



RESOURCE AND PATIENT MANAGEMENT SYSTEM

Pharmacy Point of Sale (ABSP)

Patch Addendum

Version 1.0 Patch 38 May 2010

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

Preface

The requirements and functionality outlined in the Software Requirements Specification Indian Health Service Point of Sale (POS) Version 1.0 Patch 38 include the following:

- 1. Commented out the code to send rejected claims to Accounts Receivable
- 2. New Insurance Coverage report available through POSU/RPT/ADMN/RIC option
- 3. New ability to run Transaction Posting Summary through POSU/RPT/ADMN option
- 4. Old column name "OTHER" changed to new column name "DUPLICATE" in the following reports:
 - a. POSU/RPT/ADMN/DAY
 - b. POSU/RPT/ADMN/INS
 - c. POSU/RPT/ADMN/PVT
 - d. RPT/SITE/DAY
 - e. RPT/SITE/INS
- 5. New Collection Productivity report available through POSU/RPT/ADMN/CPR Replacing Worked Rejection Report (WRR)
- 6. New RX Expense Summary Report available when response is received, which can be set up through the POSM/SET/PHAR menu option
- 7. ABSP Routine Modifications
- 8. New and modified POS NCPDP 5.1 formats

Security

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

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1.0 Introduction

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

Patch 38 of Pharmacy Point of Sale (POS) Version 1.0 contains the following changes:

- Commented out the code to send rejected claims to Accounts Receivable (A/R)
- New Insurance Coverage report available through POS/RPT/ADMN/RIC option
- New ability to run Transaction Posting Summary (TPS) through POS/RPS/ADMN option
- Old column name "OTHER" changed to new column name "DUPLICATE in the following reports:
 - POSU/RPT/ADMN/DAY
 - POSU/RPT/ADMN/INS
 - POSU/RPT/ADMN/PVT
 - RPT/SITE/DAY
 - RPT/SITE/INS
- New Collection Productivity report available through POS/RPS/ADMN/CPR replacing Worked Rejection Report (WRR).
- New RX Expense Summary Report available when response is received, which can be set up through the POSM/SET/PHAR menu option
- ABSP Routine Modifications
- New and modified POS NCPDP 5.1 formats

2.0 Commented Out Code to Send Rejected Claims to A/R

No rejected claims will be sent to A/R because the code previously inserted was commented out. A/R was not ready to receive this data. It will be enabled when A/R is ready to process it.

3.0 New Insurance Coverage Report (RIC)

This section provides details of the new Insurance Coverage Report available to the Pharmacy POS package. This new report is created by accessing it through POSU/RPT/ADMN/RIC.

This option will print information about the number of registered patients who are currently enrolled in an insurance type that you will select.

You will be asked to select a POS Pharmacy or use ALL.

You will be asked if you wish to include only active patients.

You will be asked to select a particular POS insurance company of the type selected.

PATIENT DETAIL can be selected unless *all* insurance companies are specified.

You will be asked to enter an "As of" date to determine those patients who are actively enrolled in a plan of the selected type.

```
DAY
         TOTALS - by RELEASED DATE
         TOTALS - by INSURER
  INS
         TOTALS - MEDICARE PART D INSURERS
  MPD
  PVT
         TOTALS - by PRIVATE INSURER
  DRUG
         Billed and Collected DRUG cost
  EXP Print Expense Report
   PSR AR Period Summary Report
        A/R Statistical Report
  STA
  RIC
        Insurance Coverage Report
  TPS
         Transaction Posting Summary
  CPR
         Collection Productivity Report
Select Administration reports Option: RIC Insurance Coverage Report
...updating the Report Master file, please stand by...
 This option will print information about the number of registered patients
 who are currently enrolled in an insurance type that you will select.
 You will be asked to select a POS Pharmacy
 You will be asked if you wish to include only active patients.
 You will be asked to select a particular POS insurance company of the type
 PATIENT DETAIL can be selected unless ALL insurance companies are
specified
 You will be asked to enter an "As of" date to be used in determining
 those patients who are "actively" enrolled in a plan of the selected type.
Please Select a Pharmacy or leave blank for ALL: CHEROKEE HOSPITAL PHARMACY
        ...OK? Yes//
                      (Yes)
```

```
Select one of the following:
         D
                  MEDICAID FI
         P
                  PRIVATE
                  MEDICARE PART D
         MD
SELECT INSURER TYPE: MD// D MEDICAID FI
Please choose an insurer or leave blank for ALL: NORTH CAROLINA MEDICAID(
CAROLI
NA MEDICAID
NORTH/NORTHEAST/NORTHEASTERN/NORTHERN/NORTHLAKE/NORTHLAND/NORTHWEST/
NORTHWESTERN )
NORTH CAROLINA MEDICAID
                                  - PO BOX 30968
                                    RALEIGH, NC 27622
OK? Y//
Reporting For Insurance Type: MEDICAID FI
    The following POS Insurer(s) will be included on this report:
 NORTH CAROLINA MEDICAID
Display eligibility as of what date?: Today// T-1 (MAY 5,2010)
Do you wish to EXCLUDE inactive and deceased patients? YES// NO
Do you wish to view detail (patients)? NO// YES
DEVICE: HOME// VT Right Margin: 80//
Gathering data...
MAY 6,2010
                                                                Page 1
              REGISTERED PATIENTS - ACTIVE MEDICAID FI ENROLLEES
                          NORTH CAROLINA MEDICAID
                     Actively enrolled as of MAY 5,2010
 Pharmacy: CHEROKEE HOSPITAL PHARMACY
         Outpatient Site: 515101
  PLAN NAME
                                               COUNT
  HRN SUBSCRIBER NAME
                                         EFF.DT END.DT
SUBSCR.ID
 NORTH CAROLINA MEDICAID
                                                  1588
 140089 ROLAND, ALLISON HALEY FEB 1,2007
772652485
          ROLAND, CARRIE LEA
 130839
                                       JAN 1,2001
201561336
          STILES, FALA SHAWNNESSY
 112449
                                       JAN 1,1995
100814960
 130254
          SIKORSKI, MAMIE
                                       JUL 1,2001
110619873
 131283
          BUCHANAN, CAROLYN BERNICE
                                      JAN 1,2001
761202696
```

125408	BOTTOMS, TIFFANI C	JAN 1,2002				
437777917						
136719	ROBERTS, TIMOTHY	JUL 1,2004				
160614009						
118521	LUNSFORD, JANET LUCILLE	JUL 1,2001				
197904880						
137038	FRENCH, JAMICE KAYTELYNE	JUL 1,2005				
119084747						
132447	RITCHIE, DANICA ANN	JAN 1,2004				
748524852						
117263	FRADY, SUZANNE C	JAN 1,1999				
771566331						
Enter RETURN	to continue or '^' to exit:					
MASZ 6 2010			Daga 2			
MAY 6,2010	REGISTERED PATIENTS - ACTI	THE MEDICATO ET EMDOLLEEC	Page 2			
	NORTH CAROLIN					
	Actively enrolled	as 01 MAY 5,2010				
Dharmagu: (CHEROKEE HOSPITAL PHARMACY					
_	tpatient Site: 515101					
Jul	Chariette pire. 212101					
PLAN NAME		COUNT				
HRN	SUBSCRIBER NAME	EFF.DT END.DT				
SUBSCR.ID	SOBSCITED IVE					
129858	GARLAND, LUCILLE	MAY 1,2003				
549194843						
130173	BILLINOS, AMANDA CATHERINE	FEB 25,2000				
492744519						
108791	LONG, BETH	DEC 1,1996				
272261227						
137656	MANEY, WAHKEENA MARIE	JAN 1,2006				
467699633						
128336	EDGINGTON, MICHAEL E	FEB 1,2003				
391252272						
137755	WENKE, ANKE	APR 1,2005				
551873080						
129789	BLACKFOX, FRANCES	JAN 1,2003				
336946485						
139996	BRANTNER, TIFFANY ROCHELLE	JUL 1,2006				
476844899						
128039	OTTER, MARY	DEC 1,1996				
589400880		TTG 1 0000				
134043	FREE, VEROL	DEC 1,2003				
737929365	DODDDEG THEFE	T. 1 0000				
129843	ROBERTS, TERESA	JAN 1,2002				
662284393	CRITERIA TOUR RAVIES	MAD 1 1000				
123438	GRIFFIN, JOHN DAVID	MAR 1,1998				
267772168	to continue or IAI to soit.					
Filter RETURN	to continue or '^' to exit:					
MAY C 2010						
MAY 6,2010	ספרטיים האיידיניים אמייד	TO MEDICATO ET EMBOTTERO	Page 3			
REGISTERED PATIENTS - ACTIVE MEDICAID FI ENROLLEES						

NORTH CAROLINA MEDICAID Actively enrolled as of MAY 5,2010							
Pharmacy: CHEROKEE HOSPITAL PHARMACY Outpatient Site: 515101							
PLAN NAME HRN SUBSCR.ID	SUBSCRIBER NAME	COUNT EFF.DT END.DT					
129732 519871072	KETTLE, FERN	SEP 1,1992					
130182 229204827	CALLAWAY, STEVEN	DEC 1,2000					
123291 295776022	GUNTER, JATANNA L	MAY 1,2001					
133503 513651840	BAKER, LARRY GLENN	SEP 1,2003					
121225 486878696	GIBSON, HAROLD RAY	DEC 1,1995					
134553 231804641	MANEY, DONNIE	MAR 1,2004					
135306 293027382	BABY, TONY	NOV 1,2004					
129834 281997555	BYRD, JOYCE	MAR 1,2007					
128973 383583398	SMITH, CHARLES HENRY	MAR 1,2003					
126893 158001862	FRADY, JOSHUA	OCT 1,2007					
130407 205915027	MORNINGSTAR, RHONDA LYNN						
125167 778337804	SAPUTRA, ASHLEY	JAN 1,2002					
	I to continue or '^' to exit	;:					
MAY 6,2010	NORTH CAROI	CTIVE MEDICAID FI ENROLLEES LINA MEDICAID ed as of MAY 5,2010	Page 4				
	Pharmacy: CHEROKEE HOSPITAL PHARMACY Outpatient Site: 515101						
PLAN NAME HRN SUBSCR.ID	SUBSCRIBER NAME	COUNT EFF.DT END.DT					
119868 692222746	MANEY, FLOYD	JAN 1,2001					
	KOZICH, CASSIDY LEE	SEP 1,1998					

129816	MURPHY, QUIANA TIGER	JUN 1,2001					
488321608							
136755							
265551790							
138799	CREASMAN, ERICA SANDERS	AUG 1,2005					
312136717							
129837	MCMILLAN, SAMANTHA JOY	JAN 1,2002					
429595223							
134481	CHRISTMAS, TIMOTHY MARC	OCT 1,2006					
312055725							
134034	LEHNICK, LEROY SALVARDO	SEP 1,2004					
329531942							
129828	ORR, MELISSA ELISE	JAN 1,2003					
682890125							
130200	PARTON, CAMERON HAYES	DEC 1,2002					
481433114							
124954	ANDERSON, MADALYNN SARA	JUL 1,2002					
157314088							
129768	RICH, ROY	JAN 1,2003					
312320310	I to continue or '^' to exit:	•					
	MAY 6,2010 REGISTERED PATIENTS - ACTIVE MEDICAID FI ENROLLEES NORTH CAROLINA MEDICAID Actively enrolled as of MAY 5,2010 Pharmacy: CHEROKEE HOSPITAL PHARMACY Outpatient Site: CIHA						
PLAN NAME		COUN	T				
HRN	SUBSCRIBER NAME	EFF.DT	END.DT				
SUBSCR.ID							
TOTAL FOR PHARMACY: CHEROKEE HOSPITAL PHARMACY 3172							
TOTAL NUMBER OF ACTIVE ENROLLEES: 1585							
(REPORT COMPLETE)							
Press ENTER to continue:							

Figure 3-1 Sample of Insurance Coverage Report

4.0 Running TPS in POS

This option now makes the TPS report available from the POSU/RPT/ADMN menu path.

By selecting an A/R Bill or an IHS Bill Number, the user can see the list of attractions associated with that bill.

```
DAY
           TOTALS - by RELEASED DATE
   INS TOTALS - by INSURER
   MPD TOTALS - MEDICARE PART D INSURERS
PVT TOTALS - by PRIVATE INSURER
   DRUG Billed and Collected DRUG cost
EXP Print Expense Report
PSR AR Period Summary Report
STA A/R Statistical Report
RIC Insurance Coverage Report
TPS Transaction Posting Summary
CPR Collection Productivity Report
Select A/R BILL/IHS BILL NUMBER: 394483A-CH-707
DEVICE: HOME// VT Right Margin: 80//
                     List of Transactions for Bill 394483A-CH-707
Patient: MCMILLAN, SAMANTHA JOY
                                                     Beg DOS : OCT 07, 2002
                                                     End DOS : OCT 07, 2002
Address: P.O. BOX 1725
SOMEPLACE, NORTH CAROLINA 28719
                                                     LST STMT:
Phone #: 555-555-5894
                                                     Insurer: NORTH CAROLINA
MEDICAID
                                                     Balance: 0.00
Trans Dt By Trans Type
                                                                   Amount
Balance
                A/R Account
                                                    Batch
                                                                               Item
12/09/2002 BILL NEW
                                                                     32.16
32.16
                NORTH CAROLINA MEDICAID NO BATCH
                                                                                  0
05/07/2003 CAS NON PAYMENT/OTHER (FT)
                                                                    (32.16)
0.00
                 NORTH CAROLINA MEDICAID NO BATCH
                                                                                  0
Enter RETURN to continue:
```

Figure 4-1: The TPS report

5.0 "Other" Column Changed to "Duplicate"

On the following reports, the "OTHER" column name has been changed to "DUPLICATE:

```
DAY
          TOTALS - by RELEASED DATE
   INS
          TOTALS - by INSURER
   MPD
          TOTALS - MEDICARE PART D INSURERS
   PVT
          TOTALS - by PRIVATE INSURER
         Billed and Collected DRUG cost
   DRUG
   EXP
          Print Expense Report
   PSR AR Period Summary Report
   STA A/R Statistical Report
  RIC Insurance Coverage Report
TPS Transaction Posting Summary
   CPR
         Collection Productivity Report
Select Administration reports Option: DAY TOTALS - by RELEASED DATE
...updating the Report Master file, please stand by...
* Previous selection: RELEASED DATE from Jan 1,2010
START WITH RELEASED DATE: Jan 1,2010// (JAN 01, 2010)
GO TO RELEASED DATE: LAST//
DEVICE: VT
               Right Margin: 80//
POINT OF SALE TOTALS
                                                            MAY 4,2010
From JAN 1,2010 thru
                                                            1:45 PM
           PAYABLE SHORTED
                                  PAPER REJECTED UNINSURED DUPLICATE
JAN 22,2010
SUBTOTAL
               0.00
                                   0.00
                                              0.00
                                                         0.00
                                                                   0.00
                        0.00
SUBCOUNT
                                                                         1
JAN 25,2010
               0.00
                        0.00
                                   0.00
                                              0.00
                                                         0.00
                                                                   0.00
SUBTOTAL
SUBCOUNT
                                                                         2
FEB 10,2010
               0.00
                        0.00
                                   0.00
SUBTOTAL
                                              0.00
                                                         0.00
                                                                   0.00
SUBCOUNT
                                                                         1
FEB 16,2010
               0.00
                        0.00
                                   0.00
                                              0.00
                                                         0.00
SUBTOTAL
                                                                   0.00
SUBCOUNT
                                                                         1
FEB 19,2010
                        0.00
                                   0.00
SUBTOTAL
               0.00
                                             89.92
                                                         0.00
                                                                   0.00
SUBCOUNT
                                                                         1
               0.00
                        0.00
                                   0.00
                                             89.92
                                                         0.00
                                                                   0.00
TOTAL
COUNT
                                                                          6
Press ENTER to continue:
```

Figure 5-1: Day totals released by date

DAY	TOTALS - by RELEASED DATE
INS	TOTALS - by INSURER

```
MPD
         TOTALS - MEDICARE PART D INSURERS
         TOTALS - by PRIVATE INSURER
  PVT
  DRUG
         Billed and Collected DRUG cost
        Print Expense Report
  PSR
         AR Period Summary Report
         A/R Statistical Report
  STA
         Insurance Coverage Report
  RIC
         Transaction Posting Summary
  TPS
  CPR
         Collection Productivity Report
Select Administration reports Option: INS TOTALS - by INSURER
...updating the Report Master file, please stand by...
* Previous selection: TRANSACTION: INSURER from
START WITH TRANSACTION: INSURER: //
GO TO TRANSACTION: INSURER: LAST//
  * Previous selection: RELEASED DATE from Jan 1,2010
 START WITH RELEASED DATE: Jan 1,2010// (JAN 01, 2010)
 GO TO RELEASED DATE: LAST//
DEVICE: VT Right Margin: 80//
POINT OF SALE TOTALS
                                                       MAY 4,2010
From JAN 1,2010 thru
                                                       1:53 PM
                              PAPER REJECTED UNINSURED DUPLICATE
          PAYABLE SHORTED
CALIFORNIA MEDICAID
SUBTOTAL 0.00
                      0.00
                               0.00
                                          0.00
                                                    0.00
                                                              0.00
SUBCOUNT
                                                                   1
D-TEST
SUBTOTAL
              0.00
                      0.00
                                 0.00
                                          0.00
                                                    0.00
                                                              0.00
                                                                    2
SUBCOUNT
NORTH CAROLINA MEDICAID
SUBTOTAL 0.00
                      0.00
                                0.00
                                          0.00
                                                    0.00
                                                              0.00
                                                                   1
SUBCOUNT
RX ANTHEM
              0.00
SUBTOTAL
                      0.00
                                0.00
                                          0.00
                                                    0.00
                                                              0.00
                                                                   1
SUBCOUNT
RX ANTHEM PRESCRIPTION
                                                    0.00
                      0.00
SUBTOTAL 0.00
                                0.00
                                         89.92
                                                              0.00
SUBCOUNT
                                                                    1
              0.00
                                0.00
                                         89.92
TOTAL
                      0.00
                                                    0.00
                                                              0.00
                                                                    6
COUNT
Press ENTER to continue:
```

Figure 5-2: Insurance totals by insurer

```
TOTALS - by RELEASED DATE
DAY
       TOTALS - by INSURER
INS
MPD
       TOTALS - MEDICARE PART D INSURERS
PVT
      TOTALS - by PRIVATE INSURER
       Billed and Collected DRUG cost
DRUG
       Print Expense Report
EXP
      AR Period Summary Report
PSR
       A/R Statistical Report
STA
       Insurance Coverage Report
RIC
       Transaction Posting Summary
TPS
CPR
       Collection Productivity Report
```

```
Select Administration reports Option: PVT TOTALS - by PRIVATE INSURER
...updating the Report Master file, please stand by...
   * Previous selection: RELEASED DATE from Jan 1,2010
   START WITH RELEASED DATE: Jan 1,2010// (JAN 01, 2010)
   GO TO RELEASED DATE: LAST//
DEVICE: VT Right Margin: 80//
POINT OF SALE TOTALS
                                                      MAY 4,2010
From JAN 1,2010 thru
                                                      2:00 PM
          PAYABLE SHORTED
                              PAPER REJECTED UNINSURED DUPLICATE
PRIVATE
         RX ANTHEM PRESCRIPTION
             0.00 0.00 0.00
                                        89.92
                                                   0.00
SUBTOTAL
                                                             0.00
SUBCOUNT
                                                                   1
              0.00 0.00 0.00
                                                    0.00
TOTAL
                                        89.92
                                                             0.00
COUNT
                                                                   1
Press ENTER to continue:
```

Figure 5-3: PVT totals by private insurer

REJ Rejected control of the DAY Totals by 1 MPD Totals by 1	REJ Rejected claims report by site DAY Totals by Released Date by site INS Totals by Insurer by site MPD Totals by Medicare Part D by site					
by site						
START WITH RELEASED OF COURSE START WITH PHARMACY OF THE POINT OF SALE TOTALS From thru	, , , ,					
JAN 22,2010	SHORTED	PAPER	REJECTED	UNINSURED D	OPLICATE	
PHARMACY:	CHEROKEE	HOSPITAL P	HARMACY			
SUBTOTAL 0.00	0.00	0.00	0.00	0.00	0.00	
SUBCOUNT						1
	0.00	0.00	0.00	0.00	0.00	
SUBCOUNT						1
JAN 25,2010						
		HOSPITAL P				
SUBTOTAL 0.00	0.00	0.00	0.00	0.00	0.00	0
SUBCOUNT						2

SUBTOTAL	0.00	0.00	0.00	0.00	0.00	0.00	
SUBCOUNT							2
F	EB 10,2010						
	PHARMACY:	CHEROKEE	HOSPITAL P	HARMACY			
SUBTOTAL	0.00	0.00	0.00	0.00	0.00	0.00	
SUBCOUNT							1
SUBTOTAL	0.00	0.00	0.00	0.00	0.00	0.00	
SUBCOUNT							1
202000111							_
POINT OF	SALE TOTALS				MAX	4,2010	
From thru						L7 PM	
	PAYABLE	SHORTED	PAPER	REJECTED	UNINSURED I	OUPLICATE	
F	EB 16,2010						
		CHEROKEE	HOSPITAL P	HARMACY			
SUBTOTAL	0.00	0.00	0.00	0.00	0.00	0.00	
SUBCOUNT							1
SUBTOTAL	0.00	0.00	0.00	0.00	0.00	0.00	_
SUBCOUNT							1
	EB 19,2010						_
	PHARMACY:	CHEROKEE	HOSPITAL P	HARMACY			
SUBTOTAL	0.00	0.00	0.00	89.92	0.00	0.00	
SUBCOUNT							1
SUBTOTAL	0.00	0.00	0.00	89.92	0.00	0.00	-
SUBCOUNT							1
TOTAL	0.00	0.00	0.00	89.92	0.00	0.00	_
COUNT							6
Press ENT	Press ENTER to continue:						

Figure 5-4: Totals by released date by site

```
PAY
         Payable claims report by site
   REJ
         Rejected claims report by site
         Totals by Released Date by site
   DAY
         Totals by Insurer by site
   INS
   MPD
         Totals by Medicare Part D by site
          Closed Claim Report by Site
   CLO
Select Claims result and status by site Option: INS Totals by Insurer by
...updating the Report Master file, please stand by...
* Previous selection: TRANSACTION: PHARMACY from CHERO to D
START WITH PHARMACY: CHERO//
GO TO PHARMACY: D//
    * Previous selection: RELEASED DATE from Nov 2,2001 to Nov 3,2001@24:00
   START WITH RELEASED DATE: Nov 2,2001// 12/31/2009 (DEC 31, 2009)
   GO TO RELEASED DATE: LAST// T (MAY 04, 2010)
DEVICE: VT
               Right Margin: 80//
POINT OF SALE TOTALS
                                                           MAY 4,2010
From thru
                                                           3:19 PM
            PAYABLE SHORTED
                                  PAPER REJECTED UNINSURED DUPLICATE
        PHARMACY: CHEROKEE HOSPITAL PHARMACY
           INSURER: CALIFORNIA MEDICAID
             RELEASED DATE: FEB 16,2010
```

SUBTOTAL	0.00	0.00	0.00	0.00	0.00	0.00	
SUBCOUNT							1
SUBTOTAL	0.00	0.00	0.00	0.00	0.00	0.00	
SUBCOUNT							1
	INSURER: D-T						
			JAN 22,2010				
SUBTOTAL	0.00	0.00	0.00	0.00	0.00	0.00	
SUBCOUNT							1
	RELEASED		JAN 25,2010				
SUBTOTAL	0.00	0.00	0.00	0.00	0.00	0.00	
SUBCOUNT							1
SUBTOTAL	0.00	0.00	0.00	0.00	0.00	0.00	
SUBCOUNT							2

Figure 5-5: Totals by insurer by site

6.0 Collection Productivity Report

The Collection Productivity Report (CPR) is run from the POSI/RPT/ADMN menu and replaces the WRR, which is no longer available on the POSU/RPT/ADMN menu path

This is a sample of the Collection Productivity Report

- First, enter Beginning Prescription Release Date in a mm/mm/yy format
- Then enter Ending Prescription Release Date in a mm/dd/yy format

A pharmacy can be selected or be left blank for *all* pharmacies to be reported.

```
DAY
          TOTALS - by RELEASED DATE
          TOTALS - by INSURER
   INS
          TOTALS - MEDICARE PART D INSURERS
   MPD
   PVT
          TOTALS - by PRIVATE INSURER
   DRUG Billed and Collected DRUG cost
   EXP Print Expense Report
   PSR AR Period Summary Report
   STA A/R Statistical Report
RIC Insurance Coverage Repo
         Insurance Coverage Report
   TPS Transaction Posting Summary
   CPR
         Collection Productivity Report
Select Administration reports Option: CPR Collection Productivity Report
Enter Beginning Prescription Release Date: 04/01/2010
Enter Ending Prescription Release Date: 04/30/2010
Please Select a Pharmacy or leave blank for ALL:
DEVICE: HOME// VT
                      Right Margin: 80//
                  Pharmacy Point of Sale Collection Productivity Report
                      From APR 01, 2010 TO APR 30, 2010
          RELEASED DATE: JAN 03, 2005
              PHARMACY: CHEROKEE HOSPITAL PHARMACY
                  USER: ALL
RX #/REFILL: `1257267/0
     TRANSACTION DATE: APR 01, 2010 RECOVERED BY:
     TOTAL PRICE: 7.94
                                       PAID BY INSURER: 0.00
RX #/REFILL: `1258823/0
     TRANSACTION DATE: APR 13, 2010 RECOVERED BY:
     TOTAL PRICE: 59.22
                                       PAID BY INSURER: 0.00
RX #/REFILL: `1258824/0
     TRANSACTION DATE: APR 13, 2010 RECOVERED BY:
     TOTAL PRICE: 18.01
                                       PAID BY INSURER: 0.00
RX #/REFILL: `1258861/0
```

TRANSACTION DATE: APR 30, 2005 RECOVERED BY:
TOTAL PRICE: 49.35 PAID BY INSURER: 0.00

RX #/REFILL: `2160245/0

TRANSACTION DATE: APR 30, 2010 RECOVERED BY: CARLOW, LISA TOTAL PRICE: 610.13 PAID BY INSURER: 150.50

1. REJECTION CODE: 09REASON: M/I Birth Date

PHARMACY TOTAL 744.65 INSURER PAID: 150.50

DATE TOTAL: 895.15 TOTAL PAID BY INSURER FOR DATE:

150.50

Figure 6-1: The CPR

7.0 RX Summary Report

This is a new report made available for when a prescription is filled and the site would like to print a receipt for the client.

The path to set the parameters needed for this report is POSM/SET/PHAR.

```
Note: The ABSP MANAGER Security Key is required to set these parameters.
```

This report requires that the site set the field AUTO-PRINT PHARMACY EXPENSE REPORT: field to:

- "1" for All Patients
- "0" for No Patients (Expense Summary Report will not print at all)
- "NB" for Non-Beneficiary Patients only.

Additionally, the Default Device, if different from the usual default device, should also be set up using DEFAULT DEVICE: field.

```
BAS
         Edit basic pharmacy POS parameters
         Edit pharmacy POS ILC A/R settings
   ILC
         Edit pharmacy POS dial out settings ...
  DIAL
  PHAR
         Edit pharmacy POS pharmacy data
  INS Edit Pharmacy POS Insurance settings ...
  USER Edit pharmacy POS user preferences
  BILL Unbillable/Billable POS items menu ...
  PRI Enter/edit Pricing formulas
  MISC Miscellaneous setup programs ...
  PROV Enter/Edit providers' ID #s
  NPI Add/Edit NPI values for Providers
  SUMI POS Setup - Summary of Insurers
  SETD POS Setup - Detailed Report
Select Pharmacy Point of Sale Setup Menu Option: PHA Edit pharmacy POS
pharmacy
data
Select ABSP PHARMACIES NAME:
                               CHEROKEE HOSPITAL PHARMACY
OUTPATIENT SITE: One or more of the RPMS pharmacy package's
         Outpatient Sites (File 59) must be associated with
         this Point of Sale pharmacy entry
Select OUTPATIENT SITE: 515101// ^AUTOPRINT PHARMACY EXPENSE RPT
AUTOPRINT PHARMACY EXPENSE RPT: No Patients// ?
    Choose from:
      1 All Patients
              No Patients
```

```
NB Only Non-Beneficiary Patients
AUTOPRINT PHARMACY EXPENSE RPT: No Patients//
What Device should the Pharmacy Expense Reports print to?

DEFAULT DEVICE: TERM//
```

Figure 7-1: The RX Summary Report

This is an example of the report created. However, this example shows a rejection.

```
DOB: Sep 20, 1950 HRN: 105950
PATIENT: BROWN, JIMMY WADE
        RELEASE DATE: MAY 04, 2010
       PHARMACY: CHEROKEE HOSPITAL PHARMACY
RX #/REFILL: `1503253/0
TRANSACTION DATE: MAY 04, 2010 TRANSACTION TYPE: REJECTED
    DRUG NAME: LEVOFLOXACIN 500MG INJ
                                            NDC#: 00045-0069-51
                                            D/S: 30
    OTY: 5
    PROVIDER NAME: ALLEN, MARY E
                                            PROVIDER NPI#: -1
TOTAL PRICE: 17.01 INSURER PAID: 0.00
                                              AMOUNT DUE: 17.01
TOTAL: 17.01
                     INS PAID: 0
                                               DUE: 17.01
```

Figure 7-2: The RX Report with a rejection

8.0 ABSP Routine/Data Dictionary Definition Modification

The following routines were modified for POS patch 38

ABSPOSBC: Added call to the ABSPOSPE to automatically print Pharmacy Expense Report after receiving response from Emdeon

ABSPOS6D: Modified RESUB1 subroutine to update the UPDATED BY USER field when a new trxn is submitted

ABSPOSR6: Commented out because WRR report was removed from options

ABSPECA5: Ensured that Reject Code coming back from Emdeon gets converted to numeric value (stripping off leading and trailing spaces) This fixes the problem with sites getting: "Unrecognized Reject Codes".

ABSPOSR9: Padded paging to CPR report

ABPOS35: Changes were made to this routine for paging RCR

NEW ABSPOSPE: Pharmacy Expense Report

NEW ABSPOSR9: Collection Productivity Report (CPR)

NEW ABSPOSUU: Reporting utilities added to get ABSPOSR9 within allowable routine length limits

NEW ABSPOSR7: Insurance Coverage Report (RIC)

NEW ABSPOSRU: Support Routines for Insurance Coverage Report (RIC)

NEW ABSPOSRA: Transaction (Posting) History Report

The following data dictionary definitions were altered for POS patch 38

• ABSP PHARMACIES

- Added Field 115 Autoprint Pharmacy Expense Rpt
- Added Field 115.02 Default printer for Pharmacy Expense Rpt

9.0 POS 5.1 Formats

9.1 New 5.1 POS Formats

FORMAT NAME	BIN#	PCN#
STATE OF MONTANA 5.1	003585	36430
PHARMUCARE 5.1	009117	ERXBK
SXC TROOP 2 PDP 5.1	610011	IRX
CVS CAREMARK MEDICAID 5.1	004336	ADV
WINDSOR HEALTH PLAN MAPD 5.1	012189	MAPD

9.2 Adjusted 5.1 Formats

- MEDICA PDP 5.1 ALL 5.1 FORMATS
 - Changed Plan ID# to 3904...went out incorrectly in Patch 36
 - Added Field 403
- TRICARE EXPRESS SCRIPTS 5.1 ALL 5.1 FORMATS
 - Moved Field 308 to proper location on Claims Segment and added Field 433 to the Pricing Segment.
 - Added Field 403
- WISCONSIN MEDICAID 5.1 ALL 5.1 FORMATS
 - Remove Field 433 in the pricing segment for plan # 264
 - Added Field 33

Contact Information

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

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Email: support@ihs.gov