



RESOURCE AND PATIENT MANAGEMENT SYSTEM

Pharmacy Point of Sale (ABSP)

Patch Addendum

Version 1.0 Patch 21
June 2007

Office of Information Technology (OIT)
Division of Information Resources
Albuquerque, New Mexico

PREFACE

The requirements and functionality outlined in the SRS *IHS Point of Sale Version 1.0 Patch 21* includes the following:

1. Updates the NPI functionality to facilitate transmittal of either the Pharmacy or Provider NPI only, both the Provider and Pharmacy NPI, or neither.
2. Updates the SUMI Report with the INSURER NPI FLAG.
3. Updates the PHAR Report with the Pharmacy NPI.
4. Provides new E1, Eligibility Check enhancements.

These updates to the NPI functionality and the modified reports are described in this document.

SECURITY

This patch uses the same security keys as described in the Pharmacy POS User manual Version 1.0.

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1.0 Introduction

The requirements and functionality outlined in the SRS *IHS Point of Sale Version 1.0* are described in three patch documents: Patch 19, Patch 20 and Patch 21. Patch 21 provides additional instructions for implementing the National Provider Identifier (NPI) number.

Patch 21

- Updates the NPI functionality to facilitate transmittal of either the Pharmacy or Provider NPI only, both the Provider and Pharmacy NPI, or neither
- Updates the SUMI Report with the INSURER NPI FLAG
- Updates the PHAR Report with the Pharmacy NPI
- Provides new E1, Eligibility Check enhancements

These updates to the NPI functionality and the modified reports are described in this document. All other requirements and functionality have been addressed in Patches 19 and Patch 20.

Patch 20

- Provided an option for adding or editing the provider NPI. For more information see the Kernel v8.0 patch 1013 notes.
- Added the INSURER NPI FLAG to ABSP INSURER File to indicate whether pharmacy claims generated by this application should use the NPI number or the Legacy number. This flag is only used by the Pharmacy POS, so an API is not required.
- Added the GLOBAL NPI FLAG to the ABSP SETUP File to indicate whether pharmacy claims generated by this application should use the NPI number or the Legacy number. If this flag is set to Yes, NPI is sent for all insurers excluding insurers whose INSURER NPI FLAG is set to no. This flag is only used by the Pharmacy POS, so an API is not required.
- Modified the PROV Survey Report to include the provider NPI number.

2.0 NPI Modifications

This section provides instructions for setting up the Pharmacy POS module to use the NPI insurer flags and provides instructions for generating a Survey Report that includes providers' NPI numbers

2.1 Setting the Insurer NPI Flag

The *Insurer NPI Flag* indicates whether an insurer is ready to accept the Pharmacy and/or Provider NPI. It allows selection of one of the four following options:

- *1 or Both*, to indicate the insurer is ready to accept both the Pharmacy and provider NPI.
- *0 or Neither*, to indicate that the insurer is not ready to accept any NPI.
- *P or Pharmacy Only*, to indicate that the insurer is ready to accept the Pharmacy NPI but not the Provider NPI.
- *D or Provider Only*, to indicate that the insurer is not ready to accept the Pharmacy NPI, but is ready to accept the Provider NPI.

To set the Insurer NPI Flag:

1. Select "MGR Pharmacy POS Manager Menu" from the Main Menu.
2. Select "SET Pharmacy Point of Sale Setup Menu" from the Pharmacy POS Manager Menu.
3. Select "INS Edit Pharmacy POS Insurance settings" menu.
4. Select "ADV Advanced setup of insurer" option shown in Figure 2-1.

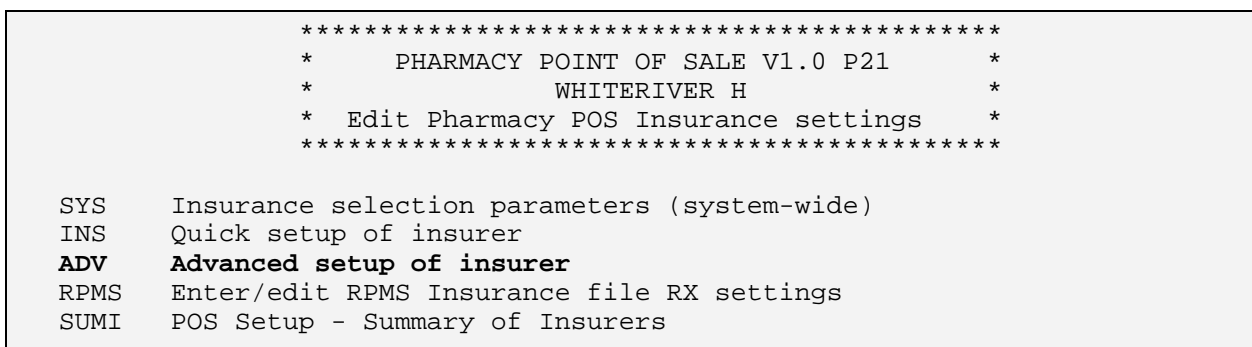


Figure 2-1: Edit Pharmacy POS Insurance settings menu

5. Enter the name of an insurer at the "Select ABSP Insurer name" prompt.
6. Type one of the menu options in response to the "INSURER NPI FLAG:" prompt.

```

Select ABSP INSURER NAME:    CALIFORNIA MEDICAID
NAME: CALIFORNIA MEDICAID//
RX - NCPDP Record Format: CALIFORNIA MED-CAL 5.1//
INSURER NPI FLAG: //?
  Choose from:
    1      BOTH
    0      NEITHER
    P      PHARMACY ONLY
    D      PRESCRIBER ONLY
RX - DIAL OUT TO: RESERVED - DO NOT USE//
RX - PRICING METHOD: STANDARD//
RX - Dispensing Fee:
GRACE PERIOD:
RX - Help Telephone #:
RX PRIORITY:

```

Figure 2-2: Setting the Insurer NPI Flag Option

This completes the procedure for setting a single insurer NPI flag.

Note: If the Insurer NPI Flag is blank, the field defaults to the setting of the Global NPI Flag.

2.2 Generating a SUMI Report with Insurer NPI Flag

This section shows how to select and generate a Survey of Insurers (SUMI) report that includes NPI numbers.

To generate a Survey of Insurers with NPI numbers:

1. Select “SUMI POS Setup – Summary of Insurers” from the Setup (Configuration) Reports sub-menu on the “RPT Pharmacy electronic claims reports” menu as shown in Figure 2-3.

```

*****
*      PHARMACY POINT OF SALE V1.0 P21      *
*      WHITERIVER H                        *
*      SETUP (CONFIGURATION) REPORTS        *
*****

DET    POS Setup - Detailed Report
PHAR   POS Setup - Pharmacies Report
SUMI  POS Setup - Summary of Insurers
RXB    POS Setup - Rx Billing Status Report
USER   Display user preferences settings

```

Figure 2-3: Selecting the SUMI Report from the Setup Reports menu

An example of this report is shown in Figure 2-4, which follows. The SUMI Report includes recently added NPI numbers.

Pharmacy Electronic Claims Insurers		May 31, 2007 11:59	
		Disp Fee	Grace Ins.
		Override	Period Sel.
Insurer	Pricing Formula	Override	
Pts.			
= = = = DIAL OUT to: ENVOY DIRECT VIA T1 LINE			
- - - -Using electronic Format: AETNA 5.1			
BIN: 610502			
NPI FLAG: EMPTY			
AARP	STANDARD		
- - - -Using electronic Format: ANTHEM 5.1			
BIN: 610575			
NPI FLAG: BOTH			
GOLDEN RULE	STANDARD		

Figure 2-4: Summary of Insurers example

2.3 Generating a PHAR Report with NPI Numbers.

This section shows how to select and generate a Pharmacies (PHAR) report that includes NPI numbers.

How to Generate a Pharmacies Report with NPI Numbers

1. Select “PHAR POS Setup – Pharmacies Report” from the Setup (Configuration) Reports sub-menu on the “RPT Pharmacy electronic claims reports” menu as shown in Figure 2-5.

* PHARMACY POINT OF SALE V1.0 P21 *	
* WHITERIVER H *	
* SETUP (CONFIGURATION) REPORTS *	

DET	POS Setup - Detailed Report
PHAR	POS Setup - Pharmacies Report
SUMI	POS Setup - Summary of Insurers
RXB	POS Setup - Rx Billing Status Report
USER	Display user preferences settings

Figure 2-5: Selecting the PHAR Report from the Setup Reports menu

An example of this report is shown in Figure 2-6. PHAR Report includes recently added NPI numbers.

ABSP PHARMACIES LIST		MAY 31, 2007	12:30

NUMBER: 1			
NAME: WHIT		NCPDP #:	3711062
DEFAULT DEA #: PQ000000		ENVOY TERMINAL ID:	2659
MEDICAID #: AB0000		DEFAULT CAID PROVIDER #: XY0000	
OUTPATIENT SITE: WHITE EARTH			
PHARMACY NPI # ©: 1316097298			

Figure 2-6: PHAR Report example

3.0 Eligibility Check (E1) Enhancements

This section provides instructions for sending a real-time transaction to the TrOOP Facilitator to determine a patient's insurance coverage information. With installation of this patch, the facilitator returns additional information about each of the insurance companies providing coverage for the patient.

3.1 Generating Medicare Part D Eligibility Check for a Patient

To view information regarding a patient's eligibility for Medicare Part D coverage follow these steps:

1. Select "ELIG Medicare Part D Eligibility Check" from the RPT Pharmacy Electronic Claims Reports menu as shown in figure 3-1.

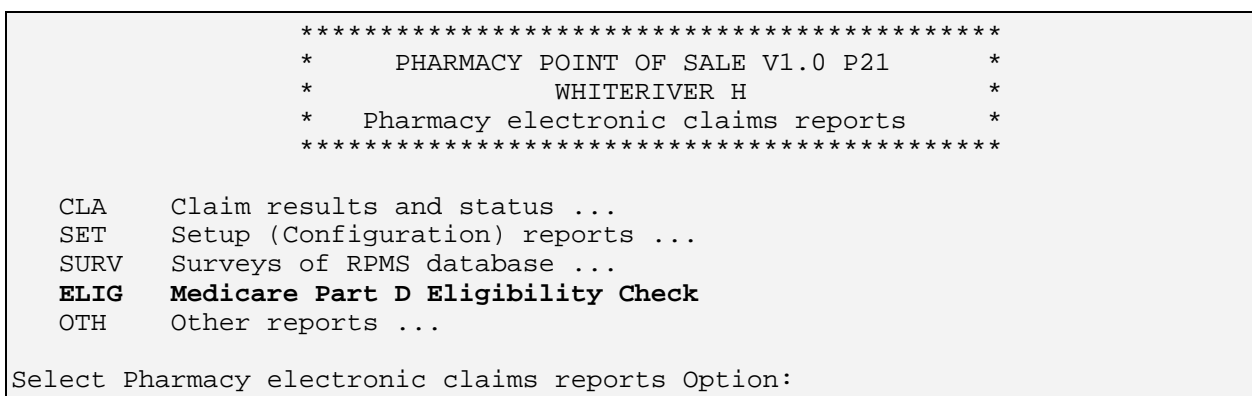


Figure 3-1: Selecting the Eligibility Check from the RPT menu

2. At the "Generate Eligibility Check for which patient?" prompt, enter the name of the patient using standard RPMS format
3. Accept the default date or enter a date within the time frame listed
4. After the transmission is completed, the eligibility report will be displayed as shown in figure 3-2, which follows.

```
Generate eligibility chk (Med Part D) for which patient?
IRONCLOUD,MARCELLA VIVIAN          F 05-11-1932 506449854  FYU 14326

A check was previously submitted for this patient:
On:                MAY 03, 2007@11:20:58
Patient Name:      DOE, JANE
Status:            A
Authorization #:

PATIENT INFORMATION
LAST NAME          :   DOE
FIRST NAME         :   JANE
DOB                :   19320101

MEDICARE D INFORMATION
Insurance Level    :   0
BIN                :   610649
PCN                :   03200000
GROUP             :   P9999
CARDHOLDER ID     :   H99999999
PERSON CODE        :       PH
PHONE NUMBER       :   8008658715
CONTRACT ID        :   S0000
RX BENEFIT PLAN    :   083
EFFECTIVE DATE     :   20060101
TERMINATION DATE   :
LOW-INCOME COST    :   Y
FORMULARY ID       :

FUTURE MEDICARE PART D INFORMATION:
EFFECTIVE DATE     :
TERMINATION DATE   :

OTHER COVERAGE INFORMATION
Secondary Coverage
None
Tertiary Coverage
None
Would you like to send a new eligibility check? Y//
```

Figure 3-2: Eligibility Check sample

4.0 Contact Information

If you have any questions or comments regarding this distribution, please contact the ITSC Help Desk by:

Phone: (505) 248-4371 or

(888) 830-7280

Fax: (505) 248-4297

Web: <http://www.ihs.gov/GeneralWeb/HelpCenter/Helpdesk/index.cfm>

Email: support@ihs.gov