



RESOURCE AND PATIENT MANAGEMENT SYSTEM

Pharmacy Point of Sale (ABSP)

Patch Addendum

Version 1.0 Patch 28 December 2008

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

PREFACE

The requirements and functionality outlined in the SRS IHS Point of Sale Version 1.0 Patch 28 include the following:

- 1. Removal of Held Claim functions within POS
- **2.** Updated display screen for reporting issues with POS
- **3.** New, adjusted, and deactivated 5.1 POS formats
- **4.** Vaccination billing through POS for Medicare Part D plans

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

SECURITY

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

TABLE OF CONTENTS

1.0 Intro	ductionduction	1
2.0 Rem	oval of HELD Claim Functions	2
2.1	Removal of POS Insurer Missing Tax ID Report	2
2.2	Removal of Option to Update Insurer Tax ID	3
2.3	Removal of Claims Waiting for Tax ID Report	
2.4	Removal of Splash Screen Related to Held Claims	
3.0 Spla	sh Screen Update	6
4.0 POS	Formats	7
4.1	New 5.1 POS Formats	7
4.2	Adjusted 5.1 POS Formats	8
4.3	Deactivated 5.1 POS Formats	
5.0 Medi	5.0 Medicare Part D Vaccination Billing	
5.1	Populating the DUR/PPS Segment & Pricing Segment	12
6 0 Cont	act Information	16

1.0 Introduction

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

Patch 28 of Pharmacy Point of Sale version 1.0 contains the following changes:

- Removal of Held Claim functions
- Splash screen update
- New and adjusted 5.1 POS Formats
- Medicare Part D Vaccination Billing

2.0 Removal of HELD Claim Functions

Removal of HELD Claim function that was introduced in POS Patch 22 which would place claims that did not contain an insurer's tax id number into a HOLD queue until that information was populated.

2.1 Removal of POS Insurer Missing Tax ID Report

Removal of the Pharmacy Point-Of-Sale (POS) Insurers with Missing Tax IDs report which identified the insurers who are being billed through POS and are attached to a format, but are missing the required federal tax ID number.

RPT/SET/TAX

Figure 2-1: Screen 1 of accessing the POS insurers with missing tax IDs report

```
POS Insurers with Missing Tax IDs (AZFAMH) SEP 19,2007@16:55:09

ADVANCE PCS (`1920)
123 ELM ST

MASHANTUCKET,CT 06339
(888)459-1337

ADVANCE PCS-610415 (`1751)
P.O. BOX 33780
PHOENIX,AZ 85072
(877)473-3232
-- END OF REPORT -- (Press <ENTER> to return to menu):
```

Figure 2-2: Screen 2 of accessing the POS insurers with missing tax IDs report

2.2 Removal of Option to Update Insurer Tax ID

Removal of option which allowed you to enter the tax ID numbers for insurers as needed through the manager menu keys.

MGR/SET/INS/TAX

Figure 2-3: Screen 1 of updating insurer's tax ID

```
Select INSURER NAME: AARP PENNSYLVANIA 18175
...OK? Yes// (Yes)
FEDERAL TAX ID #:
```

Figure 2-4: Screen 2 of updating insurer's tax ID

2.3 Removal of Claims Waiting for Tax ID Report

Removal of the Count of POS Claims Not Passed to 3PB report which identified all claims which were being held because of a missing tax ID number.

RPT/CLA/HELD

```
**********
* PHARMACY POINT OF SALE V1.0 P22 *
* NOT-A-REAL FACILITY *
* Claim results and status *
PAY Payable claims report
REJ Rejected claims report
CAP Captured claims report
PAP Paper claims report
UN Uninsured claims report
DUP Duplicate claims report (should be none)
MISS Find prescriptions missed by POS
NRV Reversals needed
URM Update Report Master File for a date range
REC Recent transactions
STR List possibly stranded claims
HELD Count of POS Claims Not Passed to 3PB
DAY TOTALS - by RELEASED DATE
INS TOTALS - by INSURER
MPD TOTALS - MEDICARE PART D INSURERS
Select Claim results and status Option:
```

Figure 2-5: Screen 1 of claims waiting for tax ID report

Figure 2-6: Screen 2 of claims waiting for tax ID report

2.4 Removal of Splash Screen Related to Held Claims

Removal of the splash screen which was used to provide a notification of how many POS claims were not being passed to third party billing.

Figure 2-7: Sample splash screen

3.0 Splash Screen Update

This splash screen provides point of contact when experiencing an unexplained error with POS. Updated screen to direct user to local help desk support instead of OIT support desk.

PREVIOUS SPLASH SCREEN

UPDATED SPLASH SCREEN

4.0 POS Formats

This section provides new and adjusted 5.1 POS formats used with POS.

4.1 New 5.1 POS Formats

NMHC TROOPT 2 PDP 5.1/610011/NMHC

MEDICARE PART D LOVELACE 5.1/012353/03730000

CAROLINA HEALTH PLAN 5.1/600428/04990000

VA E-PHARMACY 5.1/003650/64

LDI PHARMACY BENEFIT 5.1/800010/LDI

QUALITY CHOICE OF AR 5.1/013501/NONE

SCRIPT GUIDE RX 5.1/610473/SGRX

BEYOND RX 5.1/601641/PB

SHARP HEALTH PLAN 5.1/003585/56900

AAA PRESCRIPTION SAVINGS 5.1/004336/AAA

ANTHEM LUMENOS CDH9999 5.1/610575/CHD9999

ARGUS 05000000 5.1/012353/05000000

CAREMARK COB AMGSEGADV

5.1/013089/AMGSEGADV

LEGACY ADVANCE PARADIG PDP

5.1/012114/COBSEGADV

MEMBERHEALTH MPD MED 5.1/610211/MED

MEMBERHEALTH MPD PDP 5.1/610211/PDP

OREGON DHHS MEDICAID 5.1/014203/ORDHSFFS

THE PLAN HANDLERS 5.1/600471/2976

SCRIP WORLD-MERITAIN 5.1/003585/59120

4.2 Adjusted 5.1 POS Formats

NEBRASKA MEDICAID FHEALTH 5.1

Revised reversal format and updated format to send claims successfully

COMMUNITY RX 5.1

Removed special coding for field 302 – Cardholder ID

Washington Teamsters Trust 5.1

Added field 303 - person code in insurance segment

Washington Medicaid SXC 5.1

Added field 462 - prior authorization in claim segment

Caremark 5.1

Updated with new payer format sheet

Express Scripts 5.1

Updated with new payer format sheet

Iowa Medicaid GHS 5.1

Updated with new payer sheet

Medicare PartD ESI 84 5.1

Updated with new payer format sheet

Medicare PartD ESI A4 5.1

Updated with new payer format sheet

Medicare PartD Express 5.1

Updated with new payer format sheet

NMHCRX 5.1

Added field 311 - Patient Last Name

Security Health Plan RX 5.1

Removed Special Code for fields 331 & 332 – Patient ID Qualifier & Patient ID

Tricare Express Scripts 5.1

Updated with new payer format sheet

United Drug 5.1

Updated with new payer sheet

Wisconsin Medicaid 5.1

Added field 524 – Plan ID with hard code of "TXIX"

Incentive Fee Submitted field (438) was added to the pricing segment of each of the following formats for vaccine submission:

CAREPLUS HP HUMANA PDP 5.1 CIGNATURERX PART D 5.1 **COMMUNITY MUTUAL PDP 5.1** ESSENCE MEMBER MAPD 5.1 MEDICARE PARTD ADVANTRARX 5.1 MEDICARE PARTD AMERIHEALTH 5.1 MEDICARE PARTD ASURIS 5.1 MEDICARE PARTD BSCA PDP 5.1 MEDCIARE PARTD FHLTH PREMR 5.1 MEDICARE PARTD HEALTHNET 5.1 MEDICARE PARTD HLTHNET0338 5.1 MEDICARE PARTD HLTHSPG PDP 5.1 MEDICARE PARTD MC FIRST 5.1 MEDICARE PARTD PERFORMRX 5.1 MEDICARE PARTD PRIORITY PDP 5.1 MEDICARE PARTD REGENCE L&H 5.1 MEDCIARE PARTD REGENCE PDP 5.1 MEDCIARE PARTD WELLPOINT 5.1 WASHINGTON MEDICARE SXC 5.1 WELLPOINT RX MGMT PDP 5.1

4.3 Deactivated 5.1 POS Formats

MAILHANDLERS 5.1
ARGUS REGENCE BCBS WA 5.1
NORTHWEST PHARMACY SRVS 5.1
ACS NC SENIOR CARE 5.1
MEDICARE PARTD ABRAZO 5.1
RX SOULTIONS WEBMD 5.1

SUN RX 5.1

5.0 Medicare Part D Vaccination Billing

This section includes the instruction to bill for Dispensing and Administering Vaccines for Medicare Part D plans.

If the provider dispenses the vaccine medication and administers the vaccine to the enrollee, submit both drug cost and vaccine administration information on a single claim. The following fields are required in order for the claim to adjudicate and reimburse Provider appropriately for vaccine administration:

NCPDP Field	Segment & Field Name	Required Vaccine Administration Information for Processing
440-E5	DUR/PPS Segment Professional Service Code Field	MA (Medication Administration)
438-E3	Pricing Segment Incentive Amount Submitted Field	(Submit Administration Fee)

5.1 Populating the DUR/PPS Segment & Pricing Segment

POS/U/U/NEW

```
PHARMACY POINT OF SALE Dec 10, 2008 08:38:14 Page: 0 of 0
Transmitted by BRADY, CHRISTINA
With activity in the past 15 min

-#-----PATIENT/PRESCRIPTION---COMMENTS------

NEW Send new claims DIS Dismiss patient RCA Request cancellation
CU Continuous update SP Print single patient REV Reverse a paid claim
UD Display update PA Print all RES Resubmit a claim
EV Edit view screen LOG Print claim log REC Print receipt/DUR info
Select Action:UD//NEW
```

Figure 5-1: Screen 1: Sending a NEW claim through POS

Enter Internal RX number (number starting with `mark) or enter F to find prescription using the patient's name and fill date.

Change "Ask Qty/Price?" and "Ask Overrides?" to 'YES' enter through NDC # until pop-up screen appears.

```
Ask Insurance? NO
                                              <PF1> E when done, to file claims
                         | PHARMACY | POINT OF |
Ask Preauth #? NO
                                              <PF1> Q to quit without filing claims
Ask Qty/Price? YES
                                              <PF3> insert/overstrike modes
Ask Fill Date? NO
                              SALE
                                              <PF4> to go back one field
                         DATA ENTRY
Ask Overrides? YES
                                              Arrow keys may be used, too
   Prescription NDC/CPT/HCPCS - Patient - - - - Drug - - - - - - Fill Date `1561533 58160-0837-01 DUCK, DONALD HEPATITIS A VACCINE, INA DEC 10
2
3
4
5
6
COMMAND:
                                                     Press <PF1>H for help
                                                                                 Insert
```

Figure 5-2: Screen 2: Sending a NEW claim through POS

Move cursor to Incentive Amnt and enter the amount to be submitted to the insurer.

>Enter F1 C to close this pop-up page<

```
Ask Insurance? NO
                                        <PF1> E when done, to file claims
Ask Preauth #? NO
                         PHARMACY
                                       <PF1> Q to quit without filing claims
Ask Qty/Price? YES
                         POINT OF
                                        <PF3> insert/overstrike modes
Ask Fill Date? NO
                          SALE
                                        <PF4> to go back one field
                      DATA ENTRY
Ask Overrides? YES
                                       Arrow keys may be used, too
       1 DUCK, DONALD
                                        <PF1> C to close this pop-up page
                                          ---- PRICING ----
      HEPATITIS A VACCINE, INACTIVATE
                                                Quantity: .5
3
      Primary insurance:
                                           Price per unit: $71.48
                                           from AWP IN PRESC FILE
      Do you want to view/edit
the ORDER of INSURANCE? NO
5
                                             Qty x Price = $35.74
                                         Dispensing Fee: $4.5
6
7
                                          Incentive Amnt: $20.00
                                          Total Price: $40.24
8
      Prior Auth Type:
      Prior Auth #:
                                                 Done with this page? YES |
COMMAND:
                                             Press <PF1>H for help
                                                                      Insert
```

Figure 5-3: Entering Incentive Dollar Amount

Enter 'YES' for the NCPDP 5.1 DUR Overrides field

```
Ask Insurance? NO
                                         <PF1> E when done, to file claims
Ask Preauth #? NO
                         PHARMACY
                                         <PF1> Q to quit without filing claims
Ask Qty/Price? YES
                         POINT OF
                                         <PF3> insert/overstrike modes
Ask Fill Date? NO
                           SALE
                                         <PF4> to go back one field
Ask Overrides? YES
                     DATA ENTRY
                                       Arrow keys may be used, too
       Enter Y to select needed overrides.
1
       Please <PF1> C to close the screen.
2
3
       Enter General Overrides (Y/N) ?
4
5
       Enter NCPDP 5.1 DUR Overrides (Y/N) ?
                                              YES
6
       Enter Diagnosis Codes (Y/N) ?
8
9
COMMAND:
                                              Press <PF1>H for help
                                                                        Insert
```

Figure 5-4: Screen 1: Entering DUR Override

Populate the following fields:

- 439 Service Code Reason AD: Additional Drug Needed
- 440 Profession Service Code MA: Medication Administration
- 441 Service Code Result 3A: Recommendation Accepted
- >Enter F1 C to close this page<

```
Ask Insurance? NO
                                      <PF1> E when done, to file claims
                        POINT OF
                                      <PF1> Q to quit without filing claims
Ask Preauth #? NO
Ask Qty/Price? YES
                                      <PF3> insert/overstrike modes
Ask +
Ask |
      Enter the NCPDP DUR 5.1 values
                                      1 DUCK, DONALD
      to override for this claim.
                                      HEPATITIS A VACCINE, INACTIVATE
      Use <PF1> C to close this page.
2
      Line Srvc Cd Prof
                                                Co-agent
                             Srvc Cd Level of
3
       #
           Reason
                    Srvc Cd Result Effort ID Qual ID
4
            (439)
                    (440)
                            (441)
                                     (474)
                                             (475) (476)
5
       1
            AD
                     MA
                              3A
6
       2
       3
8
Will add override from IEN RX 1561533
```

Figure 5-5: Screen 2: Entering DUR Override

>Enter F1 E to file the claim<

```
Ask Insurance? NO
                                                <PF1> E when done, to file claims
Ask Preauth #? NO
                               PHARMACY
                                                <PF1> Q to quit without filing claims
Ask Qty/Price? YES
                                                <PF3> insert/overstrike modes
                               POINT OF
Ask Fill Date? NO
                                 SALE
                                                <PF4> to go back one field
Ask Overrides? YES
                             DATA ENTRY
                                                Arrow keys may be used, too
   Prescription NDC/CPT/HCPCS - Patient - - - - Drug - - - - - - Fill Date `1561533 58160-0837-01 DUCK, DONALD HEPATITIS A VACCINE, INA DEC 10
3
4
5
6
7
8
COMMAND:
                                                       Press <PF1>H for help
                                                                                     Insert
```

Figure 5-6: Filing claim with populated override fields

6.0 Contact Information

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

Phone: (505) 248-4371 or (888) 830-7280 (toll free)

Fax: (505) 248-4363

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

Email: support@ihs.gov