	@	@	@	@
9002313.82418	ABSP NCPDP FIELD 418	^ABSPF(9002313.82418,	Pp	@	@	@	@
9002313.82419	ABSP NCPDP FIELD 418	^ABSPF(9002313.82418,	Pp	@	@	@	@
9002313.8242	ABSP NCPDP FIELD 420	^ABSPF(9002313.8242	Pp	@	@	@	@
9002313.82423	ABSP NCPDP FIELD 423	^ABSPF(9002313.82423,	Pp	@	@	@	@
9002313.82425	ABSP NCPDP FIELD 425	^ABSPF(9002313.82425,	Pp	@	@	@	@
9002313.82429	ABSP NCPDP FIELD 429	^ABSPF(9002313.82429,	Pp	@	@	@	@
9002313.82432	ABSP NCPDP FIELD 432	^ABSPF(9002313.82432,	Pp	@	@	@	@
9002313.82436	ABSP NCPDP FIELD 436	^ABSPF(9002313.82436,	Pp	@	@	@	@
9002313.82439	ABSP NCPDP FIELD 439	^ABSPF(9002313.82439,	Pp	@	@	@	@

File #	Filename	GL	RD	WR	LYG	DD	DEL
9002313.8244	ABSP NCPDP FIELD 440	^ABSPF(9002313.8244,	Pp	@	@	@	@
9002313.82441	ABSP NCPDP FIELD 441	^ABSPF(9002313.82441,	Pp	@	@	@	@
9002313.82501	ABSP NCPDP FIELD 501	^ABSPF(9002313.82501,	Pp	@	@	@	@
9002313.82522	ABSP NCPDP FIELD 522	^ABSPF(9002313.82522,	Pp	@	@	@	@
9002313.82528	ABSP NCPDP FIELD 528	^ABSPF(9002313.82528,	Pp	@	@	@	@
9002313.82529	ABSP NCPDP FIELD 529	^ABSPF(9002313.82529,	Pp	@	@	@	@
9002313.82532	ABSP NCPDP FIELD 532	^ABSPF(9002313.82532,	Pp	@	@	@	@
9002313.82533	ABSP NCPDP FIELD 533	^ABSPF(9002313.82533,	Pp	@	@	@	@
9002313.82535	ABSP NCPDP FIELD 535	^ABSPF(9002313.82535,	Pp	@	@	@	@
9002313.83	ABSP RESULT CATEGORY	^ABSPF(9002313.83,	Pp	@	@	@	@
9002313.89	ABSP ERROR CODES	^ABSPF(9002313.89,	Pp	@	@	@	@
9002313.91	ABSP NCPDP FIELD DEFS	^ABSPF(9002313.91,	Pp	@	@	@	@
9002313.92	ABSP NCPDP FORMATS	^ABSPF(9002313.92,	Pp	@	@	@	@
9002313.93	ABSP NCPDP REJECT CODES	^ABSPF(9002313.93,	Pp	@	@	@	@
9002313.94	ABSP INSURANCE RULES	^ABSPF(9002313.94,	Pp	@	@	@	@
9002313.99	ABSP SETUP	^ABSP(9002313.99,	Pp	@	@	@	@

4.3 Cross Reference

4.3.1 ABSP Claims (9002313.02)

- .01 Claim ID
 - B Regular

- .03 Billing Item IEN
 - AC Regular
 - #1.02 Trigger
 - #1.01 Trigger
- .04 Transmit Flag
 - AD Regular
- .05 Transmitted On
 - AE Regular
- 1.01 Patient Name
 - C Regular
- 1.02 Billing Item PCN #
 - D Regular
- 1.03 Billing Item VCN #
 - E Regular
- 401 Date of Service
 - AF Regular

4.3.2 ABSP RESPONSES (9002313.03)

- .01 ID
 - B Regular
- .02 Date/Time Response Received
 - AE Regular
- 1000 Response(s)
 - 501 Response Status (Prescription)
 - AC Regular

4.3.3 ABSP COMBINED INSURANCE (9002313.1)

- .01 PATIENT NAME
 - B Regular

4.3.4 ABSP REJECT CODES (9002313.3)

- .01 REJECT CODE
 - B Regular

- 2 EXPLANATION
 - C Regular

4.3.5 ABSP CERTIFICATION (9002313.31)

- .01 NAME
 - B Regular

4.3.6 ABSP INSURER (9002313.4)

- .01 NAME
 - B Regular
- 100.01 RX – NCPDP Record Format
 - AFormat Regular
- 100.06 RX – PRICING METHOD
 - APricing Regular
- 100.07 RX – DIAL OUT TO
 - ADialOut Regular

4.3.7 ABSP DUR/PPS (9002313.473)

- .01 Record Number
 - B Regular

4.3.8 ABSP DIAGNOSIS CODE (9002313.491)

- .01 Record Number
 - B Regular
- .09 ABSPRXI
 - AC Regular

4.3.9 ABSP DATA INPUT (9002313.51)

- .01 START TIME
 - B Regular

4.3.10 ABSP NCPDP OVERRIDE (9002313.511)

- .01 NAME
 - B Regular

4.3.11 ABSP INPUT USER PREF (9002313.515)

- .01 USER
 - B Regular

4.3.12 ABSP ORIGIN OF INPUT (9002313.516)

- .01 NAME
 - B Regular

4.3.13 ABSP PRICING TABLES (9002313.53)

- .01 NAME
 - B Regular

4.3.14 ABSP MODEM TYPES (9002313.54)

- .01 NAME
 - B Regular

4.3.15 ABSP DIAL OUT (9002313.55)

- .01 NAME
 - B Regular
- .02 MODEM TYPE
 - AModemType Regular

4.3.16 ABSP PHARMACIES (9002313.56)

- .01 NAME
 - B Regular
- 13800 OUTPATIENT SITE
 - .01 OUTPATIENT SITE
 - B Regular

4.3.17 ABSP LOG OF TRANSACTIONS (9002313.57)

- .01 ENTRY #
 - B Regular
- .06 INSURER
 - AI Regular
- .15 POSTED TO A/R
 - AR Regular
- .16 NEEDS BILLING
 - AS Regular
- 2 PCN
 - C Regular
- 3 CLAIM
 - AE Regular
- 4 RESPONSE
 - AF Regular
- 5 PATIENT
 - AC Regular
- 7 LAST UPDATE
 - AH Regular
- 13 USER
 - AG Regular
- 401 REVERSAL CLAIM
 - AER Regular
- 402 REVERSAL RESPONSE
 - AFR Regular

4.3.18 ABSP STATISTICS (9002313.58)

- .01 NAME
 - B Regular

4.3.19 ABSP TRANSACTION (9002313.59)

- .01 ENTRY #
 - B Regular

- .15 POSTED TO A/R
 - AR Regular
- 1 STATUS
 - AD Regular
- 2 CLAIM
 - AE Regular
- 4 RESPONSE
 - AF Regular
- 5 PATIENT
 - AC Regular
- 7 LAST UPDATE
 - AH Regular
- 13 USER
 - AG Regular
- 401 REVERSAL CLAIM
 - AER Regular
- 402 REVERSAL RESPONSE
 - AFR Regular

4.3.20 ABSP REPORT MASTER (9002313.61)

- .01 RELEASED DATE
 - B Regular
- .02 TRANSACTION DATE
 - AD Regular
- .03 TRANSACTION
 - AE Regular
- .04 RXI
 - C Regular

4.3.21 ABSP ELIGIBILITY (9002313.7)

- .01 PATIENT NAME
 - B Regular

4.3.22 ABSP FILEMAN ERROR LOG (9002313.71)

- .01 TIME OF ERROR
 - B Regular

4.3.23 ABSP CLASS XML (9002313.72)

- .01 NAME
 - B Regular

4.3.24 ABSP TRANSLATE 9999999.36 (9002313.81)

- .01 NAME
 - B Regular

4.3.25 ABSP NCPDP FIELD 103 (9002313.82103)

- .01 CODE
 - B Regular

4.3.26 ABSP NCPDP FIELD 305 (9002313.82305)

- .01 CODE
 - B Regular

4.3.27 4ABSP NCPDP FIELD 306 (9002313.82306)

- .01 CODE
 - B Regular

4.3.28 ABSP NCPDP FIELD 307 (9002313.82307)

- .01 CODE
 - B Regular

4.3.29 ABSP NCPDP FIELD 308 (9002313.82308)

- .01 CODE
 - B Regular

4.3.30 ABSP NCPDP FIELD 309 (9002313.82309)

- .01 CODE
 - B Regular

4.3.31 ABSP NCPDP FIELD 406 (9002313.82406)

- .01 CODE
 - B Regular

4.3.32 ABSP NCPDP FIELD 408 (9002313.82408)

- .01 CODE
 - B Regular

4.3.33 ABSP NCPDP FIELD 416 (9002313.82416)

- .01 CODE
 - B Regular

4.3.34 ABSP NCPDP FIELD 418 (9002313.82418)

- .01 CODE
 - B Regular

4.3.35 ABSP NCPDP FIELD 419 (9002313.82419)

- .01 CODE
 - B Regular

4.3.36 ABSP NCPDP FIELD 420 (9002313.8242)

- .01 CODE
 - B Regular

4.3.37 ABSP NCPDP FIELD 423 (9002313.82423)

- .01 CODE
 - B Regular

4.3.38 ABSP NCPDP FIELD 425 (9002313.82425)

- .01 CODE
 - B Regular

4.3.39 ABSP NCPDP FIELD 429 (9002313.82429)

- .01 CODE
 - B Regular

4.3.40 ABSP NCPDP FIELD 432 (9002313.82432)

- .01 CODE
 - B Regular

4.3.41 ABSP NCPDP FIELD 436 (9002313.82436)

- .01 CODE
 - B Regular

4.3.42 ABSP NCPDP FIELD 439 (9002313.82439)

- .01 CODE
 - B Regular

4.3.43 ABSP NCPDP FIELD 440 (9002313.8244)

- .01 CODE
 - B Regular

4.3.44 ABSP NCPDP FIELD 441 (9002313.82441)

- .01 CODE
 - B Regular

4.3.45 ABSP NCPDP FIELD 501 (9002313.82501)

- .01 CODE
 - B Regular

4.3.46 ABSP NCPDP FIELD 522 (9002313.82522)

- .01 CODE
 - B Regular

4.3.47 ABSP NCPDP FIELD 528 (9002313.82528)

- .01 CODE
 - B Regular

4.3.48 ABSP NCPDP FIELD 529 (9002313.82529)

- .01 CODE
 - B Regular

4.3.49 ABSP NCPDP FIELD 532 (9002313.82532)

- .01 CODE
 - B Regular

4.3.50 ABSP NCPDP FIELD 533 (9002313.82533)

- .01 CODE
 - B Regular

4.3.51 ABSP NCPDP FIELD 535 (9002313.82535)

- .01 CODE
 - B Regular

4.3.52 ABSP RESULT CATEGORY (9002313.83)

- .01 NAME
 - B Regular
- .03 OTHER NAME
 - C Regular

4.3.53 ABSP ERROR CODES (9002313.89)

- .01 Code
 - B Regular

4.3.54 ABSP NCPDP FIELD DEFS (9002313.91)

- .01 Number
 - B Regular
- .03 Name
 - C Regular
- .065.1 ID
 - D Regular

4.3.55 ABSP NCPDP FORMATS (9002313.92)

- .01 Record Format Name
 - B Regular
- 1.01 NDC BIN Number
 - C Regular
- 1.04 Envoy Plan Number
 - D Regular

4.3.56 ABSP NCPDP REJECT CODES (9002313.93)

- .01 Code
 - B Regular

4.3.57 ABSP INSURANCE RULES (9002313.94)

- .01 NAME
 - B Regular

4.3.58 ABSP SETUP (9002313.99)

- .01 NAME
 - B Regular

4.4 Table File

4.4.1 ABSP CLAIMS FILE

Global: ^ABSPC(

File#: 9002313.02

- .01 Claim ID (RF), [0;1]
- .02 Electronic Payor (P9002313.4'), [0;2]
- .03 Billing Item IEN (P9002302'), [0;3]
- .04 Transmit Flag (S), [0;4]
- .05 Transmitted On (DO), [0;5]
- .06 Created On (DO), [0;6]
- 1.01 Patient Name (F), [1;1]
- 1.02 Billing Item PCN # (F), [1;2]
- 1.03 Billing Item VCN # (F), [1;3]
- 101 BIN Number (F), [100;1]
- 102 Version/Release Number (F), [100;2]
- 103 Transaction Code (F), [100;3]
- 104 Processor Control Number (F), [100;4]
- 109 Transaction Count (F), [100;9]
- 110 Software Vendor/Cert ID (F), [100;10]
- 147 Pharmacy Service Type (NJ2,0), [140;7]
- 201 Service Provider ID (F), [200;1]
- 202 Service Provider ID Qualifier (F), [200;2]
- 301 Group ID (FO), [300;1]
- 302 Cardholder ID (FO), [300;2]
- 303 Person Code (F), [300;3]
- 304 Date of Birth (FO), [300;4]
- 305 Patient Gender Code (FO), [300;5]
- 306 Patient Relationship Code (FO), [300;6]
- 307 Place of Service (F), [300;7]
- 308 Other Coverage Code (F), [300;8]

- 309 Eligibility Clarification Code (F), [300;9]
- 310 Patient First Name (F), [300;10]
- 311 Patient Last Name (F), [300;11]
- 312 Cardholder First Name (F), [300;12]
- 313 Cardholder Last Name (F), [300;13]
- 314 Home Plan (F), [300;14]
- 315 Employer Name (F), [300;15]
- 316 Employer Street Address (F), [300;16]
- 317 Employer City Address (F), [300;17]
- 318 Employer State (F), [300;18]
- 319 Employer Zip Code (F), [300;19]
- 320 Employer Phone Number (F), [320;20]
- 322 Patient Street Address (F), [321;2]
- 323 Patient City Address (F), [321;3]
- 324 Patient State/Prov Address (F), [321;4]
- 325 Patient Zip/Postal Zone (F), [321;5]
- 326 Patient Phone Number (F), [321;6]
- 327 Carrier ID # (F), [320;27]
- 329 Patient SSN (F), [320;29]
- 331 Patient ID Qualifier (F), [330;1]
- 332 Patient ID (F), [330;2]
- 333 Employer ID (F), [330;3]
- 334 Smoker/Non Smoker (F), [330;4]
- 335 Pregnancy Indicator (F), [330;5]
- 336 Facility ID (F), [330;6]
- 350 Patient E-mail Address (F), [350;1]
- 384 Patient Residence (NJ2,0), [380;4]
- 388 FACILITY CITY (F), [388;1]
- 390 NARRATIVE MESSAGE (F), [390;1]
- 400 Medication(s) (Multiple-9002313.0201), [400;0]

- .01 Medication Order (MNJ9,0), [0;1]
- .02 VCPT IEN (P9002301'), [0;2]
- .03 Medication Number (NJ9,0), [0;3]
- .04 Medication Name (F), [0;4]
- 308 Other Coverage Code (F), [300;8]
- 315 Employer Name (F), [310;5]
- 316 Employer Street Address (F), [310;6]
- 317 Employer City Address (F), [310;7]
- 318 Employer State/Prov Address (F), [310;8]
- 319 Employer Zip/Postal Zone (F), [310;9]
- 320 Employer Phone Number (F), [310;10]
- 321 Employer Contact Name (F), [320;1]
- 327 Carrier ID (F), [320;7]
- 330 Alternate ID (F), [320;10]
- 337 COB/Other Payments Cnt (F), [330;7]
- 337.01 COB/Other Payments (Multiple-9002313.0401), [337;0]
 - .01 COB/Other Paymnt Cntr (F), [0;1]
 - 338 Other Payer Coverage Type (F), [0;2]
 - 339 Other Payer ID Qualifier (F), [0;3]
 - 340 Other Payer ID (F), [0;4]
 - 341 Other Payer Amt Paid Cnt (F), [0;6]
 - 342 Other Payer Amt Paid Qual (Multiple-9002313.401342), [1;0]
- .01 Other Payer Amt Paid Qual (F), [0;1]
- 431 Other Payer Amount Paid (F), [0;2]
 - 443 Other Payer Date (F), [0;5]
 - 471 Other Payer Reject Count (F), [0;7]
 - 472 Other Payer Reject Code (Multiple-9002313.401472), [2;0]
- .01 Other Payer Reject Code (F), [0;1]
 - 343 Dispensing Status (F), [340;3]
 - 344 Qty Intended to be Dispensed (F), [340;4]
 - 345 Days Supply Intd Dispensed (F), [340;5]
 - 354 Subm Clarif Code Count (NJ2,0), [350;4]
 - 367 Prescriber State/Prov (F), [360;7]
 - 401 Date of Service (FO), [400;1]

- 402 Prescription/Service Ref Num (F), [400;2]
- 403 Fill Number (FO), [400;3]
- 404 Metric Quantity (FO), [400;4]
- 405 Days Supply (FO), [400;5]
- 406 Compound Code (F), [400;6]
- 407 Product/Service ID (FO), [400;7]
- 408 Dispense as Wrtn/Prd Sel Cd (F), [400;8]
- 409 Ingredient Cost Submitted (FO), [400;9]
- 410 Sales Tax (FO), [400;10]
- 411 Prescriber ID (F), [400;11]
- 412 Dispensing Fee Submitted (FO), [400;12]
- 414 Date Prescription Written (F), [400;14]
- 415 Number Refills Authorized (F), [400;15]
- 416 PA/MC Code & Number (F), [400;16]
- 418 Level of Service (F), [400;18]
- 419 Prescription Origin Code (F), [400;19]
- 420 Submission Clarification Code (F), [400;20]
- 420.1 Subm Clarif Code 1 (NJ2,0), [421;1]
- 420.2 Subm Clarif Code 2 (NJ2,0), [421;2]
- 420.3 Subm Clarif Code 3 (NJ2,0), [421;3]
- 421 Primary Care Provider ID (F), [400;21]
- 422 Clinic ID Number (F), [400;22]
- 423 Basis of Cost Determination (F), [400;23]
- 424 Diagnosis Code (F), [400;24]
- 425 Drug Type (F), [420;25]
- 426 Usual & Customary Charge (F), [400;26]
- 427 Prescriber Last Name (F), [420;27]
- 428 Postage Amt. Claimed (F), [420;28]
- 429 Unit Dose Indicator (F), [400;29]
- 430 Gross Amount Due (F), [400;30]
- 431 Other Payer Amount (F), [430;1]
- 432 Basis of Days Supply Det (F), [420;32]
- 433 Patient Paid Amount Submitted (F), [430;3]
- 434 Date of Injury (F), [430;4]
- 435 Claim/Ref ID Number (F), [430;5]
- 436 Product/Service ID Qualifier (F), [430;6]

- 437 Alternate Product Code (F), [430;7]
- 438 Incentive Amount Submitted (F), [430;8]
- 439 Reason for Service Code (F), [430;9]
- 440 Professional Service Code (F), [430;10]
- 441 Result of Service Code (F), [440;1]
- 442 Quantity Dispensed (F), [440;2]
- 443 Other Payer Date (F), [440;3]
- 444 Provider ID (F), [440;4]
- 445 Orig Pres Prod/Srv Cd (F), [440;5]
- 446 Originally Prescribed Quantity (F), [440;6]
- 447 Comp Inged Component Cnt (F), [440;7]
- 447.01 Compound Repeating Fields (Multiple-9002313.0501), [447;0]
 - .01 Compound Repeating Count (F), [0;1]
 - 448 Compound Ingredient Quantity (F), [0;4]
 - 449 Compound Ingredient Drug Cost (F), [0;5]
 - 488 Compound Product ID Qualifier (F), [0;2]
 - 489 Compound Product ID (F), [0;3]
 - 490 Compound Inged Basis of Cost (F), [0;6]
- 450 Compound Dosage Form Desc Cd (F), [440;10]
- 451 Compound Disp Unit Form Ind (F), [450;1]
- 452 Compound Route of Admin (F), [450;2]
- 453 Orig Pres/Serv ID Qual (F), [450;3]
- 454 Scheduled Pres ID Number (F), [450;4]
- 455 Pres/Srv Ref Number Qual (F), [450;5]
- 456 Assoc Pres/Srv Ref Number (F), [450;6]
- 457 Assoc Pres/Srv Date (F), [450;7]
- 458 Procedure Mod Code Cnt (F), [450;8]
- 459 Procedure Modifier Code (Multiple-9002313.201459), [459;0]
 - .01 Procedure Modifier Code (F), [0;1]
- 460 Quantity Prescribed (F), [450;10]
- 461 Prior Authorization Type Code (F), [460;1]
- 462 Prior Authorization Num Sub (F), [460;2]
- 463 Intermediary Auth Type ID (F), [460;3]
- 464 Intermediary Auth ID (F), [460;4]

- 465 Provider ID Qualifier (F), [460;5]
- 466 Prescriber ID Qualifier (F), [460;6]
- 467 Prescriber Location Code (F), [460;7]
- 468 Primary Care Prov ID Qual (F), [460;8]
- 469 Primary Care Prov Loc Cd (F), [460;9]
- 470 Primary Care Prov Last Name (F), [460;10]
- 471 Other Payer Reject Count (F), [470;1]
- 473.01 DUR/PPS Repeating Fields (Multiple-9002313.1001), [473.01;0]
 - .01 (473) DUR/PPS Code Counter (F), [0;1]
 - 439 Reason for Service Code (F), [0;2]
 - 440 Professional Service Code (F), [0;3]
 - 441 Result of Service Code (F), [0;4]
 - 474 DUR/PPS Level of Effort (F), [0;5]
 - 475 DUR Co-Agent ID Qualifier (F), [0;6]
 - 476 DUR Co-Agent ID (F), [0;7]
- 477 Professional Srv Fee Submitted (F), [470;7]
- 478 Other Amt Claimed Sub Cnt (F), [470;8]
- 478.01 Pricing Repeating Section (Multiple-9002313.0601), [478.01;0]
 - .01 Pricing Counter (F), [0;1]
 - 479 Other Amt Claimed Sub Qual (F), [0;2]
 - 480 Other Amt Claimed Sub (F), [0;3]
- 481 Flat Sales Tax Amt Sub (F), [480;1]
- 482 Percentage Sales Tax Amt Sub (F), [480;2]
- 483 Percentage Sales Tax Rate Sub (F), [480;3]
- 484 Percentage Sales Tax Basis Sub (F), [480;4]
- 485 Coupon Type (F), [480;5]
- 486 Coupon Number (F), [480;6]
- 487 Coupon Value Amount (F), [480;7]
- 491 Diagnosis Code Count (F), [490;1]
- 491.01 Clinical Diagnosis Repeating (Multiple-9002313.0701), [491.01;0]
 - .01 Diagnosis Counter (F), [0;1]
 - 424 Diagnosis Code (F), [0;3]
 - 492 Dianosis Code Qualifier (F), [0;2]

- 493.01 Clinical Information Repeating (Multiple-9002313.0801), [493.01;0]
 - .01 (493) Clinical Info Counter (F), [0;1]
 - 494 Measurement Date (F), [0;2]
 - 495 Measurement Time (F), [0;3]
 - 496 Measurement Dimension (F), [0;4]
 - 497 Measurement Unit (F), [0;5]
 - 499 Measurement Value (F), [0;6]
- 498.01 Request Type (F), [498;1]
- 498.02 Request Period Date-Begin (F), [498;2]
- 498.03 Request Period Date-End (F), [498;3]
- 498.04 Basis of Request (F), [498;4]
- 498.05 Authorized Rep First Name (F), [498;5]
- 498.06 Authorized Rep Last Name (F), [498;6]
- 498.07 Authorized Rep Street Address (F), [498;7]
- 498.08 Authorized Rep City Address (F), [498;8]
- 498.09 Authorized Rep State/Prov (F), [498;9]
- 498.11 Authorized Rep Zip/Postal Zone (F), [498;11]
- 498.12 Prescriber Phone Number (F), [498;12]
- 498.13 Prior Auth Supporting Doc (Multiple-9002313.0901), [498.13;0]
 - .01 Prior Auth Supporting Doc (WL), [0;1]
- 498.14 Prior Auth Number Assigned (F), [498;14]
- 503 Authorization Number (F), [500;3]
- 600 Unit of Measure (F), [600;1]
- 401 Date of Service (F), [401;1]
- 498.09 Authorized Rep State/Prov (F), [498;9]
- 524 Plan ID (F), [520;4]
- 9999 RAW DATA SENT (Multiple-9002313.29999), [M;0]
 - .01 RAW DATA SENT (WL), [0;1]

4.4.2 ABSP RESPONSES FILE

Global: ^ABSPR(

File#: 9002313.03

- .01 ID (RP9002313.02'), [0;1]

- .02 Date/Time Response Received (D), [0;2]
- 102 Version/Release Number (F), [100;2]
- 103 Transaction Code (F), [100;3]
- 109 Transaction Count (F), [100;9]
- 201 Service Provider ID (F), [200;1]
- 202 Service Provider ID Qualifier (F), [200;2]
- 301 Group ID (F), [300;1]
- 401 Date of Service (F), [400;1]
- 501 Response Status (Header) (F), [500;1]
- 504 Message (F), [504;1]
- 524 Plan Identification (F), [500;24]
- 545 Network Reimbursement ID (F), [540;5]
- 568 Payer ID Qualifier (F), [560;8]
- 569 Payer ID (F), [560;9]
- 1000 Response(s) (Multiple-9002313.0301), [1000;0]
 - .01 Medication Order (MNJ9,0), [0;1]
 - 112 Transaction Response Status (FO), [110;2]
 - 346 Basis of Calc - Disp Fee (F), [340;6]
 - 347 Basis of Calc - Copay (F), [340;7]
 - 348 Basis of Calc-Flat Sales Tax (F), [340;8]
 - 349 Basis of Calc-Prctg Sales Tax (F), [340;9]
 - 402 Prescription/Service Ref Num (F), [400;2]
 - 455 Prescription/Srv Ref Num Qual (F), [450;5]
 - 498.14 Prior Auth Number Assigned (F), [498;6]
 - 498.51 Prior Auth Processed Date (F), [498;1]
 - 498.52 Prior Auth Effective Date (F), [498;2]
 - 498.53 Prior Auth Expiration Date (F), [498;3]
 - 498.54 Prior Auth Refills Authorized (F), [498;4]
 - 498.55 Prior Auth Qty Accumulated (F), [498;5]
 - 498.57 Prior Auth Quantity (F), [498;7]
 - 498.58 Prior Auth Dollars Authorized (F), [498;8]
 - 501 Response Status (Prescription) (F), [500;1]
 - 503 Authorization Number (F), [500;3]

- 504 Message (F), [504;1]
- 505 Patient Pay Amount (FO), [500;5]
- 506 Ingredient Cost Paid (FO), [500;6]
- 507 Dispensing Fee Paid (FO), [500;7]
- 508 Sales Tax Paid (FO), [500;8]
- 509 Total Amount Paid (FO), [500;9]
- 510 Reject Count (F), [500;10]
- 511 Reject Code(s) (Multiple-9002313.03511), [511;0]
 - .01 Reject Code(s) (MFO), [0;1]
 - 546 Reject Fld Occurrence Ind (F), [0;2]
- 512 Accumulated Deductible Amount (FO), [500;12]
- 513 Remaining Deductible Amount (FO), [500;13]
- 514 Remaining Benefit Amount (FO), [500;14]
- 517 Amt Applied to Periodic Deduct (FO), [500;17]
- 518 Amount of Copay/CoInsurance (FO), [500;18]
- 519 Amt Attrib to Prod Selection (FO), [500;19]
- 520 Amt Exceed Per Benefit Max (FO), [500;20]
- 521 Incentive Amount Paid (FO), [500;21]
- 522 Basis of Reimb Determination (F), [500;22]
- 523 Amount Attributed to Sales Tax (FO), [500;23]
- 525 DUR Response Data (F), [525;1]
- 526 Additional Message Information (Multiple-9002313.301526), [526;0]
 - .01 Additional Message Information (F), [0;1]
- 547 Approved Message Code Count (F), [540;7]
- 548 Approved Message Code (Multiple-9002313.301548), [548;0]
 - .01 Approved Message Code (F), [0;1]
- 549 Help Desk Phone Number Qual (F), [540;9]
- 550 Help Desk Phone Number (F), [540;10]
- 551 Preferred Product Count (F), [550;1]
- 551.01 Preferred Product Repeating (Multiple-9002313.1301), [551.01;0]
 - .01 Preferred Product Counter (F), [0;1]
 - 552 Preferred Product ID Qualifier (F), [1;1]
 - 553 Preferred Product ID (F), [1;2]
 - 554 Preferred Product Incentive (F), [1;3]

- 555 Preferred Product Copay Inc (F), [1;4]
- 556 Preferred Product Description (F), [1;5]
- 557 Tax Exempt Indicator (F), [550;7]
- 558 Flat Sales Tax Amount Paid (F), [550;8]
- 559 Percentage Sales Tax Amt Paid (FO), [550;9]
- 560 Percentage Sales Tax Rate Paid (FO), [550;10]
- 561 Percentage Sales Tx Basis Pd (F), [560;1]
- 562 Professional Service Fee Paid (F), [560;2]
- 563 Other Amount Paid Count (F), [560;3]
- 563.01 Other Amt Paid Repeating Flds (Multiple-9002313.1401), [563.01;0]
 - .01 Other Amt Paid Counter (F), [0;1]
 - 564 Other Amount Paid Qualifier (F), [1;1]
 - 565 Other Amount Paid (F), [1;2]
 - 566 Other Payer Amount Recognized (F), [560;6]
- 567.01DUR/PPS Repeating flds (Multiple-9002313.1101), [567.01;0]
 - .01 (567) DUR/PPS Resp Cd Counter (F), [0;1]
 - 439 Reason for Service Code (FO), [0;2]
 - 528 Clinical Significance Code (F), [0;3]
 - 529 Other Pharmacy Indicator (F), [0;4]
 - 530 Previous Date of Fill (F), [0;5]
 - 531 Quantity of Previous Fill (F), [0;6]
 - 532 Database Indicator (F), [0;7]
 - 533 Other Prescriber Indicator (F), [0;8]
 - 544 DUR Free Text Message (F), [0;9]
- 1000 Duplicate Response Data (F), [1000;1]
- 9999 RAW DATA RECEIVED (Multiple-9002313.39999), [M;0]
 - .01 RAW DATA RECEIVED (WL), [0;1]

4.4.3 ABSP COMBINED INSURANCE FILE

Global: ^ABSPCOMB(

File#: 9002313.1

- .01 PATIENT NAME (RP2'X), [0;1]

- 1 COMPANY (Multiple-9002313.11), [1;0]
 - .01 COMPANY (MP9999999.18'), [0;1]
 - .02 INSURANCE TYPE (S), [0;2]
 - .03 NAME OF POLICY HOLDER (F), [0;3]
 - .04 POLICY NUMBER (F), [0;4]
 - .05 ELIGIBILITY START DATE (D), [0;5]
 - .06 ELIGIBILITY END DATE (D), [0;6]
 - .07 POLICY HOLDER POINTER (P9000003.1'), [0;7]
 - .08 SOURCE FILE (P1'), [0;8]
 - .09 SOURCE IEN (NJ15,0), [0;9]
 - .1 PRIVATE INSURANCE SUB IEN (NJ8,0), [0;10]
 - .11 RELATIONSHIP TO INSURED (P9999999.36'), [0;11]

4.4.4 ABSP REJECT CODES FILE

Global: ^ABSPRJC(

File#: 9002313.3

- .01 REJECT CODE (RF), [0;1]
- 1 TYPE (S), [0;2]
- 2 EXPLANATION (F), [0;3]

4.4.5 ABSP CERTIFICATION FILE

Global: ^ABSP(9002313.31,

File#: 9002313.31

- .01 NAME (RF), [0;1]
- .03 CREATED 9002313.02 (P9002313.02'), [0;3]
- .04 POINT TO 9002313.4 (P9002313.4'), [0;4]
- .05 SWITCH TYPE (S), [0;5]
- 1 NCPDP FIELD # (Multiple-9002313.311), [1;0]
 - .01 NCPDP FIELD # (MP9002313.91'), [0;1]
 - .0199 FIELD NAME (CJ30), [;]
 - .02 VALUE (F), [0;2]
- 2 RX IN POSITION # (Multiple-9002313.312), [2;0]
 - .01 RX IN POSITION # (MNJ1,0), [0;1]

- .1 NCPDP FIELD # (Multiple-9002313.3121), [1;0]
 - .01 NCPDP FIELD # (MP9002313.91'), [0;1]
 - .01 99FIELD NAME (CJ30), [;]
 - .02 VALUE (F), [0;2]

4.4.6 ABSP INSURER FILE

Global: ^ABSPEI(

File#: 9002313.4

- .01 NAME (RP9999999.18'Xa), [0;1]
- 100.01 RX - NCPDP Record Format (*P9002313.92'a), [100;1]
- 100.02 RX - Dispensing Fee (NJ5,2a), [100;2]
- 100.03 RX - Activation Date (D), [100;3]
- 100.04 RX - # Days Backbill (NJ3,0), [100;4]
- 100.05 RX - Help Telephone # (Fa), [100;5]
- 100.06 RX - PRICING METHOD (P9002313.53'a), [100;6]
- 100.07 RX - DIAL OUT TO (P9002313.55'a), [100;7]
- 100.08 GRACE PERIOD (NJ5,0a), [100;8]
- 100.09 NCPDP FORM - PRINT DRUG NAME (Sa), [100;9]
- 100.11 NCPDP FORM - PRINT DIAGNOSIS (Sa), [100;11]
- 100.12 NCPDP FORM - PHARM # TO USE (Sa), [100;12]
- 100.13 NCPDP FORM - PRINT TAX ID # (Sa), [100;13]
- 100.14 INSURER NPI FLAG (Sa), [100;14]
- 100.15 NCPDP VERSION (RS), [100;15]
- 100.16 BIN NUMBER (F), [100;16]
- 100.17 PCN NUMBER (F), [100;17]
- 100.18 MEDICARE PARTD? (RS), [100;18]
- 100.19 Maximum RX's Per Claim (RNJ2,0), [100;19]
- 100.2 Add Disp. Fee to Ingr. Cost (S), [100;20]
- 100.3 *Contract Required (S), [100;21]
- 100.4 Total exclusive of Patient Amt (S), [UNBILLABLE OTC;2]
- 100.97 RX - DIAL OUT TO, RESOLVED (CJ30), [;]

- 100.99 NCPDP FORM - ANY SET (CJ8,0), [;]
- 101.01 RX SLEEPING UNTIL (D), [101;1]
- 101.02 RX SLEEP WAIT BASE (NJ5,0), [101;2]
- 101.03 RX SLEEP WAIT MULT (NJ6,3), [101;3]
- 101.04 RX SLEEP WAIT MAX (NJ5,0), [101;4]
- 101.05 RX SLEEP WAIT CURR (NJ5,0), [101;5]
- 101.06 RX SLEEP PROBER (P9002313.59'), [101;6]
- 101.07 99 REJECT SLEEP OVERRIDE (S), [101;7]
- 102.01 RX POSTAGE ALLOWED (Sa), [102;1]
- 102.02 RX POSTAGE POS LIMIT (NJ6,2a), [102;2]
- 102.03 RX SUPPLIES POSTAGE ALLOWED (Sa), [102;3]
- 103.01 RX SUPPLIES ALLOWED (Sa), [103;1]
- 104.01 RX PRIORITY (NJ7,2a), [104;1]
- 105.01 PREBILL - WHICH FORM (Sa), [105;1]
- 105.02 PREBILL - FORM FOR ROLLOVERS (Sa), [105;2]
- 105.99 PREBILL - ANY SET (CJ8,0), [;]
- 107.01 WORKERS COMP INSURANCE (Sa), [107;1]
- 200 ICD10 EFF DATE (D), [ICD10;1]
- 201 STRIP DECIMAL POINT (S), [ICD10;2]
- 210 NCPDP FIELD SPECIAL CODE (Multiple-9002313.42), [210;0]
 - .01 NCPDP FIELD SPECIAL CODE (MP9002313.91'), [0;1]
 - .02 SPECIAL CODE (F), [210;2]
- 215 SUPPRESS NCPDP SEGMENT (Multiple-9002313.48), [221;0]
 - .01 SUPPRESS NCPDP SEGMENT (MS), [0;1]
- 220 SUPPRESS NCPDP FIELD (Multiple-9002313.46), [220;0]
 - .01 SUPPRESS NCPDP FIELD (MP9002313.91'), [0;1]
- 228.11 BILLABLE NDC # (Multiple-9002313.41), [BILLABLE NDC #;0]
 - .01 BILLABLE NDC # (MFa), [0;1]
- 228.12 BILLABLE DRUG NAME (Multiple-9002313.44), [BILLABLE DRUG NAME;0]
 - .01 BILLABLE DRUG NAME (WL), [0;1]

- 2128.11 UNBILLABLE NDC # (Multiple-9002313.43), [UNBILLABLE NDC #;0]
 - .01 UNBILLABLE NDC # (MFa), [0;1]
- 2128.12 UNBILLABLE DRUG NAME (Multiple-9002313.45), [UNBILLABLE DRUG NAME;0]
 - .01 UNBILLABLE DRUG NAME (WL), [0;1]
- 2128.13 UNBILLABLE OTC (Sa), [UNBILLABLE OTC;1]
- 2128.99 ANY UN/BILLABLES SET (CJ8), [;]

4.4.7 ABSP DUR/PPS FILE

Global: ^ABSP(9002313.473,

File#: 9002313.473

- .01 Record Number (RNJ9,0), [0;1]
- .02 Created On (D), [0;2]
- .03 ABSPRXI (P52'), [0;3]
- .04 ABSPRXR (F), [0;4]
- 1 DUR/PPS Repeating Record (Multiple-9002313.4731), [1;0]
 - .01 DUR/PPS Repeating Record (MNJ2,0), [0;1]
 - 439 Reason for Service Code (F), [0;2]
 - 440 Professional Service Code (F), [0;3]
 - 441 Result of Service Code (F), [0;4]
 - 474 DUR/PPS Level of Effort (F), [0;5]
 - 475 DUR Co-Agent ID Qualifier (F), [0;6]
 - 476 Dur Co-Agent ID (F), [0;7]

4.4.8 ABSP DIAGNOSIS CODE FILE

Global: ^ABSP(9002313.491,

File#: 9002313.491

- .01 Record Number (RNJ9,0), [0;1]
- .02 Created On (D), [0;2]
- .03 ABSPRXI (P52'), [0;3]
- .04 ABSPRXR (F), [0;4]
- .05 Diagnosis Record Count (NJ1,0), [0;5]

- 1 DIAGNOSIS CODE Repeating Rec (Multiple-9002313.4911), [1;0]
 - .01 DIAGNOSIS CODE COUNT (NJ1,0), [0;1]
 - 424 DIAGNOSIS CODE (FX), [0;3]
 - 492 DIAGNOSIS CODE QUALIFIER (S), [0;2]

4.4.9 ABSP DATA INPUT FILE

Global: ^ABSP(9002313.51,

File#: 9002313.51

- .01 START TIME (RDa), [0;1]
- .02 USER (P200'a), [0;2]
- .03 ORIGIN (P9002313.516'a), [0;3]
- 1.01 ASK INSURANCE (Sa), [1;1]
- 1.02 ASK PREAUTH NUMBER (Sa), [1;2]
- 1.03 ASK PRICING (Sa), [1;3]
- 1.04 ASK FILL DATE (Sa), [1;4]
- 1.05 ASK NCPDP OVERRIDES (Sa), [1;5]
- 2 LINE ITEMS (Multiple-9002313.512), [2;0]
 - .01 LINE NUMBER (MNJ6,0a), [0;1]
 - .02 RX DISP (Fa), [0;2]
 - .03 NDC DISP (Fa), [0;3]
 - .04 PAT DISP (Fa), [0;4]
 - .05 DRUG DISP (Fa), [0;5]
 - .06 DATE DISP (Fa), [0;6]
 - 1.01 RXI (P52'a), [1;1]
 - 1.02 RXR (NJ3,0a), [1;2]
 - 1.03 DRUG (P50'a), [1;3]
 - 1.04 PATIENT (P2'a), [1;4]
 - 1.05 AWP MED (NJ6,0a), [1;5]
 - 1.06 VISIT (P9000010'a), [1;6]
 - 1.07 IEN .59 (Fa), [1;7]
 - 1.08 CPTIEN (P9002300'a), [1;8]
 - 1.09 NCPDP OVERRIDE (P9002313.511a), [1;9]
 - 1.13 NCPDP DUR 5.1 OVERRIDE (P9002313.473'a), [1;10]
 - 1.15 NCPDP DIAGNOSIS CODE 5.1 (P9002313.491'a), [1;12]

- 2.01 PREAUTHORIZATION NUMBER (Fa), [2;1]
- 2.02 Prior Authorization Type Code (Sa), [2;2]
- 5.01 QTY (NJ10,3a), [5;1]
- 5.02 UNIT PRICE (NJ13,6a), [5;2]
- 5.03 INGR COST (NJ13,6a), [5;3]
- 5.04 DISP FEE (NJ5,2a), [5;4]
- 5.05 TOTAL PRICE (NJ13,6a), [5;5]
- 5.06 PRICE SOURCE (Sa), [5;6]
- 5.07 INCENTIVE AMOUNT (NJ6,2a), [5;7]
- 6.01 PINS 1 (Fa), [6;1]
- 6.02 PINS 2 (Fa), [6;2]
- 6.03 PINS 3 (Fa), [6;3]
- 7.01 INSURER 1 (P9999999.18'a), [7;1]
- 7.02 INSURER 2 (P9999999.18'a), [7;2]
- 7.03 INSURER 3 (P9999999.18'a), [7;3]
- 100 INS SEL SCRATCH (Multiple-9002313.522), [I;0]
 - .01 INS LINE (RNJ6,0a), [0;1]
 - .02 ORDER (Sa), [0;2]
 - .03 INSURER (P9999999.18'a), [0;3]
 - .04 PINS (Fa), [0;4]
 - 1.01 DESCRIPTION (Fa), [1;1]
- 100.01 DEFAULT NDC # (Sa), [100;1]

4.4.10 ABSP NCPDP OVERRIDE FILE

Global: ^ABSP(9002313.511,

File#: 9002313.511

- .01 NAME (RF), [0;1]
- .02 CREATED ON (D), [0;2]
- 1 NCPDP FIELD (Multiple-9002313.5111), [1;0]
 - .01 NCPDP FIELD (MP9002313.91'), [0;1]
 - .02 VALUE (F), [0;2]

4.4.11 ABSP INPUT USER PREF FILE

Global: ^ABSP(9002313.515,

File#: 9002313.515

- .01 USER (RP200'), [0;1]
- .02 SAME SETTINGS AS (P200'), [0;2]
- .03 OLD-STYLE INPUT (S), [0;3]
- 1.01 ASK INSURANCE (S), [1;1]
- 1.02 ASK PREAUTH (S), [1;2]
- 1.03 ASK PRICING (S), [1;3]
- 1.04 ASK FILL DATE (S), [1;4]
- 100.01 DEFAULT NDC # (S), [100;1]

4.4.12 ABSP ORIGIN OF INPUT FILE

Global: ^ABSP(9002313.516,

File#: 9002313.516

- .01 NAME (RF), [0;1]
- 1 DESCRIPTION (Multiple-9002313.5161), [1;0]
 - .01 DESCRIPTION (W), [0;1]

4.4.13 ABSP PRICING TABLES FILE

Global: ^ABSP(9002313.53,

File#: 9002313.53

- .01 NAME (RFa), [0;1]
- .02 UNIT PRICE SOURCE (RSa), [0;2]
- .03 FORMULA (RS), [0;3]
- .04 MULTIPLIER (RNJ7,5a), [0;4]
- .05 DISPENSING FEE (RNJ6,2a), [0;5]
- .99 IN USE BY ANY INSURERS (CJ8), [;]
- 1 DESCRIPTION (Multiple-9002313.531), [DESCRIPTION;0]
 - .01 DESCRIPTION (W), [0;1]

4.4.14 ABSP MODEM TYPES FILE

Global: ^ABSP(9002313.54,

File#: 9002313.54

- .01 NAME (RF), [0;1]
- .99 IN USE BY ANY DIAL OUT (CJ8), [;]
- 350.01 CONNECT MESSAGE (F), [CONNECT MESSAGE;1]
- 360.01 WRITE NEWLINE AFTER COMMAND (S), [GRAMMAR;1]
- 950 INITIALIZATION STRING (F), [INIT;1]
- 1570 OTHER SETUP INFO (Multiple-9002313.5401), [OTHER SETUP INFO;0]
 - .01 OTHER SETUP INFO (W), [0;1]
- 1760 QUERY FOR STATUS (F), [QUERY FOR STATUS;1]
- 1760.02 QUERY TIMEOUT (NJ2,0), [QUERY FOR STATUS;2]
- 1760.03 QUERY LOOK FOR OK (S), [QUERY FOR STATUS;3]

4.4.15 ABSP DIAL OUT FILE

Global: ^ABSP(9002313.55,

File#: 9002313.55

- .01 NAME (RFa), [0;1]
- .02 MODEM TYPE (P9002313.54'a), [0;2]
- .03 SWITCH TYPE (Sa), [0;3]
- .99 IN USE BY ANY INSURERS (CJ8), [;]
- 1 DESCRIPTION (Multiple-9002313.551), [1;0]
 - .01 DESCRIPTION (WL), [0;1]
- 208 BAUD RATE (NJ6,0a), [BAUD;1]
- 420.01 DEVICE # (F), [DEVICE;1]
- 420.02 CONNECTION TYPE (Sa), [DEVICE;2]
- 420.03 CACHE DEVICE # (Fa), [DEVICE;3]
- 450.01 PHONE # (Fa), [DIAL;1]
- 567.01 EWAIT UNTIL (D), [ERROR WAIT;1]
- 567.02 EWAIT BASE (NJ3,0), [ERROR WAIT;2]
- 567.03 EWAIT MULT (NJ6,3), [ERROR WAIT;3]

- 567.04 EWAIT MAX (NJ9,3), [ERROR WAIT;4]
- 567.05 EWAIT CURR (NJ9,3), [ERROR WAIT;5]
- 1260 LOG FILE (F), [LOG FILE;1]
- 1260.1 LOG FILE -1 (F), [LOG FILE;2]
- 1260.2 LOG FILE -2 (F), [LOG FILE;3]
- 1260.3 LOG FILE -3 (F), [LOG FILE;4]
- 1425 NDC SYSTEM ID (F), [NDC;1]
- 1425.02 NDC MESSAGE PREFIX (F), [NDC;2]
- 1660.01 ETB (Sa), [PROTOCOL;1]
- 2021.01 IP ADDRESS (Fa), [SERVER;1]
- 2021.02 TCP PORT NUMBER (Fa), [SERVER;2]

4.4.16 ABSP PHARMACIES FILE

Global: ^ABSP(9002313.56,

File#: 9002313.56

- .01 NAME (RFa), [0;1]
- .02 NCPDP # (Fa), [0;2]
- .03 DEFAULT DEA # (Fa), [0;3]
- .04 AR TYPE (P9001626'), [0;4]
- .05 TAX ID # (F), [0;5]
- .06 ENVOY TERMINAL ID (NJ10,0a), [0;6]
- 102.03 SITE CITY (F), [ADDR;3]
- 115 AUTOPRINT PHARMACY EXPENSE RPT (Sa), [REP;3]
- 115.01 DEFAULT DEVICE (P3.5'a), [REP;4]
- 120.01 SITE ADDRESS 1 (F), [ADDR;1]
- 120.02 SITE ADDRESS 2 (F), [ADDR;2]
- 120.04 SITE STATE (F), [ADDR;4]
- 120.05 SITE ZIP CODE (F), [ADDR;5]
- 120.06 SITE PHONE (F), [ADDR;6]
- 120.07 SITE FAX (F), [ADDR;7]

- 950 INSURER-ASSIGNED # (Multiple-9002313.6), [INSURER-ASSIGNED #;0]
 - .01 INSURER (MP9999999.18'a), [0;1]
 - .02 INSURER-ASSIGNED # (Fa), [0;2]
 - .03 MED-CAL SUBSCRIBER ID (Fa), [0;3]
 - .04 CA FAMILY PACT ID (Fa), [0;4]
- 1830.01 CONTACT NAMES (F), [REP;1]
- 1830.02 CONTACT PHONES (F), [REP;2]
- 3001.01 MEDICAID # (Fa), [CAID;1]
- 3001.02 DEFAULT CAID PROVIDER # (Fa), [CAID;2]
- 13800 OUTPATIENT SITE (Multiple-9002313.5601), [OPSITE;0]
 - .01 OUTPATIENT SITE (MP59'), [0;1]
 - .02 PHARMACY NPI # (CJ12), [;]
 - 1 PRESCRIBER (Multiple-9002313.56011), [1;0]
 - .01 PRESCRIBER (MP200'), [0;1]

4.4.17 ABSP LOG OF TRANSACTIONS FILE

Global: ^ABSPTL(

File#: 9002313.57

- .01 ENTRY # (RFa), [0;1]
- .13 TYPE (Sa), [0;13]
- .14 ORIGIN (P9002313.516'a), [0;14]
- .15 POSTED TO A/R (Fa), [0;15]
- .16 NEEDS BILLING (Sa), [0;16]
- 1 STATUS (NJ2,0a), [0;2]
- 1.05 ABSBDIV SOURCE (Sa), [1;5]
- 1.06 INSURER (P9999999.18'a), [1;6]
- 1.07 PHARMACY (P9002313.56'a), [1;7]
- 1.08 PINS PIECE (NJ1,0a), [1;8]
- 1.09 PREAUTHORIZATION # (Fa), [1;9]
- 1.11 ABSBRXI (P52'a), [1;11]
- 1.1199 RXI-INTERNAL (CJ8), [;]

- 1.12 RESUBMIT AFTER REVERSAL (Sa), [1;12]
- 1.13 NCPDP OVERRIDES (P9002313.511'a), [1;13]
- 1.14 DUR/PPS POINTER (P9002313.473'a), [1;14]
- 1.15 PRIOR AUTHORIZATION TYPE CODE (Sa), [1;15]
- 1.16 COB-OTHER PAYMENTS POINTER (P9002313.337'a), [1;16]
- 1.17 DIAGNOSIS CODE POINTER (P9002313.491'a), [1;17]
- 2 PCN (P9002302'a), [0;3]
- 2.0099 PCN-INTERNAL (CJ8), [;]
- 3 CLAIM (P9002313.02'a), [0;4]
- 3.1 CLAIM IEN (CJ8), [;]
- 4 RESPONSE (P9002313.03'a), [0;5]
- 4.0098 RESULT WITH REVERSAL (CJ20), [;]
- 4.0099 RESULT (CJ20), [;]
- 4.1 RESPONSE IEN (CJ8), [;]
- 5 PATIENT (P9000001'a), [0;6]
- 6 UPDATED BY USER (P200'a), [0;17]
- 7 LAST UPDATE (Da), [0;8]
- 8 VCPT (P9002301'a), [1;3]
- 8.0099 VCPT-INTERNAL (CJ8), [;]
- 9 ABSBRXR (Fa), [1;1]
- 10 ABSBND C (Fa), [1;2]
- 10.0099 USER-INTERNAL (CJ8), [;]
- 11 ABSBDIV (Fa), [1;4]
- 12 ABSBVISI (Fa), [0;7]
- 13 USER (P200'a), [0;10]
- 14 POSITION IN CLAIM (NJ1,0a), [0;9]
- 15 START TIME (Da), [0;11]
- 16 COMMS LOG (Fa), [0;12]
- 201 RESULT CODE (Fa), [2;1]
- 202 RESULT TEXT (Fa), [2;2]

- 301 CANCELLATION REQUESTED (Fa), [3;1]
- 302 CANCELED DURING STATUS (Fa), [3;2]
- 401 REVERSAL CLAIM (P9002313.02'a), [4;1]
- 402 REVERSAL RESPONSE (P9002313.03'a), [4;2]
- 403 PAPER REVERSAL (Sa), [4;3]
- 404 RXREASON (Fa), [4;4]
- 501 QUANTITY (NJ12,3a), [5;1]
- 502 UNIT PRICE (NJ18,8a), [5;2]
- 503 SUBTOTAL (NJ18,8a), [5;3]
- 504 DISPENSING FEE (NJ6,2a), [5;4]
- 505 TOTAL PRICE (NJ12,2a), [5;5]
- 506 PRICE MANUALLY ENTERED (Sa), [5;6]
- 507 INCENTIVE AMOUNT SUBMITTED (NJ7,2a), [5;7]
- 601 PINS 1 (Fa), [6;1]
- 602 PINS 2 (Fa), [6;2]
- 603 PINS 3 (Fa), [6;3]
- 701 INSURER 1 (P9999999.18'a), [7;1]
- 702 INSURER 2 (P9999999.18'a), [7;2]
- 703 INSURER 3 (P9999999.18'a), [7;3]
- 801 RETRY AFTER (Da), [8;1]
- 802 RETRY ON DIAL OUT (P9002313.55'a), [8;2]
- 803 RETRY SLEEPING INSURER (P9002313.4'a), [8;3]
- 901 CLOSED STATUS (Sa), [9;1]
- 902 CLOSED DATE (Da), [9;2]
- 903 CLOSED BY USER (P200'a), [9;3]
- 904 RE-OPEN DATE (Da), [9;4]
- 905 RE-OPEN BY USER (P200'a), [9;5]
- 906 CLOSED REASON (Sa), [9;6]
- 9999.92 HRN & FAC (CJ16), [;]
- 9999.93 DRUG NAME (CJ30), [;]

- 9999.94 DRUG IEN (CJ8), [;]
- 9999.95 RELEASED DATE/TIME (INT) (CJ14), [;]
- 9999.96 NET PAID BY INSURER (CJ8), [;]
- 9999.97 ELAPSED TIME (PRINTABLE) (CJ20), [;]
- 9999.98 ELAPSED TIME (SECONDS) (CJ8), [;]
- 9999.99 RESULT CATEGORY (CJ20), [;]
- 10101 BIN NUMBER (CJ6), [;]
- 10102 VERSION/RELEASE NUMBER (CJ2), [;]
- 10103 TRANSACTION CODE (CJ2), [;]
- 10104 PROCESSOR CONTROL NUMBER (CJ10), [;]
- 10201 PHARMACY NUMBER (CJ12), [;]
- 10301 GROUP NUMBER (CJ15), [;]
- 10302 CARDHOLDER ID NUMBER (CJ18), [;]
- 10303 PERSON CODE (CJ3), [;]
- 10304 DATE OF BIRTH (CJ8), [;]
- 10305 SEX CODE (CJ1), [;]
- 10306 RELATIONSHIP CODE (CJ1), [;]
- 10307 CUSTOMER LOCATION (CJ2), [;]
- 10308 OTHER COVERAGE CODE (CJ1), [;]
- 10309 ELIGIBILITY CLARIFICATION CODE (CJ1), [;]
- 10310 PATIENT FIRST NAME (CJ12), [;]
- 10311 PATIENT LAST NAME (CJ15), [;]
- 10312 CARDHOLDER FIRST NAME (CJ12), [;]
- 10313 CARDHOLDER LAST NAME (CJ15), [;]
- 10314 HOME PLAN (CJ3), [;]
- 10315 EMPLOYER NAME (CJ30), [;]
- 10316 EMPLOYER STREET ADDRESS (CJ30), [;]
- 10317 EMPLOYER CITY ADDRESS (CJ20), [;]
- 10318 EMPLOYER STATE (CJ2), [;]
- 10319 EMPLOYER ZIP CODE (CJ9), [;]

- 10320 EMPLOYER PHONE NUMBER (CJ10), [;]
- 10321 EMPLOYER CONTACT NAME (CJ30), [;]
- 10322 PATIENT STREET ADDRESS (CJ30), [;]
- 10323 PATIENT CITY ADDRESS (CJ20), [;]
- 10324 PATIENT STATE (CJ2), [;]
- 10325 PATIENT ZIP CODE (CJ9), [;]
- 10326 PATIENT PHONE NUMBER (CJ10), [;]
- 10327 CARRIER ID NUMBER (CJ10), [;]
- 10328 PATIENT WEIGHT (CJ3), [;]
- 10329 PATIENT SSN (CJ9), [;]
- 10401 DATE FILLED (CJ8), [;]
- 10402 PRESCRIPTION NUMBER (CJ7), [;]
- 10403 NEW/REFILL CODE (CJ2), [;]
- 10404 METRIC QUANTITY (CJ5), [;]
- 10405 DAYS SUPPLY (CJ3), [;]
- 10406 COMPOUND CODE (CJ1), [;]
- 10407 NDC NUMBER (CJ11), [;]
- 10408 DISPENSE AS WRITTEN (CJ1), [;]
- 10409 INGREDIENT COST (CJ8,2), [;]
- 10410 SALES TAX (CJ8,2), [;]
- 10411 PRESCRIBER ID (CJ10), [;]
- 10412 DISPENSING FEE SUBMITTED (CJ8,2), [;]
- 10414 DATE PRESCRIPTION WRITTEN (CJ8), [;]
- 10415 NUMBER OF REFILLS AUTHORIZED (CJ2), [;]
- 10416 PRIOR AUTH/MC CODE AND NUMBER (CJ10), [;]
- 10418 LEVEL OF SERVICE (CJ2), [;]
- 10419 PRESCRIPTION ORIGIN CODE (CJ1), [;]
- 10420 PRESCRIPTION CLARIFICATION (CJ2), [;]
- 10421 PRIMARY PRESCRIBER (CJ10), [;]
- 10422 CLINIC ID NUMBER (CJ5), [;]

- 10423 BASIS OF COST DETERMINATION (CJ2), [;]
- 10424 DIAGNOSIS CODE (CJ6), [;]
- 10425 DRUG TYPE (CJ1), [;]
- 10426 USUAL AND CUSTOMARY CHARGE (CJ8,2), [;]
- 10427 PRESCRIBER LAST NAME (CJ15), [;]
- 10428 POSTAGE AMOUNT CLAIMED (CJ8,2), [;]
- 10429 UNIT DOSE INDICATOR (CJ1), [;]
- 10430 GROSS AMOUNT DUE (CJ8,2), [;]
- 10431 OTHER PAYOR AMOUNT (CJ8,2), [;]
- 10432 BASIS OF DAYS SUPPLY DET (CJ1), [;]
- 10433 PATIENT PAID AMOUNT (CJ8,2), [;]
- 10434 DATE OF INJURY (CJ8), [;]
- 10435 CLAIM/REF ID NUMBER (CJ14), [;]
- 10436 ALT. PRODUCT TYPE (CJ1), [;]
- 10437 ALT. PRODUCT CODE (CJ13), [;]
- 10438 INCENTIVE AMOUNT SUBMITTED (CJ8,2), [;]
- 10439 DUR CONFLICT CODE (CJ2), [;]
- 10440 DUR INTERVENTION CODE (CJ2), [;]
- 10441 DUR OUTCOME CODE (CJ2), [;]
- 10442 METRIC DECIMAL QUANTITY (CJ9,3), [;]
- 10443 OTHER PAYOR DATE (CJ8), [;]
- 10444 PHARMACIST ID (CJ10), [;]
- 10501 RESPONSE STATUS (CJ1), [;]
- 10503 AUTHORIZATION NUMBER (CJ14), [;]
- 10504 MESSAGE (CJ200), [;]
- 10505 PATIENT PAY AMOUNT (CJ8,2), [;]
- 10506 INGREDIENT COST PAID (CJ8,2), [;]
- 10507 CONTRACT FEE PAID (CJ8,2), [;]
- 10508 SALES TAX PAID (CJ8,2), [;]
- 10509 TOTAL AMOUNT PAID (CJ8,2), [;]

- 10510 REJECT COUNT (CJ2), [;]
- 10511 REJECT CODES (CJ60), [;]
- 10511.01 REJECT CODE #1 (CJ60), [;]
- 10511.02 REJECT CODE #2 (CJ60), [;]
- 10511.03 REJECT CODE #3 (CJ60), [;]
- 10511.04 REJECT CODE #4 (CJ60), [;]
- 10511.05 REJECT CODE #5 (CJ60), [;]
- 10511.06 REJECT CODE #6 (CJ60), [;]
- 10511.07 REJECT CODE #7 (CJ60), [;]
- 10511.08 REJECT CODE #8 (CJ60), [;]
- 10511.09 REJECT CODE #9 (CJ60), [;]
- 10511.1 REJECT CODE #10 (CJ60), [;]
- 10511.11 REJECT CODE #11 (CJ60), [;]
- 10511.12 REJECT CODE #12 (CJ60), [;]
- 10511.13 REJECT CODE #13 (CJ60), [;]
- 10511.14 REJECT CODE #14 (CJ60), [;]
- 10511.15 REJECT CODE #15 (CJ60), [;]
- 10511.16 REJECT CODE #16 (CJ60), [;]
- 10511.17 REJECT CODE #17 (CJ60), [;]
- 10511.18 REJECT CODE #18 (CJ60), [;]
- 10511.19 REJECT CODE #19 (CJ60), [;]
- 10511.2 REJECT CODE #20 (CJ60), [;]
- 10512 ACCUMULATED DEDUCTIBLE AMOUNT (CJ8,2), [;]
- 10513 REMAINING DEDUCTIBLE AMOUNT (CJ8,2), [;]
- 10514 REMAINING BENEFIT AMOUNT (CJ8,2), [;]
- 10515 POSTAGE AMOUNT PAID (CJ8,2), [;]
- 10516 DRUG DESCRIPTION (CJ30), [;]
- 10517 AMOUNT APP TO PER DEDUCTIBLE (CJ8,2), [;]
- 10518 AMOUNT OF CO-PAY/CO-INSURANCE (CJ8,2), [;]
- 10519 AMOUNT ATTR TO PRODUCT SELECT (CJ8,2), [;]

- 10520 AMOUNT EXCEED PER BENEFIT MAX (CJ8,2), [;]
- 10521 INCENTIVE FEE PAID (CJ8,2), [;]
- 10522 BASIS OF REIMBURSEMENT DET (CJ8,2), [;]
- 10523 AMOUNT ATTRIBUTED TO SALES TAX (CJ8,2), [;]
- 10524 PLAN ID (CJ8), [;]
- 10525 DUR RESPONSE DATA (CJ160), [;]
- 10525.01 DUR COUNT (CJ1), [;]
- 10525.1 DUR #1 RAW DATA (CJ53), [;]
- 10525.1439 DUR #1 DRUG CONFLICT CODE (CJ2), [;]
- 10525.1528 DUR #1 SEVERITY INDEX CODE (CJ1), [;]
- 10525.1529 DUR #1 OTHER PHARMACY INDIC (CJ1), [;]
- 10525.153 DUR #1 PREVIOUS DATE OF FILL (CJ8), [;]
- 10525.1531 DUR #1 QTY OF PREVIOUS FILL (CJ5), [;]
- 10525.1532 DUR #1 DATABASE INDICATOR (CJ1), [;]
- 10525.1533 DUR #1 OTHER PRESCRIBER INDIC (CJ1), [;]
- 10525.1544 DUR #1 FREE TEXT (CJ30), [;]
- 10525.1999 DUR #1 RESERVE SPACE (CJ4), [;]
- 10525.2 DUR #2 RAW DATA (CJ53), [;]
- 10525.2439 DUR #2 DRUG CONFLICT CODE (CJ2), [;]
- 10525.2528 DUR #2 SEVERITY INDEX CODE (CJ1), [;]
- 10525.2529 DUR #2 OTHER PHARMACY INDIC (CJ1), [;]
- 10525.253 DUR #2 PREVIOUS DATE OF FILL (CJ8), [;]
- 10525.2531 DUR #2 QTY OF PREVIOUS FILL (CJ5), [;]
- 10525.2532 DUR #2 DATABASE INDICATOR (CJ1), [;]
- 10525.2533 DUR #2 OTHER PRESCRIBER INDIC (CJ1), [;]
- 10525.2544 DUR #2 FREE TEXT (CJ30), [;]
- 10525.2999 DUR #2 RESERVE SPACE (CJ4), [;]
- 10525.3 DUR #3 RAW DATA (CJ53), [;]
- 10525.3439 DUR #3 DRUG CONFLICT CODE (CJ2), [;]
- 10525.3528 DUR #3 SEVERITY INDEX CODE (CJ1), [;]

- 10525.3529 DUR #3 OTHER PHARMACY INDIC (CJ1), [;]
- 10525.353 DUR #3 PREVIOUS DATE OF FILL (CJ8), [;]
- 10525.3531 DUR #3 QTY OF PREVIOUS FILL (CJ5), [;]
- 10525.3532 DUR #3 DATABASE INDICATOR (CJ1), [;]
- 10525.3533 DUR #3 OTHER PRESCRIBER INDIC (CJ1), [;]
- 10525.3544 DUR #3 FREE TEXT (CJ30), [;]
- 10525.3999 DUR #3 RESERVE SPACE (CJ4), [;]
- 10526 ADDITIONAL MESSAGE INFORMATION (CJ200), [;]
- 10528 CLINICAL SIGNIFICANCE CODE (CJ1), [;]
- 10529 OTHER PHARMACY INDICATOR (CJ1), [;]
- 10530 PREVIOUS DATE OF FILL (CJ8), [;]
- 10531 QUANTITY OF PREVIOUS FILL (CJ5), [;]
- 10532 DATABASE INDICATOR (CJ1), [;]
- 10533 OTHER PRESCRIBER INDICATOR (CJ1), [;]
- 10535 DUR OVERFLOW (CJ1), [;]
- 10544 FREE TEXT (CJ30), [;]

4.4.18 ABSP STATISTICS FILE

Global: ^ABSPECX("S",

File#: 9002313.58

- .01 NAME (RF), [0;1]
- 2 Date/Time Cleared (D), [0;2]
- 101 Submissions - Total (NJ9,0), [S;1]
- 102 Submissions - Unique (NJ9,0), [S;2]
- 103 Submissions - Repeat (NJ9,0), [S;3]
- 200 Result - Count (CJ9,0), [;]
- 201 Result - Unbillable (NJ9,0), [R;1]
- 202 Result - Rejected (NJ9,0), [R;2]
- 203 Result - Paid (NJ9,0), [R;3]
- 204 Result - Duplicate (NJ9,0), [R;4]
- 205 Result - Captured (NJ9,0), [R;5]

- 219 Result - Other (NJ9,0), [R;19]
- 301 \$ Paid (NJ12,2), [M;1]
- 302 \$ Copay (NJ12,2), [M;2]
- 402 Comms - Send Packets (NJ9,0), [C;2]
- 403 Comms - Send Bytes (NJ9,0), [C;3]
- 404 Comms - Receive Packets (NJ9,0), [C;4]
- 405 Comms - Receive Bytes (NJ9,0), [C;5]
- 406 Comms - Ignored Message (NJ9,0), [C;6]
- 407 Comms - Send ACK (NJ9,0), [C;7]
- 408 Comms - Send NAK (NJ9,0), [C;8]
- 409 Comms - Send EOT (NJ9,0), [C;9]
- 411 Comms - TCode 01 (NJ9,0), [C;11]
- 412 Comms - TCode 02 (NJ9,0), [C;12]
- 413 Comms - TCode 03 (NJ9,0), [C;13]
- 414 Comms - TCode 04 (RNJ9,0), [C;14]
- 415 Comms - TCode 11 (NJ9,0), [C;15]
- 419 Comms - TCode Other (NJ9,0), [C;19]
- 501 Comms - Transaction Time Comms (NJ9,0), [CT;1]
- 601 Dial Session - Count (NJ9,0), [D;1]
- 602 Dial Session - Packets (NJ9,0), [D;2]
- 603 Dial Session - Error (NJ9,0), [D;3]
- 604 Dial Session - No connect (NJ9,0), [D;4]
- 701 Comms Response - Not STX (NJ9,0), [CR;1]
- 702 Comms Response - ENQ (NJ9,0), [CR;2]
- 703 Comms Response - NAK (NJ9,0), [CR;3]
- 704 Comms Response - +++ (NJ9,0), [CR;4]
- 705 Comms Response - Null (NJ9,0), [CR;5]
- 709 Comms Response - Other (NJ9,0), [CR;9]
- 719 Comms - ENQ not received (NJ9,0), [CR;19]
- 801 Comms - Receive No ETX (NJ9,0), [CR2;1]

- 802 Comms - EOT during response (NJ9,0), [CR2;2]
- 803 Comms - Null during response (NJ9,0), [CR2;3]
- 804 Comms - +++ during response (NJ9,0), [CR2;4]
- 809 Comms - Other during response (NJ9,0), [CR2;9]
- 901 Comms - Response to NAK count (NJ9,0), [CRN;1]
- 902 Comms - Response to NAK STX (NJ9,0), [CRN;2]
- 903 Comms - Response to NAK null (NJ9,0), [CRN;3]
- 904 Comms - Response to NAK +++ (NJ9,0), [CRN;4]
- 909 Comms - Response to NAK other (NJ9,0), [CRN;9]
- 1001 ABSBPOSV FILEARRAY count (NJ9,0), [ABSBPOSV;1]
- 1002 ABSBPOSV FILEARRAY # of claims (NJ9,0), [ABSBPOSV;2]
- 1101 VISIT Found by PCC link (NJ9,0), [V;1]
- 1102 VISIT Found by AA index (NJ9,0), [V;2]
- 1103 VISIT Created new (NJ9,0), [V;3]

4.4.19 ABSP TRANSACTION FILE

Global: ^ABSPT(

File#: 9002313.59

- .01 ENTRY# (RFa), [0;1]
- .13 TYPE (Sa), [0;13]
- .14 ORIGIN (P9002313.516'a), [0;14]
- .15 POSTED TO A/R (Fa), [0;15]
- .16 NEEDS BILLING (N/A) (Fa), [0;16]
- 1 STATUS (NJ2,0a), [0;2]
- 1.05 ABSBDIV SOURCE (Sa), [1;5]
- 1.06 INSURER (P9999999.18'a), [1;6]
- 1.07 PHARMACY (P9002313.56'a), [1;7]
- 1.08 PINS PIECE (NJ1,0a), [1;8]
- 1.09 PREAUTHORIZATION # (Fa), [1;9]
- 1.11 ABSBRXI (P52'a), [1;11]
- 1.1199 RXI INTERNAL (CJ8), [;]

- 1.12 RESUBMIT AFTER REVERSAL (Sa), [1;12]
- 1.13 NCPDP OVERRIDES (P9002313.511'a), [1;13]
- 1.14 DUR/PPS POINTER (P9002313.473'a), [1;14]
- 1.15 PRIOR AUTHORIZATION TYPE CODE (Sa), [1;15]
- 1.16 COB-OTHER PAYMENTS POINTER (P9002313.337'a), [1;16]
- 1.17 DIAGNOSIS CODE POINTER (P9002313.491'a), [1;17]
- 2 PCN (RNJ9,0a), [0;3]
- 2.0099 PCN-INTERNAL (CJ8), [;]
- 3 CLAIM (P9002313.02'a), [0;4]
- 3.1 CLAIM IEN (CJ8), [;]
- 4 RESPONSE (P9002313.03'a), [0;5]
- 4.0098 RESULT WITH REVERSAL (CJ20), [;]
- 4.0099 RESULT (CJ20), [;]
- 4.1 RESPONSE IEN (CJ8), [;]
- 5 PATIENT (P9000001'a), [0;6]
- 6 UPDATED BY USER (P200'a), [0;17]
- 7 LAST UPDATE (Da), [0;8]
- 8 VCPT (P9002301'a), [1;3]
- 8.0099 VCPT-INTERNAL (CJ8), [;]
- 9 ABSBRXR (Fa), [1;1]
- 10 ABSBND C (Fa), [1;2]
- 10.0099 USER-INTERNAL (CJ8), [;]
- 11 ABSBDIV (Fa), [1;4]
- 12 ABSBVISI (Fa), [0;7]
- 13 USER (P200'a), [0;10]
- 14 POSITION IN CLAIM (NJ2,0a), [0;9]
- 15 START TIME (Da), [0;11]
- 16 COMMS LOG (Fa), [0;12]
- 201 RESULT CODE (NJ11,7a), [2;1]
- 202 RESULT TEXT (Fa), [2;2]

- 301 CANCELLATION REQUESTED (Fa), [3;1]
- 302 CANCELED DURING STATUS (Fa), [3;2]
- 401 REVERSAL CLAIM (P9002313.02'a), [4;1]
- 402 REVERSAL RESPONSE (P9002313.03'a), [4;2]
- 403 PAPER REVERSAL (Sa), [4;3]
- 404 RXREASON (Fa), [4;4]
- 501 QUANTITY (NJ10,3a), [5;1]
- 502 UNIT PRICE (NJ14,6a), [5;2]
- 503 SUBTOTAL (NJ13,6a), [5;3]
- 504 DISPENSING FEE (NJ5,2a), [5;4]
- 505 TOTAL PRICE (NJ9,2a), [5;5]
- 506 PRICE MANUALLY ENTERED (Sa), [5;6]
- 507 INCENTIVE AMOUNT SUBMITTED (NJ7,2a), [5;7]
- 601 PINS 1 (Fa), [6;1]
- 602 PINS 2 (Fa), [6;2]
- 603 PINS 3 (Fa), [6;3]
- 701 INSURER 1 (P9999999.18'a), [7;1]
- 702 INSURER 2 (P9999999.18'a), [7;2]
- 703 INSURER 3 (P9999999.18'a), [7;3]
- 801 RETRY AFTER (Da), [8;1]
- 802 RETRY ON DIAL OUT (P9002313.55'a), [8;2]
- 803 RETRY SLEEPING INSURER (P9002313.4'a), [8;3]
- 901 CLOSED STATUS (Sa), [9;1]
- 902 CLOSED DATE (Da), [9;2]
- 903 CLOSED BY USER (P200'a), [9;3]
- 904 RE-OPEN DATE (Da), [9;4]
- 905 RE-OPEN BY USER (P200'a), [9;5]
- 906 CLOSED REASON (Sa), [9;6]
- 9999.96 NET PAID BY INSURER (CJ8,2), [;]
- 9999.97 ELAPSED TIME (PRINTABLE) (CJ8), [;]

- 9999.98 ELAPSED TIME (SECONDS) (CJ8), [;]
- 9999.99 RESULT CATEGORY (CJ20), [;]

4.4.20 ABSP REPORT MASTER FILE

Global: ^ABSPECX("RPT",

File#: 9002313.61

- .01 RELEASED DATE (RD), [0;1]
- .02 TRANSACTION DATE (D), [0;2]
- .03 TRANSACTION (P9002313.57'), [0;3]
- .04 RXI (P52'), [0;4]
- .05 RXR (NJ4,0), [0;5]
- .06 RESULT TYPE (NJ2,0), [0;6]
- 1 REMARKS (Multiple-9002313.611), [1;0]
 - .01 REMARKS (W), [0;1]
- 1300 MESSAGE (Multiple-9002313.6213), [M;0]
 - .01 MESSAGE (W), [0;1]
- 1800 REJECTION REASONS (Multiple-9002313.6118), [R;0]
 - .01 REJECTION REASONS (WL), [0;1]
- 10001 RX DELETED (CJ1,0), [;]
- 10002 INSURER HELP # (CJ30), [;]
- 10003 RX RELEASED DATE/TIME (CJ20), [;]
- 10004 RX RETURNED TO STOCK (CJ20), [;]
- 10005 UNINSURED (BC), [;]
- 10006 AMOUNT PAYABLE (CJ10,2), [;]
- 10007 AMOUNT SHORTED (CJ8,2), [;]
- 10008 AMOUNT CAPTURED (CJ10,2), [;]
- 10009 AMOUNT DUPLICATE (CJ10,2), [;]
- 10010 AMOUNT PAPER (CJ8,2), [;]
- 10011 AMOUNT UNINSURED (CJ8,2), [;]
- 10012 AMOUNT OTHER (CJ8,2), [;]
- 10013 AMOUNT REJECTED (CJ8,2), [;]

4.4.21 ABSP ELIGIBILITY FILE

Global: ^ABSPE(

File#: 9002313.7

- .01 PATIENT NAME (RP2'Xa), [0;1]
- .02 ELECTRONIC PAYER (P9002313.4'a), [0;2]
- .03 DATE/TIME LAST SENT (Da), [0;3]
- 112 TRANSACTION RESPONSE STATUS (Fa), [RSTSSG;1]
- 301 GROUP ID (Fa), [TINSSG;6]
- 301.01 RESPONSE GROUP ID (Fa), [RINSSG;1]
- 302 CARDHOLDER ID (Fa), [TINSSG;1]
- 303 PERSON CODE (Fa), [TINSSG;7]
- 304 DATE OF BIRTH (Fa), [TPATSG;3]
- 305 PATIENT GENDER CODE (Fa), [TPATSG;4]
- 306 PATIENT RELATIONSHIP CODE (Fa), [TINSSG;8]
- 310 PATIENT FIRST NAME (Fa), [TPATSG;5]
- 311 PATIENT LAST NAME (Fa), [TPATSG;6]
- 312 CARDHOLDER FIRST NAME (Fa), [TINSSG;2]
- 313 CARDHOLDER LAST NAME (Fa), [TINSSG;3]
- 314 HOME PLAN (Fa), [TINSSG;4]
- 322 PATIENT STREET ADDRESS (Fa), [TPATSG;7]
- 323 PATIENT CITY ADDRESS (Fa), [TPATSG;8]
- 324 PATIENT STATE/PROVINCE ADDRESS (Fa), [TPATSG;9]
- 325 PATIENT ZIP/POSTAL ZONE (Fa), [TPATSG;10]
- 326 PATIENT PHONE NUMBER (Fa), [TPATSG;11]
- 331 PATIENT ID QUALIFIER (Fa), [TPATSG;1]
- 332 PATIENT ID (Fa), [TPATSG;2]
- 333 EMPLOYER ID (Fa), [TPATSG;12]
- 503 AUTHORIZATION NUMBER (Fa), [RSTSSG;2]
- 504 MESSAGE (Fa), [RMSGSG;1]
- 510 REJECT COUNT (Fa), [RSTSSG;3]

- 511 REJECT CODE(S) (Multiple-9002313.7511), [511;0]
 - .01 REJECT CODE(S) (Fa), [0;1]
 - 546 REJECT FLD OCCURENCE IND (Fa), [0;2]
- 524 PLAN ID (Fa), [TINSSG;5]
- 524.01 RESPONSE PLAN ID (Fa), [RINSSG;2]
- 526 ADDITIONAL MESSAGE INFORMATION (Fa), [526;1]
- 545 NETWORK REIMBURSEMENT ID (Fa), [RINSSG;3]
- 547 APPROVED MESSAGE CODE COUNT (Fa), [RSTSSG;4]
- 548 APPROVED MESSAGE CODE (Multiple-9002313.7548), [548;0]
 - .01 APPROVED MESSAGE CODE (Fa), [0;1]
- 549 HELP DESK PHONE NUMBER QUAL (Fa), [RSTSSG;5]
- 550 HELP DESK PHONE NUMBER (Fa), [RSTSSG;6]
- 568 PAYER ID QUALIFIER (Fa), [RINSSG;4]
- 569 PAYER ID (Fa), [RINSSG;5]
- 1000 TRANSMISSION RAW DATA TRANS (Multiple-9002313.798), [TRANS;0]
 - .01 TRANSMISSION RAW DATA TRANS (WL), [0;1]
- 2000 RESPONSE RAW DATA (Multiple-9002313.799), [RESP;0]
 - .01 RESPONSE RAW DATA (WL), [0;1]
- 9999999 RESPSTS (Fa), [RESPSTS;1]

4.4.22 ABSP FILEMAN ERROR LOG FILE

Global: ^ABSPFMLOG(

File#: 9002313.71

- .01 TIME OF ERROR (RD), [0;1]
- 1 TEXT (Multiple-9002313.711), [1;0]
 - 01 TEXT (Fx), [0;1]

4.4.23 ABSP CLASS XML FILE

Global: ^ABSPCXML(

File#: 9002313.72

- .01 NAME (RF), [0;1]

- 10 XML (Multiple-9002313.721), [10;0]
 - .01 XML (Wx), [0;1]

4.4.24 ABSP TRANSLATE 9999999.36 FILE

Global: ^ABSP(9002313.81,

File#: 9002313.81

- .01 NAME (RF), [0;1]
- .02 RELATIONSHIP CODE (S), [0;2]

4.4.25 ABSP NCPDP FIELD 103 FILE

Global: ^ABSPF(9002313.82103,

File#: 9002313.82103

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.26 ABSP NCPDP FIELD 305 FILE

Global: ^ABSPF(9002313.82305,

File#: 9002313.82305

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.27 ABSP NCPDP FIELD 306 FILE

Global: ^ABSPF(9002313.82306,

File#: 9002313.82306

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.28 ABSP NCPDP FIELD 307 FILE

Global: ^ABSPF(9002313.82307,

File#: 9002313.82307

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.29 ABSP NCPDP FIELD 308 FILE

Global: ^ABSPF(9002313.82308,

File#: 9002313.82308

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.30 ABSP NCPDP FIELD 309 FILE

Global: ^ABSPF(9002313.82309,

File#: 9002313.82309

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.31 ABSP NCPDP FIELD 406 FILE

Global: ^ABSPF(9002313.82406,

File#: 9002313.82406

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.32 ABSP NCPDP FIELD 408 FILE

Global: ^ABSPF(9002313.82408,

File#: 9002313.82408

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.33 ABSP NCPDP FIELD 416 FILE

Global: ^ABSPF(9002313.82416,

File#: 9002313.82416

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.34 ABSP NCPDP FIELD 418 FILE

Global: ^ABSPF(9002313.82418,
File#: 9002313.82418

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.35 ABSP NCPDP FIELD 419 FILE

Global: ^ABSPF(9002313.82419,
File#: 9002313.82419

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.36 ABSP NCPDP FIELD 420 FILE

Global: ^ABSPF(9002313.8242,
File#: 9002313.8242

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.37 ABSP NCPDP FIELD 423 FILE

Global: ^ABSPF(9002313.82423,
File#: 9002313.82423

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.38 ABSP NCPDP FIELD 425 FILE

Global: ^ABSPF(9002313.82425,
File#: 9002313.82425

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.39 ABSP NCPDP FIELD 429 FILE

Global: ^ABSPF(9002313.82429,
File#: 9002313.82429

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.40 ABSP NCPDP FIELD 432 FILE

Global: ^ABSPF(9002313.82432,
File#: 9002313.82432

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.41 ABSP NCPDP FIELD 436 FILE

Global: ^ABSPF(9002313.82436,
File#: 9002313.82436

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.42 ABSP NCPDP FIELD 439 FILE

Global: ^ABSPF(9002313.82439,
File#: 9002313.82439

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.43 ABSP NCPDP FIELD 440 FILE

Global: ^ABSPF(9002313.8244,
File#: 9002313.8244

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.44 ABSP NCPDP FIELD 441 FILE

Global: ^ABSPF(9002313.82441,
File#: 9002313.82441

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.45 ABSP NCPDP FIELD 501 FILE

Global: ^ABSPF(9002313.82501,
File#: 9002313.82501

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.46 ABSP NCPDP FIELD 522 FILE

Global: ^ABSPF(9002313.82522,
File#: 9002313.82522

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.47 ABSP NCPDP FIELD 528 FILE

Global: ^ABSPF(9002313.82528,
File#: 9002313.82528

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.48 ABSP NCPDP FIELD 529 FILE

Global: ^ABSPF(9002313.82529,
File#: 9002313.82529

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.49 ABSP NCPDP FIELD 532 FILE

Global: ^ABSPF(9002313.82532,

File#: 9002313.82532

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.50 ABSP NCPDP FIELD 533 FILE

Global: ^ABSPF(9002313.82533,

File#: 9002313.82533

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.51 ABSP NCPDP FIELD 535 FILE

Global: ^ABSPF(9002313.82535,

File#: 9002313.82535

- .01 CODE (RF), [0;1]
- .02 MEANING (F), [0;2]

4.4.52 ABSP RESULT CATEGORY FILE

Global: ^ABSPF(9002313.83,

File#: 9002313.83

- .01 NAME (RF), [0;1]
- .02 ABBREVIATION (F), [0;2]
- .03 OTHER NAME (F), [0;3]

4.4.53 ABSP ERROR CODES FILE

Global: ^ABSPF(9002313.89,

File#: 9002313.89

- .01 Code (RNJ5,0X), [0;1]
- .02 Description (F), [0;2]

4.4.54 ABSP NCPDP FIELD DEFS FILE

Global: ^ABSPF(9002313.91,

File#: 9002313.91

- .01 Number (RF), [0;1]
- .02 ID (F), [0;2]
- .03 Name (F), [0;3]
- .04 Format (S), [0;4]
- .05 Length (NJ4,0), [0;5]
- .06 5.1 ID (F), [5;1]
- .07 5.1 Length (NJ4,0), [5;2]
- 10 Get Code (Multiple-9002313.9101), [10;0]
 - .01 Get Code (WL), [0;1]
- 20 Format Code (Multiple-9002313.9102), [20;0]
 - .01 Format Code (WL), [0;1]
- 30 Set Code (Multiple-9002313.9103), [30;0]
 - .01 Set Code (WL), [0;1]
- 40 5.1 Format Code (Multiple-9002313.9104), [25;0]
 - .01 5.1 Format Code (WL), [0;1]

4.4.55 ABSP NCPDP FORMATS FILE

Global: ^ABSPF(9002313.92,

File#: 9002313.92

- .01 Record Format Name (RF), [0;1]
- 1.01 NDC BIN Number (F), [1;1]
- 1.02 Version (RS), [1;2]
- 1.03 Maximum RX's Per Claim (NJ2,0), [1;3]
- 1.04 Envoy Plan Number (NJ6,0), [1;4]
- 1.05 Help Telephone # (F), [1;5]
- 1.06 Production/Testing Status (*S), [1;6]
- 1.07 Is A Reversal Format (S), [1;7]
- 1.08 Add Disp. Fee to Ingr. Cost (S), [1;8]

- 1.09 *Contract Required (S), [1;9]
- 1.1 Total exclusive of Patient Amt (S), [1;10]
- 1.2 MEDICARE PART D FORMAT (S), [1;11]
- 1.3 Processor Control Number (F), [1;12]
- 10 Claim Header (Required) (Multiple-9002313.9201), [10;0]
 - .01 Claim Header (Required) Order (MNJ2,0), [0;1]
 - .02 NCPDP Field Number (P9002313.91'), [0;2]
 - .03 Processing Mode (S), [0;3]
 - 1 Special Code (Multiple-9002313.92011), [1;0]
 - .01 Special Code (WL), [0;1]
 - 2 Programming Notes (Multiple-9002313.92012), [2;0]
 - .01 Programming Notes (WL), [0;1]
- 20 Claim Header (Optional) (Multiple-9002313.9202), [20;0]
 - .01 Claim Header (Optional) Order (MNJ2,0), [0;1]
 - .02 NCPDP Field Number (P9002313.91'), [0;2]
 - .03 Processing Mode (S), [0;3]
 - 1 Special Code (Multiple-9002313.92021), [1;0]
 - .01 Special Code (WL), [0;1]
 - 2 Programming Notes (Multiple-9002313.92022), [2;0]
 - .01 Programming Notes (WL), [0;1]
- 30 Claim Information (Required) (Multiple-9002313.9203), [30;0]
 - .01 Claim Info (Required) Order (MNJ2,0), [0;1]
 - .02 NCPDP Field Number (P9002313.91'), [0;2]
 - .03 Processing Mode (S), [0;3]
 - 1 Special Code (Multiple-9002313.92031), [1;0]
 - .01 Special Code (WL), [0;1]
 - 2 Programming Notes (Multiple-9002313.92032), [2;0]
 - .01 Programming Notes (WL), [0;1]
- 40 Claim Information (Optional) (Multiple-9002313.9204), [40;0]
 - .01 Claim Info (Optional) Order (MNJ2,0), [0;1]
 - .02 NCPDP Field Number (P9002313.91'), [0;2]
 - .03 Processing Mode (S), [0;3]
 - 1 Special Code (Multiple-9002313.92041), [1;0]

- .01 Special Code (WL), [0;1]
 - 2 Programming Notes (Multiple-9002313.92042), [2;0]
 - .01 Programming Notes (WL), [0;1]
- 100 5.1 Transaction Header Segment (Multiple-9002313.9205), [100;0]
 - .01 5.1 Transaction Header Order (MNJ2,0), [0;1]
 - .02 NCPDP Field Number (P9002313.91'), [0;2]
 - .03 Processing Mode (S), [0;3]
 - 1 Special Code (Multiple-9002313.92051), [1;0]
 - .01 Special Code (WL), [0;1]
 - 2 Programming Notes (Multiple-9002313.92052), [2;0]
 - .01 Programming Notes (WL), [0;1]
- 110 5.1 Patient Segment (Multiple-9002313.9206), [110;0]
 - .01 5.1 Patient Segment Order (MNJ2,0), [0;1]
 - .02 NCPDP Field Number (P9002313.91'), [0;2]
 - .03 Processing Mode (S), [0;3]
 - 1 Special Code (Multiple-9002313.92061), [1;0]
 - .01 Special Code (WL), [0;1]
 - 2 Programming Notes (Multiple-9002313.92062), [2;0]
 - .01 Programming Notes (WL), [0;1]
- 120 5.1 Insurance Segment (Multiple-9002313.9207), [120;0]
 - .01 5.1 Insurance Segment Order (MNJ2,0), [0;1]
 - .02 NCPDP Field Defs (P9002313.91'), [0;2]
 - .03 Processing Mode (S), [0;3]
 - 1 Special Code (Multiple-9002313.92071), [1;0]
 - .01 Special Code (WL), [0;1]
 - 2 Programming Notes (Multiple-9002313.92072), [2;0]
 - .01 Programming Notes (WL), [0;1]
- 130 5.1 Claim Segment (Multiple-9002313.9208), [130;0]
 - .01 5.1 Claim Segment Order (MNJ2,0), [0;1]
 - .02 NCPDP Field Number (P9002313.91'), [0;2]
 - .03 Processing Mode (S), [0;3]
 - 1 Special Code (Multiple-9002313.92081), [1;0]
 - .01 Special Code (WL), [0;1]

- 2 Programming Notes (Multiple-9002313.92082), [2;0]
 - .01 Programming Notes (WL), [0;1]
- 140 5.1 Pharmacy Provider Segment (Multiple-9002313.9209), [140;0]
 - .01 5.1 Pharmacy Provider Order (MNJ2,0), [0;1]
 - .02 NCPDP Field Number (P9002313.91'), [0;2]
 - .03 Processing Mode (S), [0;3]
 - 1 Special Code (Multiple-9002313.92091), [1;0]
 - .01 Special Code (WL), [0;1]
 - 2 Programming Notes (Multiple-9002313.92092), [2;0]
 - .01 Programming Notes (WL), [0;1]
- 150 5.1 Prescriber Segment (Multiple-9002313.921), [150;0]
 - .01 5.1 Prescriber Segment Order (MNJ2,0), [0;1]
 - .02 NCPDP Field Number (P9002313.91'), [0;2]
 - .03 Processing Mode (S), [0;3]
 - 1 Special Code (Multiple-9002313.9211), [1;0]
 - .01 Special Code (WL), [0;1]
 - 2 Programming Notes (Multiple-9002313.9212), [2;0]
 - .01 Programming Notes (WL), [0;1]
- 160 5.1 COB/Other Payments Segment (Multiple-9002313.9213), [160;0]
 - .01 5.1 COB/Other Payments Order (MNJ2,0), [0;1]
 - .02 NCPDP Field Number (P9002313.91'), [0;2]
 - .03 Processing Mode (S), [0;3]
 - 1 Special Code (Multiple-9002313.92131), [1;0]
 - .01 Special Code (WL), [0;1]
 - 2 Programming Notes (Multiple-9002313.92132), [2;0]
 - .01 Programming Notes (WL), [0;1]
- 170 5.1 Workers Comp Segment (Multiple-9002313.9214), [170;0]
 - .01 5.1 Workers Comp Segment Order (MNJ2,0), [0;1]
 - .02 NCPDP Field Number (P9002313.91'), [0;2]
 - .03 Processing Mode (S), [0;3]
 - 1 Special Code (Multiple-9002313.92141), [1;0]
 - .01 Special Code (WL), [0;1]
 - 2 Programming Notes (Multiple-9002313.92142), [2;0]
 - .01 Programming Notes (WL), [0;1]

- 180 5.1 DUR/PPS Segment (Multiple-9002313.9215), [180;0]
 - .01 5.1 DUR/PPS Segment Order (MNJ2,0), [0;1]
 - .02 NCPDP Field Number (P9002313.91'), [0;2]
 - .03 Processing Mode (S), [0;3]
 - 1 Special Code (Multiple-9002313.92151), [1;0]
 - .01 Special Code (WL), [0;1]
 - 2 Programming Notes (Multiple-9002313.92152), [2;0]
 - .01 Programming Notes (WL), [0;1]
- 190 5.1 Pricing Segment (Multiple-9002313.9216), [190;0]
 - .01 5.1 Pricing Segment Order (MNJ2,0), [0;1]
 - .02 NCPDP Field Number (P9002313.91'), [0;2]
 - .03 Processing Mode (S), [0;3]
 - 1 Special Code (Multiple-9002313.92161), [1;0]
 - .01 Special Code (WL), [0;1]
 - 2 Programming Notes (Multiple-9002313.92162), [2;0]
 - .01 Programming Notes (WL), [0;1]
- 200 5.1 Coupon Segment (Multiple-9002313.9217), [200;0]
 - .01 5.1 Coupon Segment Order (MNJ2,0), [0;1]
 - .02 NCPDP Field Number (P9002313.91'), [0;2]
 - .03 Processing Mode (S), [0;3]
 - 1 Special Code (Multiple-9002313.92171), [1;0]
 - .01 Special Code (WL), [0;1]
 - 2 Programming Notes (Multiple-9002313.92172), [2;0]
 - .01 Programming Notes (WL), [0;1]
- 210 5.1 Compound Segment (Multiple-9002313.9218), [210;0]
 - .01 5.1 Compound Segment Order (MNJ2,0), [0;1]
 - .02 NCPDP Field Number (P9002313.91'), [0;2]
 - .03 Processing Mode (S), [0;3]
 - 1 Special Code (Multiple-9002313.92181), [1;0]
 - .01 Special Code (WL), [0;1]
 - 2 Programming Notes (Multiple-9002313.92182), [2;0]
 - .01 Programming Notes (WL), [0;1]
- 220 5.1 Prior Auth Segment (Multiple-9002313.9219), [220;0]

- .01 5.1 Prior Auth Segment Order (MNJ2,0), [0;1]
- .02 NCPDP Field Number (P9002313.91'), [0;2]
- .03 Processing Mode (S), [0;3]
- 1 Special Code (Multiple-9002313.92191), [1;0]
 - .01 Special Code (WL), [0;1]
- 2 Programming Notes (Multiple-9002313.92192), [2;0]
 - .01 Programming Notes (WL), [0;1]
- 230 5.1 Clinical Segment (Multiple-9002313.922), [230;0]
 - .01 5.1 Clinical Segment Order (MNJ2,0), [0;1]
 - .02 NCPDP Field Number (P9002313.91'), [0;2]
 - .03 Processing Mode (S), [0;3]
 - 1 Special Code (Multiple-9002313.9221), [1;0]
 - .01 Special Code (WL), [0;1]
 - 2 Programming Notes (Multiple-9002313.9222), [2;0]
 - .01 Programming Notes (WL), [0;1]
- 1001 Reversal Format (P9002313.92'), [REVERSAL;1]
- 1901 Developer's Remarks (Multiple-9002313.921901), [DEVELOPER'S REMARKS;0]
 - .01 Developer's Remarks (WL), [0;1]

4.4.56 ABSP NCPDP REJECT CODES FILE

Global: ^ABSPF(9002313.93,

File#: 9002313.93

- .01 Code (RF), [0;1]
- .02 Explanation (F), [0;2]

4.4.57 ABSP INSURANCE RULES FILE

Global: ^ABSPF(9002313.94,

File#: 9002313.94

- .01 NAME (RF), [0;1]
- .02 ROUTINE (F), [0;2]
- 1 DESCRIPTION (Multiple-9002313.941), [1;0]
 - .01 DESCRIPTION (W), [0;1]

4.4.58 ABSP SETUP FILE

Global: ^ABSP(9002313.99,

File#: 9002313.99

- .01 NAME (RF), [0;1]
- .04 *M Vendor (S), [0;4]
- 2.01 PCN or VCN on reports? (RS), [2;1]
- 2.02 PROCESS460 (S), [2;2]
- 5.01 BACKBILL TIME LIMIT (RNJ5,0), [BACKLIMIT;1]
- 115.01 KEEP DISPHIST (S), [ABSPOS6*;1]
- 115.02 SET \$ZT (S), [ABSPOS6*;2]
- 115.03 AUTOPRINT PHARMACY EXPENSE RPT (S), [3;1]
- 119.01 ABSPOSM1 LAST BEGIN DATE (D), [ABSPOSM1;1]
- 119.02 ABSPOSM1 LAST THRU DATE (D), [ABSPOSM1;2]
- 119.03 ABSPOSM1 LAST STARTED RUN (D), [ABSPOSM1;3]
- 119.04 ABSPOSM1 LAST FINISHED RUN (D), [ABSPOSM1;4]
- 120.01 ABSPOSR1 CURRENT JOB (NJ4,0), [ABSPOSR1;1]
- 120.02 ABSPOSR1 LAST DATETIME (D), [ABSPOSR1;2]
- 120.03 ABSPOSR1 STOP SIGNAL (S), [ABSPOSR1;3]
- 120.04 ABSPOSR1 POLLING INTERVAL (NJ5,0), [ABSPOSR1;4]
- 120.05 ABSPOSR1 REACH BACK (NJ5,0), [ABSPOSR1;5]
- 120.06 ABSPOSR1 INDEX FOR NEW CLAIMS (F), [ABSPOSR1;6]
- 120.07 ABSPOSR1 INDEX FOR REVERSALS (F), [ABSPOSR1;7]
- 140.01 ABSPOSX DELTA 1 (NJ8,4), [ABSPOSX;1]
- 140.02 ABSPOSX DELTA 2 (NJ8,4), [ABSPOSX;2]
- 140.03 ABSPOSX HRS FOR PURGE (NJ10,4), [ABSPOSX;3]
- 170.01 A/R PACKAGE (Sa), [A/R INTERFACE;1]
- 170.02 SEND 3PB REJECT (Sa), [A/R INTERFACE;2]
- 230.01 *LAST TRANS THRU ABSPOSB1 (NJ7,0), [BILLING;1]
- 235.01 BILLING - NEXT SCHEDULED TIME (D), [BILLING - NEW;1]
- 235.02 BILLING - DELTA TIME - MINUTES (NJ9,4), [BILLING - NEW;2]

- 235.03 BILLING - DISABLED (S), [BILLING - NEW;3]
- 235.04 BILLING - POST PAPER CLAIMS (S), [BILLING - NEW;4]
- 235.05 ILC ADJUSTMENTS BATCH NUMBER (F), [BILLING - NEW;5]
- 235.06 ILC ADJUSTMENTS BATCH LAST USE (D), [BILLING - NEW;6]
- 235.07 ILC ADJUSTMENTS BATCH LIFESPAN (NJ2,0), [BILLING - NEW;7]
- 235.08 LAST 3PB HOLD RUN (D), [BILLING - NEW;8]
- 240 BILLING LOG FILE (Multiple-9002313.9902), [BILLING LOG FILE;0]
 - .01 BILLING LOG FILE (F), [0;1]
 - .02 DATE-TIME (D), [0;2]
 - .03 STEP # (F), [0;3]
 - .04 DEBUGGING LOG (F), [0;4]
- 370.01 SUPPRESS V POV V68.1 (S), [CREATING A/R;1]
- 370.02 SUPPRESS V PROVIDER (S), [CREATING A/R;2]
- 370.03 SUPPRESS CLINIC (S), [CREATING A/R;3]
- 440.01 DEFAULT DIAL OUT (*P9002313.55'a), [DIAL-OUT DEFAULT;1]
- 577.01 EOB INSURER (P9999999.18'), [EOB-SCREEN;1]
- 577.02 EOB START DATE/TIME (D), [EOB-SCREEN;2]
- 577.03 EOB END DATE/TIME (D), [EOB-SCREEN;3]
- 577.04 EOB DEPOSIT DATE (D), [EOB-SCREEN;4]
- 577.05 EOB \$ TOTAL (NJ9,2), [EOB-SCREEN;5]
- 665.01 NCPDP FORM - PRINT DRUG NAME (S), [FORMS - NCPDP;1]
- 665.02 NCPDP FORM - PRINT DIAGNOSIS (S), [FORMS - NCPDP;2]
- 665.03 NCPDP FORM - PHARM # TO USE (S), [FORMS - NCPDP;3]
- 665.04 NCPDP FORM - PRINT TAX ID # (S), [FORMS - NCPDP;4]
- 667.01 PREBILL - DEFAULT FORM (S), [FORMS - PREBILL;1]
- 667.02 PREBILL - FORM FOR ROLLOVERS (S), [FORMS - PREBILL;2]
- 800 ICD10 EFF DATE (D), [ICD10;1]
- 801 Maximum Dollar Limit (NJ5,0), [DOLLMT;1]
- 941 RX NUMERIC (S), [INPUT;1]
- 942 COMPARE NDC # TO DRUG (S), [INPUT;2]

- 943 USUAL INPUT METHOD (Sa), [INPUT;3]
- 951 INS GRACE DEFAULT (NJ3,0), [INS;1]
- 952 *ASK INS DURING INPUT (S), [INS;2]
- 953 NO FI TRANSLATION IN ABSPOS29 (S), [INS;3]
- 960.01 INS BASE PRVT (NJ4,0a), [INS BASE SCORES;1]
- 960.02 INS BASE CARE (NJ4,0a), [INS BASE SCORES;2]
- 960.03 INS BASE CAID (NJ4,0a), [INS BASE SCORES;3]
- 960.04 INS BASE RR (NJ4,0a), [INS BASE SCORES;4]
- 960.05 INS BASE SELF (NJ4,0a), [INS BASE SCORES;5]
- 970.01 INS RULE ORDER (Multiple-9002313.9903), [INS RULES;0]
 - .01 INS RULE ORDER (MNJ8,3a), [0;1]
 - .02 INS RULE NAME (P9002313.94'a), [0;2]
 - .03 INS RULE POINTS PLUS (NJ8,3a), [0;3]
 - .04 INS RULE POINTS MINUS (NJ8,3a), [0;4]
- 1490 NULL FILE (F), [NULL FILE;1]
- 1501 OUTSIDE LINE (Fa), [OUTSIDE LINE;1]
- 1660.01 POSTAGE CPT (P9002300'), [POSTAGE;1]
- 1801 RX AR TYPE DEFAULT (P9001626'), [RX A/R TYPE;1]
- 1811.01 RECEIPT STYLE (F), [RECEIPT;1]
- 1960.01 OK MEDICAID INSURANCE NAME (P9999999.18'a), [SPECIAL;1]
- 1960.02 OK MEDICAID CYCLE (SECONDS) (NJ4,0a), [SPECIAL;2]
- 1960.03 OK MEDICAID LIMIT (NJ2,0a), [SPECIAL;3]
- 1960.04 SUBSCRIBER ID (F), [SPECIAL;4]
- 1980.01 STARTUP DATE (D), [STARTUP;1]
- 2128.11 UNBILLABLE NDC # (Multiple-9002313.9905), [UNBILLABLE NDC #;0]
 - .01 UNBILLABLE NDC # (MFa), [0;1]
- 2128.12 UNBILLABLE DRUG NAME (Multiple-9002313.9904), [UNBILLABLE DRUG NAME;0]
 - .01 UNBILLABLE DRUG NAME (WL), [0;1]
- 2128.13 UNBILLABLE OTC (Sa), [UNBILLABLE OTC;1]
- 2270.01 WO INSURER LIST TYPE (S), [WRITEOFF-SCREEN;1]

- 2270.02 WO ARTYPE LIST TYPE (S), [WRITEOFF-SCREEN;2]
- 2270.03 WO BAL MIN (NJ10,2), [WRITEOFF-SCREEN;3]
- 2270.04 WO BAL MAX (NJ10,2), [WRITEOFF-SCREEN;4]
- 2270.05 WO AGE IN DAYS (NJ4,0), [WRITEOFF-SCREEN;5]
- 2270.06 WO CLINIC LIST TYPE (S), [WRITEOFF-SCREEN;6]
- 2270.11 WO PMT (S), [WRITEOFF-SCREEN;11]
- 2270.12 WO REASON PTR (P9002320'), [WRITEOFF-SCREEN;12]
- 2270.7 WO DIAGNOSIS LIST TYPE (S), [WRITEOFF-SCREEN;7]
- 2270.8 WO DATE OF SERVICE (D), [WRITEOFF-SCREEN;8]
- 2270.9 WO BAL AS PCT (NJ6,2), [WRITEOFF-SCREEN;9]
- 2271 WO ARTYPE (Multiple-9002313.992271), [WRITEOFF-SCREEN ARTYPE;0]
 - .01 WO ARTYPE (MP9001626'), [0;1]
- 2272.01 WO BATCH (P9001625.1'), [WRITEOFF-SCREEN BATCH;1]
- 2273 WO CLINIC (Multiple-9002313.992273), [WRITEOFF-SCREEN CLINIC;0]
 - .01 WO CLINIC (MP40.7'), [0;1]
- 2274 WO DIAG (Multiple-9002313.992274), [WRITEOFF-SCREEN DIAG;0]
 - .01 WO DIAG (MP80'), [0;1]
- 2279 WO INSURER (Multiple-9002313.992279), [WRITEOFF-SCREEN INSURER;0]
 - .01 WO INSURER (MP9999999.18'), [0;1]
- 2341.01 WINNOW .57 AFTER POSTING (NJ4,0), [WINNOW;1]
- 2341.02 WINNOW UNPOSTED .57 (NJ4,0), [WINNOW;2]
- 2341.03 WINNOW LOG FILES (NJ7,2), [WINNOW;3]
- 2341.04 WINNOW COMBINED INSURANCE (NJ7,2), [WINNOW;4]
- 2341.05 WINNOW .03 RAW DATA (NJ4,0), [WINNOW;5]
- 2341.06 WINNOW .03 CONTENTS (NJ4,0), [WINNOW;6]
- 2341.07 WINNOW .02 RAW DATA (NJ4,0), [WINNOW;7]
- 2341.08 WINNOW .02 CONTENTS (NJ4,0), [WINNOW;8]
- 2341.09 WINNOW .51 (NJ4,0), [WINNOW;9]

- 2341.1 WINNOW .511 (NJ4,0), [WINNOW;10]
- 2341.11 WINNOW .59 (NJ4,0), [WINNOW;11]
- 2342.01 WINNOW LOG FILE (F), [WINNOW LOG;1]
- 2342.02 WINNOW LOG -1 (F), [WINNOW LOG;2]
- 2342.03 WINNOW LOG -2 (F), [WINNOW LOG;3]
- 2343.01 WINNOW TESTING FLAG (S), [WINNOW TESTING;1]
- 2380 WORKERS COMP (Multiple-9002313.9901), [WORKERS COMP;0]
 - .01 WORKERS COMP (MP9999999.18'), [0;1]
- 2388 WRITE OFF INSURER (Multiple-9002313.992388), [WRITE OFF INSURER;0]
 - .01 WRITE OFF INSURER (MP9999999.18'), [0;1]
- 2389 WRITE OFF SELF PAY (Multiple-9002313.992389), [WRITE OFF SELF PAY;0]
 - .01 WRITE OFF SELF PAY (MP9999999.25'), [0;1]
- 5151 NCPDP 5.1 CONVERSION (D), [NCPDP51;1]
- 6000 GLOBAL NPI FLAG (Sa), [NPI;1]
- 6001 UNKC Report date last ran, [6000;1]
- 6002 UNKC start date, [6000;2]
- 6003 UNKC end date, [6000;3]
- 6004 NIGHTLY BACKBILL LIMIT, [6000;4]

5.0 External Relations

The ABSP system makes extensive use of the documented entry points into FileMan, the device handler, and TaskMan.

5.1 Callable Routines

The only calls into Point of Sale should be done by the Pharmacy package interface. There are potentially many other callable entry points but for now they are used by Point of Sale only and are not documented here.

5.1.1 [PRD,SYS]>D DOCU^ABSPOSRX

There are only four callable entry points:

Callable Entry Points	Description
\$\$CLAIM^ABSPOSRX	Submit a claim to Point of Sale
\$\$UNCLAIM^ABSPOSRX	Reverse a previously submitted claim
\$\$STATUS^ABSPOSRX	Inquire about a claim's status
SHOWQ^ABSPOSRX	Display queue of claims to be processed

All of these routines may be called in either **\$\$** or **DO** forms, even though the individual descriptions speak only of **\$\$** form.

- The RXI argument is required – a pointer to ^PSRX(*
- The RXR argument is optional – a pointer to ^PSRX(RXI,1,*
- If RXR is omitted, the first fill is assumed.
- Should have MOREDATA(“ORIGIN”)

= undefined – if caller is RPMS Pharmacy package

= some assigned value – for all other callers

5.1.1.1 \$\$CLAIM^ABSPOSRX - SUBMIT A CLAIM TO POINT OF SALE

\$\$CLAIM^ABSPOSRX(RXI,RXR,.MOREDATA)

Submit a claim to point of sale. Use, for example, when a prescription is released. All this does is to put it on a list and start a background job.

Return values:

1 = accepted for processing

0^reason = failure (should never happen)

Note: If the claim has already been processed and it's resubmitted, a reversal will be done first, and then the resubmit will be done. Intervening calls to **\$\$\$STATUS** may show progress of the reversal before the resubmitted claim is processed.

5.1.1.2 **\$\$UNCLAIM^ABSPSRX REVERSE A PREVIOUSLY SUBMITTED CLAIM**

Use, for example, if a prescription has been cancelled.

\$\$UNCLAIM^ABSPSRX(RXI,RXR,.MOREDATA)

Return value:

1 = will submit request for reversal 0^reason = failure (should never happen)

Note: The reversal will actually be done ONLY if the most recent processing of the claim resulted in something reversible, namely E PAYABLE or PAPER

5.1.1.3 **\$\$\$STATUS^ABSPSRX INQUIRE ABOUT A CLAIM'S STATUS**

\$\$\$STATUS^ABSPSRX(RXI,RXR)

Returns result^time^description

Returns null if there's no POS record of this **RXI,RXR**.

Result is **IN PROGRESS**, or if the claim is complete, result is one of the following:

E PAYABLE, E REJECTED, E CAPTURED, E DUPLICATE

E REVERSAL ACCEPTED, E REVERSAL REJECTED

E OTHER

PAPER, PAPER REVERSAL

(PAPER categories include uninsured patients, even beneficiaries, as well as non-electronic insurances) "time" is the Fileman date and time of the last update in the status of this claim.

5.2 Published Entry Points

There are no Published Entry Points in Pharmacy Point of Sale.

5.3 Exported Options

Name

Menu Text

Description

ABSP AUTO-WRITEOFF BAT

Auto-Adjustments Pre Bill -to-> Adjustment

ILC A/R only – Auto-Adjustments Pre Bill list -to-> Adjustments Batch

ABSP AUTO-WRITEOFF LIST

Automatic Adjustment Pre Bill List

ILC A/R only – Automatic Adjustment Pre Bill List

ABSP BACKGROUND SCAN LOG

Print log file of Pharmacy POS background

Print log file of Pharmacy POS background scan job. See what it's picking up from pharmacy ^PSRX indexes.

ABSP BACKGROUND SCAN START

Start Pharmacy POS background scan

Start background job to scan ^PSRX indexes and issue appropriate POS transactions.

ABSP BACKGROUND SCAN STATUS

Status of Pharmacy POS background scan

View status of background job which is scanning ^PSRX indexes.

ABSP BACKGROUND SCAN STOP

Stop Pharmacy POS background scan

Stop the background job that scans ^PSRX indexes.

ABSP BEN/ELIG SURVEY

Survey patients' beneficiary/eligibility

Count prescriptions and tally patients' ben/elig. statuses. Curiosity.

ABSP BILLING MENU

RX Point of Sale Billing Menu

The main menu for Business Office pharmacy billing. Posting charges. Also access to some POS stuff, including the pharmacy data entry screen and some POS inquiries and reports.

ABSP BILLING MENU FOR ILC A/R

RX Point of Sale Billing Menu for ILC A/

The main menu for Business Office pharmacy billing. Posting charges; creating payment batches, etc. Also access to some POS stuff, including the pharmacy data entry screen and some POS inquiries and reports.

ABSP COMMS LOG VIEW

Communications - View Dial Out Log File

Have a look at what's going on with dial-out, especially if there's some problems – you can see if it's a modem init. problem or a problem getting the connection established or something wacky during send/receive.

ABSP DISPLAY CLAIMS 1

Display NDC Electronic Claims (by PCN/Pa ILC A/R only).

ABSP DISPLAY RESPONSES 1

Display NDC Electronic Claims (by Respon ILC A/R only).

ABSP DIVISIONS SURVEY

Survey pharmacy divisions

Which pharmacy divisions (^PS(59)) are used and how often?

ABSP EOB TO BATCH

Create payment batch to match EOB ILC A/R only.

ABSP FORMATS EDIT

Edit NCPDP formats (complete details, X

Development use only! This one asks ALL the fields. Use it primarily for editing existing templates to input the executable code for the few fields which need it.

ABSP FORMATS INPUT

Input NCPDP formats (order and field # o)

Development use only! Initial input of NCPDP format - designed for speed. Go back later to do the "X" special fields. This time around, everything is set to Standard.

ABSP FORMATS LIST

List electronic claims formats

See what insurance formats are supported and the status. Also shows Help Desk phone numbers.

ABSP INS RULES AVAIL

View available insurance selection rules

View available insurance selection rules.

ABSP INS RULES IN-USE

View insurance rules in use now

View insurance rules in use now at this site.

ABSP INSURANCE EDIT

Edit RX-related insurance info

Fields in ^AUTNINS and ^ABSPEI related to choosing insurance and printing forms.

ABSP INSURER SURVEY

Survey insurers by frequency

Survey past prescriptions to see which insurers are most often used, and hence, which electronic formats should be added next.

ABSP MANAGER MENU

Pharmacy POS Manager Menu

Pharmacy point of sale main menu for Manager functions

ABSP MANAGER SCREEN

Statistics & misc. options screen...

List Manager display of stats and some protocols to accomplish various manager functions.

ABSP MENU BACKGROUND SCAN

Pharmacy POS background scan Menu

ABSP MENU DEVEL

Point of Sale Developers Menu Menu

ABSP MENU RPT CLAIM STATUS

Claim results and status Menu

ABSP MENU RPT MAIN

Pharmacy electronic claims reports Menu

ABSP MENU RPT OTHER

Other reports Menu

ABSP MENU RPT SETUP

Setup (Configuration) reports Menu

ABSP MENU RPT SURVEY

Surveys of RPMS database Menu

ABSP NCPDP FIELDS LIST

List NCPDP Fields

Printout of file 9002313.91.

ABSP NCPDP FORMS ALIGN

Align NCPDP Forms

Print a sample form to test printer alignment (In development).

ABSP NCPDP FORMS PRINT

Print NCPDP Forms

Print NCPDP forms by date range and starting at a selected insurer (In development).

ABSP NCPDP REPRINT

Reprint Selected NCPDP Forms

Reprint selected forms (In development).

ABSP PAYABLE REPORT

Pharmacy Claim Payable Report Obsolete.

ABSP PROVIDER #S EDIT

Enter/Edit providers' ID #s

Edit in file 200, selected fields.

ABSP PROVIDER #S SURVEY

Survey if recent providers have ID #s

Looks back a couple of months to see if providers have ID #s on file. Prints a report.

ABSP RECENT TRANSACTIONS

Recent transactions

Useless report. Except maybe for looking at the last hour's activity and seeing if transactions are running to completion.

ABSP REJECTION REPORT

Pharmacy Claim Rejection Report Obsolete.

ABSP RPMS RX BILLING STATUS

Enter/edit RPMS Insurance file RX settin

Edits ^AUTNINS file RX BILLING STATUS

ABSP RPT CAPTURED

Captured claims report Captured claims report

ABSP RPT DUPLICATE

Duplicate claims report (should be none) Duplicate claims report

ABSP RPT MISSED PRESCRIPTIONS

Find prescriptions missed by POS

Finds prescriptions which have no complete Point of Sale transaction, but for which the prescription file indicates released, not deleted, not returned to stock. Consider doing manual input to generate claims for these.

ABSP RPT NEED REVERSAL

Reversals needed

E PAYABLE or PAPER claims for which the corresponding prescriptions are now marked as deleted or returned to stock.

ABSP RPT PAPER

Paper claims report

Report of non-electronic claims, insured patients. A paper claim for such prescriptions might be paid. Or consider getting the electronic claims format for future claims to these insurers.

ABSP RPT PAYABLE

Payable claims report

Report of payable claims (electronic), and comparison to amount billed vs. amount paid.

ABSP RPT REJECTION

Rejected claims report

Report of rejected claims (electronic), amounts, and information that's useful in calling a Help Desk, starting with the Help Desk telephone number.

ABSP RPT TOTALS BY DAY TOTALS - by RELEASED DATE

Report \$\$\$ totals of Point of Sale activity day by day. Input a date range.

ABSP RPT TOTALS BY INSURER TOTALS - by INSURER

Report \$\$\$ totals of Point of Sale activity day by day, broken down by insurer. Input a date range and optionally a range of insurer names. Gives total amount for the insurer for the entire date range.

ABSP RPT UNINSURED

Uninsured claims report

Report \$\$\$ amounts of prescriptions issued to the uninsured. Broken down by patients' eligibility status; especially useful if you are serving non-native community and want to know how much is being dispensed to same.

ABSP SETUP DETAIL

POS Setup - Detailed Report

Prints POS parameters and a number of tables (pricing, electronic insurer, dial outs, etc.). Useful starting point for investigating a support problem. Output should agree with Configuration Survey that was filled out as part of pre-installation planning.

ABSP SETUP DIAL OUT ADV

Advanced settings for POS dial out

All the questions, all the possibilities are accessible from this program. Avoid using it.

ABSP SETUP DIAL OUT BASIC

Basic settings for POS dial out

1. Settings for the DEFAULT dial out. 2. Selection of which dial out the DEFAULT is linked to.

ABSP SETUP DIAL OUT DEF

Select default destination for claims

To which dial out are your claims to be sent?

ABSP SETUP DIAL OUT MENU

Edit pharmacy POS dial out settings Menu

ABSP SETUP ILC AR

Edit pharmacy POS ILC A/R settings Various parameters.

ABSP SETUP INSURANCE MENU

Edit Pharmacy POS Insurance settings Menu

ABSP SETUP INSURANCE SEL

Insurance selection parameters (system-w Some parameters - grace period, etc.

ABSP SETUP INSURER

Advanced setup of insurer

If you need to edit something not available in Quick Setup of Insurer.

ABSP SETUP INSURER QUICK

Quick setup of insurer

Just asks for format and pricing formula.

ABSP SETUP MENU

Pharmacy Point of Sale Setup Menu

Menu All the setup goodies. See installation manual.

ABSP SETUP MISC.

Miscellaneous setup programs Menu

ABSP SETUP OKLA. MEDICAID

Parameters for Oklahoma Medicaid

Since reimbursement is made for only the first three claims in a calendar month, we need to maximize revenue – choose the three most expensive claims only – and minimize expense and time – by not sending claims after three have been paid.

ABSP SETUP PART 1

Edit basic pharmacy POS parameters

Several parameters – done early in initial installation and maybe later if the need arises.

ABSP SETUP PHARMACIES

POS Setup – Pharmacies Report Print file 9002313.56

ABSP SETUP PHARMACY

Edit pharmacy POS pharmacy data Edit file 9002313.56

ABSP SETUP PRICING

Enter/edit Pricing formulas Edit file 9002313.53

ABSP SETUP SUMMARY

POS Setup - Summary of Insurers Print file 9002313.4

ABSP SETUP USERS

Edit pharmacy POS user preferences Edit file 9002313.515

ABSP STRANDED CLAIMS

List possibly stranded claims

List claims that have not completely processed yet. They may be stranded because of some error. It is possible that there may be a large backlog of processing, so it doesn't automatically mean that the reason for the incompleteness is an error. You can choose the range of start times (when the claims started to process). For example, go through about an hour ago to find the ones that have been incomplete for all that time. This screens out the more recently-submitted claims from being reported here.

ABSP SUP CHECK DATE RANGE

Check POS for Date range input Support utility monitor system

ABSP SUP CHECK DEFAULT

Check POS for Default date range Support utility monitor system

ABSP SUP CHECK MENU

Check POS (error log, stats, etc.) Support utility

ABSP SUP CHECK PAST WEEK

Check POS for past Week Support utility monitor system

ABSP SUP CHECK TODAY

Check POS for Today

Support utility monitor system

ABSP SUP CHECK YESTERDAY

Check POS for Yesterday Support utility monitor system

ABSP SUP ERROR LOG

Search error log

Support utility Search error log for point of sale entries. Called as part of the ABSP SUP CHECK options

ABSP SUP MENU

Support utilities Menu

ABSP SUP QUEUES

Show queues

Internals.

ABSP SUP SPECIAL LOG FILES

Print special log files (billing, etc.)

Possibly useful support utility. Prompts for which log file and which date.

ABSP SUP UNSTRAND CLAIMS

Unstrand stranded claims

This should never be used! But if you do use it, use it sparingly! It forces idle claims to completion status so that they can be resubmitted again from the beginning. May be needed if there is a bug that strands claims or in case of a system crash or a massive dial-out failure.

ABSP TECH - FILES

Files – for technical manual Print table of files

ABSP TECH - OPTIONS

Options – for Technical Manual

Print options - names, menu text, description. For Technical Manual.

ABSP TEST MESSAGE

Test it (send claim, receive response)

Sends the Nebraska Medicaid test message to your default dial out and waits for a response. Recommended using when no other POS activity.

ABSP TRANS STATUS BY CLAIM

Transmission Status Report by Claim ILC A/R soon to be obsolete report.

ABSP UNBILLABLE DRUG

Enter/edit unbillable drug names

Define billable / unbillable status in terms of drug name.

ABSP UNBILLABLE MENU

Unbillable/Billable POS items menu

Menu

ABSP UNBILLABLE NDC

Enter/edit unbillable NDC #s

Define billable / unbillable status in terms of NDC #

ABSP UNBILLABLE OTC

Set billable status of OTC drugs

Define whether OTC drugs are considered to be billable.

ABSP UPDATE REPORT MASTER FILE

Update Report Master File for a date ran

In case you want to make absolutely sure that the Report Master File agrees with the Prescription file RELEASED DATE/TIME for every prescription in a date range that you specify, use this option to recompute the Report Master File data. Otherwise, some Prescription file changes in RELEASED DATE/TIME and RETURNED TO STOCK, and some Point of Sale changes, such as late reversals, may not be accurately reflected in the reports.

ABSP USER MENU

Pharmacy POS User Menu Menu

ABSP USER PREFERENCES

Display user preference settings Print file 9002313.515

ABSP USER SCREEN

Claims data entry screen...

List Manager screen - the big one - displays status of claims, has protocols for data entry, resubmitting, reversing, etc.

ABSP VOLUME SURVEY

Survey of volume

Count “AL” released prescriptions and “AJ” canceled. Tallies by day, by week, by grand total. Useful in pre-installation, for curiosity.

ABSP WRITEOFF SELECTION

Write-offs Selection Screen

ILC A/R only – characterize accounts you’d like to write off.

ABSPMENU

Pharmacy Point of Sale

The main menu

6.0 Internal Relations

All users should be given access to the appropriate options and keys as needed.

7.0 Archiving and Purging

7.1 Log Files

About once every 10,000 transactions, Point of Sale schedules a task to winnow log files during the wee hours of the morning. By default, it deletes log files over 100 days. The exact number of days is a parameter stored in file **9002313.99** field **#2341.03**.

7.2 Rest of the Data

A winnowing program is available for testing. **DO MAIN^ABSPOSK**, preferably after having done a backup. Pending a successful test, permanent automatic purging may be put into the Manager menu tree in a future release.

8.0 Documentation Resources

This section describes a few methods to generate online technical documentation.

8.1 System Documentation

Online VPS system documentation can be generated through the use of several Kernel options, including, but not limited to:

- %INDEX
- Menu Management
- Inquire Option
- Print Option File
- VA FileMan
- Data Dictionary Utilities
- List File Attributes

For more option listings and further information about other utilities that supply online technical information, see the *Decentralized Hospital Computer Program (DHCP) Kernel Reference manual*.

8.1.1 %INDEX

The **%INDEX** option analyzes the structure of a routine to determine in part, if the routine adheres to RPMS programming standards. The output can include the following components:

- Compiled list of errors and warnings
- Routine listing
- Local variables
- Global variables
- Naked globals
- Label references
- External references
- Running **%INDEX** for a specified set of routines allows users to discover any deviations from RPMS programming standards that exist, and to see how routines interact with one another (i.e., which routines call or are called by other routines).
- To run **%INDEX** for the VPS system, at the “Routine(s)?” prompt, type the **<<CC>> namespace**.

8.1.2 Inquire Options

The Inquire menu management option provides the following information about a specified option:

- Option name
- Menu text
- Option description
- Type of option
- Lock (if any)

In addition, all items on the menu are listed for each menu option. To secure information about **Pharmacy POS** options, specify the **ABSP namespace**.

8.1.3 Print Option File

The Print Option File utility generates a listing of options from the **Option file (#19)**. Users can print all of the entries or a single option or range of options.

8.1.4 List File Attributes

This **VA FileMan** option allows users to generate documentation pertaining to files and file structure. The standard format of this option provides the following data dictionary information for a specified file:

- File name and description
- Identifiers
- Cross-references
- Files pointed to by the file specified
- Files that point to the file specified
- Input, print, and sort templates

In addition, the following applicable data is supplied for each field in the file:

- Field name, number, title, and description
- Global location
- Help prompt
- Cross-references
- Input transform
- Date last edited

- Notes

Using the Global Map format of this option generates an output that lists the following information:

- All cross-references for the file selected
- Global location of each field in the file
- Input, print, and sort templates

For a comprehensive listing of <<package name>> files, see Section 4.0.

8.2 Online Help

In addition to system documentation, RPMS includes special help displays for most menu options and data entry prompts. Typing ? at the “Select . . . Option” prompt displays information related to the current option, where:

Table 8-1: Online Help

Typing . . .	Displays . . .
One question mark (?)	A list of all options accessible from the current option.
Two question marks (??)	a list of all accessible options and their formal names
Three question marks (???)	A brief description for each option in a menu.
One question mark (?) followed by an option name (?OPTION)	Extended help, if available, for that option

9.0 SAC Requirements and Exemptions

Currently, there are no exemptions for ABSP.

Glossary

Archiving

The storing of historical or little-used data off-line (often on tape).

Callable Entry Points

Places in a routine that can be called from an application program.

Cross-reference

An indexing method whereby files can include pre-sorted lists of entries as part of the stored database. Cross-references (x-refs) facilitate look-up and reporting.

Entry Point

Entry point within a routine that is referenced by a “DO” or “GOTO” command from a routine internal to a package.

File

A set of related records or entries treated as a single unit.

FileMan

The database management system for RPMS.

Global

In MUMPS, refers to a variable stored on disk (global variable) or the array to which the global variable may belong (global array).

INDEX (%INDEX)

A Kernel utility used to verify routines and other MUMPS code associated with a package. Checking is done according to current ANSI MUMPS standards and RPMS programming standards. This tool can be invoked through an option or from direct mode (>D ^%INDEX).

Internal Entry Number (IEN)

The number used to identify an entry within a file. Every record has a unique internal entry number.

Kernel

The set of MUMPS software utilities that function as an intermediary between the host operating system and application packages, such as Laboratory and Pharmacy. The Kernel provides a standard and consistent user and programmer interface between application packages and the underlying MUMPS implementation. These utilities provide the foundation for RPMS.

Menu

A list of choices for computing activity. A menu is a type of option designed to identify a series of items (other options) for presentation to the user for selection. When displayed, menu-type options are preceded by the word “Select” and followed by the word “option” as in Select Menu Management option: (the menu’s select prompt).

Namespace

A unique set of 2 to 4 alpha characters that are assigned by the database administrator to a software application.

Option

An entry in the Option file. As an item on a menu, an option provides an opportunity for users to select it, thereby invoking the associated computing activity. Options may also be scheduled to run in the background, non-interactively, by TaskMan.

Routine

A program or sequence of instructions called by a program that may have some general or frequent use. MUMPS routines are groups of program lines that are saved, loaded, and called as a single unit via a specific name.

Acronym List

Acronym	Meaning
ABSP	Pharmacy Point of Sale namespace
BBM	Another Accounts Receivable application
EHR	Electronic Health Record
HIPAA	Health Insurance Portability and Accountability Act
HHS	Department of Health and Human Services
ID	Identification
IHS	Indian Health Service
IT	Information Technology
OIT	Office of Information Technology
PC	Personal Computer
PHI	Protected Health Information
PHR	Personal Health Record
PII	Personally Identifiable Information
PPN	Patient Preferred Name
ROB	Rules of Behavior
RPMS	Resource and Patient Management System
QA	Quality Assurance
SAC	Standards and Conventions
SOP	Standard Operating Procedure
VPN	Virtual Private Network

Contact Information

If you have any questions or comments regarding this distribution, please contact the IHS IT Service Desk.

Phone: (888) 830-7280 (toll free)

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