



OUTPATIENT PHARMACY (PSO)

PHARMACIST'S USER MANUAL

Version 7.0
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Revision History

Each time this manual is updated, the Title Page lists the new revised date and this page describes the changes. If the Revised Pages column lists “All,” replace the existing manual with the reissued manual. If the Revised Pages column lists individual entries (e.g., 25, 32), either update the existing manual with the Change Pages Document or print the entire new manual.

Date	Revised Pages	Patch Number	Description
02/12	i-ii , ii-a-ii-b , v-viii , 10 , 13-14 , 36-37 , 43 , 48a-48b , 50 , 67 , 67a-67n , 75 , 111 , 117-119 , 122-123 , 123a-123b , 125-128 , 128a-128b , 130-134 , 134a-134b , 135-138 , 138a-138b , 139-140 , 140a-140b , 141 , 141a-141b , 142-146 , 147-149 , 149a , 150-154 , 156a-156b , 157 , 170e-170f , 171-178	PSO*7*385	Removed incorrect listing of View Additional Reject Info (ARI) action Added signature alerts Updated wording for ¾ Days Supply Hold Added rounding functionality for ¾ Days Supply Hold Added new actions Submit Multiple Actions (SMA) and Suspense Date Calculation (SMA) Added new option View ePharmacy Rx (VER) Corrected earlier formatting errors Corrected typos Updated Service Code values Updated changed security key names Added TRICARE and CHAMPVA examples of rejects on a new order Updated name of TRICARE CHAMPVA Bypass/Override Report Updated screen shots related to patch changes Updated wording based on reviewer feedback Added CHAMPVA functionality Added separate section to list changes to security keys Added CHAMPVA to Glossary (S. Spence, PM; C. Smith, Tech Writer)
02/12	i, 107a-107b, 160a-160b, 171, 172	PSO*7*354	Automated Dispensing Device (ADD) enhancement. ADD and DNS added to Glossary. (Niha Goyal, PM; John Owczarzak, Tech Writer)

Date	Revised Pages	Patch Number	Description
10/11	i-ii, v-viii, 4, 7-10, 36, 56-58, 64, 66, 95, 118, 120-124, 126-127, 128-128b, 135-137, 139-145, 146-146b, 148, 149-149b, 150-153, 154-154b, 155-156, 165, 175-178	PSO*7*359	<p>Added new action View Additional Reject Info (ARI)</p> <p>Expanded ECME Numbers to twelve digits</p> <p>Updated screen shots related to patch changes</p> <p>Added TRICARE to Glossary</p> <p>Corrected typos</p> <p>Corrected formatting errors from 11/10 reissue (S. Spence, PM; C. Smith, Tech Writer)</p>
09/11	i,vi-vii, 30a-30f	PSO*7*382	<p>Added information regarding the new [PSO HRC PROFILE/REFILL] option.</p> <p>(N. Goyal, PM; J. Owczarzak, Tech Writer)</p>
04/11	i, viii, 8, 170a-170d, 177-179	PSO*7*343	<p>To add functionality to Outpatient Pharmacy for the On-Demand Displaying of FDA Medication Guides.</p> <p>Display FDA Medication Guide [MG] added to Other OP Actions [OTH]</p> <p>Updates to Index</p> <p>(T. Leggett, PM; B. Thomas, Tech Writer)</p>
04/11	i, vi, vii, viii, 5, 8, 10, 27-27b, 28, 30, 39-39nnn, 40, 54-54t, 58, 59, 60-60l, 78, 82, 159, 163, 167-180	PSO*7*251	<p>The following changes are included in this patch:</p> <ul style="list-style-type: none"> -Outpatient List Manager Screen Views -Added HP and H to Hold Status -Removed DC code; Added DF,DE,DP,DD and DA -Added to Hidden Action List: IN - Removed DC code; Added DF,DE,DP,DD and DA, and - Added HP and H to Hold Status -Replaced Medication Short Profile -Inserted enhanced Order checks, Outpatient Pharmacy generated order checks -Added IN to Screen Scrape -Modified New Order Screen Scrape -Inserted Drug Allergy Screens -Updated Glossary and Index to start on odd pages <p>(G. Tucker, PM; G. Scorca, Tech Writer)</p>

11/10	All	PSO*7*358	Added information regarding TRICARE Active Duty Bypass/Override details (S. Spence, PM; G. Johnson, Tech Writer)
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Action	Description
Patient Information [PI]	Shows patient information, allergies, adverse reactions, and pending clinic appointments.
Pull Rx [PP]	Action taken to pull prescription(s) early from suspense.
Reprint [RP]	Reprints the label.
View Reject [REJ]	Allows the user to view and resolve the Refill Too Soon or Drug Utilization Review returned by the third party payer for a specific prescription/fill claim.
Unhold [UH]	Removes an order from a hold status.
Verify [VF]	Allows the pharmacist to verify an order a pharmacy technician has entered.

Speed Actions

These Outpatient Pharmacy actions are referred to as “speed actions” and appear on the Medication Profile screen. These actions can be applied to one or more orders at a time.

Action	Description
Reprint [RP]	Reprints the label.
Renew [RN]	A continuation of a medication authorized by the provider.
Refill [RF]	A second or subsequent filling authorized by the provider.
Reprint Signature [RS]	Reprints the signature log.
Discontinue [DC]	Status used when an order was made inactive either by a new order or by the request of a physician.
Release [RL]	Action taken at the time the order is filled and ready to be given to the patient.
Pull Rx [PP]	Action taken to pull prescription(s) early from suspense.
Inpat. Profile [IP]	Action taken to view an Inpatient Profile.
CM	Action taken to manually queue to CMOP.
Fill/Rel Date Disply [RDD]	Switch between displaying the FILL DATE column and the LAST RELD column.
Display Remote [DR]	Action taken to display a patient’s remote prescriptions.

Other Outpatient Pharmacy ListMan Actions

Action	Description
Exit [EX]	Exit processing pending orders.
AC	Accept.
BY	Bypass.
ED	Edit.
FN	Finish.

Other Screen Actions

Action	Description
Edit/Enter Allergy/ADR Data [EA]	Provides access to the Adverse Reaction Tracking package to allow entry and/or edit of allergy adverse reaction data for the patient. See the Adverse Reaction Tracking package documentation for more information on allergy/ADR processing.
Detailed Allergy Display [DA]	Displays a detailed listing of the selected item from the patient's allergy/ADR list. Entry to the Edit Allergy/ADR Data action is provided with this list also.
Patient Record Update [PU]	Allows editing of patient data such as SSN, birth date, address, phone, and outpatient narrative. Patient data can also be updated using the <i>Update Patient Record</i> menu option. If implementing Other Language Modifications, either can be used to set a patient's other language preference.
New Order [NO]	Allows new orders to be entered for the patient.
Exit Patient List [EX]	Exit patient's Patient Information screen so that a new patient can be selected.

Chapter 1: Using the Bingo Board

This chapter describes the options available on the *Bingo Board User* menu.

Bingo Board User

[PSO BINGO USER]

The *Bingo Board User* menu enables use of the bingo board display. The options on this menu allow a patient's name or a number to be displayed, entered, or removed from the bingo board display located in the pharmacy area.

When the routing for an order is set to "Window", the entering of prescription orders stores information in the bingo board PATIENT NOTIFICATION (Rx READY) file. For new, renew, pull early from suspense, refill orders, barcode refill/renew, and finish process for orders entered via CPRS, the date and time is captured when the order is stored in this file. The same occurs for partials, except the time is captured when a prescription number is entered.

Releasing the prescription places the name or ticket number of the patient on the bingo board monitor if a display group exists and stores data in the WAITING TIME file. The options on this menu are used to manually enter, display, or remove a patient's name or number from the monitor.

The following options are available on the *Bingo Board User* menu:

- *Enter New Patient*
- *Display Patient's Name on Monitor*
- *Remove Patient's Name from Monitor*
- *Status of Patient's Order*

Enter New Patient

[PSO BINGO NEW PATIENT]

Use this option to manually enter the name of a new patient on the bingo board. Each prescription number for the patient's order must also be entered.

A "Ticket #" prompt displays if ticket number was chosen as the method of display in the *Enter/Edit Display* option on the *Bingo Board Manager* menu. Enter the ticket number and at the next prompt enter each of the prescription numbers for that patient.

Display Patient's Name on Monitor

[PSO BINGO DISPLAY PATIENT]

Use this option to begin displaying the name or number of a patient whose prescription is ready. The message, "PRESCRIPTIONS ARE READY FOR:" appears as fixed text on the display screen. This option displays the following reminder for ECME billable prescriptions: "**** This Pharmacy Rx requires a patient signature! ****"

Remove Patient's Name from Monitor

[PSO BINGO DELETE PATIENT]

After the patient picks up the prescription, remove the name or ticket number from the display either manually or through the barcode reader.



It is recommended that a patient's name be removed from the monitor as soon as the prescription is picked up.

Status of Patient's Order

[PSO BINGO STATUS]

This option enables checking of the number of prescriptions a patient has ready, the division, time in/time out, and the prescription number(s). There are four possible statuses:

Status	Description
Pending	Active order input via CPRS that is in the PENDING OUTPATIENT ORDERS file.
Being Processed	Order that is in the PATIENT NOTIFICATION (Rx READY) file, but not displayed.
Ready For Pickup	Order that is in the PATIENT NOTIFICATION (Rx READY) file and is being displayed.
Picked Up	Order that has been picked up.

Example: Status of Patient's Order

```
Select Bingo Board User Option: Status of Patient's Order
Enter Patient Name: OPPPATIENT17,ONE      08-30-48      000123456      NO      NSC
VETERAN
      OPPATIENT17,ONE has the following orders for 10/31/06
Being Processed: ***Entered on OCT 31, 2006***
  Division: GENERAL HOSPITAL      Time In: 10:27      Time Out:
  Rx #: 500416,
Pending:
  Orderable Item: ACETAMINOPHEN      Provider: OPPROVIDER24,TWO
  Entered By: OPCLERK28,FOUR      Time In: 10/31/06@06:46
  Drug: ACETAMINOPHEN 325MG TAB UD      Routing: MAIL
Ready For Pickup:
  Division: GENERAL HOSPITAL      Time In: 10:36      Time Out: 10:46
  Rx #: 1022731,
Enter Patient Name: <Enter>
```

Chapter 2: Print from Suspense File

This chapter describes the *Print from Suspense File* option used for printing suspended prescriptions.

Print from Suspense File

[PSO PNDLBL]

This option allows the user to print labels from the RX SUSPENSE file. First, enter the “Print Through” date. Any prescriptions with a suspense date on or before the date entered will print. Additionally, if a patient has at least one prescription on or before the date entered, any other prescriptions for that patient that are in suspense will be printed for the site parameter specified number of days to be pulled from suspense.

For example, if today’s date is entered and Patient A has a prescription to be printed through the that date, all of Patient A’s prescriptions between the date entered plus the number of days set in the local site parameter will be printed. If there are no prescriptions for Patient A through the date entered, no labels will print.

Labels can be sorted by the patient name, the SSN, or the DEA Special Handling code. If sorted by DEA, the labels must then sort by patient name or SSN. Sorting by DEA will send the labels to the printer in three groups:

- **First group** – will contain all the prescriptions with drugs that contain an “A” (narcotics and alcoholics) or a “C” (controlled substances-non narcotic) in the DEA Special Handling field.
- **Second group** – will contain all the prescriptions with drugs containing an “S” (supply) in the DEA Special Handling field.
- **Third group** – will contain all others. If a patient has prescriptions in suspense that fall in all three categories, that patient’s labels will be printed three times, once in each group.

Only one job is tasked for all of the prescriptions in the batch; therefore, if the job is queued by mistake, only one tasked job must be undone. Any prescription that is put in suspense for the "Print Through Date" between the times the job was queued until the time it actually runs will be included in the job.

Labels for each job printed from suspense will be part of a batch. Each batch is identified by the Division, the user who queued the batch, and the date/time that the job was queued to begin.



Prescriptions pulled early from suspense will not be part of a batch, so they will not be able to be reprinted through the *Reprint Batches from Suspense* option.

A short profile for every patient for whom a label for a new prescription is being printed will also be printed if the local Profile with New Prescriptions site parameter is set to Yes.



If a patient has partial prescriptions with regular fills, only one set of trailing documents will print for that patient. (In V. 6.0 trailer documents were printed after each partial.)

If a prescription is determined to be an ePharmacy prescription (e.g., third party electronically billable), an electronic claim will be sent by the Electronic Claims Management Engine (ECME) to the third party payer. TRICARE and CHAMPVA prescriptions are exceptions, as noted in the TRICARE and CHAMPVA section. The communication events between Outpatient Pharmacy and ECME are recorded in the ECME Log section of each prescription. The ECME log can be viewed in the patient Medication Profile screen (Activity Log option - AL) and also from the View Prescriptions option. If the claim submission returns a Refill Too Soon (79) or Drug Utilization Review (88) reject, the label is not printed for the prescription and it is moved to the Refill Too Soon/DUR section of the patient Medication Profile screen until the user resolves the reject. The prescription will also display on the Third Party Payer Reject worklist.

¾ Days Supply Hold

Because of the great number of refill-too-soon third party claim rejections that can occur due to prescriptions being filled too early, the system verifies that ¾ of the days supply has elapsed on the previous fill before the ePharmacy prescription may be refilled. The following list describes this functionality.

- ePharmacy prescriptions are delayed from being sent to CMOP and printed for local mail until ¾ of the days supply has elapsed. For CMOP suspense, a partial day will be rounded up (ex.: ¾ of 30 days will be 23 days). With the release of PSO*7*367, this rounding functionality will also be available for local mail suspense.
- An activity log entry will state the date/time that the Rx will be allowed to be removed from suspense. The activity log will be defined on the initial evaluation. The following is an example of the log entry:

```
4 06/18/08  SUSPENSE      REFILL 2      OPHARM, ONE
Comments: 3/4 of Days Supply SUSPENSE HOLD until 6/20/08.
```

- To fill the prescription earlier, users may pull these types of prescriptions early from suspense.

Host Errors

Prescriptions (ePharmacy only) will be prevented from being filled/sent to CMOP when a host processing error occurs as a claim is submitted through ECME. Host processing errors are identified by reject codes M6, M8, NN, and 99 which are returned by the third party payer. The following conditions apply when this scenario occurs.

- The transmission of the prescription fill will be delayed 1 day in hopes that the host processing issues will be resolved by the third party payer.
- An activity log entry will state the date/time along with a comment stating that the Rx/fill was left in suspense hold due to a host processing error. The following is an example of the log entry:

2 06/25/08 SUSPENSE ORIGINAL OPPHARM, TWO
Comments: SUSPENSE HOLD until 6/26/08 due to host reject error.

- The Pull Early from Suspense function is not impacted by this added functionality. Users may pull these type prescriptions early from suspense.

There is no user interaction for this function. It initiates when the Print from Suspense [PSO PNDLBL] option is initiated for CMOP prescriptions.

TRICARE and CHAMPVA

If there is an override or bypass for a TRICARE or CHAMPVA prescription and there are no open claim rejections for that prescription, then an electronic claim is not generated from suspense, and the label will be printed when the prescription is processed from suspense. This exception applies to TRICARE and CHAMPVA ePharmacy billable prescriptions and non-billable prescriptions.

If a claim is submitted from suspense for a TRICARE or CHAMPVA prescription, the prescription will be displayed on the Third Party Payer Reject worklist if the claim submission returns any type of reject. Also, non-billable TRICARE and CHAMPVA prescriptions will be displayed on the Third Party Payer Reject worklist. A user must resolve the reject or submit an override before the prescription can be processed through suspense.

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Chapter 3: Queue CMOP Prescription

This chapter describes the option for suspending prescriptions for mail-routed CMOP drugs.

QUEUE CMOP Prescription

[PSO RX QUEUE CMOP]

The *Queue CMOP Prescription* option allows the users (including pharmacy technicians) to put mail-routed prescription(s) for CMOP drugs on suspense for CMOP.

Example: Queue CMOP Prescription

```
Select Suspense Functions Option: QUEUE CMOP Prescription
Enter the Rx # to queue to CMOP: 300486
```

If the prescription does not have a routing of Mail, has already been released, or is not for a CMOP drug, and does not pass all the other normal checks for CMOP, it will not be put on suspense for CMOP.

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Changes to Releasing Orders Function – Signature Alert

With Patch PSO*7*385, the release function in the *Patient Prescription Processing* option has been modified to display a message to the user when an ECME-billable prescription is being released as a window fill. This message will alert the user that the patient's signature must be obtained. The user is not required to press <Enter> to continue or respond to the alert in any other manner.

Example: Releasing an ePharmacy Window Fill

```
Prescription Number 100003853 Released  
No Refill(s) to be Released  
No Partial(s) to be Released  
ePharmacy Rx – Obtain Signature
```

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Changes to Releasing Orders function – HIPAA NCPDP Global

The release function has been modified with patch PSO*7*148 to perform National Drug Code (NDC) validation for ePharmacy prescriptions. These changes also affect the Controlled Substance prescription release, which is performed through the Controlled Substances package.

The user releasing the third-party electronically billable prescription will be prompted for the NDC for the drug being dispensed to the patient. The NDC code previously retrieved when the prescription was finished will be presented as the current (default) NDC for the prescription. The other possible values that the user will be able to choose from are:

- NDC field value in the DRUG file, if valid and different than the current prescription NDC.
- LAST LOCAL NDC field value in NDC BY OUTPATIENT SITE sub-file in the DRUG file for the division filling the prescription, if valid and different than the current prescription NDC.
- NDC CODE field values in the SYNONYM sub-file in the DRUG file, if valid and different than the current prescription NDC.

If the NDC dispensed is not on the list to select, the user must contact the ADPAC or other designated person to add the NDC in a synonym multiple for that drug in file 50.

If the NDC code selected matches the current NDC in the prescription no further NDC processing is required. However, if the user selects a different NDC, the following steps will occur:

1. Outpatient Pharmacy V. 7.0 will instruct ECME to reverse the previous claim for the previous NDC code and submit a new claim for the newly selected NDC code.
2. The newly selected NDC code will be saved in the LAST LOCAL NDC field in NDC BY OUTPATIENT SITE sub-file in the DRUG file for the division filling the prescription.

The following examples show the new prompt for NDC validation during the release process.

Example: Releasing an ePharmacy Order – Selecting Default NDC

```
Select Outpatient Pharmacy Manager Option: RELEASE Medication
Enter PHARMACIST: OPPHARMACIST4,THREE
Enter/Wand PRESCRIPTION number: 100003853
```

```
NDC: 00580-0277-10// ?
Select one of the following valid NDC code(s) below:
      1 - 00580-0277-10
NDC: 00580-0277-10// <Enter> 00580-0277-10
      Prescription Number 100003853 Released
      No Refill(s) to be Released
      No Partial(s) to be Released
```

```
ePharmacy Rx - Obtain Signature
```

Example: Releasing an ePharmacy Order – Selecting Different NDC

```
Select Outpatient Pharmacy Manager Option: RELEASE Medication
Enter PHARMACIST: OPPHARMACIST4,THREE
Enter/Wand PRESCRIPTION number: 100003853
```

```
NDC: 00580-0277-10// ?
Select one of the following valid NDC code(s) below:
      1 - 00580-0277-10
      2 - 00580-0277-14
NDC: 00580-0277-10// 2 00580-0277-14
Prescription 100003853 successfully submitted to ECME for claim generation.
Claim Status:
Reversing and Rebilling a previously submitted claim...
Reversing...
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
Resubmitting...
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Waiting to process response
E PAYABLE
      Prescription Number 100003853 Released
      No Refill(s) to be Released
      No Partial(s) to be Released
```

Example: Handling a Rejected New Order for ePharmacy Billing (continued)

```
Select one of the following:

O          (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES
I          (I)GNORE - FILL Rx WITHOUT CLAIM SUBMISSION
Q          (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O)verride, (I)gnore, (Q)uit: Q//  OVERRIDE
```

When a claim is rejected, typically the Payer provides a “Reason for Service Code”, which displays on the reject as “Reason”. The user can use this reason to then select which code is entered for “Professional Service Code” and “Result of Service Code”. To see a list of service codes, enter ? at the specified prompt.

```
Reason for Service Code : ER - OVERUSE
Professional Service Code: RT          RECOMMENDED LABORATORY TEST
Result of Service Code  : 1G          FILLED, WITH PRESCRIBER APPROVAL

Reason for Service Code : ER - OVERUSE
Professional Service Code: RT - RECOMMENDED LABORATORY TEST
Result of Service Code  : 1G - FILLED, WITH PRESCRIBER APPROVAL

Confirm? ? YES// <Enter>

Prescription 99999999 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Waiting to process response
E PAYABLE
```

For Refill Too Soon rejects, the same choices apply.

Example: Handling a TRICARE Rejected New Order for ePharmacy Billing

Rejected TRICARE claims will be denoted with “TRICARE” during submission to ECME and within the subsequent reject notification screen. Also, the reject codes will be displayed in both places. The following example shows a prescription being submitted to ECME and this process occurs directly following the “Is this correct? YES//” prompt during finish. Where DUR or RTS are one of the reject codes, the user will be able to select from (D)iscontinue the prescription, submit (O)verride codes, or (Q)uit which sends the rejection to the Third Party Payer Rejects - Worklist. A TRICARE rejection may not be (I)gnored.

```
TRICARE Prescription 101110 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Processing response
E REJECTED
  79 - Refill Too Soon
  14 - M/I Eligibility Clarification Code

*** REJECT RECEIVED FOR TRICARE PATIENT ***
-----
Division : ALBANY ISC                               NPI#: 5000000021
Patient  : OPTRICARE,ONE(666-55-4789) Sex: M        DOB: OCT 18,1963(44)
Rx/Drug  : 101110/0 - NAPROXEN 250MG S.T.         ECME#: 000000112303
Reject(s): REFILL TOO SOON (79), 14 - M/I Eligibility Clarification Code (14).
          Received on MAR 03, 2008@14:40:57.

Insurance   : TRICARE                               Contact:
Group Name  : TRICARE PRIME                         Group Number: 123123
Cardholder ID: SI9844532
-----

Select one of the following:

O          (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES
D          (D)ISCONTINUE - DO NOT FILL PRESCRIPTION
Q          (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O)verride, (D)iscontinue, (Q)uit: Q//
```

Example: Handling a non-DUR/RTS or non-clinical TRICARE rejected New Order for ePharmacy Billing

For TRICARE prescription rejections that have non-DUR/RTS or non-clinical rejects, the user will be able to select from (D)iscontinue the prescription or (Q)uit which sends it to the Third Party Payer Rejects - Worklist. TRICARE prescriptions with these type rejects cannot be filled until the rejection is resolved. Example:

```
TRICARE Prescription 101113 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Building the HL7 packet
IN PROGRESS-Transmitting
E REJECTED
  07 - M/I Cardholder ID Number
  14 - M/I Eligibility Clarification Code

*** REJECT RECEIVED FOR TRICARE PATIENT ***
-----
Division : ALBANY ISC                               NPI#: 5000000021
Patient  : OPTRICARE,ONE(666-55-4789) Sex: M        DOB: OCT 18,1963(44)
Rx/Drug  : 101113/0 - SIMETHICONE 40MG TAB         ECME#: 000000112306
Reject(s): M/I Eligibility Clarification Code (14), M/I Cardholder ID
          Number (07). Received on MAR 03, 2008@14:43:42.

Insurance   : TRICARE                               Contact:
Group Name  : TRICARE PRIME                         Group Number: 123123
Cardholder ID: SI9844532
-----

Select one of the following:

D (D)iscontinue - DO NOT FILL PRESCRIPTION
Q   (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(D)iscontinue,(Q)uit: Q//
```

For non-billable TRICARE prescriptions, an abbreviated version of the reject notification screen will be displayed. Because the prescription is non-billable, the insurance and ECME information that's currently provided for DUR/RTS rejects will not be displayed (i.e. insurance, group name, group #, ECME #, contact, cardholder ID). In this case, the prescription must be discontinued.

```
Is this correct? YES// ...

*** TRICARE - NON-BILLABLE ***
-----
Division : ALBANY ISC                               NPI#:
Patient  : OPTRICARE,ONE(666-55-4789) Sex: M        DOB: OCT 18,1963(44)
Rx/Drug  : 102058/0 - ABSORBABLE GELATIN S
Date/Time: AUG 27, 2008@16:49:46
Reason   : Drug not billable.
-----

This is a non-billable TRICARE prescription.  It cannot be filled or sent
to the reject worklist.  It must be discontinued.

Press <RETURN> to continue...
Nature of Order: SERVICE CORRECTION//              S
Requesting PROVIDER: OPHARM  OPPHARM,ONE          OO
```

Labels will not print for discontinued TRICARE prescriptions, and reprint label will not be allowed for TRICARE rejected prescriptions.

```
Select Rx (Prescriptions) Option: REPrint an Outpatient Rx Label

Reprint Prescription Label: 101113          SIMETHICONE 40MG TAB
Number of Copies? : (1-99): 1//
Print adhesive portion of label only? ? No// NO
Do you want to resend to Dispensing System Device? No// NO
Comments: REPRINT

Rx # 101113          03/03/08
OPTRICARE,ONE          #180

ONE MOUTH TWICE A DAY

SIMETHICONE 40MG TAB
OPPHARM,ONE          OPPHARM,ONE
# of Refills: 3

Select LABEL DEVICE: NULL Bit Bucket

No Label(s) printed.

Reprint Prescription Label:
```

Suspended TRICARE prescriptions will remain on suspense when a reject occurs, when the prescription is non-billable, or when the third party claim remains in an 'IN PROGRESS' status in ECME. Labels will not print. Once the reject is resolved, the user may pull the prescription early from suspense or wait for the next scheduled Print from Suspense option runs at which time labels will print accordingly. This includes CMOP and local suspense.

```
TRICARE Prescription 101607 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response

*** TRICARE - 'IN PROGRESS' ECME status ***
-----
Division : ALBANY ISC                               NPI#: 5000000021
Patient  : OPTRICARE,ONE(666-55-4789) Sex: M        DOB: OCT 18,1963(44)
Rx/Drug  : 101607/0 - ACETAZOLAMIDE 250MG
Date/Time: APR 20, 2008@20:11:17
Reason   : ECME Status is in an 'IN PROGRESS' state and cannot be filled
-----

This prescription will be suspended. After the third party claim is resolved,
it may be printed or pulled early from suspense.

Press <RETURN> to continue...
```

A rejected TRICARE prescription may not have a partial fill ordered until the reject is resolved.

```
OP Medications (SUSPENDED) Apr 18, 2008@19:10:16 Page: 1 of 2
OPTRICARE,ONE
PID: 666-55-4789 Ht (cm): _____ (_____)
DOB: OCT 18,1963 (44) Wt (kg): _____ (_____)

Rx #: 101526e
(1) *Orderable Item: ACETAZOLAMIDE PILL
(2) Drug: ACETAZOLAMIDE 500MG SEQUELS
Verb: TAKE
(3) *Dosage: 1 PILL
*Route: ORAL
*Schedule: BID
(4) Pat Instructions:
SIG: TAKE 1 PILL BY MOUTH TWICE A DAY
(5) Patient Status: OTHER FEDERAL
(6) Issue Date: 04/18/08 (7) Fill Date: 04/19/08
Last Fill Date: 04/19/08 (Window)
Last Release Date: (8) Lot #:
Expires: 04/19/09 MFG:
+
DC Discontinue PR Partial RL Release
ED Edit RF (Refill) RN Renew
Select Action: Next Screen//  Partial

OP Medications (SUSPENDED) Apr 18, 2008@19:10:16 Page: 1 of 2
OPTRICARE,ONE
PID: 666-55-4789 Ht (cm): _____ (_____)
DOB: OCT 18,1963 (44) Wt (kg): _____ (_____)

Rx #: 101526e
(1) *Orderable Item: ACETAZOLAMIDE PILL
(2) Drug: ACETAZOLAMIDE 500MG SEQUELS
Verb: TAKE
(3) *Dosage: 1 PILL
*Route: ORAL
*Schedule: BID
(4) Pat Instructions:
SIG: TAKE 1 PILL BY MOUTH TWICE A DAY
(5) Patient Status: OTHER FEDERAL
(6) Issue Date: 04/18/08 (7) Fill Date: 04/19/08
Last Fill Date: 04/19/08 (Window)
Last Release Date: (8) Lot #:
Expires: 04/19/09 MFG:
+
Partial cannot be filled on TRICARE non-payable Rx
DC Discontinue PR Partial RL Release
ED Edit RF (Refill) RN Renew
Select Action: Next Screen//
```

If ECME's status on the claim remains in an "In Progress" state past the processing timeout during finish of the prescription, TRICARE prescriptions will not be allowed to be filled. Instead it will be placed on suspense until the rejection is resolved. Below is an example of this screen:

```
TRICARE Prescription 101607 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response

*** TRICARE - 'IN PROGRESS' ECME status ***
-----
Division : ALBANY ISC                               NPI#: 5000000021
Patient  : OPTRICARE,ONE(666-55-4789) Sex: M        DOB: OCT 18,1963(44)
Rx/Drug  : 101607/0 - ACETAZOLAMIDE 250MG
Date/Time: APR 20, 2008@20:11:17
Reason   : ECME Status is in an 'IN PROGRESS' state and cannot be filled
-----

This prescription will be suspended. After the third party claim is resolved,
it may be printed or pulled early from suspense.

Press <RETURN> to continue...
```

If a pharmacy is active for ePharmacy processing but an insurance plan is not linked or not active, TRICARE prescription will be allowed to be filled without third party claim submission. The phrase "Inactive ECME TRICARE" will be displayed during Finish and an ECME log entry will be added stating such.

Example of message during finish:

```

Do you want to enter a Progress Note? No//  NO

Rx # 102046          08/27/08
OPTRICARE, TEST          #180
ONE MOUTH TWICE A DAY

DANTROLENE 25MG CAP
OPPROVIDER, ONE          OPPHAR, ONE
# of Refills: 3

Is this correct? YES// ...
-Rx 101921 has been discontinued...

Inactive ECME TRICARE
  
```

Example of ECME Activity Log entry:

```

ECME Log:
#   Date/Time          Rx Ref          Initiator Of Activity
=====
1   8/27/08@11:07:45   ORIGINAL        OPPHARM, ONE
Comments: TRICARE-Inactive ECME TRICARE
  
```

Example: Handling a CHAMPVA Rejected New Order for ePharmacy Billing

Rejected CHAMPVA claims will be denoted with “CHAMPVA” during submission to ECME and within the subsequent reject notification screen. Also, the reject codes will be displayed in both places. The following example shows a prescription being submitted to ECME and this process occurs directly following the “Is this correct? YES//” prompt during finish. Where DUR or RTS are one of the reject codes, the user will be able to select from (D)iscontinue the prescription, submit (O)verride codes, or (Q)uit which sends the rejection to the Third Party Payer Rejects - Worklist. A CHAMPVA rejection may not be (I)gnored.

```
CHAMPVA Prescription 101110 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Processing response
E REJECTED
  79 - Refill Too Soon
  14 - M/I Eligibility Clarification Code

*** REJECT RECEIVED FOR CHAMPVA PATIENT ***

-----
Division : ALBANY ISC                      NPI#: 5000000021
Patient  : OPCHAMPVA,ONE(666-55-4789) Sex: M      DOB: OCT 18,1963(44)
Rx/Drug  : 101110/0 - NAPROXEN 250MG S.T.      ECME#: 000000112303
Reject(s): REFILL TOO SOON (79), 14 - M/I Eligibility Clarification Code (14).
          Received on MAR 03, 2008@14:40:57.

Insurance   : CHAMPVA                      Contact:
Group Name  : CHAMPVA PRIME                 Group Number: 123123
Cardholder ID: SI9844532

-----

Select one of the following:

O          (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES
D          (D)ISCONTINUE - DO NOT FILL PRESCRIPTION
Q          (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O)verride, (D)iscontinue, (Q)uit: Q//
```

Example: Handling a non-DUR/RTS or non-clinical CHAMPVA rejected New Order for ePharmacy Billing

For CHAMPVA prescription rejections that have non-DUR/RTS or non-clinical rejects, the user will be able to select from (D)iscontinue the prescription or (Q)uit which sends it to the Third Party Payer Rejects - Worklist. CHAMPVA prescriptions with these type rejects cannot be filled until the rejection is resolved. Example:

```
CHAMPVA Prescription 101113 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Building the HL7 packet
IN PROGRESS-Transmitting
E REJECTED
  07 - M/I Cardholder ID Number
  14 - M/I Eligibility Clarification Code

*** REJECT RECEIVED FOR CHAMPVA PATIENT ***
-----
Division : ALBANY ISC                      NPI#: 5000000021
Patient  : OPCHAMPVA,ONE(666-55-4789)  Sex: M      DOB: OCT 18,1963(44)
Rx/Drug  : 101113/0 - SIMETHICONE 40MG TAB      ECME#: 000000112306
Reject(s): M/I Eligibility Clarification Code (14), M/I Cardholder ID
           Number (07). Received on MAR 03, 2008@14:43:42.

Insurance   : CHAMPVA                      Contact:
Group Name  : CHAMPVA PRIME                Group Number: 123123
Cardholder ID: SI9844532
-----

Select one of the following:

D (D)iscontinue - DO NOT FILL PRESCRIPTION
Q      (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(D)iscontinue, (Q)uit: Q//
```

For non-billable CHAMPVA prescriptions, an abbreviated version of the reject notification screen will be displayed. Because the prescription is non-billable, the insurance and ECME information that's currently provided for DUR/RTS rejects will not be displayed (i.e. insurance, group name, group #, ECME #, contact, cardholder ID). In this case, the prescription must be discontinued.

```
Is this correct? YES// ...

*** CHAMPVA - NON-BILLABLE ***
-----
Division : ALBANY ISC                                NPI#:
Patient  : OPCHAMPVA,ONE(666-55-4789) Sex: M        DOB: OCT 18,1963(44)
Rx/Drug  : 102058/0 - ABSORBABLE GELATIN S
Date/Time: AUG 27, 2008@16:49:46
Reason   : Drug not billable.
-----

This is a non-billable CHAMPVA prescription.  It cannot be filled or sent
to the reject worklist.  It must be discontinued.

Press <RETURN> to continue...
Nature of Order: SERVICE CORRECTION//              S
Requesting PROVIDER: OPHARM  OPPHARM,ONE          OO
```

Labels will not print for discontinued CHAMPVA prescriptions, and reprint label will not be allowed for CHAMPVA rejected prescriptions.

```
Select Rx (Prescriptions) Option: REPrint an Outpatient Rx Label

Reprint Prescription Label: 101113          SIMETHICONE 40MG TAB
Number of Copies? : (1-99): 1//
Print adhesive portion of label only? ? No// NO
Do you want to resend to Dispensing System Device? No// NO
Comments: REPRINT

Rx # 101113          03/03/08
OPCHAMPVA,ONE          #180

ONE MOUTH TWICE A DAY

SIMETHICONE 40MG TAB
OPPHARM,ONE          OPPHARM,ONE
# of Refills: 3

Select LABEL DEVICE: NULL Bit Bucket

No Label(s) printed.

Reprint Prescription Label:
```

Suspended CHAMPVA prescriptions will remain on suspense when a reject occurs, when the prescription is non-billable, or when the third party claim remains in an 'IN PROGRESS' status in ECME. Labels will not print. Once the reject is resolved, the user may pull the prescription early from suspense or wait for the next scheduled Print from Suspense option runs at which time labels will print accordingly. This includes CMOP and local suspense.

```
CHAMPVA Prescription 101607 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response

*** CHAMPVA - 'IN PROGRESS' ECME status ***
-----
Division : ALBANY ISC                               NPI#: 5000000021
Patient  : OPCHAMPVA, ONE (666-55-4789) Sex: M      DOB: OCT 18, 1963 (44)
Rx/Drug  : 101607/0 - ACETAZOLAMIDE 250MG
Date/Time: APR 20, 2008@20:11:17
Reason   : ECME Status is in an 'IN PROGRESS' state and cannot be filled
-----

This prescription will be suspended. After the third party claim is resolved,
it may be printed or pulled early from suspense.

Press <RETURN> to continue...
```

A rejected CHAMPVA prescription may not have a partial fill ordered until the reject is resolved.

```
OP Medications (SUSPENDED)   Apr 18, 2008@19:10:16           Page:    1 of    2
OPCHAMPVA, ONE
  PID: 666-55-4789                Ht (cm) : _____ (_____)
  DOB: OCT 18,1963 (44)           Wt (kg) : _____ (_____)

                                Rx #: 101526e
(1) *Orderable Item: ACETAZOLAMIDE PILL
(2)      Drug: ACETAZOLAMIDE 500MG SEQUELS
      Verb: TAKE
(3)      *Dosage: 1 PILL
      *Route: ORAL
      *Schedule: BID
(4) Pat Instructions:
      SIG: TAKE 1 PILL BY MOUTH TWICE A DAY
(5) Patient Status: OTHER FEDERAL
(6)      Issue Date: 04/18/08                (7) Fill Date: 04/19/08
      Last Fill Date: 04/19/08 (Window)
      Last Release Date:                    (8) Lot #:
      Expires: 04/19/09                    MFG:
+
DC  Discontinue      PR  Partial      RL  Release
ED  Edit             RF  (Refill)    RN  Renew
Select Action: Next Screen//  Partial

OP Medications (SUSPENDED)   Apr 18, 2008@19:10:16           Page:    1 of    2
OPCHAMPVA, ONE
  PID: 666-55-4789                Ht (cm) : _____ (_____)
  DOB: OCT 18,1963 (44)           Wt (kg) : _____ (_____)

                                Rx #: 101526e
(1) *Orderable Item: ACETAZOLAMIDE PILL
(2)      Drug: ACETAZOLAMIDE 500MG SEQUELS
      Verb: TAKE
(3)      *Dosage: 1 PILL
      *Route: ORAL
      *Schedule: BID
(4) Pat Instructions:
      SIG: TAKE 1 PILL BY MOUTH TWICE A DAY
(5) Patient Status: OTHER FEDERAL
(6)      Issue Date: 04/18/08                (7) Fill Date: 04/19/08
      Last Fill Date: 04/19/08 (Window)
      Last Release Date:                    (8) Lot #:
      Expires: 04/19/09                    MFG:
+
Partial cannot be filled on CHAMPVA non-payable Rx
DC  Discontinue      PR  Partial      RL  Release
ED  Edit             RF  (Refill)    RN  Renew
Select Action: Next Screen//
```

If ECME's status on the claim remains in an "In Progress" state past the processing timeout during finish of the prescription, a CHAMPVA prescription will not be allowed to be filled. Instead it will be placed on suspense until the rejection is resolved. Below is an example of this screen:

```
CHAMPVA Prescription 101607 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response

*** CHAMPVA - 'IN PROGRESS' ECME status ***
-----
Division : ALBANY ISC                               NPI#: 5000000021
Patient  : OPCHAMPVA,ONE(666-55-4789) Sex: M        DOB: OCT 18,1963(44)
Rx/Drug  : 101607/0 - ACETAZOLAMIDE 250MG
Date/Time: APR 20, 2008@20:11:17
Reason   : ECME Status is in an 'IN PROGRESS' state and cannot be filled
-----

This prescription will be suspended. After the third party claim is resolved,
it may be printed or pulled early from suspense.

Press <RETURN> to continue...
```

If a pharmacy is active for ePharmacy processing but an insurance plan is not linked or not active, the CHAMPVA prescription will be allowed to be filled without third party claim submission. The phrase "Inactive ECME CHAMPVA" will be displayed during Finish and an ECME log entry will be added stating such.

Example of message during finish:

```
Do you want to enter a Progress Note? No//  NO

Rx # 102046          08/27/08
OPCHAMPVA, TEST          #180
ONE MOUTH TWICE A DAY

DANTROLENE 25MG CAP
OPPROVIDER, ONE          OPPHAR, ONE
# of Refills: 3

Is this correct? YES// ...
-Rx 101921 has been discontinued...

Inactive ECME CHAMPVA
```

Example of ECME Activity Log entry:

```
ECME Log:
#   Date/Time          Rx Ref          Initiator Of Activity
=====
1   8/27/08@11:07:45  ORIGINAL        OPPHARM, ONE
Comments: CHAMPVA -Inactive ECME CHAMPVA
```

Displaying a Patient's Remote Prescriptions

If a patient has prescriptions at another location, when the user selects the patient to enter a new order from Patient Prescription Processing, the following message appears.

```
REMOTE PRESCRIPTIONS AVAILABLE!
Display Remote Data? N//
```

If the user responds **NO**, then the normal procedure occurs for entering prescriptions. If the user responds **YES**, the "Remote Facilities Visited" screen appears such as the following example.


```

Remote Facilities Visited      Dec 30, 2008@17:26:47      Page: 1 of 1
Patient: PSOPATIENT,ONE      (000-00-0000)      DOB: 01/02/1967

Station
HDR CHEYENNE

Enter ?? for more actions
DR Display Remote Pharmacy Data      DB Display Both Pharmacy Data
Action:Quit//DR

```

To display the prescriptions at the remote pharmacy location, enter DR at the “Action” prompt. The “Medication Profile – Remote” screen appears such as the following example. .

```

Medication Profile - Remote    Dec 30, 2008@17:29:43    Page: 1 of 2
Patient: PSOPATIENT,ONE      (000-00-0000)      DOB: 01/02/1967

RX#          DRUG          ST QTY ISSUED  LAST FILLED
HDR CHEYENNE
712885      AMOXICILLIN TRIHYDRATE 250MG CAP  A  90 11/06/08  11/06/08
SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY
PROVIDER: MCKAY,ELMER
712886      DILTIAZEM (INWOOD) 240MG CAP,SA  A  30 11/28/08  11/28/08
SIG: TAKE ONE CAPSULE BY MOUTH EVERY DAY
PROVIDER: MCKAY,ELMER
712888      LABETALOL HCL 200MG TAB          A  60 12/30/08  12/30/08
SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
PROVIDER: MCKAY,ELMER
712887      SIMVASTATIN 20MG TAB          A  15 12/09/08  12/09/08
SIG: TAKE ONE-HALF TABLET BY MOUTH EVERY EVENING TESTING
FOR PATTESTING FOR PATIENT TESTING FOR PATTESTING
FOR PATIENTENT INTRUCTION ON SIG1 TESTING FOR
PATIENT INTRUCTION ON SIG1 TESTING FOR PATIENT
REPLACE IENT WITH IENT TESTING FOR PATIENT
+          Enter ?? for more actions

Select Action:Next Screen//

```

The field is updated and displayed in the Medication Profile.

```
OP Medications (ACTIVE)          Nov 03, 2005@12:51:52          Page: 1 of 3
OPPATIENT, FOUR
PID: 000-01-1322P                Ht (cm): _____ (_____)
DOB: JAN 13,1922 (83)           Wt (kg): _____ (_____)

(19) Counseling: YES              Was Counseling Understood: YES
(20) Refill Data
(21) DAW Code: 0 - NO PRODUCT SELECTION INDICATED
    Entry By: OPPHARMACIST4,THREE      Entry Date: 11/03/05 12:50:51

+ Enter ?? for more actions
DC Discontinue          PR Partial          RL Release
ED Edit                RF Refill          RN Renew
Select Action: Quit//
```

```
New OP Order (ROUTINE)          Nov 04, 2005@08:36:29          Page: 2 of 2
OPPATIENT, FOUR
PID: 000-01-1322P                Ht (cm): _____ (_____)
DOB: JAN 13,1922 (83)           Wt (kg): _____ (_____)

+
(7) Days Supply: 30              (8) QTY (TAB): 30
(9) # of Refills: 5              (10) Routing: WINDOW
(11) Clinic:
(12) Provider: OPPROVIDER4,TWO    (13) Copies: 1
(14) Remarks: New Order Created by editing Rx # 100003840.
    Entry By: OPPHARMACIST4,THREE      Entry Date: NOV 4,2005 08:36:06
```

```
-----
This change will create a new prescription!
AC Accept                    ED Edit
Select Action: Edit// AC Accept
Nature of Order: SERVICE CORRECTION// <Enter> S
WAS THE PATIENT COUNSELED: NO// YES
WAS COUNSELING UNDERSTOOD: NO// YES

Do you want to enter a Progress Note? No// <Enter> NO
-----
```

-----example continues-----

```

Rx # 100003852          11/04/05
OPPATIENT,FOUR          #30
TAKE ONE TABLET BY BY MOUTH FOUR TIMES A DAY FOR 30 DAYS WITH FOOD
AVOIDING DAIRY FOODS

PREDNISONE 5MG TAB
OPPROVIDER4,TWO          OPPHARMACIST4,THREE
# of Refills: 5

Is this correct? YES// <Enter> YES...
Claim has status E REJECTED. Not reversed.

Prescription 100003852 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE

```

This status refers to the original prescription.

This status refers to the newly created prescription.

Using the Copy Action

If a double question mark (??) is entered at the "Select Action" prompt above, the hidden actions below will display in the action area.

```

The following actions are also available:

AL  Activity Logs (OP)   OTH  Other OP Actions     FS  First Screen
VF  Verify (OP)         REJ  View REJECT          GO  Go to Page
CO  Copy (OP)           DIN  Drug Restr/Guide (OP)LS  Last Screen
RP  Reprint (OP)        +    Next Screen          PS  Print Screen
HD  Hold (OP)           -    Previous Screen      PT  Print List
UH  Unhold (OP)         <    Shift View to Left   QU  Quit
PI  Patient Information >  Shift View to Right  RD  Re Display Screen
PP  Pull Rx (OP)        ADPL Auto Display(On/Off)SL  Search List
IP  Inpat. Profile (OP) DN   Down a Line          UP  Up a Line

```

Copy is a hidden action used to create a new order exactly like the original order. Any field of the new order can be edited. This action does not affect the status of the original order but the duplicate order checks will occur.

ePharmacy Menu

[PSO EPHARMACY MENU]



The following menu items are locked with the PSORPH key: ePharmacy Medication Profile Division Preferences, ePharmacy Site Parameters, Third Party Payer Rejects – View/Process and Third Party Payer Rejects – Worklist. The following menu item is locked with the PSO TRICARE/CHAMPVA MGR key: TRICARE CHAMPVA Bypass/Override Report.

These menu items allow the user to perform ePharmacy specific functions including rejections by third party payers including DUR/RTS and has the following options:

- *Ignored Rejects Report*
- *ePharmacy Medication Profile (View Only)*
- *NDC Validation*
- *ePharmacy Medication Profile Division Preferences*
- *ePharmacy Site Parameters*
- *Third Party Payer Rejects – View/Process*
- *Third Party Payer Rejects – Worklist*
- *TRICARE CHAMPVA Bypass/Override Report*
- *View ePharmacy Rx*

DURs can occur when a third party determines there are safety issues involved with an Rx claim submission, and they can be due to high dose, drug interaction, and excessive utilization. The third party payer returns an NCPDP rejection code of 88 to indicate a DUR.

Refill Too Soon rejections happen when a third party payer determines that a prescription is being processed too early compared to the last time the prescription was filled. This can occur for several reasons, including third party payer's policy differs from VA policy, patient receiving medication at another pharmacy, or the provider may have increased the dosage or frequency of the medication. The third party payer returns an NCPDP rejection code of 79 to indicate a Refill Too Soon.

Prescriptions rejected as DUR and Refill Too Soon are moved to the REFILL TOO SOON/DUR REJECTS (Third Party) section of the Medication Profile. The user must resolve a rejected prescription before other actions such as release, label print, renew, and refill, among others, can be performed on it. Actions may still be taken on these prescriptions through CPRS.

Ignored Rejects Report

[PSO IGNORED REJECTS REPORT]

This option gives the user the ability to run a report for third-party rejects that have been ignored and consequently closed by the pharmacy users.

The user can select one of the following parameters to filter the data in the report:

- **DIVISION:** Allows the user to select one, some or all divisions.
- **DATE RANGE:** Allows the user to select a date range.
- **SORT BY:** Allows the user to choose different fields to sort the report by. Any combination can be selected:
 - **PATIENT:** Allows the user to select a single, multiple or all patients
 - **DRUG:** Allows the user to select a single, multiple or all drugs.
 - **USER:** Allows the user to select a single, multiple or all users that have ignored third party rejects.

Example: Ignored Rejects Report

```
Select ePharmacy Menu Option: IR Ignored Rejects Report

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION: ^ALL

BEGIN REJECT DATE: 030606 (MAR 06, 2006)

END REJECT DATE: 061407 (JUN 14, 2007)

Enter the SORT field(s) for this Report:

1 - PATIENT
2 - DRUG
3 - USER

Or any combination of the above, separated by comma,
as in these examples:

2,1 - BY PATIENT, THEN DRUG
3,1,2 - BY USER, THEN BY PATIENT, THEN BY DRUG

SORT BY: PATIENT// 1,2

SORT BY PATIENT
THEN BY DRUG

You may select a single or multiple PATIENTS,
or enter ^ALL to select all PATIENTS.

PATIENT: ^ALL

You may select a single or multiple DRUGS,
or enter ^ALL to select all DRUGS.

DRUG: ^ALL

DEVICE: HOME// [Select Printer Device]
```

ePharmacy Medication Profile Division Preferences

[PSO PMP SITE PREFERENCES]

This option allows the user to specify certain settings that will control how the *ePharmacy Medication Profile* option works for that user. Below is the list of settings that can be specified through this option:

- **EXP/CANCEL CUTOFF:** Indicates the maximum number of days for an expired and/or discontinued prescription to be cut from the profile.
- **SORT BY:** Indicates the default sorting column. The options are: Rx#, Drug Name, Issue Date or Last Fill Date.
- **SORT ORDER:** Indicates the order in which the column above will be sorted: Ascending or Descending.
- **DISPLAY SIG:** Indicates whether the SIG should be displayed under each prescription or if it should be hidden.
- **GROUP BY STATUS:** Indicates whether the list should be grouped by status (Active, Discontinued, Hold, etc...) or not.
- **DISPLAY ORDER COUNT:** Indicates whether the number of orders under each group should be displayed beside the group name. Example _____ACTIVE (3 orders)_____

```
Select ePharmacy Menu Option: PF ePharmacy Medication Profile Division Preferences
```

```
ALBANY ISC's current default view:
```

```
-----  
EXP/CANCEL CUTOFF : 200 DAYS  
SORT BY           : Rx#  
SORT ORDER        : ASCENDING  
DISPLAY SIG       : ON  
GROUP BY STATUS   : OFF  
DISPLAY ORDER COUNT: OFF
```

```
Delete this default view? NO// <Enter>
```

```
EXP/CANCEL CUTOFF: 200// <Enter> DAYS  
SORT BY: RX// <Enter> Rx#  
SORT ORDER: ASCENDING// ^EXP  
EXP/CANCEL CUTOFF: 200// 120 DAYS  
SORT BY: RX// <Enter> Rx#  
SORT ORDER: ASCENDING// <Enter>  
DISPLAY SIG: ON// <Enter>  
GROUP BY STATUS: OFF// <Enter>  
DISPLAY ORDER COUNT: OFF//<Enter>
```

```
Saving...OK!
```



If there is a set of preferences already on file for the division the user is logged under, the option to delete such preferences is presented to the user as seen above.

ePharmacy Site Parameters

The ePharmacy Site Parameters file (#52.86) has been added to store ePharmacy Site parameters by division. Along with this, a new EPHARMACY SITE PARAMETERS [PSO ePHARM SITE PARAMETERS] option has been added to the existing ePharmacy Menu [PSO EPHARMACY MENU].



This new option requires the PSORPH security key.

The following site parameters are definable using this option:

- **ALLOW ALL REJECTS:** Requires a YES or NO answer. It is highly suggested that NO be answered at this prompt. Answering YES to this prompt will signify that all prescription fills with ePharmacy rejected claims will automatically be placed on the Third Party Payer Rejects - Worklist, also known as the Pharmacy Reject Worklist. This is in addition to Refill-Too-Soon (79), Drug Utilization Review (DUR/88), CHAMPVA rejects and TRICARE rejects, which are automatically placed on the Pharmacy Reject Worklist. Any individually defined reject codes in this file will be overridden when a “YES” answer is given.
- **REJECT WORKLIST DAYS:** This is the number of days an uncommented reject can remain on the reject worklist without being included in the nightly reject worklist alert mail message.

The following prompts appear consecutively and the user may enter as many reject codes as they desire along with the manner in which each will be allowed to be placed on the reject worklist.

- **REJECT CODE:** A valid third party claim reject code should be entered. A listing of these codes is provided when double question marks (??) are entered for this prompt. Valid codes are contained within the BPS NCPDP REJECT CODES file (#9002313.93). Also, a value defined in this field triggers definition of USER field (#2) and DATE OF LAST UPDATE field (#3). Any individually defined codes will be overridden when the ALLOW ALL REJECTS prompt is answered as YES.
- **AUTO SEND:** This prompt is a companion to the REJECT CODE prompt. Enter YES to allow the entered REJECT CODE to be automatically placed on the Pharmacy Reject Worklist or NO to require Outpatient Pharmacy Electronic Claims Coordinator (OPECC) intervention to do so. A null value will be treated the same as entering NO in this field.

The following is an example of definition of ePharmacy Site Parameters:

```
Select ePharmacy Menu Option: SP ePharmacy Site Parameters

Regardless of any parameters defined, Refill-Too-Soon, Drug Utilization
Review(DUR), CHAMPVA and TRICARE rejects will always be placed on the Third Party
Payer Rejects - Worklist, also known as Pharmacy Reject Worklist. These
parameters are uneditable and are the default parameters.

Division: ALBANY ISC      500
          ...OK? Yes//    (Yes)

ALLOW ALL REJECTS: NO//
REJECT WORKLIST DAYS: 7
Select REJECT CODE: DAW ??

Select REJECT CODE: ??

  Choose from:  (The following are previously defined reject code(s))
22      M/I Dispense As Written (DAW)/Product Selection Co      YES

  You may enter a new REJECT CODE, if you wish

*** Enter a valid third party reject code from the previously entered codes
*** above, enter a new code, or enter one from the provided listing below.
*** Valid codes are those defined in BPS NCPDP REJECT CODES file (#9002313.93).

  A valid third party claim reject code should be entered. A listing
  of these codes is provided when double question marks are entered
  for this field.

  Choose from:
10      M/I Patient Gender Code
11      M/I Patient Relationship Code
12      M/I Place of Service
13      M/I Other Coverage Code
14      M/I Eligibility Clarification Code
15      M/I Date of Service
16      M/I Prescription/Service Reference Number
17      M/I Fill Number
18      M/I Metric Quantity
19      M/I Days Supply
20      M/I Compound Code
21      M/I Product/Service ID
22      M/I Dispense As Written (DAW)/Product Selection Code
23      M/I Ingredient Cost Submitted
24      M/I SALES TAX
25      M/I Prescriber ID
26      M/I Unit Of Measure
27      (FUTURE USE)
          ^

Select REJECT CODE: 22      M/I Dispense As Written (DAW)/Product Selection C
ode
          ...OK? Yes//    (Yes)

CODE: 22//
AUTO SEND: NO// Y  YES
Select REJECT CODE: 75      Prior Authorization Required
          ...OK? Yes//    (Yes)

CODE: 75//
AUTO SEND: NO//
Select REJECT CODE:

Division:
```

Third Party Payer Rejects - View/Process

[PSO REJECTS VIEW/PROCESS]

This option provides information about rejects that have been on the Third Party Payer Rejects – Worklist. This option allows the user to find, display and reopen rejects previously resolved from the Third Party Payer Rejects – Worklist in order to take action on them again.

The user can choose to view rejects for one, multiple, or all Outpatient Pharmacy Divisions.

Example: Viewing and Resolving Open Rejects

```
Select ePharmacy Menu Option: VP Third Party Payer Rejects - View/Process

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION: ^ALL
```

The user can select one of the following selections to filter the data displayed:

- **DATE RANGE:** Selects a date range (Default: Last 90 days).

```
BEGIN REJECT DATE: T-90// <Enter> (MAR 09, 2007)

END REJECT DATE: T// <Enter> (JUN 07, 2007)
```

- **(P)ATIENT:** Selects a single patient, multiple patients, or all patients.
- **(D)RUG:** Selects a single drug, multiple drugs, or all drugs.
- **(R)x:** Selects a single prescription number, or multiple prescription numbers.
- **(I)NSURANCE:** Selects a single insurance, multiple insurances, or all insurances.

```
Select one of the following:

      P      PATIENT
      D      DRUG
      R      Rx
      I      INSURANCE

By (P)atient, (D)rug, (R)x or (I)nsurance: P// INSURANCE

Enter the whole or part of the Insurance Company
name for which you want to view/process REJECTS.

INSURANCE: TEST INS
ANOTHER ONE: <Enter>
```

Next, the user can choose to display either Unresolved, Resolved, or Both types of rejects.

```
Select one of the following:
      U      UNRESOLVED
      R      RESOLVED
      B      BOTH

(U)NRESOLVED, (R)RESOLVED or (B)OTH REJECT statuses: B// <Enter> BOTH
Please wait...

-----example continues-----
```

Example: Viewing and Resolving Open Rejects (continued)

```
Rejects Processing Screen      Nov 21, 2005@08:27:37      Page: 1 of 1
Divisions: ALL
Selection: ALL REJECTS FOR TEST INS
# Rx#      PATIENT(ID) [^]      DRUG      REASON
1 100003872  OPPATIENT,FOUR(1322P      A AND Z OINTMENT      DUR:
Payer Message:
2 100003873  OPPATIENT,FOUR(1322P      PHYTONADIONE 5MG TAB 79 :REFILL
TOO SO
Payer Message:
3 100003873  OPPATIENT,FOUR(1322P      PHYTONADIONE 5MG TAB DUR:
Payer Message:
4 100003785  OPPATIENT,TEN(3222)      ALBUMIN 5% 250ML      DUR:
Payer Message:
5 100003882  OPPATIENT,TEN(3222)      ALBUTEROL INHALER      DUR:
Payer Message:
6 100003884  OPPATIENT,TEN(3222)      TEMAZEPAM 15MG CAP      DUR:
Payer Message:

Select the entry # to view or ?? for more actions
DR  Sort by Drug      RE  Sort by Reason      RX  Sort by Prescription
PA  Sort by Patient    RF  Screen Refresh      GI  Group by Insurance
Select: Quit//
-----example continues-----
```

The following options are available on the screen above:

- DR – Sorts the list by the drug name.
- PA – Sorts the list by the patient’s last name.
- RE – Sorts the list by the reject reason.
- RF – Refreshes the screen. (This selection retrieves DUR/ REFILL TOO SOON rejects that happened after the screen was originally populated.)
- RX – Sorts the list by Prescription number.
- GI – Groups the rejects by Insurance Company name.



The following two sets of characters denote the order by which the list is being sorted: [^] for ascending and [v] for descending. The order inverts every time the user selects the same column by which the list is already ordered . Thus, if the list is currently ordered by Patient in ascending order ([^]) and the user types “PA”, the list will be re-sorted in descending order and the order indicator will change to ([v])

The user selects a specific record to display all relevant information about the prescription and the claim submitted to the payer.

Example: Viewing and Resolving Open Rejects (continued)

```

Reject Information (UNRESOLVED) Nov 21, 2005@08:29:30          Page: 1 of 2
Division : ALBANY                                           NPI#: 17128842
Patient  : OPPATIENT, FOUR (000-01-1322P) Sex: M           DOB: JAN 13, 1922 (83)
Rx#      : 100003873/0      ECME#: 000000504455 Date of Service: Nov 15, 2005
CMOP Drug: DOCUSATE NA 100MG CA                            NDC Code: 54629-0600-01
-----
REJECT Information
Reject Type   : 79 - REFILL TOO SOON received on NOV 15, 2005@14:13:51
Reject Status : OPEN/UNRESOLVED
Payer Adtl Msg : NEXT RFL 111805, DAYS TO RFL 3, LAST FILL 101805 AT YOUR
                PHARM, REFILL TOO SOON
Reason Code   : ER (OVERUSE PRECAUTION )
DUR Text      : RETAIL
DUR Add Msg   : THIS IS THE DUR ADDITIONAL TEXT.
-----
OTHER REJECTS
29 - M/I Number Refills Authorized
39 - M/I Diagnosis Code
-----
INSURANCE Information
Insurance     : TEST INS
Contact       : 1-800-555-5050
BIN           : 741852
-----
+          Enter ?? for more actions
VW  View Rx          IGN Ignore Reject          OVR Submit Override Codes
MP  Medication Profile  RES Resubmit Claim          CSD Change Suspense Date
Select: Next Screen// IGN Ignore Reject
-----
-----example continues-----

```

These options are available on the screen above:

- **VW (View)** – Takes the user to the *View Prescription* option to review details for that prescription.
- **MP (Medication Profile)** – Invokes the patient’s list of medication.
- **IGN (Ignore Reject)** – Allows the user to close or resolve the DUR/REFILL TOO SOON Reject without resubmission to the payer. The user will be required to enter a free-text comment and his/her electronic signature.
- **RES (Resubmit Claim)** – Allows the user to re-submit the claim to the payer. This will automatically mark the reject resolved.
- **OVR (Submit Override Codes)** – Allows the user to re-submit the claim by entering NCPDP override codes, which shall trigger a new claim submission be sent to the payer.
- **CSD (Change Suspense Date)** – Allows the user to change the fill date for suspended prescriptions.

Hidden actions:

- **COM (Add Comments)** – Allows the user to add reject specific comments. This comments are local to the Reject Worklist and View/Process options and are not transmitted to ECME.
- **CLA (Submit Clarif. Code)** – Allows the user to re-submit a claim with Clarification Codes.
- **ED (Edit Rx)** – Allows the user to edit the prescription.
- **PA (Submit Prior Auth.)** – Allows the user to re-submit a claim with Prior Authorization information.
- **ARI (View Addtnl Rej Info)** – Allows the user to display additional reject information from the payer, if available.

- SDC (Suspense Date Calculation) – Allows the user to calculate a new suspense date based on Last Date of Service and Last Days Supply.
- SMA (Submit Multiple Actions) – Allows the user to resubmit a claim with multiple actions, including the following information: Prior Authorization, Submission Clarification Code, Reason for Service Code, Professional Service Code, and Result of Service Code.

(This page included for two-sided copying.)

Example: Viewing and Resolving Open Rejects (continued)

```
Enter your Current Signature Code:    SIGNATURE VERIFIED
Comments: changed quantity
    When you confirm this REJECT will be marked RESOLVED.
Confirm? ? NO// Y YES                [Closing...OK]
```

The following is a sample of the ECME Activity Log update that occurs when a reject is resolved:

Example: ECME Activity Log entry: Reject Resolved

```
Rx Activity Log                Nov 21, 2005@09:43:33                Page:    3 of    3
OPPATIENT, FOUR
  PID: 000-01-1322P                Ht (cm): _____ (_____)
  DOB: JAN 13,1922 (83)           Wt (kg): _____ (_____)
+
1  11/15/05@14:13:52  ORIGINAL  OPPHARMACIST4, THREE
Comments: Submitted to ECME:REJECT WORKLIST-DUR OVERRIDE CODES (DD/M0/1B) -E
PAYABLE
ECME REJECT Log:
#  Date/Time Rcvd    Rx Ref    Reject Type    STATUS    Date/Time Resolved
=====
1  12/11/05@19:03:31 ORIGINAL  DUR           RESOLVED    12/12/05@16:45:21
Comments: CLAIM RE-SUBMITTED
2  5/30/06@19:13:57 REFILL 2  DUR           RESOLVED    5/31/06@15:58:32
Comments: CLAIM RE-SUBMITTED
Enter ?? for more actions
Select Action: Quit//
```

Third Party Payer Rejects - Worklist
[PSO REJECTS WORKLIST]

This option gives the user the ability to process Third Party Payer Rejects, CHAMPVA Non-billable rejects and TRICARE Non-billable rejects for one, multiple, or all Outpatient Pharmacy Divisions. Only OPEN/UNRESOLVED rejects that have clinical significance, such as DUR and Fill Too Soon, and rejects transferred from the ECME user screen, are added to the Worklist. Once the reject is marked CLOSED/RESOLVED, it is automatically removed from the Worklist.

Example: Resolving Open Rejects

```
Select Rx (Prescriptions) Option: EPHARMACY Menu

IR      Ignored Rejects Report
MP      ePharmacy Medication Profile (View Only)
NV      NDC Validation
PF      ePharmacy Medication Profile Division Preferences
SP      ePharmacy Site Parameters
VP      Third Party Payer Rejects - View/Process
WL      Third Party Payer Rejects - Worklist
TC      TRICARE CHAMPVA Bypass/Override Report

Select ePharmacy Menu Option: WL Third Party Payer Rejects - Worklist

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION: ^ALL
```

Insurance Rejects - Worklist		Nov 09, 2010@11:24:10		Page:	1 of 1
Divisions: ALL					
Selection: ALL UNRESOLVED REJECTS					
#	Rx#	PATIENT (ID) [^]	DRUG	REASON	
1	100003521	OPPATIENT,TWELVE(5444)	ACETYLCYSTEINE 20% 3 79	:REFILL TOO SO	
Payer Message: PLAN = 8906 NEXT FILL: 20050429					
2	100003521	OPPATIENT,TWELVE(5444)	ACETYLCYSTEINE 20% 3 79	:REFILL TOO SO	
Payer Message: RTS - Rx: 9306343 DT: 31-MAR-2005 DS: 30 RD: 23-APRIL 2005					
3	100003872	OPPATIENT,FOUR(1322P)	A AND Z OINTMENT	DUR:	
Payer Message: DUR Reject Error					
CHAMPVA - Non-DUR/RTS					
4	101358	OPCVACARE,ONE(7895)	BACLOFEN 10MG TABS	07 :M/I Cardholde	
Payer Message:					
5	100923	OPCVACARE,TWO(4933)	LORAZEPAM 1MG TAB	07 :M/I Cardholde	
Payer Message:					
TRICARE - Non-DUR/RTS					
6	101359	OPTRICARE,ONE(7894)	BACLOFEN 10MG TABS	07 :M/I Cardholde	
Payer Message:					
7	100924	OPTRICARE,TRI(4932)	LORAZEPAM 1MG TAB	07 :M/I Cardholde	
Payer Message:					
OTHER REJECTS					
8	101173	IBPATIENT,ONE(9877)	FENOPROFEN 300MG CAP	08 :M/I Person Co	
Payer Message:					
9	101130	OPPATIENT,ONE(4589)	CHLORAMBUCIL 2MG TAB NN	:Transaction R	
Payer Message:					
Select the entry # to view or ?? for more actions					
DR	Sort by Drug		RE	Sort by Reason	
			RX	Sort by Prescription	

Hidden actions:

- TRI (Show/Hide TRICARE) - When toggled to Show, TRICARE Non-DUR/RTS rejects will be automatically displayed at the end of the listing. Toggling the TRI action to Hide will remove them from the screen.
- CVA (Show/Hide CHAMPVA) - When toggled to Show, CHAMPVA Non-DUR/RTS rejects will be automatically displayed at the end of the listing. Toggling the CVA action to Hide will remove them from the screen.

These options are available on the following screen:

- VW (View Rx) – Takes the user to the View Prescription option to review details for that prescription.
- MP (Medication Profile) – Invokes the patient’s list of medication.
- IGN (Ignore Reject) – Allows the user to close or resolve the DUR/REFILL TOO SOON Reject without resubmission to the payer. The user will be required to enter a free-text comment and his/her electronic signature.
- RES (Resubmit Claim) – Allows the user to re-submit the claim to the payer. This will automatically mark the reject resolved.
- OVR (Submit Override Codes) – Allows the user to re-submit the claim by entering NCPDP override codes, which shall trigger a new claim submission be sent to the payer. This option is active for DUR rejects only.
- CSD (Change Suspense Date) – Allows the user to change the fill date for suspended prescriptions.

Hidden actions:

- COM (Add Comments) – Allows the user to add reject specific comments. These comments are local to the Reject Worklist and View/Process options and are not transmitted to ECME.
- CLA (Submit Clarif. Code) – Allows the user to re-submit a claim with Clarification Codes.
- ED (Edit Rx) – Allows the user to edit the prescription.
- PA (Submit Prior Auth.) – Allows the user to re-submit a claim with Prior Authorization information.
- ARI (View Addtnl Rej Info) – Allows the user to display additional reject information from the payer, if available.
- SDC (Suspense Date Calculation) – Allows the user to calculate a new suspense date.
- SMA (Submit Multiple Actions) – Allows the user to resubmit a claim with multiple actions.

Example: Resolving Open Rejects (continued)

```

Reject Information (UNRESOLVED) Nov 21, 2005@09:51:15          Page: 1 of 1
Division : ALBANY                                           NPI#: 17128842
Patient  : OPPATIENT, FOUR (000-01-1322P) Sex: M           DOB: JAN 13, 1922 (83)
Rx#      : 100003872/0          ECME#: 000000504454 Date of Service: Nov 15, 2005
CMOP Drug: DOCUSATE NA 100MG CA                            NDC Code: 54629-0600-01

REJECT Information
Reject Type   : 88 - DUR REJECT received on NOV 15, 2005@14:11:51
Reject Status : OPEN/UNRESOLVED
Payer Adtl Msg : DUR Reject Error
Reason Code   :
DUR Text      :

INSURANCE Information
Insurance     : TEST INS
Contact       :
BIN          : 741852
Group Number : 12454
Cardholder ID : 000011322P

Enter ?? for more actions
VW View Rx          IGN Ignore Reject          OVR Submit Override Codes
MP Medication Profile RES Resubmit Claim      CSD Change Suspense Date
Select: Quit// OVR Submit Override Codes
  
```

When a claim is rejected, typically the Payer returns a “Reason for Service Code”, which becomes the default for the “Reason for Service Code” prompt. The user can use this reason to then select which code is entered for “Professional Service Code” and “Result of Service Code”.

Available codes for “Professional Service Code” include:

<u>Code</u>	<u>Description</u>
00	NO INTERVENTION
AS	PATIENT ASSESSMENT
CC	COORDINATION OF CARE
DE	DOSING EVALUATION/DETERMINATION
DP	DOSAGE EVALUATED
FE	FORMULARY ENFORCEMENT
GP	GENERIC PRODUCT SELECTION
M0	PRESCRIBER CONSULTED
MA	MEDICATION ADMINISTRATION
MB	OVERRIDING BENEFIT
MP	PATIENT WILL BE MONITORED
MR	MEDICATION REVIEW
P0	PATIENT CONSULTED
PA	PREVIOUS PATIENT TOLERANCE
PE	PATIENT EDUCATION/INSTRUCTION
PH	PATIENT MEDICATION HISTORY
PM	PATIENT MONITORING
PT	PERFORM LABORATORY REQUEST
R0	PHARMACIST CONSULTED OTHER SOURCE
RT	RECOMMENDED LABORATORY TEST
SC	SELF-CARE CONSULTATION
SW	LITERATURE SEARCH/REVIEW
TC	PAYER/PROCESSOR CONSULTED
TH	THERAPEUTIC PRODUCT INTERCHANGE
ZZ	OTHER ACKNOWLEDGEMENT

Available codes for “Result of Service Code” include:

<u>Code</u>	<u>Description</u>
00	NOT SPECIFIED
1A	FILLED AS IS, FALSE POSITIVE
1B	FILLED PRESCRIPTION AS IS
1C	FILLED, WITH DIFFERENT DOSE
1D	FILLED, WITH DIFFERENT DIRECTIONS
1E	FILLED, WITH DIFFERENT DRUG
1F	FILLED, WITH DIFFERENT QUANTITY
1G	FILLED, WITH PRESCRIBER APPROVAL
1H	BRAND-TO-GENERIC CHANGE
1J	RX-TO-OTC CHANGE
1K	FILLED, WITH DIFFERENT DOSAGE FORM
2A	PRESCRIPTION NOT FILLED

2B	NOT FILLED, DIRECTIONS CLARIFIED
3A	RECOMMENDATION ACCEPTED
3B	RECOMMENDATION NOT ACCEPTED
3C	DISCONTINUED DRUG
3D	REGIMEN CHANGED
3E	THERAPY CHANGED
3F	THERAPY CHANGED - COST INCREASE ACKNOWLEDGED
3G	DRUG THERAPY UNCHANGED
3H	FOLLOW-UP REPORT
3J	PATIENT REFERRAL
3K	INSTRUCTIONS UNDERSTOOD
3M	COMPLIANCE AID PROVIDED
3N	MEDICATION ADMINISTERED
4A	PRESCRIBED WITH ACKNOWLEDGEMENTS

Available codes for "Reason for Service Code" include:

Code	Description
AD	ADDITIONAL DRUG NEEDED
AN	PRESCRIPTION AUTHENTICATION
AR	ADVERSE DRUG REACTION
AT	ADDITIVE TOXICITY
CD	CHRONIC DISEASE MANAGEMENT
CH	CALL HELP DESK
CS	PATIENT COMPLAINT/SYMPTOM
DA	DRUG-ALLERGY
DC	DRUG-DISEASE (INFERRED)
DD	DRUG-DRUG INTERACTION
DF	DRUG-FOOD INTERACTION
DI	DRUG INCOMPATIBILITY
DL	DRUG-LAB CONFLICT
DM	APPARENT DRUG MISUSE
DR	DOSE RANGE CONFLICT
DS	TOBACCO USE
ED	PATIENT EDUCATION/INSTRUCTION
ER	OVERUSE
EX	EXCESSIVE QUANTITY
HD	HIGH DOSE
IC	IATROGENIC CONDITION
ID	INGREDIENT DUPLICATION
LD	LOW DOSE
LK	LOCK IN RECIPIENT
LR	UNDERUSE
MC	DRUG-DISEASE (REPORTED)
MN	INSUFFICIENT DURATION
MS	MISSING INFORMATION/CLARIFICATION
MX	EXCESSIVE DURATION
NA	DRUG NOT AVAILABLE
NC	NON-COVERED DRUG PURCHASE
ND	NEW DISEASE/DIAGNOSIS
NF	NON-FORMULARY DRUG

NN	UNNECESSARY DRUG
NP	NEW PATIENT PROCESSING
NR	LACTATION/NURSING INTERACTION
NS	INSUFFICIENT QUANTITY
OH	ALCOHOL CONFLICT
PA	DRUG-AGE
PC	PATIENT QUESTION/CONCERN
PG	DRUG-PREGNANCY
PH	PREVENTIVE HEALTH CARE
PN	PRESCRIBER CONSULTATION
PP	PLAN PROTOCOL
PR	PRIOR ADVERSE REACTION
PS	PRODUCT SELECTION OPPORTUNITY
RE	SUSPECTED ENVIRONMENTAL RISK
RF	HEALTH PROVIDER REFERRAL
SC	SUBOPTIMAL COMPLIANCE
SD	SUBOPTIMAL DRUG/INDICATION
SE	SIDE EFFECT
SF	SUBOPTIMAL DOSAGE FORM
SR	SUBOPTIMAL REGIMEN
SX	DRUG-GENDER
TD	THERAPEUTIC
TN	LABORATORY TEST NEEDED
TP	PAYER/PROCESSOR QUESTION
UD	DUPLICATE DRUG

Example: Resolving Open Rejects (continued)

```

Professional Service Code: MR           MEDICATION REVIEW
Result of Service Code   : 1D           FILLED, WITH DIFFERENT DIRECTIONS

Professional Service Code: MR - MEDICATION REVIEW
Result of Service Code   : 1D - FILLED, WITH DIFFERENT DIRECTIONS

When you confirm, a new claim will be submitted for
the prescription and this REJECT will be marked
resolved.

Confirm? ? YES// <Enter>

Prescription 100003872 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit

IN PROGRESS-Waiting to process response
E PAYABLE
    
```

The following is a sample of the ECME Activity Log update that occurs when a reject is resolved.

Example: ECME Activity Log entry: Reject Resolved

```

Rx Activity Log                Nov 21, 2005@11:11:53                Page: 3 of 3
OPPATIENT, FOUR
  PID: 000-01-1322P                Ht (cm): _____ (_____)
  DOB: JAN 13,1922 (83)            Wt (kg): _____ (_____)
+
#   Date/Time                Rx Ref                Initiator Of Activity
=====
1   5/16/07@14:40:40          ORIGINAL              OPPHARMACIST4,THREE
Comments: Submitted to ECME:WINDOW FILL(NDC:00058-2467-05)
2   5/16/07@14:40:40          ORIGINAL              OPPHARMACIST4,THREE
Comments: Billing quantity submitted through ECME: 25.000 (ML)
3   5/20/07@14:21:52          ORIGINAL              OPPHARMACIST4,THREE
Comments: Submitted to ECME:REJECT WORKLIST-DUR OVERRIDE CODES (AD/AS/1B) -E
REJECTED
4   5/20/07@14:21:52          ORIGINAL              OPPHARMACIST4,THREE
Comments: Billing quantity submitted through ECME: 25.000 (ML)

ECME REJECT Log:
#   Date/Time Rcvd                Rx Ref                Reject Type                STATUS                Date/Time Resolved
=====
1   5/16/07@14:40:40          ORIGINAL              DUR                          RESOLVED
5/20/07@14:21:52
Comments: CLAIM RE-SUBMITTED

Enter ?? for more actions

Select Action:Quit//
    
```

TRICARE CHAMPVA Bypass/Override Report [PSO Bypass/Override Report]



This menu option is locked with the PSO TRICARE/CHAMPVA MGR security key.

This option provides information in a detail or summary report format that will list prescriptions where the Bypass or Override was performed to enable processing of these TRICARE and CHAMPVA prescriptions. The user has the ability to list (I)npatient; (N)on-Billable Product; (R)eject Override; or (A)ll. Besides allowing the selection of all types, the report allows the selection of one or two types. For example, the user can select Non-billable and Reject for the same report.

Example: Accessing the TRICARE CHAMPVA Bypass/Override Report

```
Select Rx (Prescriptions) Option: epharmacy Menu

IR      Ignored Rejects Report
MP      ePharmacy Medication Profile (View Only)
NV      NDC Validation
PF      ePharmacy Medication Profile Division Preferences
SP      ePharmacy Site Parameters
VP      Third Party Payer Rejects - View/Process
WL      Third Party Payer Rejects - Worklist
TC      TRICARE CHAMPVA Bypass/Override Report

You've got PRIORITY mail!

Select ePharmacy Menu Option: TC  TRICARE CHAMPVA Bypass/Override Report

Select one of the following:

D      DIVISION
A      ALL

Select Certain Pharmacy (D)ivisions or (A)LL:
```

Example: TRICARE CHAMPVA Bypass/Override Report Filters and Data Elements

```
Select one of the following:
  D      DIVISION
  A      ALL
Select Certain Pharmacy (D)ivisions or (A)LL: DIVISION
Select ECME Pharmacy Division(s): BATTLE CREEK
  Selected:
    BATTLE CREEK
Select ECME Pharmacy Division(s): GRAND RAPIDS      MI  CBOC  515BY      VA GRAND RAPIDS
OPC  515BY      VA GRAND RAPIDS OPC
  Selected:
    BATTLE CREEK
    VA GRAND RAPIDS OPC
Select ECME Pharmacy Division(s):

Select one of the following:

  T      TRICARE
  C      CHAMPVA
  A      ALL

Select Eligibility (T)RICARE, (C)HAMPVA or (A)LL Entries: ALL// ALL

  Select one of the following:

  S      Summary
  D      Detail

Display (S)ummary or (D)etail Format: Detail//

START WITH TRANSACTION DATE: T-1// T-10 (APR 30, 2010)
GO TO TRANSACTION DATE: T// T-9 (MAY 01, 2010)

  Select one of the following:

  I      INPATIENT
  N      NON-BILLABLE
  R      REJECT OVERRIDE
  P      PARTIAL FILL
  A      ALL

Select one of the following: **Can select multiples - limit of 2** : <no default> ALL

  Select one of the following:

  S      SPECIFIC PHARMACIST(S)
  A      ALL PHARMACISTS

Select Specific Pharmacist(s) or include ALL Pharmacists: ALL//

  Select one of the following:

  S      SPECIFIC PROVIDER(S)
  A      ALL PROVIDERS

Select Specific Provider(s) or include ALL Providers: ALL//

  Select one of the following:

  R      Pharmacist
  P      Provider/Prescriber Name
```

```
Group/Subtotal Report by Pharmacy (R)Pharmacist or (P)rovider: <no default> Pharmacist
Do you want to capture report data for an Excel document? NO//
WARNING - THIS REPORT REQUIRES THAT A DEVICE WITH 132 COLUMN WIDTH BE USED.
IT WILL NOT DISPLAY CORRECTLY USING 80 COLUMN WIDTH DEVICES
DEVICE: HOME// 0;132;99  INCOMING TELNET
Please wait...
```

**** When selecting from above, Specific Pharmacist(s), the user will be able to continue selecting Pharmacist(s) as necessary. This filter will have the same functionality as the Division/Insurance Company selection filters.**

**** When selecting from above, Specific Provider(s), the user will be able to continue selecting Provider(s) as necessary. This filter will have the same functionality as the Division/Insurance Company selection filters.**

Example of TRICARE CHAMPVA Bypass/Override Report Summary

```

TRICARE CHAMPVA BYPASS/OVERRIDE AUDIT REPORT - SUMMARY Print Date: NOV 10, 2010@10:05:26 PAGE: 1
DIVISION(S): ALL
ELIGIBILITY: ALL
TC TYPES: INPATIENT, NON-BILLABLE PRODUCT, PARTIAL FILL, REJECT OVERRIDE
ALL PRESCRIPTIONS BY AUDIT DATE: From 10/31/10 through 11/10/10
=====
-----
DIVISION: DIVISION ONE
***** CHAMPVA INPATIENT *****

  PHARMACIST: PHARMACIST,ONE      -----
  SUB-TOTALS                      45.00
  RX COUNT                         1
  MEAN                             10.00

  PHARMACIST: PHARMACIST,TWO      -----
  SUB-TOTALS                      30.00
  RX COUNT                         1
  MEAN                             30.00
  -----

CHAMPVA INPATIENT
SUBTOTALS                      75.00
RX COUNT                        2
MEAN                            37.50

***** CHAMPVA NON-BILLABLE PRODUCT *****

  PHARMACIST: PHARMACIST,THREE    -----
  SUB-TOTALS                      20.00
  RX COUNT                         1
  MEAN                             20.00

CHAMPVA NON-BILLABLE PRODUCT
SUBTOTALS                      20.00
RX COUNT                        1
MEAN                            20.00

***** CHAMPVA PARTIAL FILL *****

  PHARMACIST: PHARMACIST,FOUR     -----
  SUB-TOTALS                      16.20
  RX COUNT                         2
  MEAN                             8.10
  
```

```

PHARMACIST: PHARMACIST, FIVE      -----
SUB-TOTALS                        8.00
RX COUNT                          1
MEAN                              8.00

PHARMACIST: PHARMACIST, SIX      -----
SUB-TOTALS                        23.58
RX COUNT                          1
MEAN                              23.58

CHAMPVA PARTIAL FILL
SUBTOTALS                        47.78
RX COUNT                          4
MEAN                              11.95

***** CHAMPVA REJECT OVERRIDE *****
CHAMPVA REJECT OVERRIDE
SUBTOTALS                        0.00
RX COUNT                          0
MEAN                              0.00

***** TRICARE INPATIENT *****
TRICARE INPATIENT
SUBTOTALS                        11.93
RX COUNT                          1
MEAN                              11.93

***** TRICARE NON-BILLABLE PRODUCT *****
PHARMACIST: OPPHARM, ONE      -----
SUB-TOTALS                        8.03
RX COUNT                          1
MEAN                              8.03

TRICARE NON-BILLABLE PRODUCT
SUBTOTALS                        8.03
RX COUNT                          1
MEAN                              8.03

***** TRICARE PARTIAL FILL *****
PHARMACIST: OPPHARM, FOUR      -----
SUB-TOTALS                        8.54
RX COUNT                          1
MEAN                              8.54

```

PHARMACIST: OPPHARM, FIVE	-----
SUB-TOTALS	16.20
RX COUNT	2
MEAN	8.10

TRICARE PARTIAL FILL	
SUBTOTALS	24.74
RX COUNT	3
MEAN	8.25

***** TRICARE REJECT OVERRIDE *****

PHARMACIST: OPPHARM, TWO	-----
SUB-TOTALS	29.17
RX COUNT	3
MEAN	9.72

PHARMACIST: OPPHARM, THREE	-----
SUB-TOTALS	10.38
RX COUNT	1
MEAN	10.38

TRICARE REJECT OVERRIDE	
SUBTOTALS	39.55
RX COUNT	4
MEAN	9.89

DIVISION DIVISION ONE	-----
SUBTOTALS	154.51
RX COUNT	9
MEAN	17.17

GRAND TOTALS	-----
	154.51
RX COUNT	9
MEAN	17.17

REPORT HAS FINISHED
Press Return to continue, '^' to exit:

(This page included for two-sided copying.)

Example of TRICARE CHAMPVA Bypass/Override Report Detail

```

TRICARE CHAMPVA BYPASS/OVERRIDE AUDIT REPORT -    DETAIL Print Date: OCT 31, 2010@11:59:22    Page: 1
DIVISION(S): DIVISION ONE, DIVISION TWO
ELIGIBILITY: ALL
TC TYPES: INPATIENT, NON-BILLABLE PRODUCT, PARTIAL FILL, REJECT OVERRIDE
ALL PRESCRIPTIONS BY AUDIT DATE: From 09/01/10 through 09/30/10
=====
BENEFICIARY NAME/ID          RX#          REF/ECME#          RX DATE          RX INFO
ACTION DATE          USER NAME          $BILLED          QTY          NDC#          DRUG
=====
-----
DIVISION: DIVISION ONE
***** CHAMPVA INPATIENT *****
CVAPATIENT, TWO/xxxx          10750570B$          0/000009300476          02/13/10          C RT AC/N
02/13/10          POSTMASTER          45.00          180          06524328809          METFORMIN HCL 500MG TAB
CHAMPVA INPATIENT/DISCHARGE
CVAPATIENT, THREE/xxxx          10750570B$          0/000009300476          02/13/10          C RT AC/N
02/13/10          POSTMASTER          30.00          180          06524328809          METFORMIN HCL 500MG TAB
CHAMPVA INPATIENT/DISCHARGE
CHAMPVA INPATIENT
SUBTOTALS          75.00
RX COUNT          2
MEAN          37.50
***** CHAMPVA NON-BILLABLE PRODUCT*****
CVAPATIENT, ONE/xxxx          10750570B$          0/000009300476          02/13/10          C RT AC/N
02/13/10          POSTMASTER          20.00          180          06524328809          DOCUSATE NA 100MG CA
ec CHAMPVA DRUG NOT BILLABLE
Fill Per Provider
PSOUSER, ONE
SUB-TOTALS          20.00
RX COUNT          1
MEAN          20.00
CHAMPVA NON-BILLABLE PRODUCT
SUBTOTALS          20.00
RX COUNT          1
MEAN          20.00
***** CHAMPVA PARTIAL FILL *****

```

OPCVA, TWO/272P	2719140	0/N/A	07/27/11	W ** AC/N	
07/27/11	PSOUSER, THREE	8.18	60	51111048893	ACETAMINOPHEN 325MG TAB
eC:CHAMPVA-DRUG NON BILLABLE					
CHAMPVA Partial Fill					
OPCVA, TWO/272P	2719141	0/000004315966	07/27/11	W ** AC/N	
07/27/11	PSOUSER, THREE	8.02	1	58177032404	NITROGLYCERIN 0.4MG SL T
79:Refill Too Soon					
CHAMPVA Partial Fill					
PSOUSER, ONE					
SUBTOTALS 16.20					
RX COUNT 2					
MEAN 8.10					
TCOUSER, TWO/265P	2719348	0/N/A	09/08/11	W ** AC/N	
09/08/11	PSOUSER, FOUR	8.00	1	51111048893	ACETAMINOPHEN 325MG TAB
CHAMPVA Partial Fill					
PSOUSER, TWO					
SUBTOTALS 8.00					
RX COUNT 1					
MEAN 8.00					
TCOUSER, TWO/265P	2719354	0/000004316183	09/08/11	W ** AC/N	
09/08/11	PSOUSER, FOUR	23.58	30	00052047260	CALCIFEDIOL 20MCG CAPS
79:Refill Too Soon					
22:M/I Dispense As Written (DAW)/Product Selection Code					
23:M/I Ingredient Cost Submitted					
24:M/I SALES TAX					
25:M/I Prescriber ID					
26:M/I Unit Of Measure					
CHAMPVA Partial Fill					
PSOUSER, FIVE					
SUBTOTALS 23.58					
RX COUNT 1					
MEAN 23.58					
CHAMPVA PARTIAL FILL					
SUBTOTALS 47.78					
RX COUNT 4					
MEAN 11.95					
***** CHAMPVA REJECT OVERRIDE *****					
CHAMPVA REJECT OVERRIDE					
SUBTOTALS 0.00					

```

RX COUNT                                0
MEAN                                    0.00

***** TRICARE INPATIENT *****

OPPATIENT,TRIONE/XXXX          10750XXXX$      0/000009300XXX    09/10/10      C RT AC/N
09/10/10          POSTMASTER          45.00          180          06XXX3XXXXX          METFORMIN HCL 500MG TAB
TRICARE Inpatient/Discharge

TRICARE INPATIENT
SUBTOTALS                                45.00
RX COUNT                                  1
MEAN                                      45.00

***** TRICARE NON-BILLABLE PRODUCT*****

OPPATIENT,TRITWO/XXXX          1075XXXXX$      0/00000930XXXX    09/10/10      C RT AC/N
09/10/10          OPPHARM,ONE          20.00          180          06XXX3XXXXX          DOCUSATE NA 100MG CA
eT TRICARE DRUG NOT BILLABLE
Fill Per Provider

OPPHARM,ONE
SUB-TOTALS                                20.00
RX COUNT                                  1
MEAN                                      20.00

TRICARE NON-BILLABLE PRODUCT
SUBTOTALS                                20.00
RX COUNT                                  1
MEAN                                      20.00

***** TRICARE REJECT OVERRIDE *****

OPPATIENT,TRIFOUR/XXXX          107XXXX0B$      0/00000930XXXX    09/10/10      C RT AC/N
09/10/10          OPPHARM,ONE          20.00          180          06524328809          DOCUSATE NA 100MG CA
50:Non-Matched Pharmacy Number
25:M/I Prescriber ID

OPHARM,ONE
SUB-TOTALS                                20.00
RX COUNT                                  1
MEAN                                      20.00

TRICARE REJECT
SUBTOTALS                                20.00
RX COUNT                                  1
MEAN                                      20.00

DIVISION: DIVISION ONE          -----

```

SUBTOTALS 180.00
 RX COUNT 6
 MEAN 30.00

DIVISION: DIVISION TWO

***** CHAMPVA INPATIENT *****
 CVAPATIENT, TWO/xxxx 10750570B\$ 0/000009300476 02/13/10 C RT AC/N
 02/13/10 POSTMASTER 10.00 180 06524328809 METFORMIN HCL 500MG TAB
 CHAMPVA INPATIENT/DISCHARGE
 SUB-TOTALS 10.00
 RX COUNT 1
 MEAN 10.00

CVAPATIENT, THREE/xxxx 10750570B\$ 0/000009300476 02/13/10 C RT AC/N
 02/13/10 POSTMASTER 40.00 180 06524328809 METFORMIN HCL 500MG TAB
 CHAMPVA INPATIENT/DISCHARGE
 SUB-TOTALS 40.00
 RX COUNT 1
 MEAN 40.00

CHAMPVA INPATIENT
 SUBTOTALS 50.00
 RX COUNT 2
 MEAN 25.00

***** CHAMPVA NON-BILLABLE PRODUCT *****
 CVAPATIENT, ONE/xxxx 10750570B\$ 0/000009300476 02/13/10 C RT AC/N
 02/13/10 POSTMASTER 60.00 180 06524328809 DOCUSATE NA 100MG CA
 ec CHAMPVA DRUG NOT BILLABLE
 Fill Per Provider
 OPUSER, SIX
 SUB-TOTALS 60.00
 RX COUNT 1
 MEAN 60.00

CHAMPVA NON-BILLABLE PRODUCT
 SUBTOTALS 60.00
 RX COUNT 1
 MEAN 60.00

***** CHAMPVA PARTIAL FILL *****
 OPCVA, TWO/272P 2719140 0/N/A 07/27/11 W ** AC/N
 07/27/11 OPUSER, THREE 8.18 60 51111048893 ACETAMINOPHEN 325MG TAB
 eC:CHAMPVA-DRUG NON BILLABLE

```

CHAMPVA Partial Fill
OPCVA,TWO/272P          2719141          0/000004315966    07/27/11          W ** AC/N
07/27/11          OPUSER,THREE          8.02          1          58177032404          NITROGLYCERIN 0.4MG SL T
79:Refill Too Soon
CHAMPVA Partial Fill

          OPUSER,TWO
          SUBTOTALS          16.20
          RX COUNT          2
          MEAN          8.10

CHAMPVA PARTIAL FILL
SUBTOTALS          16.20
RX COUNT          2
MEAN          8.10

***** CHAMPVA REJECT OVERRIDE *****

CHAMPVA REJECT OVERRIDE
SUBTOTALS          0.00
RX COUNT          0
MEAN          0.00

***** TRICARE INPATIENT *****

OPPATIENT,TRISIX/XXXX          107XXXXXX$          0/00000930XXXX    09/10/10          C RT AC/N
09/10/10          POSTMASTER          10.00          180          06XXXXXXXXXX          METFORMIN HCL 500MG TAB
PATIENT IS CURRENTLY ON A WEEKEND PASS AND WILL RETURN ON MONDAY 09/13/2010.

OPPATIENT,TRISEVEN/XXXX          107XXXXXB$          0/0000093XXXXX    09/10/10          C RT AC/N
09/10/10          POSTMASTER          40.00          180          06XXXXXXXXXX          METFORMIN HCL 500MG TAB
PATIENT IS CURRENTLY ON A WEEKEND PASS AND WILL RETURN ON MONDAY 09/13/2010.

          TRICARE INPATIENT
          SUB-TOTALS          50.00
          RX COUNT          2
          MEAN          50.00

***** TRICARE NON-BILLABLE PRODUCT *****

OPPATIENT,TRIEIGHT/XXXX          107XXXXXX$          0/000009300XXX    09/10/10          C RT AC/N
09/10/10 OPPHARM,THREE          60.00          180          06XXX3XXXXX          DOCUSATE NA 100MG CA
eT TRICARE DRUG NOT BILLABLE
Fill Per Provider

          OPHRAM,THREE
          SUBTOTALS          60.00
          RX COUNT          1

```

```

MEAN 60.00
TRICARE NON-BILLABLE PRODUCT
SUBTOTALS 60.00
RX COUNT 1
MEAN 60.00
***** TRICARE REJECT OVERRIDE *****
OPPATIENT, TRININE/XXXX 107XXXXXX$ 0/00000930XXXX 09/10/10 C RT AC/N
09/10/10 OPHARM, TWO 20.00 180 06XXXXXXXXX METFORMIN HCL 500MG TAB
Claim ID: VA2005-056XXXX-XXXXXX-0007XXX
50:Non-Matched Pharmacy Number
25:M/I Prescriber ID
OPPHARM, TWO
SUBTOTALS 20.00
RX COUNT 1
MEAN 20.00
TRICARE REJECT
SUBTOTALS 20.00
RX COUNT 1
MEAN 20.00
DIVISION: DIVISION TWO -----
SUBTOTALS 200.00
RX COUNT 7
MEAN 28.57
-----
GRAND TOTALS 380.00
RX COUNT 13
MEAN 29.23
-----
REPORT HAS FINISHED
Press RETURN to continue, '^' to exit:

```

TRICARE/CHAMPVA Reject Processing

The Third Party Payer Rejects - Worklist [PSO REJECTS WORKLIST] and Third Party Payer Rejects - View/Process [PSO REJECTS VIEW/PROCESS] options have been modified in the following manner:

1. Display of non-DUR/RTS rejects

- Non-DUR/RTS TRICARE and CHAMPVA rejections each will be segregated at the end of the displayed information. They will be denoted with a "TRICARE - Non-DUR/RTS" or "CHAMPVA - Non-DUR/RTS" header. This header remains regardless of whether the GI - Group by Insurance action is toggled on or off. The TRICARE and CHAMPVA sections sort in the same manner as the main sort for non-TRICARE/CHAMPVA prescriptions (by Rx, drug, patient).

```

Insurance Rejects-Worklist      Aug 13, 2008@16:04:05      Page: 1 of 1
Division : ALBANY ISC
Selection : ALL UNRESOLVED REJECTS
# R# #      PATIENT (ID) [^]      DRUG      REASON
1 101238    ECMEIBTEST,ONE (5566)    MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
Payer Message:
2 100739    ECMEPAT, TWO (8887)      BENZTROPINE 2MG TAB 79 :REFILL TOO SO
Payer Message:
3 101960    OPTRICARE, ONE (4789)    ACETAZOLAMIDE 250MG 79 :REFILL TOO SO
Payer Message:
                                CHAMPVA - Non-DUR/RTS
4 101358    OPCVACARE, ONE (7895)    BACLOFEN 10MG TABS 07 :M/I Cardholde
Payer Message:
5 100923    OPCVACARE, TWO (4933)    LORAZEPAM 1MG TAB 07 :M/I Cardholde
Payer Message:
                                TRICARE - Non-DUR/RTS
6 101980    OPTRICARE, ONE (4789)    DANTROLENE 25MG CAP 14 :M/I Eligibili
Payer Message:

Select the entry # to view or ?? for more actions
DR  Sort by Drug      RE  Sort by Reason      RX  Sort by Prescription
PA  Sort by Patient   RF  Screen Refresh      GI  Group by Insurance
Select: Quit//

```

- TRICARE and CHAMPVA DUR/RTS rejects display with all other DUR/RTS rejects. See the boxed text in the example below. Sequences 5 and 9 are rejects for the same prescription. Also note that in the following example GI - Group by Insurance action is toggled OFF.

```

Insurance Rejects-Worklist      Aug 13, 2008@16:10:22      Page: 1 of 1
Division : ALBANY ISC
Selection : ALL UNRESOLVED REJECTS
# R# #      PATIENT (ID) [^]      DRUG      REASON
1 101238    ECMEIBTEST,ONE (5566)    MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
Payer Message:
2 100739    ECMEPAT, TWO (8887)      BENZTROPINE 2MG TAB 79 :REFILL TOO SO
Payer Message:
3 101358    OPCVACARE, ONE (7895)    BACLOFEN 10MG TABS 07 :REFILL TOO SO
Payer Message:
4 101960    OPTRICARE, ONE (4789)    ACETAZOLAMIDE 250MG 79 :REFILL TOO SO
Payer Message:
5 101981    OPTRICARE, ONE (4789)    ATENOLOL 100MG TAB 79 :REFILL TOO SO
Payer Message:
                                CHAMPVA - Non-DUR/RTS
6 101358    OPCVACARE, ONE (7895)    BACLOFEN 10MG TABS 07 :M/I Cardholde
Payer Message:
7 100923    OPCVACARE, TWO (4933)    LORAZEPAM 1MG TAB 07 :M/I Cardholde
Payer Message:
                                TRICARE - Non-DUR/RTS
8 101980    OPTRICARE, ONE (4789)    DANTROLENE 25MG CAP 14 :M/I Eligibili
Payer Message:
9 101981    OPTRICARE, ONE (4789)    ATENOLOL 100MG TAB 14 :M/I Eligibili
Payer Message:

Select the entry # to view or ?? for more actions
DR  Sort by Drug      RE  Sort by Reason      RX  Sort by Prescription
PA  Sort by Patient   RF  Screen Refresh      GI  Group by Insurance
Select: Quit//

```

When GI - Group by Insurance action is toggled ON, the headers "TRICARE" and "CHAMPVA" display, and these "TRICARE" and "CHAMPVA" sections sort alphabetically within RTS/DUR insurances. These TRICARE/CHAMPVA sections are separate from the Non-DUR/RTS section that displays at the end of the listing.

(This page included for two-sided copying.)

Example with GI action toggled on:

```

Insurance Rejects-Worklist   Aug 13, 2008@16:12:46           Page:   1 of   1
Division   : ALBANY ISC
Selection  : ALL UNRESOLVED REJECTS GROUPED BY INSURANCE
# R#      PATIENT (ID) [^]      DRUG      REASON
          BLUE CROSS BLUE SHIELD
1 100739   ECMEPAT,TWO(8887)           BENZTROPINE 2MG TAB  79 :REFILL TOO SO
Payer Message:
          CHAMPVA
2 101358   OPCVACARE,ONE(7895)        BACLOFEN 10MG TABS  07 :REFILL TOO SO
Payer Message:
          TRICARE
3 101960   OPTRICARE,ONE(4789)        ACETAZOLAMIDE 250MG 79 :REFILL TOO SO
Payer Message:
          ZENITH ADMINISTRATORS
4 101238   ECMEIBTEST,ONE(5566)       MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
Payer Message:
5 101981   OPTRICARE,ONE(4789)        ATENOLOL 100MG TAB  79 :REFILL TOO SO
Payer Message:
          CHAMPVA - Non-DUR/RTS
6 101358   OPCVACARE,ONE(7895)        BACLOFEN 10MG TABS  07 :M/I Cardholde
Payer Message:
7 100923   OPCVACARE,TWO(4933)        LORAZEPAM 1MG TAB   07 :M/I Cardholde
Payer Message:
          TRICARE - Non-DUR/RTS
8 101980   OPTRICARE,ONE(4789)        DANTROLENE 25MG CAP  14 :M/I Eligibili
Payer Message:
9 101981   OPTRICARE,ONE(4789)        ATENOLOL 100MG TAB  14 :M/I Eligibili
Payer Message:
          Select the entry # to view or ?? for more actions
DR  Sort by Drug      RE  Sort by Reason      RX  Sort by Prescription
PA  Sort by Patient   RF  Screen Refresh      GI  Group by Insurance
Select: Quit//
  
```

The TRI - Show/Hide TRICARE and CVA - Show/Hide CHAMPVA toggle actions appear on the hidden menu on the Insurance Rejects screen. When the TRI action is toggled to Show, TRICARE Non-DUR/RTS rejects will automatically display at the end of the listing. Toggling the TRI action to Hide will remove them from the screen. The CVA action behaves likewise for CHAMPVA Non-DUR/RTS rejects.

Example with TRICARE and CHAMPVA rejects displayed:

```

Insurance Rejects-Worklist   Aug 13, 2008@16:04:05           Page:   1 of   1
Division   : ALBANY ISC
Selection  : ALL UNRESOLVED REJECTS
# R#      PATIENT (ID) [^]      DRUG      REASON
          ECMEIBTEST,ONE(5566)
1 101238   ECMEIBTEST,ONE(5566)       MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
Payer Message:
2 100739   ECMEPAT,TWO(8887)           BENZTROPINE 2MG TAB  79 :REFILL TOO SO
Payer Message:
3 101960   OPTRICARE,ONE(4789)        ACETAZOLAMIDE 250MG 79 :REFILL TOO SO
Payer Message:
          CHAMPVA - Non-DUR/RTS
4 101358   OPCVACARE,ONE(7895)        BACLOFEN 10MG TABS  07 :M/I Cardholde
Payer Message:
          TRICARE - Non-DUR/RTS
5 101980   OPTRICARE,ONE(4789)        DANTROLENE 25MG CAP  14 :M/I Eligibili
Payer Message:
          Select the entry # to view or ?? for more actions
  
```


DR Sort by Drug RE Sort by Reason RX Sort by Prescription
PA Sort by Patient RF Screen Refresh GI Group by Insurance

Select: Quit// ??

The following actions are also available:

TRI Show/Hide TRICARE	CVA Show/Hide CHAMPVA	FS First Screen
+ Next Screen	LS Last Screen	SL Search List
- Previous Screen	GO Go to Page	ADPL Auto Display (On/Off)
UP Up a Line	RD Re Display Screen	PT Print List
DN Down a Line	PS Print Screen	QU Quit

Enter RETURN to continue or '^' to exit:

(This page included for two-sided copying.)

Example of TRICARE and CHAMPVA rejects removed from display:

Insurance Rejects-Worklist Aug 13, 2008@16:04:05 Page: 1 of 1

Division : ALBANY ISC

Selection : ALL UNRESOLVED REJECTS

#	Rx#	PATIENT (ID) [^]	DRUG	REASON
1	101238	ECMEIBTEST,ONE(5566)	MEDROXYPROGESTRONE 1	79 :REFILL TOO SO
Payer Message:				
2	100739	ECMEPAT,TWO(8887)	BENZTROPINE 2MG TAB	79 :REFILL TOO SO
Payer Message:				
3	101960	OPTRICARE,ONE(4789)	ACETAZOLAMIDE 250MG	79 :REFILL TOO SO
Payer Message:				

Select the entry # to view or ?? for more actions

DR Sort by Drug RE Sort by Reason RX Sort by Prescription
PA Sort by Patient RF Screen Refresh GI Group by Insurance

Select: Quit// ??

The following actions are also available:

TRI	Show/Hide TRICARE	CVA	Show/Hide CHAMPVA	FS	First Screen
+	Next Screen	LS	Last Screen	SL	Search List
-	Previous Screen	GO	Go to Page	ADPL	Auto Display(On/Off)
UP	Up a Line	RD	Re Display Screen	PT	Print List
DN	Down a Line	PS	Print Screen	QU	Quit

Enter RETURN to continue or '^' to exit:

2. Processing of TRICARE and CHAMPVA Rejections – TRICARE/CHAMPVA Eligible Bypass/Override Functions

- A bypass function is provided to allow continued processing of prescriptions for TRICARE and CHAMPVA eligible inpatients who's Patient status = Inpatient at the time the prescription is issued.

In the following example a patient who has been admitted into a VA hospital (Patient status = Inpatient) is allowed to go on a weekend "pass" and issued outpatient medications such as OTC drugs or supplies for the weekend. The system displays the Non-Billable Reason "TRICARE INPATIENT/DISCHARGE" on the screen. The display of this Non-Billable Reason is due to the patient having Patient status = Inpatient, the patient is a TRICARE patient with TRICARE Insurance and an outpatient medication, OTC or Supply was issued.

```
ISSUE DATE: OCT 31,2010// (OCT 31, 2010)
FILL DATE: (10/31/2010 - 11/01/2011): OCT 31,2010// (OCT 31, 2010)
Nature of Order: WRITTEN// W
WAS THE PATIENT COUNSELED: NO// NO

Do you want to enter a Progress Note? No// NO

Rx # XXXX885 10/31/10
TRICARE,ONE(XXX-XX-XXXX) #3
TAKE 1 BY MOUTH 9

ACETAMINOPHEN 160MG/5ML ELIXIR (OZ)
VHAPROVIDER,ONE JOHN,DOE
# of Refills: 5

Is this correct? YES//

TRICARE INPATIENT/DISCHARGE

Another New Order for TRICARE,ONE? YES//
```

The following is a sample of the View Prescription ECME Log update. The Non-Billable Reason “TRICARE INPATIENT/DISCHARGE” is now displayed on the View Prescription ECME Log. The TRICARE INPATIENT/DISCHARGE status allows the system to record why a TRICARE prescription was allowed to be bypassed.

Example: View Prescription ECME Log entry: TRICARE INPATIENT/DISCHARGE

```
Rx View (Active)           Oct 26, 2010@17:07:34           Page: 4 of 4
TRICARE, ONE                <NO ALLERGY ASSESSMENT>
  PID: XXX-XX-XXXX           Ht (cm) : _____ (_____)
  DOB: MAR 16,19xx (xx)     Wt (kg) : _____ (_____)
+
-----
Label Log:
#   Date       Rx Ref           Printed By
=====
There are NO Labels printed.

ECME Log:
#   Date/Time   Rx Ref           Initiator Of Activity
=====
1   10/26/10@16:04:50  ORIGINAL        JOHN,DOE
Comments: TRICARE-Not ECME Billable: TRICARE INPATIENT/DISCHARGE

Enter ?? for more actions

Select Action:Quit//
```

In a similar situation where a prescription is issued to a CHAMPVA patient with Patient status = Inpatient, the Non-Billable Reason “CHAMPVA INPATIENT/DISCHARGE” would be displayed on the reject processing screen and in the View Prescription ECME Log.

TRICARE/CHAMPVA Eligible Outpatient Override Function

- **An override function is provided to allow continued processing of prescriptions for TRICARE or CHAMPVA eligible outpatients when a rejected response is received from the TRICARE or CHAMPVA payer/PBM.**
- The Reject Action prompt will default to “Quit”. If the Q (Quit) action is selected, the rejected claim will go to the TRICARE or CHAMPVA section, as appropriate, of the Pharmacy Third Party Payer Rejects – Worklist. If the D (Discontinue) action is selected, the next prompt “Nature of Order” will default to “Service Reject”. The I (Ignore) action is available if the user holds the “PSO TRICARE/CHAMPVA” security key and if selected, continued processing will occur.
- The Reject Action prompt will be updated to a default of “Quit”.

Example of Reject Notification Screen Non-DUR/RTS with the default action of D (Discontinue)

```
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response
E REJECTED
  21 - M/I Product/Service ID

      *** TRICARE - REJECT RECEIVED FROM THIRD PARTY PAYER ***
-----
Division : XXXX DIVISION                NPI#: XXXXXXXXXXXX
Patient  : TRICARE,ONE(XXXX)            Sex: M             DOB: OCT 1,19XX(XX)
Rx/Drug  : XXX5341/0 - AMOXICILLIN 250MG CA    ECME#: 000002345678
Reject(s): M/I Product/Service ID (21) Received on NOV 01, 2010@09:30:03.

Insurance : EXPRESS SCRIPT                Contact:
Group Name : TRICARE                      Group Number: DODA
-----
Select one of the following:

I          (I)GNORE - FILL Rx WITHOUT CLAIM SUBMISSION
D          (D)iscontinue - DO NOT FILL PRESCRIPTION
Q          (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(I)gnore, (D)iscontinue, (Q)uit: Q/Discontinue
Nature of Order: SERVICE REJECT//
Requesting PROVIDER: VHAPROVIDER,ONE      111      PHYSICIAN
```

In the following example a prescription is rejected from the Third Party Payer with a reject code of (88) DUR REJECT. The pharmacist has the option to Discontinue, Ignore, Override or Quit.



The Ignore action is only displayed for holders of the PSO TRICARE/CHAMPVA security key.

Example of Reject Notification Screen DUR/RTS

```
88 - DUR Reject Error

*** TRICARE - REJECT RECEIVED FROM THIRD PARTY PAYER ***
-----
Division : XXXXXX                               NPI#: 9999999999
Patient  : OPPATIENT,TRICARE (XXXX)           Sex: F DOB: OCT 17,19XX(XX)
Rx/Drug  : 2718XXX/0 - BALNETAR 7.5 OZ        ECME#: 00000431XXXX
Reject(s): DUR REJECT (88). Received on NOV 01, 2010@07:08:44.

Insurance : EXPRESS SCRIPTS                     Contact:
Group Name : TRICARE                           Group Number: DODA
-----
Select one of the following:

O          (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES
I          (I)GNORE - FILL Rx WITHOUT CLAIM SUBMISSION
D          (D)ISCONTINUE - DO NOT FILL PRESCRIPTION
Q          (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O)VERRIDE, (I)gnore, (D)iscontinue, (Q)uit: Q// i  (I)GNORE - FILL Rx WITHOUT CLAI
M SUBMISSION
You are bypassing claims processing. Do you wish to continue? NO// y YES
```

- For Non-Billable TRICARE or CHAMPVA rejects, a Non-Billable Notification Screen is provided to allow continued processing of prescriptions. The Reject Action prompt will default to “Discontinue”. If the action D (Discontinue) is selected, the prompt “Nature of Order” will default to “Service Reject”. The I (Ignore) action is available if the user holds the “PSO TRICARE/CHAMPVA” security key and if it is selected, continued processing will occur. If the action Q (Quit) is selected, the Non-Billable TRICARE or CHAMPVA eligible prescription will go to the **Pharmacy Third Party Payer Rejects – Worklist** utilizing either Reject Code “eT” with reject description “TRICARE-DRUG NON BILLABLE” or Reject Code “eC” with reject description “CHAMPVA-DRUG NON BILLABLE.” (The reject codes “eT” and “eC” are for use internal to the VistA system only and have no relation to any NCPDP reject code listing.) The new entry will be displayed in the TRICARE or CHAMPVA section of the **Pharmacy Third Party Payer Rejects – Worklist**, as applicable.

Example of Pharmacy Third Party Payer Rejects – Worklist

```

Insurance Rejects-Worklist   Oct 31, 2010@09:15:58           Page:    2 of    5
Division   : ALBANY ISC
Selection  : ALL UNRESOLVED REJECTS
# Rx#      PATIENT (ID)  [^]          DRUG              REASON
Payer Message:
                TRICARE - Non-DUR/RTS
13 102xxx   OPTRICARE,ONE(4789)   DIAZOXIDE 300MG INJ  eT :TRICARE-DRUG NON
Payer Message:
14 102xxx   OPTRICARE,ONE(4789)   MANNITOL 15% S.S. LV 22 :M/I Dispense
Payer Message:
15 1028xxx  OPTRICARE,ONE(4789)   METHOCARBAMOL 750MG 34 :M/I Submissio
Payer Message:
16 103xxx   OPTRICARE,ONE(4789)   BENZTROPINE 2MG TAB  07 :M/I Cardholde
Payer Message:
17 103xxx   OPTRICARE,ONE(4789)   DEXAMETHASONE 0.5MG 07 :M/I Cardholde
Payer Message:
18 102xxx   TRICARE,ONLYTRICAR(3939) NEODECADRON OPHTMALI 07 :M/I Cardholde
Payer Message:
19 102xxx   TRICARE,ONLYTRICAR(3939) GENTAMICIN OPHTHALMI 07 :M/I Cardholde
Payer Message:
+          Select the entry # to view or ?? for more actions
DR  Sort by Drug      RE  Sort by Reason      RX  Sort by Prescription
PA  Sort by Patient   RF  Screen Refresh      GI  Group by Insurance
Select: Next Screen//

```

- The Non-Billable TRICARE prescriptions will appear on the Reject Information screen shown in the example below once the TRICARE Non-Billable claim has been selected from the Pharmacy Third Party Payer Rejects – Worklist. The screen will display:
- ECME# field – will be blank
- Insurance Information – will be blank
- Reject code section will have the reject code eT and status will state “NO CLAIM SUBMITTED”
- Available Actions will be DC – Discontinue Rx, VW -View Rx, MP – Medication Profile, FIL – Fill Rx and IGN Ignore Reject (FIL and IGN will require PSO TRICARE/CHAMPVA Security key)
- Available Hidden Actions will be COM – Add Comments, ED – Edit Rx and all other standard List Manager hidden actions
- If the action DC is chosen, the system will discontinue the prescription and the prompt “Nature of Order” will default to “SERVICE REJECT”
- The following actions will **not** be selectable when processing a TRICARE or CHAMPVA eligible Non-Billable reject: Resubmit Claim (RES)/Change Suspense Date (CSD)/Submit Override Codes (OVR)/Submit Clairf Code (CLA)/Submit Prior Auth (PA)/Suspense Date Calculation (SDC)/Submit Mult Actions (SMA).. If selected for a TRICARE reject, an error message will appear: “[action] not allowed for TRICARE Non-Billable claim”. If selected for a CHAMPVA reject, an error message will appear: “[action] not allowed for CHAMPVA Non-Billable claim”. The only actions available are to Discontinue, Fill the prescription, View prescription or Medication Profile.

Example of Non-Billable Product Reject Information Screen

```

Reject Information (TRICARE) Oct 30, 2010@10:15:01 Page: 1 of 1
Division : ECME DIVISION NPI#: XXXXXXXXXXXX
Patient : TRICARE,TWO(XXX-XX-XXXX) Sex: M DOB: JUL 1,19XX(XX)
Rx# : ###4928/0 ECME#: Date of Service: Mar 16, 2009
CMOP Drug: DOCUSATE NA 100MG CA NDC Code: 54629-0600-01

REJECT Information (TRICARE)
Reject Type : TRICARE DRUG NOT BILLABLE(eT) received on OCT 17, 2010@13:19:22
Reject Status : NO CLAIM SUBMITTED
Payer Adtl Msg : Not ECME Billable: DRUG NOT BILLABLE
Reason Code :
DUR Text :

COMMENTS
- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK,ONE)

INSURANCE Information
Insurance :
Contact :
BIN :
Group Number :
Cardholder ID :

Enter ?? for more actions
VW View Rx FIL Fill Rx CSD Change Suspense Date
MP Medication Profile DC Discontinue Rx IGN Ignore Reject
RES Resubmit Claim OVR Submit Override Codes
Select Item(s): Next Screen //

```

Example of Non-Billable Product Reject Information Screen displaying the action RES (Resubmit Claim) error message

```

Reject Information (TRICARE) Nov 11, 2010@12:37:30 Page: 1 of 2
Division : ECME DIVISION NPI#:
Patient : OPPATIENT,TRICARE(XXX-XX-XXXX) Sex: F DOB: OCT 7,19XX(XX)
Rx# : 27XXXXX/0 ECME#: Date of Service: Sep 16, 2010
Drug : ALUMINUM HYDROXIDE GEL 320MG/5ML SUSP NDC Code: 00054-3035-63

REJECT Information (TRICARE)
Reject Type : TRICARE DRUG NOT BILLABLE(eT) received on SEP 16, 2010@13:07:12
Reject Status : NO CLAIM SUBMITTED
Payer Adtl Msg : Not ECME Billable: DRUG NOT BILLABLE
Reason Code :
DUR Text :

COMMENTS
- SEP 16, 2010@13:07:12 - Transferred by (XXXXXXXX,XXXX)

INSURANCE Information
Insurance :
Contact :
BIN :
Group Number :
+ RES not allowed for TRICARE Non-Billable claim.
VW View Rx FIL Fill Rx CSD Change Suspense Date
MP Medication Profile DC Discontinue Rx IGN Ignore Reject
RES Resubmit Claim OVR Submit Override Codes
Select Item(s): Next Screen//

```

Reject Information Screen – Electronic Signature and TRICARE/CHAMPVA Justification



This action requires the security key PSO TRICARE/CHAMPVA.

- A user must hold the “PSO TRICARE/CHAMPVA” security key to perform the Fill Rx (FIL) and Ignore Reject (IGN) actions on the Third Party Payer Rejects – Worklist and the “Ignore” action on the TRICARE or CHAMPVA Reject Notification screen. If the user holds the security key “PSO TRICARE/CHAMPVA”, the prompt will display: “You are bypassing claims processing. Do you wish to continue?” If the user enters (No=Default), the user will return to the reject notification screen. If the user selects Yes to continue, the system will mimic the current Ignore action/functionality and allow processing of the prescription. The user will be prompted to enter their electronic signature code and asked to enter data into the TRICARE Justification or CHAMPVA Justification field, which is required. The user will be allowed to “^” out of the process. If the user opts to “^” out of the process, they will be taken back to the Reject Information screen prompt.

In the following example a TRICARE patient with Outpatient status submits a prescription for processing and a rejected response is received from the TRICARE payer/PBM. The pharmacist initially sends the prescription to the Third Party Payer Rejects – Worklist then later decides to finish processing the prescription and chooses the FIL action.

Example of Reject Information Screen – Electronic Signature and TRICARE Justification

```

Reject Information (TRICARE) Sep 30, 2010@10:25:13 Page: 1 of 1
Division : ECME DIVISION NPI#: XXXXXXXXXXXX
Patient : TRICARE,TWO (XXX-XX-XXXX) Sex: M DOB: JAN 1,19XX (XX)
Rx# : XXX4928/0 ECME#: 000001231234 Date of Service: Feb 08, 2009
CMOP Drug: ACARBOSE 25MG TAB NDC Code: 00026-2863-52

REJECT Information (TRICARE)
Reject Type : M/I Cardholder ID (07) received on JUL 10, 2010@12:22:10
Reject Status : OPEN/UNRESOLVED - E REJECTED
Payer Adtl Msg :
Reason Code :
DUR Text :

COMMENTS
- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK,ONE)

INSURANCE Information
Insurance : EXPRESS SCRIPTS
Contact :
BIN : 741852
Group Number : DODA
Cardholder ID : XXXXXXXX

Enter ?? for more actions
VW View Rx FIL Fill Rx CSD Change Suspense Date
MP Medication Profile DC Discontinue Rx IGN Ignore Reject
RES Resubmit Claim OVR Submit Override Codes
Select Item(s): Quit/FIL

You are bypassing claims processing. Do you wish to continue (Y/N)? No/Yes
    
```


Enter your Current Signature Code:
TRICARE Justification:

- If the user does not hold the security key “PSO TRICARE/CHAMPVA”, an on screen alert to the user will display “Action Requires <PSO TRICARE/CHAMPVA> security key” as displayed in the below example. The user will need to press any key to return to the Reject Information screen.

(This page included for two-sided copying.)

Example of Reject Information Screen – Security Key – ALERT

```

Reject Information (TRICARE) Sep 30, 2010@10:25:13 Page: 1 of 1
Division : ECME DIVISION NPI#: XXXXXXXXXXXX
Patient : TRICARE,TWO(XXXX) Sex: M DOB: JAN 1,19XX(XX)
Rx# : XXX4928/0 ECME#: 000001231234 Date of Service: Feb 08, 2009
CMOP Drug: ACARBOSE 25MG TAB NDC Code: 00026-2863-52

REJECT Information (TRICARE)
Reject Type : M/I Cardholder ID (07) received on JUL 10, 2010@12:22:10
Reject Status : OPEN/UNRESOLVED - E REJECTED
Payer Adtl Msg :
Reason Code :
DUR Text :

COMMENTS
- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK,ONE)

INSURANCE Information
Insurance : EXPRESS SCRIPTS
Contact :
BIN : 741852
Group Number : DODA
Cardholder ID : XXXXXXXX
+ Action Requires <PSO TRICARE/CHAMPVA> Security Key
VW View Rx FIL Fill Rx CSD Change Suspense Date
MP Medication Profile DC Discontinue Rx IGN Ignore Reject
RES Resubmit Claim OVR Submit Override Codes
Select Item(s): Next Screen//

```

- The person that resolves TRICARE and CHAMPVA non-DUR/RTS rejects is dependent upon the type of reject. Dispense As Written (DAW) reject code 22 can be resolved by the pharmacy staff by editing the prescription and entering the appropriate DAW code which results in a claims resubmission. Other insurance-related rejects (missing eligibility or cardholder ID number) are resolved by the Outpatient Pharmacy Electronic Claims Coordinator (OPECC). Once the rejection has been resolved, the Reject Information screen under the pharmacy reject worklist shows the status of the prescription as E PAYABLE. At this point the user may select the FIL action that will prompt for label print.

```

Reject Information (TRICARE) Sep 30, 2010@10:25:13 Page: 1 of 1
Division : ECME DIVISION NPI#: XXXXXXXXXXXX
Patient : TRICARE,TWO(XXXX) Sex: M DOB: JAN 1,19XX(XX)
Rx# : XXX4928/0 ECME#: 000001231234 Date of Service: Feb 08, 2009
CMOP Drug: ACARBOSE 25MG TAB NDC Code: 00026-2863-52

```

REJECT Information (TRICARE)

```

Reject Type : M/I Cardholder ID (07) received on JUL 10, 2010@12:22:10
Reject Status : OPEN/UNRESOLVED - E REJECTED
Payer Adtl Msg :
Reason Code :
DUR Text :

```

COMMENTS

- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK,ONE)

INSURANCE Information

```

Insurance : EXPRESS SCRIPTS
Contact :
BIN : 741852
Group Number : DODA
Cardholder ID : XXXXXXXX

```

Enter ?? for more actions

```

VW View Rx          FIL Fill Rx          OVR Submit Override Codes
MP Medication Profile DC Discontinue Rx    CSD Change Suspense Date
Select Item(s): Quit// FIL Fill Rx
                  [Closing all rejections for prescription 102059:
                   07 - ...OK]

```

Print Label? ? YES//

Select LABEL PRINTER: HOME// UCX/TELNET Right Margin: 80//

- For rejects that remain in suspense, the user will be allowed to process the rejection as indicated above; however no labels will be printed until the prescription is pulled early or printed from suspense. Upon resolving the reject, the user will be notified of this information. CMOP prescriptions will function in the same manner.

Other Rejects

[PSO REJECTS WORKLIST]

Rejects under the OTHER REJECTS section of the screen contain non-clinical rejects and are resolved in the same manner as DUR/RTS rejects. The comments section denotes whether the reject was transferred automatically as is the case in the example below or "Transferred by OPECC" will denote those rejects where the OPECC manually transferred them to pharmacy for resolution.

The following example shows the user selecting to resolve sequence 16 from the Third Party Payer Rejects - Worklist option shown above. The user selects ED to edit the DAW code for the prescription, then resubmits the claim afterward. Since the claim was payable, both the RTS reject in sequence 13 and the DAW reject in sequence 16 were marked resolved. Also both are removed from the worklist after submission. The user then proceeds to Patient Prescription Processing option to view the ECME logs which show that claim resubmission was payable and that both rejects have been resolved.

```
Reject Information (UNRESOLVED) Jul 30, 2008@14:54:51      Page: 1 of 2
Division : CHEYENNE VAM&ROC                               NPI#: 1164471991
Patient  : OPPATIENT,FOUR(666-55-9987) Sex: M           DOB: OCT 20,1965(42)
Rx#      : 2055203/1      ECME#: 000001615102 Date of Service: Jul 15, 2008
CMOP Drug: DANAZOL 50MG CAP                               NDC Code: 00024-0304-06

REJECT Information
-----
Reject Type   : 22 - M/I Dispense As Written- received on JUL 30, 2008@14:32:16
Reject Status : OPEN/UNRESOLVED
Payer Adtl Msg :
Reason Code  :
DUR Text     :

OTHER REJECTS
-----
79 - Refill Too Soon

COMMENTS
-----
- JUL 30, 2008@14:32:16 - Automatically transferred due to override for reject
  code. (OPHARM,ONE)

+      Enter ?? for more actions
VW View Rx          IGN Ignore Reject          OVR Submit Override Codes
MP Medication Profile RES Resubmit Claim      CSD Change Suspense Date
Select: Next Screen// ed ED

Jul 30, 2008@14:54:53

Rx #: 2055203$e
(1) *Orderable Item: DANAZOL CAP,ORAL
(2)   CMOP Drug: DANAZOL 50MG CAP
(3)   *Dosage: 50 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: CAPSULE
      *Route: ORAL (BY MOUTH)
      *Schedule: BID
(4) Pat Instructions:
      SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
(5) Patient Status: OUTPT NON-SC
(6) Issue Date: 07/11/08          (7) Fill Date: 07/11/08
      Last Fill Date: 07/15/08 (Window)
Select Action: Next Screen// NEXT SCREEN
```

```

Last Release Date: (8) Lot #:
Expires: 07/12/09 MFG:
(9) Days Supply: 3 (10) QTY (CAP): 6
(11) # of Refills: 11 Remaining: 10
(12) Provider: OP PROVIDER, ONE
(13) Routing: MAIL (14) Copies: 1
(15) Clinic: Not on File
(16) Division: CHEYENNE VAM&ROC (442)
(17) Pharmacist:
(18) Remarks: New Order Created by copying Rx # 2055182.
(19) Counseling: NO
(20) Refill Data
(21) DAW Code: 0 - NO PRODUCT SELECTION INDICATED
Finished By: OPHARM, ONE
+ Enter ?? for more actions
DC (Discontinue) PR (Partial) RL (Release)
ED Edit RF (Refill) RN (Renew)
Select Action: Next Screen// 21
DAW CODE: 0// ?

OP Medications (SUSPENDED) Jul 30, 2008@14:54:55 Page: 2 of 3
OPPATIENT, FOUR
PID: 666-55-9987 Ht (cm) : _____ (_____)
DOB: OCT 20, 1965 (42) Wt (kg) : _____ (_____)
+

Answer with BPS NCPDP DAW CODE
Choose from:
0 NO PRODUCT SELECTION INDICATED
1 SUBSTITUTION NOT ALLOWED BY PRESCRIBER
2 SUBSTITUTION ALLOWED-PATIENT REQUESTED PRODUCT DISPENSED
3 SUBSTITUTION ALLOWED-PHARMACIST SELECTED PRODUCT DISPENSED
4 SUBSTITUTION ALLOWED-GENERIC DRUG NOT IN STOCK
5 SUBSTITUTION ALLOWED-BRAND DRUG DISPENSED AS A GENERIC
6 OVERRIDE
7 SUBSTITUTION NOT ALLOWED-BRAND DRUG MANDATED BY LAW
8 SUBSTITUTION ALLOWED-GENERIC DRUG NOT AVAILABLE IN MARKETPLACE
9 OTHER

DAW CODE: 0// 1 - SUBSTITUTION NOT ALLOWED BY PRESCRIBER
Are You Sure You Want to Update Rx 2055203? Yes// YES

OP Medications (SUSPENDED) Jul 30, 2008@14:55:21 Page: 2 of 3
OPPATIENT, FOUR
PID: 666-55-9987 Ht (cm) : _____ (_____)
DOB: OCT 20, 1965 (42) Wt (kg) : _____ (_____)
+

Last Release Date: (8) Lot #:
Expires: 07/12/09 MFG:
(9) Days Supply: 3 (10) QTY (CAP): 6
(11) # of Refills: 11 Remaining: 10
(12) Provider: OP PROVIDER, ONE
(13) Routing: MAIL (14) Copies: 1
(15) Clinic: Not on File
(16) Division: CHEYENNE VAM&ROC (442)
(17) Pharmacist:
(18) Remarks: New Order Created by copying Rx # 2055182.
(19) Counseling: NO
(20) Refill Data
(21) DAW Code: 1 - SUBSTITUTION NOT ALLOWED BY PRESCRIBER
Finished By: OPHARM, ONE
+ Enter ?? for more actions
DC (Discontinue) PR (Partial) RL (Release)
ED Edit RF (Refill) RN (Renew)
Select Action: Next Screen// ^

```

Reject Information (UNRESOLVED) Jul 30, 2008@14:55:28 Page: 1 of 2
 Division : CHEYENNE VAM&ROC NPI#: 1164471991
 Patient : OPPATIENT, FOUR (666-55-9987) Sex: M DOB: OCT 20, 1965 (42)
 Rx# : 2055203/1 ECME#: 000001615102 Date of Service: Jul 15, 2008
 CMOP Drug: DOCUSATE NA 100MG CA NDC Code: 54629-0600-01

REJECT Information

Reject Type : 22 - M/I Dispense As Written- received on JUL 30, 2008@14:32:16
 Reject Status : OPEN/UNRESOLVED
 Payer Adtl Msg :
 Reason Code :
 DUR Text :

OTHER REJECTS

79 - Refill Too Soon

COMMENTS

- JUL 30, 2008@14:32:16 - Automatically transferred due to override for reject code. (OPHARM, ONE)

+ Enter ?? for more actions

VW View Rx IGN Ignore Reject OVR Submit Override Codes
 MP Medication Profile RES Resubmit Claim CSD Change Suspense Date
 Select: Next Screen// RES Resubmit Claim

When you confirm, a new claim will be submitted for the prescription and this REJECT will be marked resolved.

Confirm? YES//

Prescription 2055203 successfully submitted to ECME for claim generation.

Claim Status:

IN PROGRESS-Waiting to start
 IN PROGRESS-Transmitting
 E PAYABLE

Please wait...

Insurance Rejects-Worklist Jul 30, 2008@14:38:38 Page: 2 of 3

Division : CHEYENNE VAM&ROC
 Selection : ALL UNRESOLVED REJECTS

#	Rx#	PATIENT (ID) [v]	DRUG	REASON
	Payer Message:			
13	2055202	OPPATIENT, FOUR (9987)	BACLOFEN 10MG TAB	79 :REFILL TOO SO
	Payer Message:			
14	2055155	OPPATIENT, FOUR (9987)	BENAZEPRIL HCL 40MG	79 :REFILL TOO SO
	Payer Message:			

OTHER REJECTS

15 2055134A OPPATIENT, FOUR (9987) CALCIUM GLUCONATE 65 22 :M/I Dispense
 Payer Message:

+ Select the entry # to view or ?? for more actions

DR Sort by Drug RE Sort by Reason RX Sort by Prescription

View ePharmacy Rx

[BPS RPT VIEW ECME RX]

The *View ePharmacy Rx* option allows you to view information for one prescription, combining information from Outpatient Pharmacy, Integrated Billing and ECME. More information on this report is available in the *Electronic Claims Management Engine (ECME) User Manual*.

(This page included for two-sided copying.)

MailMan Message for Open/Unresolved Rejects

When prescriptions remain on the Third Party Payer Reject – Worklist over the specified number of days, the system will send a Mailman Message. This message will be sent to the PSO REJECTS BACKGROUND MESSAGE mail group. Those users needing access to this information will need to be added manually to this mail group

The specified number of days referred to above is the number of days an uncommented reject can remain on the reject worklist without being included in the nightly reject worklist alert mail message. The number of days are defined in the EPHARMACY SITE PARAMETERS file (#52.86) in the REJECT WORKLIST DAYS field.

The following are the criteria for generating a Mailman message regarding a rejected claim:

- Prescription is active
- Prescription is unreleased
- Claim is on the Reject Worklist for specified number of days or greater, and
- Claim has no comments added within date range.

Adding a comment to the reject will automatically reset the clock for the alert. The specified number of days will be site configurable and stored in EPHARMACY SITE PARAMETERS file (#52.86). The initial patch default setting will be five (5) days; however, the site will be able to reset the parameter between one (1) and thirty (30) to generate the alert message. MailMan message will be sent as a Priority message, and there will be a separate MailMan message for each division. The following is an example of the message:

```
Subj: ePharmacy - OPEN/UNRESOLVED REJECTS LIST for ALBANY ISC  [#2680833]
07/25/08@11:52  53 lines
From: OUTPATIENT PHARMACY PACKAGE  In 'IN' basket.  Page 1  *New*
-----
The prescriptions listed below are third party electronically billable and can
not be filled until the rejection is resolved.  No action to resolve the
rejection has taken place within the past 1 days.

Please use the THIRD PARTY PAYER REJECTS WORKLIST option to resolve the
rejection or add a comment to the rejection.

Unresolved rejects will not be sent to CMOP or the local print queue for
filling.  They will continue to show on the rejects list until acted upon.

#  RX/FILL      PATIENT(ID)          DRUG                  FILL      REJECT
#  #            #                    #                    DATE      DATE
-----
1  100805/1      IBSCDC,TWO(2828)     SIMETHICONE 40MG TAB  6/5/08    6/5/08
   Reason:  79  :Refill Too Soon

2  101149/0      OPPATIENT,TH(7789)   DIAZEPAM 10MG S.T.   6/9/08    6/9/08
   Reason:  75  :Prior Authorization Required
   COMMENT: JUN 09, 2008@18:04:35 - Automatically transferred due to
   Override for reject code. (PHARM,ONE)

3  100928/0      IBPATIENT,QFO(567)   ETHACRYNIC ACID 50MG S.  5/7/08    6/23/08
   Reason:  31  :Submission Clarification Code
   COMMENT: JUN 23, 2008@15:02:11 - Transferred by OPECC. (OPECC,ONE)
Enter RETURN to continue or '^' to exit:
```

Alerts for Discontinued CMOP Prescription

Discontinued by a Background Process

When a CMOP prescription with a status of Transmitted or Retransmitted is discontinued by a background process to the Outpatient Pharmacy options, e.g. CPRS or Registration V. 5.3 packages, an email will be sent to the PSX EXTERNAL DISPENSE ALERTS mail group. If no recipients are defined in the new mail group, the message will be sent to PSXCMOPMGR key holders stating that a prescription was just discontinued and that the CMOP status for the discontinued prescription was either Transmitted or Retransmitted.

```
Subj: TROY - DC Alert on CMOP Rx 123456789 TRANSMITTED [#90494]
03/03/09@17:37 8 lines
From: POSTMASTER In 'IN' basket. Page 1 *New*
-----
Rx #: 123456789 Fill: 0
Patient: OUTPATIENT,DCONE (6660)
Drug: TAMOXIFEN CITRATE 10MG TABS
Rx Status: DISCONTINUED BY PROVIDER
Processing Status: TRANSMITTED to CMOP on 02/27/09
Provider: OPPROVIDER, PROV

***** Please contact CMOP or take appropriate action *****

Enter message action (in IN basket): Ignore//
-----
```

Chapter 4: Security Keys

A security key is a unique entry in the Security Key file (^DIC(19.1,)) which may prevent access to a specific option or action by including the key as part of the option's entry in the Option file (^DIC(19,)). Only users entered in the Holder field of the Security Key file may access the option or action.

New or Modified Security Keys

PSO TRICARE/CHAMPVA

PSO*7*385 renamed the PSO TRICARE security key to PSO TRICARE/CHAMPVA. Please see [TRICARE/CHAMPVA Eligible Outpatient Override Function](#) for further information on this security key.

PSO TRICARE/CHAMPVA MGR

PSO*7*385 renamed the PSO TRICARE MGR security key to PSO TRICARE/CHAMPVA MGR. Please see [TRICARE CHAMPVA Bypass/Override Report](#) for further information on this security key.

(This page included for two-sided copying.)

Glossary

The following table provides definitions for common acronyms and terms used in this manual.

Acronym/Term	Definition
Action Profile	A list of all active and recently canceled or expired prescriptions for a patient sorted by classification. This profile also includes a signature line for each prescription to allow the physician to cancel or renew it.
Activity Log	A log, by date, of changes made to or actions taken on a prescription. An entry is made in this log each time the prescription is edited, canceled, reinstated after being canceled, or renewed. An entry will be made into this log each time a label is reprinted. A CMOP activity log will contain information related to CMOP dispensing activities.
ADD	Automated Dispensing Device
Allergy/ADR Information	Includes non-verified and verified allergy and/or adverse reaction information as defined in the Adverse Reaction Tracking (ART) package. The allergy data is sorted by type (DRUG, OTHER, FOOD). If no data is found for a category, the heading for that category is not displayed.
AMIS	Automated Management Information System
Answer Sheet	An entry in the DUE ANSWER SHEET file. It contains the questions and answers of a DUE questionnaire. This term is also used to refer to the hard copy representation of a DUE ANSWER SHEET entry.
API	Application Programming Interfaces
APSP	Originally Indian Health Service Pharmacy's name space now owned by the Outpatient Pharmacy software.
Bypass	Take no action on a medication order.
CHAMPVA	CHAMPVA (Civilian Health and Medical Program of the Department of Veterans Affairs) is a cost-shared health benefits program established for the dependents and survivors of certain severely disabled and/or deceased veterans.
CMOP	Consolidated Mail Outpatient Pharmacy.
CPRS	Computerized Patient Record System. CPRS is an entry point in VistA that allows the user to enter all necessary orders for a patient in different packages (e.g., Outpatient Pharmacy, Inpatient Pharmacy, etc.) from a single entry point.
Critical	Interactions with severe consequences that require some type of action (finding facts, contacting prescribers) to prevent potential serious harm.
DATUP	Data Update (DATUP). Functionality that allows the Pharmacy Enterprise Customization System (PECS) to send out custom and standard commercial-off-the-shelf (COTS) vendor database changes to update the two centralized databases at Austin and Martinsburg.

Acronym/Term	Definition
DEA	Drug Enforcement Agency
DEA Special Handling	The Drug Enforcement Agency special Handling code used for drugs to designate if they are over-the counter, narcotics, bulk compounds, supply items, etc.
DHCP	See VistA.
DIF	Drug Information Framework
Dispense Drug	The Dispense Drug name has the strength attached to it (e.g., Acetaminophen 325 mg). The name alone without a strength attached is the Orderable Item name.
DNS	Domain Name Server
DoD	Department of Defense
Dosage Ordered	After the user has selected the drug during order entry, the dosage ordered prompt is displayed.
Drug/Drug Interaction	The pharmacological or clinical response to the administration of a drug combination different from that anticipated from the known effects of the two agents when given alone.
DUE	Drug Usage Evaluation
ETC	Enhanced Therapeutic Classification
Expiration/Stop	The date on which a prescription is no longer active. Typically, this date is 30 days after the issue date for narcotics, 365 days after the issue date for other medications and 365 days after the issue date for supplies.
FDB	First DataBank
Finish	Term used for completing orders from Order Entry/Results Reporting V. 3.0.
GUI	Acronym for Graphical User Interface.
HDR-Hx	Health Data Repository Historical
HDR-IMS	Health Data Repository- Interim Messaging Solution
Issue Date	The date on which the prescription was written. This date is usually, but not always, the same as the first fill date. This date cannot be later than the first fill date.
HFS	Host File Server.
Health Insurance Portability and Accountability Act of 1996 (HIPAA)	A Federal law that makes a number of changes that have the goal of allowing persons to qualify immediately for comparable health insurance coverage when they change their employment relationships. Title II, Subtitle F, of HIPAA gives HHS the authority to mandate the use of standards for the electronic exchange of health care data; to specify what medical and administrative code sets should be used within those standards; to require the use of national identification systems for health care patients, providers, payers (or plans), and employers (or sponsors); and to specify the

Acronym/Term	Definition
	types of measures required to protect the security and privacy of personally identifiable health care information. Also known as the Kennedy-Kassebaum Bill, the Kassebaum-Kennedy Bill, K2, or Public Law 104-191.
JCAHO	Acronym for Joint Commission on Accreditation of Healthcare Organizations
Label/Profile Monitor	A file for each printer which records, in the order in which they were printed, the last 1000 labels or profiles printed on that printer. This allows a rapid reprint of a series of labels or profiles that were damaged by a printer malfunction or other event.
Local Possible Dosages	Free text dosages that are associated with drugs that do not meet all of the criteria for Possible Dosages.
Medication Instruction File	The MEDICATION INSTRUCTION file is used by Unit Dose and Outpatient Pharmacy. It contains the medication instruction name, expansion and intended use.
Medication Order	A prescription.
Medication Profile	A list of all active or recently canceled or expired prescriptions for a patient sorted either by date, drug, or classification. Unlike the action profile, this profile is for information only and does not provide a signature line for a physician to indicate action to be taken on the prescription.
Medication Routes File	The MEDICATION ROUTES file contains medication route names. The user can enter an abbreviation for each route to be used at the local site. The abbreviation will most likely be the Latin abbreviation for the term.
Med Route	The method in which the prescription is to be administered (e.g., oral, injection).
NCCC	Acronym for National Clozapine Coordinating Center.
Non-Formulary Drugs	The medications, which are defined as commercially available drug products not included in the VA National Formulary.
Non-VA Meds	Term that encompasses any Over-the-Counter (OTC) medications, Herbal supplements, Veterans Health Administration (VHA) prescribed medications but purchased by the patient at an outside pharmacy, and medications prescribed by providers outside VHA. All Non-VA Meds must be documented in patients' medical records.
Order	Request for medication.
Orderable Item	An Orderable Item name has no strength attached to it (e.g., Acetaminophen). The name with a strength attached to it is the Dispense drug name (e.g., Acetaminophen 325mg).
Partial Prescription	A prescription that has been filled for a quantity smaller than requested. A possible reason for a partial fill is that a patient is to return to the clinic in ten days but the prescription calls for a thirty-day supply. Partials do count as workload but do not count against the total number of refills for a prescription.

Acronym/Term	Definition
Payer	In health care, an entity that assumes the risk of paying for medical treatments. This can be an uninsured patient, a self-insured employer, or a health care plan or Health Maintenance Organization (HMO).
Pending Order	A pending order is one that has been entered by a provider through CPRS without Pharmacy finishing the order. Once Pharmacy has finished the order, it will become active.
Pharmacy Narrative	OUTPATIENT NARRATIVE field that may be used by pharmacy staff to display information specific to the patient.
Polypharmacy	The administration of many drugs together.
POE	Acronym for Pharmacy Ordering Enhancements (POE) project. Patch PSO*7*46 contains all the related changes for Outpatient Pharmacy.
Possible Dosages	Dosages that have a numeric dosage and numeric dispense units per dose appropriate for administration. For a drug to have possible dosages, it must be a single ingredient product that is matched to the DRUG file. The DRUG file entry must have a numeric strength and the dosage form/unit combination must be such that a numeric strength combined with the unit can be an appropriate dosage selection.
Prescription	This term is now referred to throughout the software as medication orders.
Prescription Status	<p>A prescription can have one of the following statuses.</p> <p>Active - A prescription with this status can be filled or refilled.</p> <p>Canceled - This term is now referred to throughout the software as Discontinued. (See Discontinued.)</p> <p>Discontinued - This status is used when a prescription was made inactive either by a new prescription or by the request of a physician.</p> <p>Discontinued (Edit) - Discontinued (Edit) is the status used when a medication order has been edited and causes a new order to be created due to the editing of certain data elements.</p> <p>Deleted - This status is used when a prescription is deleted. Prescriptions are no longer physically deleted from the system, but marked as deleted. Once a prescription is marked deleted no access is allowed other than view.</p> <p>Expired - This status indicates the expiration date has passed.</p> <p>*Note: A prescription that was canceled or has expired more recently than the date specified by the cutoff date, typically 120 days in the past, can still be acted upon.</p> <p>Hold - A prescription that was placed on hold due to reasons determined by the pharmacist.</p> <p>Non-verified - There are two types of non-verified statuses. Depending on a site parameter, prescriptions entered by a technician do not become active until a pharmacist reviews them. Until such review, they remain non-verified and cannot be printed, canceled or edited except through the <i>Verification</i> menu.</p> <p>The second non-verified status is given to prescriptions when a drug/drug interaction is encountered during the new order entry or editing of a prescription.</p>

Acronym/Term	Definition
	<p>Pending - A prescription that has been entered through OERR. Refill - A second or subsequent filling authorized by the provider. Suspended - A prescription that will be filled at some future date.</p>
Progress Notes	A component of Text Integration Utilities (TIU) that can function as part of CPRS.
Provider	The person who authorized an order. Only users identified as providers who are authorized to write medication orders may be selected.
Reprinted Label	Unlike a partial prescription, a reprint does not count as workload.
Questionnaire	An entry in the DUE QUESTIONNAIRE file. This file entry contains the set of questions related to a DUE as well as the drugs being evaluated.
Schedule	The frequency by which the doses are to be administered, such as Q8H, BID, NOW, etc.
Sig	The instructions printed on the label.
Significant	The potential for harm is either rare or generally known so that it is reasonable to expect that all prescribers have taken this information into account.
Speed Actions	See Actions.
Suspense	A prescription may not be able to be filled on the day it was requested. When the prescription is entered, a label is not printed. Rather, the prescription is put in the RX SUSPENSE file to be printed at a later date.
Third (3rd) Party Claims	Health care insurance claims submitted to an entity for reimbursement of health care bills.
Time In	This is the time that the patient's name was entered in the computer.
Time Out	This is the time that the patient's name was entered on the bingo board monitor.
TIU	Text Integration Utilities; a package for document handling, that includes Consults, Discharge summary, and Progress Notes, and will later add other document types such as surgical pathology reports. TIU components can be accessed for individual patients through the CPRS, or for multiple patients through the TIU interface.
TRICARE	<p>TRICARE is the uniformed service health care program for:</p> <ul style="list-style-type: none"> • active duty service members and their families • retired service members and their families • members of the National Guard and Reserves and their families • survivors, and • others who are eligible <p>There are differences in how prescriptions for TRICARE beneficiaries are processed versus how prescriptions are processed for veterans.</p>

Acronym/Term	Definition
Units per Dose	The number of Units (tablets, capsules, etc.) to be dispensed as a Dose for an order. Fractional numbers will be accepted for medications that can be split.
VistA	Acronym for Veterans Health Information Systems and Technology Architecture, the new name for Decentralized Hospital Computer Program (DHCP).
Wait Time	This is the amount of time it took to fill the prescription. It is the difference between Time In and Time Out. For orders with more than one prescription, the wait time is the same for each.

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